

JA NFP4Health

LEARNING BY DOING LAB - CANCER

Warsaw, 18-19 November 2024

GROUP ACTIVITIES AND FEEDBACK SUMMARY



This presentation is part of the action "NFP4Health" which has received funding from the European Union's Health Programme (2014-2020) under grant agreement No 101035965.

Group activities and feedback summary

Scouting challenges, highlighted items:

Based on information found in EU funded projects from the EU Funding & Tenders Portal.

Scouting group 1

Selected the “e-QuoL” project (<https://equolproject.eu>), which is ongoing. The goals, consortium, impact, and work plan were analysed. The innovation identified is the implementation of an integrated and complex e-health tool with a long-term follow-up. This was seen as particularly valuable given the increasing challenges with new generations of patients. It was mentioned that the broad approach taken, integrating social and sociological factors, would also be valuable in the collection of relevant data and in project sustainability and dissemination (especially in other Member States). It was however noted how the research elements of the project were underrepresented on the (up to date but incomplete) website, which is notable for a Horizon project. The overlap with existing projects, which was also identified as a challenge, could be addressed by presenting said projects on the website and using them as resources.

Scouting group 2

Selected the “MadridNight” project, which has concluded. The objectives, consortium, impact, and workplan were analysed. It was noted how the main focus was on communication and information over technical research, and that many peer activities were used to actively engage stakeholders, which was identified as a point of innovation. Despite the project having concluded, **no website was readily available**, but many results were available on the Funding & Tenders portal page for the project. Based on additional feedback, apparently the positive impact of involving stakeholders was felt in a meaningful way in the past few months, with regards to expressions of interest in projects. This is particularly relevant given that oftentimes the impact of communication and dissemination activities is low.

Scouting group 3

Selected the “Melody” project, which is ongoing. Analysed the objectives of the project, the consortium, and the main impact. It was not possible to find a detailed workplan or a breakdown of work packages, **nor a project website**, but the project had only been going for two months. It was identified that the planned intervention activities, specifically pilots, could be adapted and used as an example and/or a basis for other projects in the future. The holistic scope of the project, which is integrating many actors for communities of care, was also highlighted as a very valuable example and area of innovation.

Scouting group 4

Selected the “CanScreen ECIS” project (<https://canscreen-ecis.iarc.who.int/the-project>), which has concluded. The project was chosen as an influential effort in a very impactful area. The project website allowed access to data pertaining to the relevant objectives, the consortium, and the main impacts. The innovation identified was the expansion of data available for access, with the project data being used as a valuable source of information for the European Commission. It was noted that not all the results extracted from the collected data are available yet, despite the project having concluded. This brought up questions concerning project sustainability and data accessibility.



Presentation of the Learning Labs/Working Groups' results and feedback:

EU4Health proposal groups 1&2 (merged)

Project on improving health literacy in the field of cancer screening. The outputs would include a social campaign based on survey results, with an eye to a very accessible communication register to avoid excessively difficult medical jargon, identified as an area of challenge based on existing projects. Activities would also include questionnaires and the creation and updating of a web-based information hub on cancer screening. In creating indicators, the number of targeted actions that specifically reach and involve vulnerable and disadvantaged population groups would be prioritised, as well as the general number of people reached by the questionnaires and campaign, and the involvement with the information hub.

Feedback provided highlighted the importance of showing that there are planned activities for all the various stakeholders and relevant actors that are mentioned in the call, as it was done here, making the proposal a strong starting point. Linking to existing projects and the proposed use of existing data, as it was also done here, was acknowledged as a very important step in the process as well. What was mentioned as a potential issue is the creation of a new and separate platform, which would need to be justified in light of it potentially going beyond the scope of the call and given an "overcrowded" status quo. In analysing the proposed means of verification for the chosen indicators, it was stressed how the specific mechanisms should be explained. With regards to risk evaluation, an observation was made concerning existing projects whose scope might create challenges: the potential issues in this area would need to be explicitly addressed. As a side note, with regards to checking the project budget via the Funding & Tenders portal, a reminder was made to check the number of projects sharing one budget in a given call.

Horizon Europe proposal group 1

Project on supporting dialogue towards the development of national cancer nodes, with the goal of creating a complex cancer data system in Poland to optimise cancer care. Outputs would involve the analysis of the status quo of cancer data nodes, creating a model of data infrastructure, providing a pilot for the cancer node, scaling-up and improvement of existing national data health infrastructure, providing links to the EHDS and creating a dialogue with national stakeholders. In this context, indicators and means of verifications would also include an analysis of the European data nodes and initiatives, as well as trainings and info days and a data security plan.

Feedback provided highlighted the very wide scope of the project, while acknowledging that additional time to integrate tools such as the project and goal trees would easily help establishing a narrower focus. Given that premise, the detailed nature of the proposal was considered a good foundation for a project. Additional feedback was postponed to after the presentation of group 2, to address both jointly.

Horizon Europe proposal group 2

Project on supporting dialogue towards the development of national cancer nodes, with a specific focus on the creation of a database of structured medical data in the form of eDILO card to be integrated with the existing cancer registry, to create a single integrated database for completion data form MDT and other national systems. Given the stated outputs of creating an integrated system in Poland and ensuring its external integration with the EHDS, matching indicators would include the percentage of units equipped with and using facilities for comprehensive data collection, as well as the percentage of patients with complete



data sets versus new patients. Activities would include the identification of minimal and extended data packages, system development and maintenance, as well as networking, experience sharing and joint activities.

Feedback provided positively highlighted the value of this kind of project and the importance of highlighting assumptions and points of risk, which were addressed. The necessity of addressing specific sub-groups to avoid leaving out specific relevant stakeholders was pointed out as an important addition.

Overall feedback to both Horizon Groups

Given that the projects in question are Coordination and Support Actions with a European aim, they need to explicitly show how the solutions proposed can be applied across Europe and go beyond one/a few member states. In this instance, the nature of the call would require the creation of cancer nodes that would need to be planned for a European standardised approach.

Analysis of the feedback given drew attention to the challenges imposed by the limited budget, and as such to the need for a further narrowing of the planned outcomes and outputs, but also to the difficulties created by the limited timeframe. In the light of the above, specific mention was made to existing networks operating already in Europe in this area, albeit with insufficient interaction, and how they need to be interacted with to harness their potential.

