



Specific contract No HaDEA/2022/P3/06 implementing framework contract No SANTE/2021/OP/0002



Study on mapping and evaluating the implementation of the Europe's Beating Cancer Plan

**Final workshop with stakeholders** 18 April 2024

# Agenda

| Time          | Item   |
|---------------|--|
| 14:00 – 14:30 | Registration   |
| 14:30 – 14:40 | Introduction and opening remarks by DG SANTE   |
| 14:40 – 14:50 | Presentation of the study approach by the project team   |
| 14:50 – 15:15 | Presentation of the results of the case studies on the EU4Health cancer projects by the project team |
| 15:15 – 16:00 | Q&A  |
| 16:00 – 16:15 | Coffee break   |
| 16:15 – 16:40 | Presentation of the EBCP monitoring framework by the project team                                    |
| 16:40 – 17:25 | Q&A  |
| 17:25 – 17:30 | Closing (conclusions, next steps) by the project team  |

# Some operational rules

For online participants



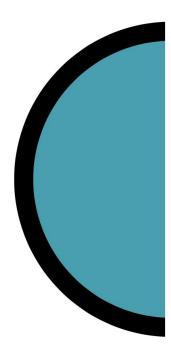
To ensure a seamless workshop experience, please keep your microphone on mute when you are not speaking.



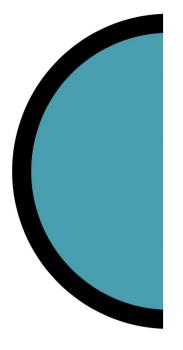
Please use the raise your hand option if you want to intervene.



Additionally, please feel free to post any thoughts or questions in the 'Chat panel.'



## Introduction and opening remarks (DG SANTE)



# Study approach

## Methodological approach

Task 1: Future proofing analysis

- Intervention logic
- Literature review
- Interviews with EU stakeholders

## Task 2: Country analysis

- National desk research
- Survey with national stakeholders
- Preparation of country factsheets

Task 3: Evaluation of progress of EU4Health programme

- Selection of case studies
- Data collection (desk research, interviews)
- Drafting of case studies

#### Task 4: Monitoring framework

- Definition of scope
- Review of reporting requirements and data sources
- Design of monitoring framework

#### Task 5: Focus groups and workshops

- Four focus groups with the panel of experts of the study
- Two workshops with stakeholders

Task 6: Synthesis and reporting

# EU4Health Programme

Assessment of cancer-related projects and actions



# Types of projects in scope

EU4Health Programme (2021-2027): EU financial support in the field of health, including cross-cutting focus on cancer. Types of funding:

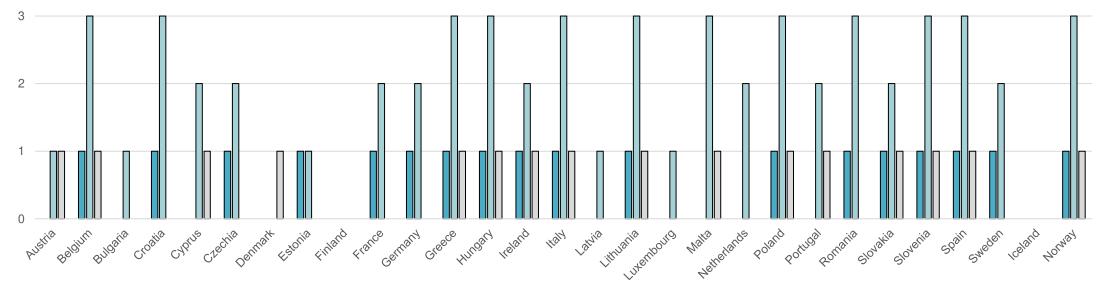
| Non-<br>competitive<br>process | <ul> <li>Joint Actions (JA): to Member States and associated countries to the EU4H Programme.</li> <li>Direct grants: to international institutions (not included in the study).</li> </ul> |
|--------------------------------|---|
| Competitive                    | <ul> <li>Project grants: in response to call for proposals to institutions<br/>from Member States and associated countries EU4H<br/>Programme.</li> </ul>                                   |
|                                | <ul> <li>Procurement contracts: call for tenders.</li> </ul>  |

## **Overview of participants in Joint Actions**

5 Joint Actions funded under the EU4Health Programme (up to November 2023):

- 1 under Pillar I (Prevention): JA PERCH
- O under Pillar II (Early detection): \*JA on screening in the 2023 EU4Health WP
   3 under Pillar III (Diagnosis and treatment): JA CraNE, JA JANE, JA OriON
   1 under Pillar IV (Quality of Life): JA eCAN

