

**WP6 Annex 1: Survey on comprehensive cancer care networks across Europe**

**SURVEY QUESTIONS sent to experts in all EU MS apart from the Czech Republic**

- Is a cancer care network in place in your country/ region which you would like to let us know about?
- Which cancer site specialties does it include?
- What is the population covered by this cancer care network?
- How is its governance structured?
- What facilities does it include?
- What is the model for inter-professional cooperation and integration of clinical pathway(esp. childhood cancer care, rare cancers care, palliative care)
- Are there any outcome data available?
- If a network as such is not in place, could you provide a description of how cancer care is managed in your country touching as many as the items above?

**Acknowledged Survey Contributors in addition to WP6 partners** i.e. Belgium, France, Finland, Germany, Ireland, Italy, Slovenia and Spain

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**SURVEY RESULTS from 25 EU MS**

	<b>COUNTRY and SOURCE</b>	<b>DESCRIPTION</b>	<b>RELEVANT WEBSITE</b>
1	Austria, Hematological and Oncological Society	The Austrian Society of Hematology and Medical Oncology runs the Network of Austrian hematologists and medical oncologists for the entire population of the country, 4.3 million. (people newly diagnosed with cancer / yr : 41,100). Treatment is offered in cancer centers, clinics and day care facilities. Interprofessional cooperation is available in tumor conferences. The Austrian Society of Hematology and Medical Oncology has published the so called „Future Demands Report“ on cancer data in 2014, indicating the need for more oncologists. A Network for pediatric cancers is well established in the country, AUSTRIAN Paediatric Haemato-Oncology Group, AGPHO, ensuring that each child and adolescent with Cancer has access to relevant and adequate specialists throughout the cancer journey. 200 children aged 0-14 years and 120 adolescents aged 15 -19 years were diagnosed with cancer (2009-2011). AGPHO as a whole and its sites meet the Standard of Care requirements summarized in <b>“Towards reducing inequalities: European Standards of Care for Children with Cancer: Jerzy R. Kowalczyk , Marzena Samardakiewicz, Edel Fitzgerald, Samira Essiaf, Ruth Ladenstein, Gilles Vassal, Anita Kienesberger, Kathy Pritchard-Jones. European Journal of Cancer (2014) 50, 481– 485”</b> Care is delivered at 3 University Hospital sites and in 5 Hospitals with special paediatric cancer care units acting together as a network. Comprehensive cancer centres providing the full scope of diagnostics needed from molecular biology /pathology to modern imaging techniques as well as the broad portfolio of specialised surgeries as well radiotherapy, are part of the network and are located in Vienna, Graz and Innsbruck. When needed and advised by the	<a href="http://www.oegho.at/">http://www.oegho.at/</a>  <a href="http://www.paediatric.at/home/OEGKJ/AGs/haemato-onkologie.php">http://www.paediatric.at/home/OEGKJ/AGs/haemato-onkologie.php</a>

		respective multidisciplinary tumour board patient referral to sites of special expertise is undertaken.	
