

## How to define an accredit a CCC Simon Oberst

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How to define and certify Comprehensive Cancer Centres



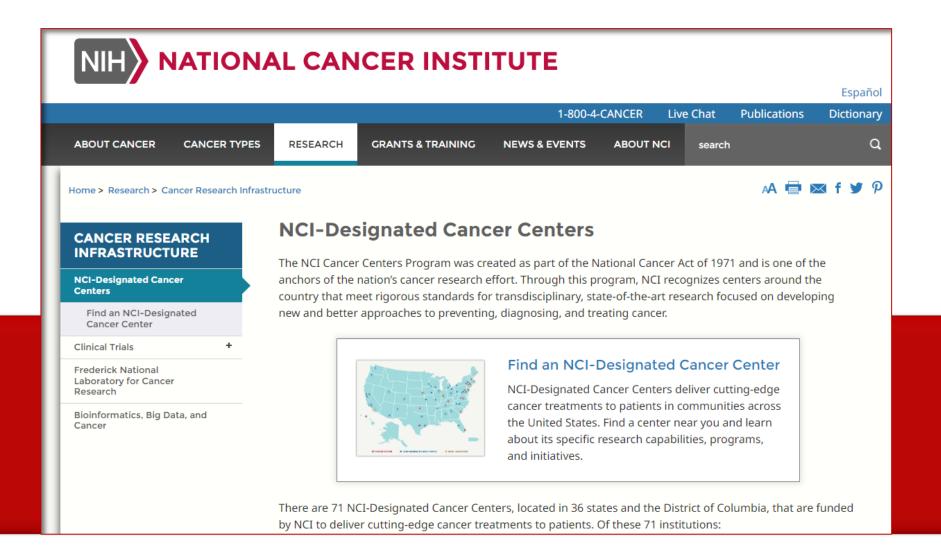


#### What is a Comprehensive Cancer Centre? - according to OECI



A comprehensive cancer centre is an organisational entity with a clear central governance spanning cancer care, research, and education (generally in one geographical location) including:

- a direct provision of an extensive range of high-quality cancer diagnostics and care covering at least
   all the major cancers
- a high level of infrastructure, expertise, and innovation in **cancer research**, **especially in translational** and **clinical research** (including early clinical trial units), but also in many cases including basic science and discovery science
- a university partnership as part of the centre, or strong links with universities and research institutes
- extensive international networking in research and clinical trials
- educational programmes for clinicians, researchers, and patients







#### **NCI definition of CCCs:**

Comprehensive Cancer Centers demonstrate reasonable depth and breadth of cancer research activities in each of three major areas: basic laboratory; clinical; and prevention, control, population-based science, as demonstrated in the formal Research Programs. Comprehensive Cancer Centers also have substantial transdisciplinary research that bridges these scientific areas, which is evaluated in the Research Programs and as part of the Six Essential Characteristics (i.e. Transdisciplinary Collaboration and Coordination). They are effective in serving their catchment area, as well as the broader population, through the cancer research they support and the cancer control activities they undertake, as demonstrated in Community Outreach and Engagement. They integrate cancer training and education of biomedical researchers and community health care professionals into programmatic efforts to enhance the scientific mission and potential of the Center, as demonstrated by the Cancer Research Training and Education Coordination component. Comprehensive Centers are expected to be strong in all four areas indicated above; strengths in some areas cannot mitigate weaknesses in one or more other areas. The NCI-Designated Cancer Centers are recognized for their scientific leadership in laboratory and clinical research. ... they dedicate significant resources toward developing research programs, faculty and facilities which will lead to better and innovative approaches to cancer prevention, diagnosis, and treatment.





#### **Definition of a CCC by Deutsche Krebshilfe**

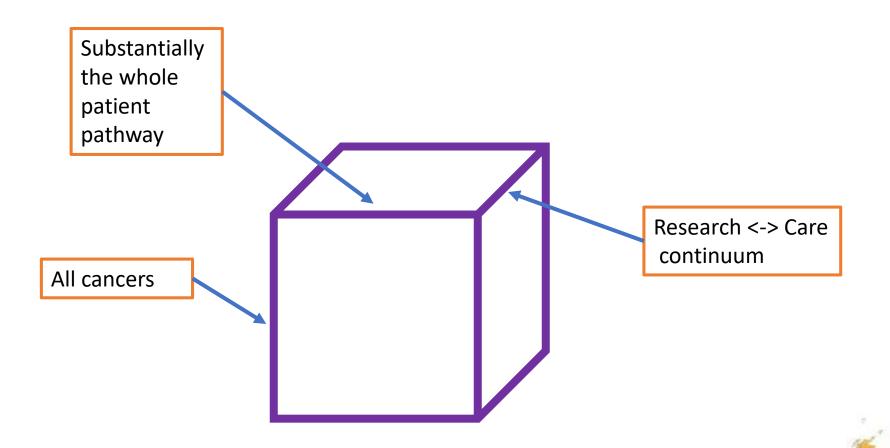


A Comprehensive Cancer Center (CCC) or Oncology Center of Excellence is to be understood as the focal point of a regional care network and should act as a driving force promoting innovative developments in the regional network.

