# CSA CCI4EU | WP6 | Deep Dive Italy Piemonte & Val D'Aosta 3<sup>rd</sup> Deep Dive Visit

18-19 September 2025



# Proposed Mission CONQUERING CANCER: MISSION POSSIBLE Report of the Mission Board for Cancer Report

# As President of the European Commission Ursula von der Leyen said:

"We need to build a <u>stronger European Health Union</u>, a Union where we are **united in diversity and adversity**, where we work together to overcome our differences and where we build today the healthier, stronger and more respectful world we want our children to live in tomorrow.

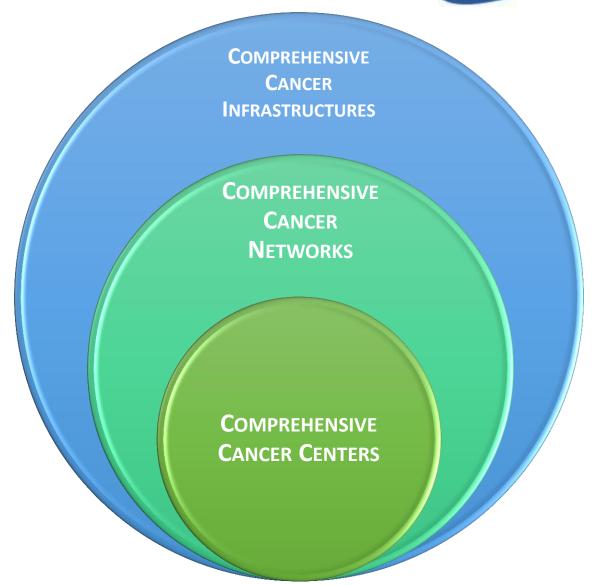
With respect to tackling cancer, the Mission on Cancer and the Europe's Beating Cancer Plan, the Commission services will therefore now explore policy options and use of financial instruments to initiate a gradual and synergised implementation of both initiatives, in close cooperation with Member States."



# **Project summary**



Comprehensive Cancer Care Networks may be the core of Comprehensive Care Infrastructures that deliver quality care and provide resources to improve and integrate care, research and education. Data already available confirm that the level of "CCI maturity" in Member States is widely different, from some countries lacking CCIs completely.



# What is a Comprehensive Cancer Infrastructure? (CCI)



A Comprehensive Cancer Infrastructure should also include public functions such as public health, screening, primary and community care, and population cancer registries. CCN Comprehensive Cancer Networks\* Prevention serve a defined population and consist of: Comprehensive Cancer Centres (CCC) Clinical Cancer Centres, individual cancer clinics Rehabilitation Research Institutes and Universities Treatment Units of General Hospitals. WHOLE Diagnostic units etc. **PATHWAY** Follow Up

<sup>\*</sup> Including Comprehensive Cancer Care Networks according to CraNE WP 6 (CCCN)

# The Horizon Europe Mission



The Horizon Europe Mission on Cancer will **complement the set-up of an EU network of Comprehensive Cancer Centers** across Member States that will be established through the *Europe's Beating Cancer Plan* by 2025.

Together with other projects: JANE, CRANE, ...

The target is ensuring that 90% of eligible cancer patients have access to Comprehensive Cancer Infrastructures by 2030.

Now from 0 to 40%

In that context, the aim is improving or developing their existing or future Comprehensive Cancer Infrastructures, focusing on developing their research & innovation-related capacities.

By setting up capacity-building interventions to support them in the change



# **OUR INVOLVEMENT**



# Requested CB interventions by 12 shortlisted CCIs



Theme:	CCI ID:	EE1	HR1	SK1	ES1/6	RO1	CZ1a/b	IT8	FR4	PT1	IE1	BG1/2	PO1
Structure of CCI													
CCC													
Interfaces													
Discovery & translar research	tional												
Clinical research		Λ											
Outcomes research													
Screening &early detection													
Patient pathways													

The - Rete Oncologica del Piemonte and Valle d'Aosta - has been selected along with other 9 Deep Dive Sites for a capacity building intervention by foreign Experts in the Oncology Field, on 3 chosen themes.