2	Belgium, Cancer Centre Scientific Institute of Public Health, Brussels	The Belgian College of Oncology, a multidisciplinary council representing the medical specialties involved in cancer care established in 2004, promotes and monitors the quality of cancer care in Belgium, organised through the 'oncological care programmes' (OCPs) including approximately 106 care institutions selected under legal criteria	<a href="https://wallex.wallonie.be/PdfLoader.php?type=doc&amp;linkpdf=8667-7802-3841">https://wallex.wallonie.be/PdfLoader.php?type=doc&amp;linkpdf=8667-7802-3841</a> <a href="http://www.collegeoncologie.be">www.collegeoncologie.be</a>
3	Bulgaria, National Oncology Institute, Sofia	The network constituted in the 50's by the Oncology Research Institute, the Oncology Institute in Sofia (now National Oncological Hospital, NOH), and the regional oncology centers throughout the country still exist. Specialized and general hospitals work under the common protocols of care and network organization written in the Act for Medical Treatment Facilities or BMTFA last amended in September 2015. Patients have a health National Health Insurance Fund ID number and are followed in all their pathway. Uniform standards for diagnostics and treatment of cancer patients in Bulgaria are in place and mandatory for all hospitals. Coordination of cancer care is done by Council of specialists depending on the cancer site. The Council includes by law a clinical oncologist, a radiotherapist, surgeon, pathologist or other healthcare professional. Funding of cancer care is carried out mainly by the National Health Insurance Fund. There is a separate network for cancer care in children and hematology diseases.	<a href="http://www.sbaloncology.bg">http://www.sbaloncology.bg</a>
4	Cyprus, Ministry of Health	In Cyprus, specialised services are provided in two reference centres, the New Nicosia General Hospital and the Bank of Cyprus Oncology Centre. In addition there are District Oncology Units at Public Hospitals and specialised centres e.g. Breast and Gastrointestinal cancers. The National Plan is run by the National Committee which is currently being renewed. A neoplasia network (NN) was envisioned in the 2010-2015 cancer Plan integrating all the stakeholders and services, with its own staffing and structure.	<a href="http://www.moh.gov.cy">http://www.moh.gov.cy</a>
5	Croatia, Croatian Institute of Public Health, HZJZ	For a population of 4,3 million, a Cancer care network is a part of the Cancer strategy of the Ministry of Health, and still under construction. In the meantime, the Surgical oncology section of the Oncological society and other professional associations are trying to implement multidisciplinary approach to cancer care in large volume centers. There is one University Hospital for Tumors and Oncology teams in other five University Hospital Centers, and surgery combined with oncology in six secondary hospitals. All the above operate on National guidelines which are modified EU or NCCN guidelines. Each center is autonomous at this point, and responsible for its results.	<a href="http://www.hzjz.hr">http://www.hzjz.hr</a>

6	Denmark Danish Cancer Society	Denmark prides itself on having particularly open access to health data: the Danish Multidisciplinary Cancer Groups (DMCG) is a national network of physicians, health care professionals, scientists, and government officials committed to improving cancer care in Denmark. DMCG and the national cancer clinical databases are under the administration of the Joint Secretariat for the Danish Clinical Quality Improvement Program (Databasernes Fællessekretariat, Regionernes Kliniske Kvalitetsudviklingsprogram, RKKP). Denmark has more than 70 national clinical databases prospectively collecting data on health care monitoring indicators for the purpose of quality improvement and research infrastructure. Each DMCG cancer group has a corresponding national clinical database and data from these clinical databases can be further linked to numerous national registries and databases via the unique person-identification number assigned to all residents upon birth or immigration. There are currently 23 cancer clinical databases under the auspices of DMCG and RKKP.dk (with the 24th cancer database recently approved). Danish Regions has launched a new quality program in 2016, to maximize the payoff from the health data. The programme includes the establishment of cancer pathways and the creation of a virtual Danish Comprehensive Cancer Center (DCCC) in 2017 by Danish Regions and the Danish Cancer Society in collaboration with Danish Universities. The center will work for shortening the process between cancer research and new innovative treatment methods, and cancer patients in the hospitals.	<a href="https://www.cancer.dk">https://www.cancer.dk</a> <a href="https://www.cancer.dk/dyn/resources/File/file/6/5996/1481800762/dccc-modelpapier.pdf">https://www.cancer.dk/dyn/resources/File/file/6/5996/1481800762/dccc-modelpapier.pdf</a>  <a href="http://www.dmcg.dk">www.dmcg.dk</a>