Number of participations in Joint Actions

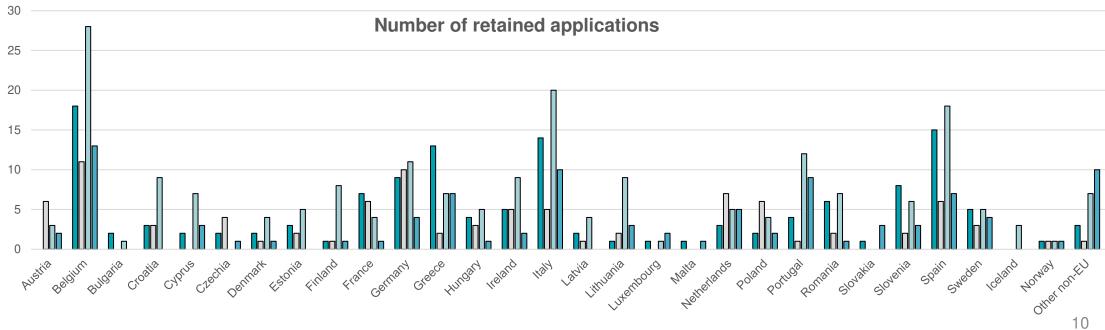


■Pillar I ■Pillar III ■Pillar IV

# Overview of participants in project grants and procurement contracts

26 project grants (not including direct grants) and 12 procurement contracts funded under the EU4Health Programme (up to November 2023):

- 18 under Pillar I: 10 project grants and 8 procurement contracts
- 4 under Pillar II: 4 project grants
- 10 under Pillar III: 9 project grants and 1 procurement contract
- 6 under Pillar IV: 3 project grants and 3 procurement contracts

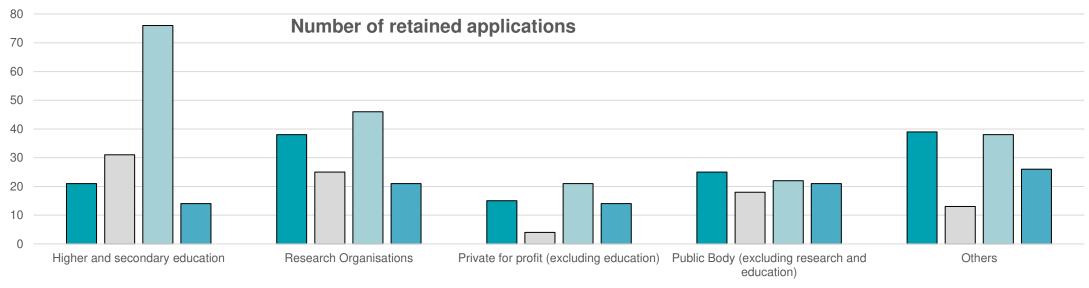


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# Experience and barriers in the application process under the EU4Health Programme

|   | Experience and barriers in the application process   | Project<br>grant | Joint<br>Action | Procure<br>ment |
|---|--|------------------|-----------------|-----------------|
| 0 | Lengthy and documentation-heavy application process  | Х                | Х               |                 |
| 0 | Burdensome financial application process - challenging for small and non-<br>profit organisations lacking administrative support             | х                | Х               |                 |
| 0 | Co-funding scheme can be a challenge for smaller Member States, smaller organisations, non-profit organisations, and universities.           | х                | х               |                 |
| 0 | Limited budget share for Joint Actions with a large number of participating countries  |                  | Х               |                 |
| 0 | Challenges with forming a consortium and organising tasks among partners, along with restrictions on participation of European organisations | х                | Х               |                 |
| 0 | Timing of calls which coincide with election periods or competing political priorities can negatively impact the application process         | Х                | Х               |                 |

# Experience and barriers in the application process under the EU4Health Programme

| Recommended actions   | Existing mechanisms  |  |  |  |
|---|--|--|--|--|
| Guidelines or tutorials to assist with the application process. | HaDEA has published some application guidelines<br>on the EU4Health website and runs dedicated<br>workshops providing information on the application<br>process.   |  |  |  |
| Revision of co-funding scheme to increase the EU funding share. | The co-funding mechanism is defined in Article 8 of<br>Regulation (EU) 2021/522 of the European<br>Parliament and of the Council of 24 March 2021<br>establishing a Programme for the Union's action in<br>the field of health ('EU4Health Programme') for the<br>period 2021-2027 |  |  |  |

#### Experience and barriers in the implementation

All projects assessed in the case studies overall progressing according to plan, delays related to external factors.