In addition to multidisciplinary state-of-the-art clinical care, a CCC must demonstrate a reasonable depth and breadth of activities in basic laboratory, clinical as well as in prevention, cancer control and population-based research. Substantial transdisciplinary research bridging these scientific areas must be present. A CCC is expected to be a major source of significant advancements in investigating the nature of cancer and in the development of more effective approaches to prevention, diagnosis and therapy. Particularly, translational research covering the entire continuum from 'bench to bedside' is a crucial feature of a CCC. It should be committed to contribute significantly to the development of shared resources which support research. A CCC should be collaborating and coordinating their research efforts with other CCCs and disseminate their research findings for the benefit of the oncological community.



#### Comprehensiveness is 3 -dimensional





#### Comprehensive Cancer Centres:

"The whole is greater than the sum of the parts" Ringborg – but how?





An overarching vision for the whole centre: to integrate clinical care, research and education



A Cancer Centre **Board bringing** together all the main players and with real capacity to drive change



A programme structure which brings clinicians & researchers together exchanging challenges and opportunities



Incentivisation through pump priming grants and shared infrastructures



Knowledge exchange through a whole programme of events and communications



A ready influx and development of young scientists/ PhDs & MD **PhDs** 

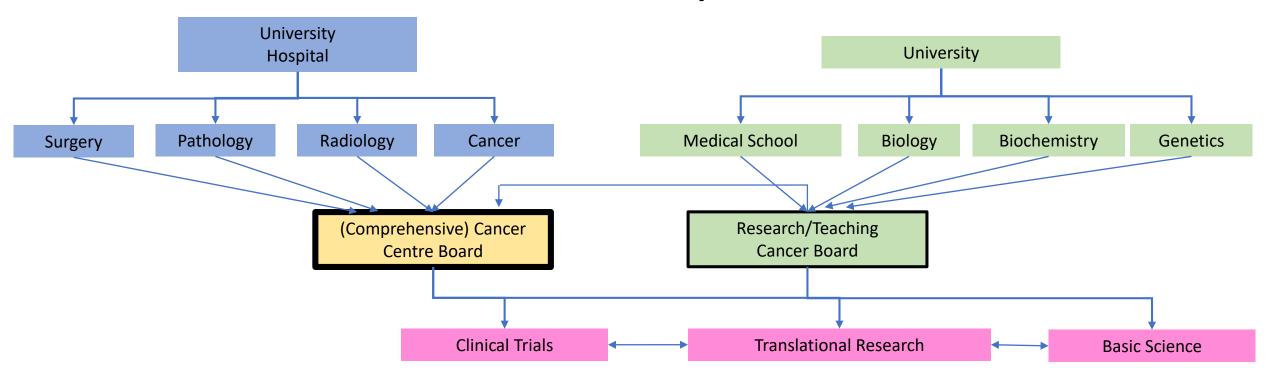


**Protected** research time for clinicians





## Governance Model for a CCC within a University Hospital – relevant for Spain?









## There are 70 large centres in the OECI Accreditation and Designation Programme





70 centres in the Accreditation Programme across:

35 Comprehensive Cancer Centres

**18 Cancer Centres** 

17 newly in the process

- OECI Member A&D certified Comprehensive Cancer Network
- ★ OECI Member A&D certified Comprehensive Cancer Center
- ★ OECI Member A&D certified Cancer Center
- ★ OECI Member in the A&D process
- Other OECI Member











All ACC Centres in Italy use the OECI accreditation programme













Most Unicancer Centresin France use the OECI accreditation programme

#### 19 Centres de Lutte

Contre le Cancer



## Finnish National Cancer Centre (FICAN)

Regional cancer centers operating in university hospitals in Helsinki, Tampere, Turku, Kuopio, and Oulu, were launched in 2018



Together with coordinating unit, regional cancer centres make up the National Cancer Center Finland (FICAN)