7	Estonia, Estonian Cancer Society	Cancer Care Facilities are coordinated by the Estonia Cancer Society, facilities follow the regulation of 19-08-2004. <a href="https://www.riigiteataja.ee/akt/793970">https://www.riigiteataja.ee/akt/793970</a> . The Health care system is characterized by strong treatment centres with sufficient number of cases, multimodal treatment, inter-speciality consulting, specialists' expertise, supportive services (intensive care, nurses and social workers having special training), necessary and good quality equipment, good opportunities for training and scientific researches covering the entire population ( 1,3 million): 2 Comprehensive Cancer Centres are located in northern part (North Estonia Medical Centre and Children's Hospital in Tallinn and a third centre is Tartu University Clinic in the south of Estonia.	<a href="http://cancer.ee">http://cancer.ee</a> <a href="http://www.regionaalhaigla.ee">www.regionaalhaigla.ee</a> <a href="http://www.itk.ee">www.itk.ee</a> <a href="http://www.kliinikum.ee">www.kliinikum.ee</a>
8	Finland, The Cancer Society of Finland, CSF	Currently, specialist care and major cancer surgery are centralized to cancer clinics/centers, one Comprehensive Cancer Centre (Helsinki) and the operational informal network of cancer centres (Turku, Tampere, Kuopio, Oulu) collaborating with Helsinki (Turku). The report "Development of cancer treatment in 2010-2020 " by the working group of Ministry of Social Affairs and Health is aimed at improving cancer treatments and define the bodies responsible for the implementation. A project on following up and improving access to cancer care was launched and financed by the Ministry of Social Affairs and Health (STM) in 2014 and carried out as a joint project with the National Institute for Health and Welfare (THL) and with the Cancer Society of Finland in 2015-2016. The waiting times from referral to treatment will be followed by THL monitoring system based on hospital discharge registries. The monitoring of access to cancer care has been started on the beginning of 2017, and the follow-up system is currently under test-use by experts. The Goal is to set up a National CCC (FICAN) which will not take care of individual cancer patients, but will be responsible for coordination of research activities and recommendations on new cancer therapies and therapies of rare cancers.	<a href="http://s3-eu-west-1.amazonaws.com/frantic/syopajarjestot/CANCER_SOCIETY_OF_FINLAND_STRATEGY_2020.pdf">http://s3-eu-west-1.amazonaws.com/frantic/syopajarjestot/CANCER_SOCIETY_OF_FINLAND_STRATEGY_2020.pdf</a>
9		In France, the national health strategy is defined by law, and the cancer control plan is embedded in the law. The regional	<a href="http://www.e-cancer.fr/Professionnels-de-sante/L-organisation-de-l-offre-de-">http://www.e-cancer.fr/Professionnels-de-sante/L-organisation-de-l-offre-de-</a>

	France, Institute du Cancer, INCA	implementation of the national health strategy is under the responsibility of "Agences regionales de santé". The Legal act ("circulaire") of 22 February 2005 establishes the cancer care organization, including accreditation criteria and activity threshold to be authorized for cancer treatment. The legal act of 25 September 2007 establishes the regional cancer networks and their coordination mandate. All regions of France have a RRC (Regional cancer network). There are currently 17 RRC involving all levels of cancer care services in the region. RCC share objectives (Quality improvement, Communication & data/practice sharing, Information to patients, relatives & professionals, Education & training, Observation of cancer care practices & evaluation), and tools (Good practice guidelines, Organization of the multidisciplinary meetings for therapeutic decision, Personalized cancer care plan, Cancer patient electronic record, Audit methods for quality assessment).	<a href="http://soins/Les-reseaux-regionaux-de-cancerologie/Coordonnees-des-RRC">soins/Les-reseaux-regionaux-de-cancerologie/Coordonnees-des-RRC</a>