|   | Barriers and challenges to implementation  | Project<br>grant | Joint<br>Action | Procure<br>ment |
|---|--|------------------|-----------------|-----------------|
| 0 | Pre-defined unit costs to reimburse travel expenses lower than actual cost.  | Х                |                 |                 |
| 0 | Burdensome financial reporting > delays in payment put under financial pressure participant organisations.           | Х                |                 |                 |
| 0 | Duration too short to effectively achieve the set objectives and uncertainty on continuation of funding.             | Х                | Х               |                 |
| 0 | Importance of coordination between different consortia running intertwined projects > avoid the duplication of work. | Х                | Х               | Х               |
| 0 | Country specific characteristics can still hinder advances at national level.  | Х                | Х               | Х               |

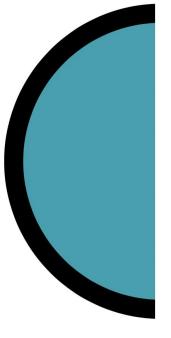


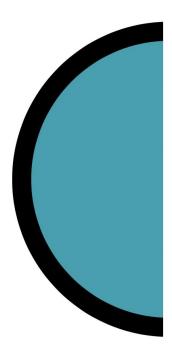
#### **Recommended actions:**

- Increase Commission's involvement in the coordination of intertwined projects
- Increase Commission's communication and dissemination efforts of project outputs.
- Streamline the financial reporting requirements and provide clear instructions, template and process.
- Amend travel expenses reimbursement rules to take into account special needs of cancer patients and survivors.

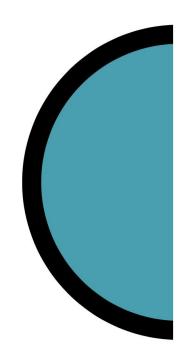


## Questions and answers





# Coffee break



## EBCP monitoring framework

#### Monitoring Framework of the Europe's Beating Cancer Plan

#### Overarching objective:

To monitor the implementation of the Europe's Beating Cancer Plan (EBCP) at European level to assess whether the action taken is sufficient to achieve the objectives or whether additional measures are necessary.

#### Methodology adopted:

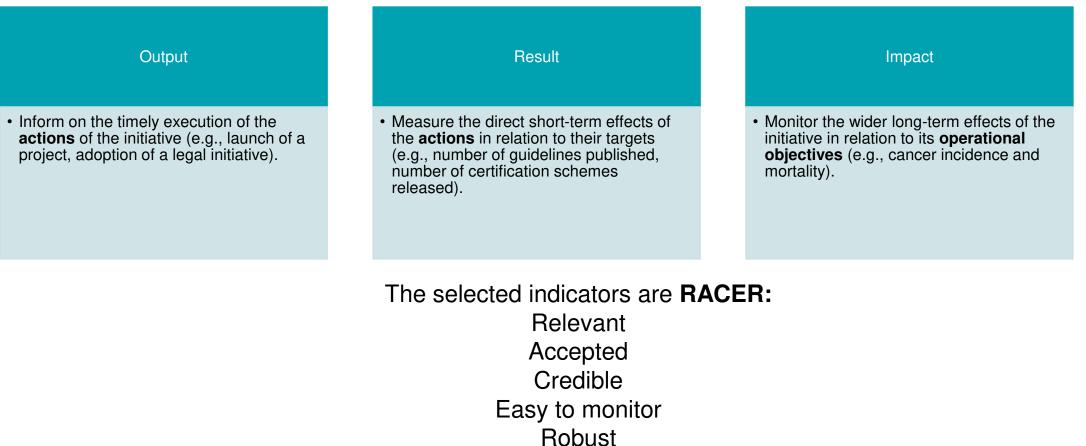
- 1. Identification of the monitoring scope
- 2. Existing reporting and data collection requirements
- 3. Data gap analysis
- 4. Outline of the monitoring framework
- 5. Guidelines for data collection activities

#### Identification of the monitoring scope

#### Monitoring scope:

Indicators to cover all dimensions of the Plan: all 42 actions under the four pillars and three cross cutting themes.

#### Conceptual framework:

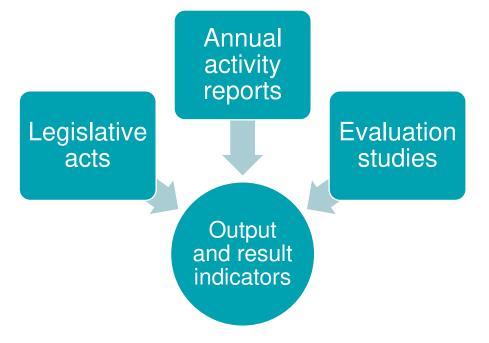


# Existing reporting requirements and data collection activities

#### **Objective:**

Make the most out of existing reporting requirements to maximise cost-efficiency, contain administrative burden and increase coherence and comparability of the results.