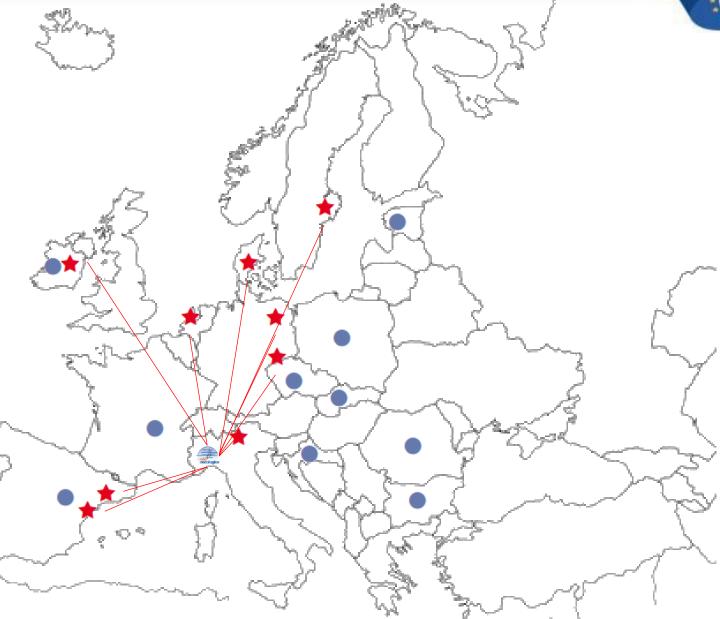
# ...at a glance





Deep Dive interventions

Experts



# **Deep Dives**

- A Deep Dive is a tailored and structured intervention within a Comprehensive Cancer Infrastructure (CCI).
- The purpose is to help the CCI build their capacity in particular domains by providing expert consultancy advice
- It consists of 3 site visits to the CCI by multidisciplinary expert teams, according to the specific domains of intervention chosen for that Deep Dive site.



# A Deep Dive is composed of **3 site visits**:

- Detailed diagnosis →
   Situational analysis
- 2. Intervention → Design of the step change improvement
- 3. Follow-up → Site to report back and gain further focused advice





# Underlying Objectives

Data and IT	Uniform the Regional Data exchange systems.					
Governance and political challenges	Implement the Hub & Spoke system and interactions.					
Screening and early detection	Expand research sites and promote communication between centers. Inform the public.					
Clinical Research	Closely monitor adherence to guidelines.					
Patient Pathway	Extend services to other potential users: the fragile, different age groups, hard-to-reach geographical areas.					

# Torino 18 -19 September 2025



Representing the two Regions

Representing public & private/structures, Patient Advocates, General Directors, Universities

From at least 10 countries

Working together for a common objective





# **Evaluation on themes from expert team**

#### What has been done?



#### November 2024 – February 2025

#### March - July 2025

#### September – December 2025

#### **Diagnosis Phase**

- Nov 2024 1st Deep Dive Visit, Torino (Situational analysis)
- Nov 2024 Final SWOT analysis
- Dec 2024 − 1<sup>st</sup> Interim Report
- Feb 2025 Digital Conference on clinical research with regional hospitals

#### **Intervention Phase**

- Mar 2025 2nd Deep Dive Visit, Novara (Design improvements)
- Mar 2025 Final SMART Objectives & Action Plan, 2<sup>nd</sup> Interim Report
- Jun–Jul 2025 Intermediate Progress Meetings

#### **Evaluation Phase**

- Sep 2025 3rd Deep Dive Visit, Torino (Evaluation phase)
- Assessment of the implemented SMART Objectives and Action Plan, based on the individual progress of the working groups from Day1 – 3rd Interim Report

#### **Focus Themes**

- ☐ Umbrella Theme: Data and Information Technology
- ② Umbrella Theme: Governance Challenges & Political Framework
- ★ Theme: Clinical Research
- ☑ Theme: Screening & Early Detection
- Theme: Patient Pathway

# 2nd Intermediate Report



CI EU

CCI4EU WP6

2nd Interim Report of CCI
Deep Dive Italy Piemonte & Val D'Aosta



Key suggestions from 2<sup>nd</sup> DD visit as well as for each of the three themes