10	Germany, German Cancer Society DKG	There are more than 1,000 cancer centres for different tumour entities certified by DKG ( <a href="http://www.oncomap.de/?lang=en&amp;action=back">http://www.oncomap.de/?lang=en&amp;action=back</a> ). It is mandatory for them to document care quality, to report to clinical cancer registries, to conduct research and much more. The network is maintained through written agreements and cooperation contracts. Volume nationwide: 150,000 newly diagnosed patients p.y. are treated in certified centers. Results of the networks are annually published.	<a href="http://www.krebsgesellschaft.de/gcs/german-cancer-society/certification/documents.html">http://www.krebsgesellschaft.de/gcs/german-cancer-society/certification/documents.html</a>
11	Hungary, National Oncology Centre	A National Oncology Centre Network is in place based on the official agreement of collaboration in oncology between the Hungarian National Oncology Institute (Budapest) and 4 Regional Institutes Oncology (Debrecen, Pecs, Szeged, Szombathely). The network foresees: 1) Coordination by the Hungarian National Oncology 2) Commitment by the four Regional Institutes to sign similar agreements with the various Institutes of Oncology, related regions 3) Creation of a shared computer network Database of Cancer Registries 4) Training and professional development, promoting and conducting coordinated studies and research 5) Multidisciplinary patients' consultations 6) Scientific collaborations and teaching 7) The Hungarian oncology network aims to serve as a basis to achieve an oncological Central European network.	<a href="http://www.onkol.hu">http://www.onkol.hu</a>
12	Ireland, Health Service Executive HSE	In 2007 the Health Service Executive (HSE) established a National Cancer Control Plan (NCCP) to manage, organise and deliver a national programme for the entire population. Under the NCCP there are eight cancer centres nationally. All initial diagnosis and surgery will eventually take place in these cancer centres. Chemotherapy and follow up care is delivered more locally, according to care plans set at the cancer centres. There are Rapid Access Clinics for prostate cancer detection and lung cancer detection and treatment in all eight cancer centres. Breast cancer services are available in all eight centres.	<a href="http://www.hse.ie/eng/services/list/5/cancer/pubs/reports/7%20year%20report.pdf">http://www.hse.ie/eng/services/list/5/cancer/pubs/reports/7%20year%20report.pdf</a>
13	Italy, Ministry of Health, MoH	There are currently 5 Regional Oncology Networks in Italy and 4 are under way. The rationale behind their creation points to the need for quality assurance / standards of care, diagnostic and therapeutic appropriateness, rationalization of services, integration of therapeutic and diagnostic care pathways, rationalization of resources and technologies, optimization of expenditure, research Implementation. In each Network, a governing body coordinates the links between all centres involved, the use of resources, and patient pathways defined and assessed for various neoplastic diseases. Centres of access	<a href="http://www.ittumori.it/IttSanitaSrty/jsp/start.jsp">http://www.ittumori.it/IttSanitaSrty/jsp/start.jsp</a> <a href="http://www.progettorol.it/">http://www.progettorol.it/</a> <a href="http://www.alleanzacontroilcancro.it/acc/">http://www.alleanzacontroilcancro.it/acc/</a> <a href="https://salute.regione.veneto.it/web/rov">https://salute.regione.veneto.it/web/rov</a> <a href="http://www.aslromah.it/operatori/decreti/doc/ALLEGATO%20DCA%2059%20-%2013%20luglio%202010%20-%20RETE_ONCOLOGICA.pdf">http://www.aslromah.it/operatori/decreti/doc/ALLEGATO%20DCA%2059%20-%2013%20luglio%202010%20-%20RETE_ONCOLOGICA.pdf</a> <a href="http://www.reteoncologica.it/">http://www.reteoncologica.it/</a>

		to the Network are spread on each territory, taking charge of the individual cases and ensuring the direction and the indications in the steps of the entire pathway. The steps are defined from scientific societies guidelines. Access to pharmacological treatment must be possible even in peripheral locations on the basis of the information shared by the network, limiting the displacements of the patients, in particular in territories with difficult logistics.	