Improve, unify and streamline cancer treatment, education and research







Fincan Centres use the OECI accreditation programme

#### 5 Regional

**Cancer Centres** 





Designated centre
 Contracted Service

#### NCCP Designated Cancer Centres

		St. James's	Mater	St. Vincent's	Beaumont	Cork	Galway	Limerick	Waterford	SLRON*	Othert
Lung	Rapid Access Clinic	•	•	•	•	•	•	•	•		
	Surgery	•	•			•	•				
Breast	Symptomatic Breast Disease	٠	٠	٠	٠	٠	٠	•	•		Letter- kenny
	Surgery	٠	•	•	•	•	•	•	•		Letter - hearity (Galway antel (e)
Prostate	Rapid Access Olinis	•	•	•	•	•	•	•	•		
	Surgery	•	•	•	•		•				
Upper GI	Surgery	•			•	•	•				
Pancrean	Surgery			•		•					
Rectal	Surgery	٠	•	•		•	•	•	•		Letter- kenny (linkad with Suterity)
Neuro- oncology					•	•					
Radiation Oncology						•	•	Mader Private Linerics	eStati eks	•	

"SLRCN: St. Luke's Raciation Oncology Network, which has locations at St. Luke's Hospital, Rathgar, and on the campuses of St. James's Hospital and Seaumont Hospital.
\*Lettercentry Hospital is a designated satellite of Calway University Hospital.

Almost all Irish Centres use the OECI accreditation programme

#### 9 Designated

#### Cancer Centres

## What is the Accreditation Programme trying to achieve?

- ✓ To drive genuine improvements for patients
- ✓ To provide an independent and objective external quality assessment of Centres
- ✓ To provide quality standards which are ambitious in terms of excellence
- ✓ To provide pan-European standards which meet EU concerns about equity of access for patients

We use pan-European quality standards to measure clinical and research excellence and improvement





## OUR PROGRAMME'S VISION IS ALSO REFLECTED IN ITS METHOD



✓ A VOLUNTARY PROGRAMME

✓ A PEER REVIEW SYSTEM

✓ A STIMULATING, ENABLING APPROACH

✓ A SELF-ASSESSMENT

✓ A 5 YEAR ACTION PLAN & A FOLLOW-UP





# What are the Domains of the Quality Standards?

- ✓ Governance of the Cancer Centre
- ✓ Quality systems' organisation of the Cancer Centre
- ✓ Patient involvement and empowerment
- ✓ Multidisciplinarity
- ✓ Prevention and Early Detection
- ✓ Diagnosis (Radiology, Nuclear Medicine, Pathology, Molecular diagnostics)
- ✓ Treatment (Surgery, Radiotherapy, Medical Oncology, Nursing, Pain, Supportive disciplines, Survivorship, Rehabilitation, Palliative Care, End of Life Care.
- ✓ Research (Basic, Translational, Clinical Research)
- Education and Training in all disciplines.





### What does the OECI Accreditation Programme consist of?

- A self assessment period (usually taking 9-12 months)
- Self assessing, scoring, and uploading evidence against around 340 Quality Standards (about 75% clinical, 25% research)
- Completing around 900 tumour-specific or modality-specific quantitative data points
- Providing around 25 key Strategic Documents in English









**Auditors** 

**Group Composition** 

### In the A&D Programme: 94 active Auditors:

- Chairs (Directors)
- Nurses / Nurse background
- Quality Managers
- Physicians
- Research background
- Other (pharmacy, psychologist)

#### The onsite audit



ACCREDITATION
AND
DESIGNATION
PROGRAMME

- 3 days with a team of 5-6 auditors and a coordinator
- Interviews and tours with all clinical, research and educational departments to verify the standards and the scoring:
  - Medical oncology; day units and wards; pharmacy
  - All diagnostic units (CT; MRI; Nuclear Medicine; interventional rad) and pathology
  - Screening and oncogenetics
  - Radiation oncology
  - Surgery and surgical wards
  - Patients
  - Multidisciplinary Teams
  - Supportive care
  - Palliative care
  - Nurses and nurse leaders
  - Training department
  - Basic and Translational research groups
  - PhD students
  - Biobanking
  - Clinical research units
  - IT, EHR; intranet and websites
  - Executive Board
  - Senior Management Team
  - Medical/nursing school leaders





#### Quality Improvement



- The centre makes an improvement plan in response to the recommendations and Partially/No scores
- The OECI Accreditation Board assesses the plan
- After one year follow up of improvement plan by audit team chair and OECI
- Self assessment begins again after 4 years.
- Second round accreditation after five years



Organisation of European Cancer Institutes



#### What are the advantages of an accreditation/certification?



- Accreditation/certification is a mark of quality
- OECI accreditation covers cancer care, education and research (so does GCS and GCA)
- The Review produces a high-quality Improvement Plan (with clear identification of opportunities and a plan to fix them)
- There is a real engagement by all disciplines and all levels of staff
- The gathering of the data and the self assessment by all departments is a benefit in itself (for self monitoring and learning)
- Collecting quality data allows benchmarking







Thank you for your attention

Ministerio de Sanidad