## Intermediate theme progress meetings



# 1. Intermediate Progress Meeting | Theme Clinical Research

Tuesday, 17 June 15:00-16:30 (CET)

# 2. Intermediate Progress Meeting | Theme Screening & Early Detection

Tuesday, 1. July, 09.00-10.00 (CET)

# 3. Intermediate Progress Meeting | Theme Patient Pathway

Monday, 30 June 10:30-12:00 (CET)

# 4. Intermediate Progress Meeting | Umbrella Theme Data and Information Technology

Tuesday, 01 July 13:30-15:00 (CET)

# 5. Intermediate Progress Meeting | Umbrella Theme Governance Challenges & Political

Tuesday, 29 July 12.00-13.30 (CET)



- Working Group presented their current status quo of the implementation for each of their SMART Objectives
- Alignment of current implementation of the SMART Objectives
- Discuss possible challenges that may arise and that should be discussed during the 3rd DD visit
- The participating experts had a detailed look at the MM Webtool, Action Plan, SMART Objectives in advance to support the Working Group if needed





### Intermediate Progress Meeting | Theme Clinical Research



#### **Governance & Infrastructure**

- Steering Committee established
- Formalized clinical research network
- Centralized diagnostics & treatment pathways

#### **Innovative Therapies**

- Cell Factory MBC1 & MBC3: CAR-T/TCR-T & Gene Therapy
- Automated CAR-T (Cocoon® platform)
- EXPECT Project for technology transfer

#### **Network & Collaboration**

- Involving more hospitals in regional trials
- Regional research system: registry, coordination, methodologies

#### **Strengthening Strategies**

- Support for non-academic hospitals
- Patient transportation & education
- Digital tools: registry, trial maps, web-apps

#### **Decentralized Clinical Trials (DCTs)**

- Remote monitoring, home testing, digital platforms
- Benefits: wider recruitment, accessibility
- Challenges: privacy, infrastructure, costs

#### Real World Data & ePROs

- Opportunities: outcomes in heterogeneous & rare populations
- Challenges: data quality, bias, dedicated staff
- Barriers: awareness, system integration, patient education

#### **Next steps**

- Steering Committee: Consolidate role & regional representation
- Infrastructure: Formalize Clinical Research Network & diagnostic pathways
- Engagement: Involve non-academic hospitals, strengthen dissemination
- Decentralized Trials: Map studies, start 2 pilots, extend to network
- Ongoing AML Study: Continue data collection & analysis
- Real World Data & PROs: Expand systematic collection & digital tools



#### Intermediate Progress Meeting | Theme Screening & Early Detection



#### **Collaborative Protocol**

- Formal working group & protocol established (roles, monthly coordination)
- Annex with KPIs & periodic revisions in preparation
- Need to formalize hospital role → Oncology Network integration

#### **Awareness Campaigns**

- Focus on vulnerable & under-screened groups
- Co-designed, culturally adapted campaign (Pap test)

#### **Academic Partnerships**

- Pilot project: PRO-Screening MRI (Prostate), BIOFIT (Colorectal)
- Universities currently need for formal cooperation and data-sharing
- University representatives should be invited to 3<sup>rd</sup> DD visit

#### Referral & IT Systems

- New digital platform (AI call-recall, EHR integration)
- Interim: SMS reminders staring 08 2025
- Data Privacy compliance roadmap in development

#### **Next steps**

- Final collaborative protocol incl. KPIs (08/25)
- Launch Colorectal Cancer Campaign (09/25)
- IT upgrade & SMS rollout (09/25)
- Draft Data-sharing agreement (12/25)



# Intermediate Progress Meeting | Theme Patient Pathway



#### **Patient Education**

- CAS-T Handbook: merging 20+ booklets
- Standardized, plain-language, tumorspecific sections
- Prototype in 3 hospitals by 09/25

#### **Coordinated Care System**

- Regional MDT survey (>60% response expected)
- Annual tumor-type audits (starting: Breast Cancer)
- Challenge: limited timing data → data governance engagement

#### **Data Tracking & Pathways**

- Shift from narratives → visual flowcharts (Helict tool)
- 4–5 decision points per tumor group
- Draft diagrams & indicators ready by 09/25