14	Latvia, Centre for Disease Prevention and Control, Riga	Nowadays there are 4 cancer centres – of which 2 are located in the capital city. The Oncology Centre of Latvia at Riga East University hospital <a href="https://www.aslimnica.lv/en/saturs/oncology-centre-latvia">https://www.aslimnica.lv/en/saturs/oncology-centre-latvia</a> serves about 80% of all cancer patients, including more difficult or rare cases and haematology. Oncology Centre of Latvia has both human and technical resources for diagnostics and treatment of all cancers except childhood cancer and bone and cartilage cancers. <a href="https://www.aslimnica.lv/en/saturs/oncology-centre-latvia">https://www.aslimnica.lv/en/saturs/oncology-centre-latvia</a> Childhood cancers are treated at the Children Hospital, irradiation may be provided at the Oncology Centre of Latvia or in nearest University Hospital. Bone and cartilage cancers are operated at the Hospital of Traumatology and Orthopedics, but irradiation or chemotherapy are provided at the Oncology Centre of Latvia. Rare cancers are usually consulted at the Oncology Centre of Latvia and in the majority of cases the treatment is provided there. The diagnostics is provided by primary care specialists and then forwarded to Oncology Centre of Latvia where additional investigations are provided.	<a href="http://www.spkc.gov.lv/about-SPKC">http://www.spkc.gov.lv/about-SPKC</a>
15	Lithuania, National Cancer Institute	Formal attempts to establish cancer care networks took place a few years ago by the Ministry of Health to create specialized centres for rare cancers care, but they are not in place now. A National cancer program for 2014-2025 was adopted in 2014 <a href="http://www3.lrs.lt/pls/inter3/dokpaieska.showdoc_l?p_id=478197&amp;p_tr2=2">http://www3.lrs.lt/pls/inter3/dokpaieska.showdoc_l?p_id=478197&amp;p_tr2=2</a> with lessons learned from the previous plan. However, there are no national standards and guidelines for cancer care and cooperation across all cancer care levels and cancer care centres is inadequate. General Practitioners are responsible for prevention and diagnosis but in primary health care centres in rural areas there are too few doctors and knowledge in oncology is insufficient. Specialized cancer care is available in six centres, children are treated in two centres. The proportion of cancer patients receiving combined treatment is insufficient, palliative care system is weak, the number of pain control units is insufficient, the number of staff in the field of psychosocial care is insufficient.	<a href="http://www.nvi.lt">http://www.nvi.lt</a>
16	Luxembourg, Coordination Unit of the National Cancer Plan	The National Cancer Plan 2014-2018 ( <a href="http://www.plancancer.lu">www.plancancer.lu</a> ) is now being implemented. There is one National Cancer Institute which was created in 2015 and 4 hospitals which have the authorization of Ministry of Health to treat patients with cancer. The national cancer Institute coordinates all stakeholders involved in the diagnostic and therapeutic management of patients with cancer. Multidisciplinary groups are formalised since 2016, they propose the therapeutic strategy for each case of cancer, with the presence of national radiotherapists doctors and national anatomo-pathologist doctors, a national software is in place to organize meetings. (meetings are conducted in local hospitals for current cancers, or at the National Cancer Institute when the clinicians have a patient with a rare cancer or a very complex situation to manage).	<a href="http://www.sante.public.lu/fr/politique-sante/ministere-sante/index.html">http://www.sante.public.lu/fr/politique-sante/ministere-sante/index.html</a>
17	Malta, Ministry of Health MoH	Cancer diagnosis and treatment for the vast majority of cases are conducted at the major acute general and teaching hospital on the Island and at the new Oncology Centre, that adjoins this hospital. Diagnosis and treatment that require	<a href="http://www.health.gov.mt">http://www.health.gov.mt</a>

		specialized tertiary services not available in Malta are referred to specialized centers abroad.	