Output and result indicators data sources:



# Existing reporting requirements and data collection activities

#### Impact indicators data sources:

- European Cancer Inequality Registry
- European Cancer Information System
- International Agency for Research on Cancer
- Global Burden of Disease Study
- Health Promotion and Disease Prevention Knowledge Gateway
- European Environmental Agency
- European Food and Safety Authority
- European Urban Mobility Observatory
- Eurobarometer Surveys

#### Gap analysis:

Given the numerous sources of information available at the global, EU and national level, no additional needs for reporting requirements were identified.

# Outline of the monitoring framework – An example based on the revision of the Tobacco Product Directive (TPD)

| Action/Operational Objective |   | Indicator   | Type of indicator | Description  | Unit of<br>measureme<br>nt  | Data source  | Frequency of measurement                             | Target                  | Baseline   |
|------------------------------|---|---|-------------------|--|---|--|--|-------------------------|--|
| Action                       | Create a<br>tobacco free<br>Generation<br>by reviewing<br>the TPD | Adoption of<br>the<br>Commission<br>Proposal                  | Output            | This indicator informs on the year of adoption of the Commission proposal on the TPD   | Qualitative   | European Commission  | Once   | 2024                    | TPD<br>(2014/40/EU)  |
|                              |   | Implementati<br>on of the<br>Commission<br>Proposal           | Result            | This indicator informs on the degree to which<br>actions were taken by the MS to comply with the<br>new legislation  | Qualitative   | European Commission<br>Implementation Reports                    | Biennial since the<br>adoption of the<br>legislation | All MS                  | Current<br>national<br>framework<br>under the<br>TPD               |
| Operational<br>Objective     | Create a<br>Tobacco<br>Free<br>Generation                         | Prevalence of<br>tobacco and<br>nicotine<br>products<br>users | Impact            | This is indicator provides estimates on the fraction<br>of users of tobacco and nicotine products. It is<br>disaggregated by product type, country, gender,<br>demographic group, socio-economic group.                                      | Percentage  | European Cancer<br>Inequality Registry,<br>Eurobarometer Surveys | At least every five<br>years                         | Less than 5%<br>by 2040 | Current<br>prevalence<br>rates (around<br>25%)                     |
|                              |   | Cancer cases<br>attributable to<br>smoking                    | Impact            | This indicator provides an estimate on the number<br>of cancer cases attributable to smoking. It can be<br>disaggregated by country, gender, cancer type.  | Percentage  | Global Cancer<br>Observatory                                     | Annual   | Not Applicable          | Current<br>cancer cases<br>attributable to<br>smoking in<br>the EU |
|                              |   | Estimated<br>cancer<br>deaths<br>attributable to<br>smoking   | Impact            | This indicator presents: (i) the total number of cancer-related deaths attributable to smoking; (ii) age-standardised cancer deaths rate attributable to smoking; (iii) the proportion of all cancer-related deaths attributable to smoking. | Count, age-<br>standardised<br>rate per<br>100,000<br>inhabitants | ECIR; Global Burden of<br>Disease Study                          | At least every 5/6<br>years                          | Not Applicable          | Not<br>applicable  |
|                              |   | Estimated<br>DALYs for<br>smoking-<br>attributable<br>cancers | Impact            | This impact indicator measures the DALYs for smoking attributable cancers  | Rate per<br>100,000<br>inhabitants                                | Global Burden of<br>Disease; Scientific<br>publications          | At least every 5/6<br>years                          | Not applicable          | Not Applicable   |

#### Proposed operationalisation of the Monitoring Framework

#### Possible administrative arrangements:

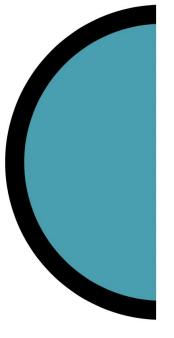
- The operationalisation of the monitoring framework could be led by the Directorate General for Health and Food Safety (DG SANTE) and the Directorate-General of the Joint Research Centre (DG JRC), which could centralise the collection of data and liaise with the relevant EU or national institutions for any additional information request
- Close cooperation with co-lead services of the Europe's Beating Cancer Plan, including the Expert Sub-Group on Cancer

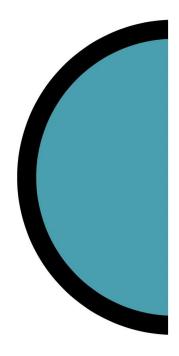
#### Possible timeline:

- Annual monitoring to update the EBCP roadmap
- First review of the EBCP by the end of 2024
- Subsequent monitoring and evaluation conducted every three years



## Questions and answers





#### Conclusions





# Thank you