#### **Telehealth Integration**

- Single regional platform adopted, lacks oncology-specific fields
- Issues: 54% digital literacy, no reimbursement for teleconsults
- Need professional training for hybrid care

#### **Research & Innovation**

- CAS-T digital triage tool pilot (3 centers, 09/25)
- Onco-Geriatrics project: courses & sessions (2026)
- Prepare 1-page scalable project summaries

#### **Additional Topics**

- Patient transportation inconsistent → support patient organisation
- Policy issues: IT integration, teleconsult reimbursement, digital skills

#### **Next steps**

- AS-T Handbook: Prototype in 3 hospitals (09/25)
- Pathway Flowcharts: Draft diagrams & indicators (09/25)
- Research Pilots: CAS-T triage tool
   (09/25); Onco-Geriatrics project (2026)
- MDT Survey & Audits: >60% response, annual audits start with breast cancer
- Telehealth: Oncology adaptation, training, reimbursement solutions
- Policy & Support: Patient transport, IT integration, teleconsult reimbursement



#### Intermediate Progress Meeting | Umbrella Theme Data and Information Technology



#### **Strategic Pillars**

- regional Electronic Health Record (Fascicolo Sanitario Elettronico) → feeding national & EU Health Data
   Space
- Piedmont Cancer Registry → research, monitoring & healthcare assessment
- GDPR reinterpretation → harmonized legal bases for compliant cancer data use

#### **Progress on Objectives**

- Hospital Discharge Records access restored (06/2025)
- Mortality data still missing; pathology data pending framework
- Breast cancer pilot study in preparation
- GDPR benchmarking (Veneto, Lombardy); DPOs engaged
- Cancer Patient Advisory Board established (charter pending)
- EHR flows exist, legal access still unresolved
- Leadership forum to be launched in Sept Deep Dive

#### **Next Steps**

- Finalize pathology data-sharing agreement
- Advance mortality data inclusion
- Draft breast cancer pilot protocol (07/25)
- Formalize Cancer Patient Advisory Board (08/25)



#### Intermediate Progress Meeting | Umbrella Theme Governance & Political Challenges



#### **Progress Highlights**

- Hub & Spoke: Cancer hubs defined, awaiting regional approval (Sept–Oct)
- Pathways & KPIs: Indicators online; dashboard in progress, GDPR limits hospital data.
- Telemedicine: €40M funded; pilot rollout 2025, full use 2026.
- Digital Pathology: 2-year rollout planned; main barriers = legal recognition & €10–50M funding.
- Harmonization: Oncology team survey underway; results Sept to align best practices.

#### **Cross-Cutting Issues to other themes**

- GDPR interpretation crucial for dashboard & data use
- Stronger alignment between Clinical Research, Screening & Earyl Detection, IT and Governance is needed

#### **Next Steps**

- Review dashboard & KPIs
- Telemedicine platform cross cut to PP
- Funding & legal strategies for digital pathology
- GDPR/ data privacy updates
- Possible high-level political meeting to push pathology funding





# Key suggestions

**Expert Team** 

# Key Suggestions – Governance | Screening | Pathways



• Support and approve the cancer network **Hub and Spoke proposal** (according to national and international guidelines).

• Reinforce the coordination of the population based screening on regional level between public health authorities and clinical facilities/ teams.

• To communicate and **connect between institutions** and obtain objective quality data on Patient Pathways and Care Quality.

# Key Suggestions – Data and IT



 Reconsider GDPR interpretation for research, health system performance and screening evaluation.

 A regional Information Technology Masterplan to improve data use and exchange.

• Connect the data-systems between Screening & Early Detection and all hospitals to improve (monitoring of) screening results.

# Key Suggestions – Clinical Research



• Promote Clinica Research to improve **equal access** to clinical trial and quality (and impact drug costs).

• **Support** Clinical Research in **smaller hospital**, also using DAIRI and Azienda Zero and in coordination with the local Comprehensive Cancer Centers within the Network, including reporting on Clinical Research.

 Support the Network Steering Group and Facilities (IT and personnel) for Clinical Research.

• Install a formal patient advisory committee.

Support the bottom up initiatives of the Rete Oncologica.



# End

Thank you very much for support & contribution It has been a real pleasure working with all of you!