18	The Netherlands, Comprehensive Cancer Centre, IKNL	<p>Since January 2014 the political- strategical ‘Taskforce oncology’ committee of six parties is in place to ensure sustainable and accessible oncological care for every patient, regardless where they arrive in care, through the formation of comprehensive cancer networks (CCN). Primary care, general hospitals and specialized centres work in network, accompanied by multi-disciplinary collaboration within each of these settings. CCNs have, in consultation with patient representatives, concrete agreements on the substantive organization of care, monitoring and quality improvement. Multidisciplinary decision making is done in tumor boards in a single hospital or in groups of hospitals in regions through videoconferencing. There are national medical norms (SONCOS) describing the disciplines that are requested during the meetings. The norms also describe the minimum volumes a single hospital has to meet for certain diagnostic interventions or treatments. <a href="http://koersboek-oncologische-netwerkvorming.nl">http://koersboek-oncologische-netwerkvorming.nl</a> Regional Managed Clinical Networks are in place, started with low volume and high complex tumours, e.g. gynaecology tumours, now also for colorectal, oesophagus, HPB and thyroid cancers (uniform way of diagnosis and referral to specialised centres, and exchange on open clinical trials and following national guidelines). At national level, in the following specialties there are cooperation and referral networks for Haematology, Head and neck cancer, Paediatric oncology, Bone and soft tissue, Gynaecology.</p>	<a href="https://www.iknl.nl/over-iknl/about-iknl">https://www.iknl.nl/over-iknl/about-iknl</a>
19	Poland, National Institute of Public Health - National Institute of Hygiene NIPH-NIH, Warsaw	<p>Cancer care in Poland is based on a network outlined in middle of the last century with three-level referenced structure of the oncology network which today is consisted of cancer centres, outpatient clinics and institutes of oncology. On 1 January 2015 with the Act of 22 July 2014, the ‘Oncological Package’ was implemented by Ministry of Health. The ‘Oncological Package’ consists of legal regulations that introduce a new systemic solution – the ‘Quick Oncological Therapy’ without cancer treatment limits. Its objective is to guarantee complex cancer care to every patient in a way outlined by the National Health Fund, mainly by improving early diagnosis, so the final diagnosis and the beginning of the treatment should not exceed 9 weeks. The ‘Oncological Package’ is characterised by: primary health care doctor’s crucial role, rapid diagnosis, quick start of treatment, and coordinated long-term care after treatment. A multidisciplinary council, consisting: oncologist, radiotherapist, surgeon and radiologist, nurse, schedules treatment and selects the coordinator to accompany the patient in the diagnostic and therapeutic procedures, supporting with information, administrative and organizational issues, including assistance in communication between the patient and the therapeutic team. The currently started 5<sup>th</sup> edition of The National Cancer Programme for years 2016-2024 continues to follow one of the main objectives of its previous editions - to improve cancer survival rates in order to reach the European average<sup>[1]</sup>. Besides that, currently, in Poland, there are three operating Breast Units (BUs). More BUs’ are needed to satisfy the country’s needs. According to the Polish Chamber of Physicians the main obstacles are: understaffing and shortage of equipment. Changes in Cancer Care in Poland stimulated by the collaboration with CANCON WP6 are described in „<b>ANALYSIS OF CHANGES IN CANCER HEALTH CARE SYSTEM IN POLAND SINCE THE SOCIO-ECONOMIC TRANSFORMATION IN 1989</b>”</p>	<a href="http://www.mz.gov.pl/wp-content/uploads/2015/12/Uchwala-Nr-208-NPZCHN-2016-2024.pdf">http://www.mz.gov.pl/wp-content/uploads/2015/12/Uchwala-Nr-208-NPZCHN-2016-2024.pdf</a>

[1] <http://www.mz.gov.pl/wp-content/uploads/2015/12/Uchwala-Nr-208-NPZCHN-2016-2024.pdf>

		Dudek-Godeau D., Kieszowska-Grudny A., Kwiatkowska K*, Bogusz J., Wysocki M. J., Bielska-Lasota M. <i>Annals of the National Institute of Hygiene</i> 2016;67(4):445-454.	
20	Portugal, Cancer Plan Director Directorate-General of Health	The National Cancer Network was published in 2016 and is governed by the ministry of health and covering the entire population (10M) including all Portuguese hospitals and all cancer specialties, i.e. clinical oncology, pathology, surgery, radio-oncology and hematology. Patients can "travel" inside the network in both ways, and be treated in several institutions where needed. As a complementary measure reference centers are in place, for specific diseases for the delivery of total care, and the obligations for each disease have been established (hepato-bilio-pancreatic cancer, testis cancer, pediatric cancer, sarcomas, Central Nervous System tumors, esophageal cancer and colorectal cancer so far)	<a href="http://www.dgs.pt">http://www.dgs.pt</a>  <a href="http://www.acss.min-saude.pt/wp-content/uploads/2016/09/Radioterapia_2015.pdf">http://www.acss.min-saude.pt/wp-content/uploads/2016/09/Radioterapia_2015.pdf</a>  <a href="http://www.acss.min-saude.pt/wp-content/uploads/2016/09/Hematologia_Clinica_2013.pdf">http://www.acss.min-saude.pt/wp-content/uploads/2016/09/Hematologia_Clinica_2013.pdf</a>  <a href="http://www.acss.min-saude.pt/wp-content/uploads/2016/09/Oncologia_Medica_2016.pdf">http://www.acss.min-saude.pt/wp-content/uploads/2016/09/Oncologia_Medica_2016.pdf</a>
21	Romania, "Ion Chiricuta" Institute of Oncology, Cluj	The Romanian Cancer Plan Ro NCCPis to be public in June 2016. Chapter 5 on Treatment foresees a Cancer Control Prevention and Treatment Network managed by " Ion Chiricuta" Institute of Oncology, " Al.Trestioreanu" Institute of Oncology Bucuresti and Regional Institute of Oncology Iasi, clustering all authorised cancer prevention and treatment units with the support of the Association "CLUSTER for TECHNOLOGICAL ADVANCE and INNOVATION in ONCOLOGY" ( <a href="http://catio.ro">http://catio.ro</a> ). The Network will be built with help of French networks on oncology, as the plan itself is inspired by French Cancer Plan. The Romanian Ministry of Health has a Protocol of medical assistance with French Embassy in Romania on this issue and Romanian Hospital; Accreditation Authority will be also part of this measure within the Cancer Plan for 2016-2020.	<a href="http://www.cancercontrol.eu/uploads/images/Press%20release%20RNCCP_13042016.pdf">http://www.cancercontrol.eu/uploads/images/Press%20release%20RNCCP_13042016.pdf</a>  <a href="http://www.iocrn.ro">http://www.iocrn.ro</a>
22	Slovenia, Institute of Oncology Ljubljana	Despite a national health insurance policy and only one Comprehensive Cancer Center with no private oncology facilities, cancer treatment is performed in many regional hospitals (mainly first surgery i.e. extreme relevance for outcome). With the new Action plan, NCCP 2016-2020, networks for management of frequent cancers are to be defined more exactly in order to become operational (diagnostic procedure, surgery, systemic treatment, radiotherapy). For now a network exists for head and neck cancers: 3 hospitals where patients are operated, they are presented at a multidisciplinary tumor board before any treatment so the most adequate treatment is proposed (Radio or chemo) they are referred to the Institute of Oncology in Ljubljana, i.e. the only one with these facilities in Slovenia so far).	<a href="http://www.dpor.si/en/?page_id=533">http://www.dpor.si/en/?page_id=533</a>
23	Slovakia, Clinical Oncology, Faculty of Medicine, Comenius University, Bratislava	There is a cancer network for rare cancers, for childhood cancer, and for hematological cancers. There are three Oncological Centres where comprehensive cancer treatment including target biological treatment is provided (i.e. more specialised, chemotherapy, surgery, radiotherapy, palliative care specific treatment are provided: National Cancer Institute in Bratislava, St. Elisabeth Institute in Bratislava, East Oncology Institute in Košice. Oncology or radiotherapy departments are available in every hospital that provides standard treatment for common cancer.	<a href="http://www.szu.sk/index.php?&amp;menu=205&amp;oid=#menutop">http://www.szu.sk/index.php?&amp;menu=205&amp;oid=#menutop</a>
24	Spain, Catalan Institute of Oncology, ICO	The Oncology Network of Catalonia is a strategic collaboration agreement between two public companies: the Catalan Institute of Health (ICS) and the Catalan Institute of Oncology (ICO), based on successful models implemented in other countries. It delivers a comprehensive, multidisciplinary, continuous and efficient model of patient-centered care. For	<a href="http://web.gencat.cat/es/actualitat/detall/Xarxa-Oncologica-de-Catalunya-00001">http://web.gencat.cat/es/actualitat/detall/Xarxa-Oncologica-de-Catalunya-00001</a>

		<p>patients, the Oncology Network allows access to new drugs and more innovative treatments; more comprehensive and multidisciplinary care; more equity in access to high specialization and better quality of care received, with results. For society in general, the Oncology Network means a better use of resources destined to cancer treatment, better health outcomes with more efficiency and equity.</p> <p>The agreement includes two ICS hospitals (Vall d'Hebron University Hospital and Arnau de Vilanova de Lleida) and the Catalan Institute of Oncology (ICO), which represent about 60% of cancer care in Catalonia.</p>	
25	UK, England Public Health England	<p>In England, the 5 Year Vision Cancer Strategy 2015-2020 is in place since Jan 2016. NHS-run Clinical Commissioning Groups (CCGs) decide locally which primary care services are needed, and ensure that they are provided. There are more than 200 CCGs altogether, commissioning care for an average of 226,000 people each. The Strategy focuses on cancer services and management of co morbidities, using cancer as a model for other diseases with the aim to increase access and quality. The focus of the Cancer strategy is early diagnosis, communication, survivorship, equipments, access to new drugs and trials. A pilot will be conducted in at least one area of a population of 1-2 million, where volumes are between 2500-7500 p/a. The new model of care covers the full pathway and involves radiology networks, to help low performing areas especially.</p>	<p><a href="https://www.england.nhs.uk/wp-content/uploads/2016/10/cancer-one-year-on.pdf">https://www.england.nhs.uk/wp-content/uploads/2016/10/cancer-one-year-on.pdf</a></p>
	UK, Wales Wales Cancer Networks	<p>From 1<sup>st</sup> October 2016 South Wales Cancer Network merged with North Wales Cancer Network and the Cancer National Specialist Advisory Group (NSAG) to create the Wales Cancer Network covering a population of 3million, and including 7 NHS Health Boards, the separate NHS cancer hospital in south east Wales, Public Health Wales -the national NHS public health agency- and linking to the Welsh Government's Cancer Implementation Group. Its aims are service improvement and place the patient at the centre. Increasingly the Network is providing and coordinating the clinical leadership needed to draw people together and create synergies among different services, policies and projects.</p>	<p><a href="http://www.walescanet.wales.nhs.uk/home">http://www.walescanet.wales.nhs.uk/home</a></p> <p><a href="http://www.walescanet.wales.nhs.uk/sitesplus/documents/1113/Cancer%20Delivery%20Plan%202016-2020.pdf">http://www.walescanet.wales.nhs.uk/sitesplus/documents/1113/Cancer%20Delivery%20Plan%202016-2020.pdf</a></p>
	UK, Scotland National Cancer Registry	<p>In Scotland, the new cancer strategy was published in 2016, aiming to better connect services. Adult cancer services are currently delivered by three regional networks. Moreover, cancer specific networks are in place. National network for Children &amp; Young People: <a href="https://www.youngcancer.scot.nhs.uk/">https://www.youngcancer.scot.nhs.uk/</a> Sarcoma: <a href="http://www.ssn.scot.nhs.uk/">http://www.ssn.scot.nhs.uk/</a> Adult Neuro-oncology: <a href="http://www.neurooncology.scot.nhs.uk/">http://www.neurooncology.scot.nhs.uk/</a></p>	<p><a href="http://www.gov.scot/Publications/2016/03/9784/downloads">http://www.gov.scot/Publications/2016/03/9784/downloads</a></p> <p><a href="http://www.woscan.scot.nhs.uk/">http://www.woscan.scot.nhs.uk/</a>  <a href="http://www.scan.scot.nhs.uk/TheNetwork/Pages/default.aspx">http://www.scan.scot.nhs.uk/TheNetwork/Pages/default.aspx</a>  <a href="http://www.noscan.scot.nhs.uk/Pages/default.aspx">http://www.noscan.scot.nhs.uk/Pages/default.aspx</a></p>