# An Excellence Designation System (EDS) in Translational Research for Comprehensive Cancer Centers (CCC's)

Draft EDS based on stakeholder consensus

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# Storyline

- 1. Why focus on Translational Research?
- 2. What is the need for Excellence?
- 3. What is the basis for & where to assess Excellence?
- 4. How can we assess Excellence?
- 5. Who will assess Excellence?
- 6. When will Excellence be assessed?

4 take home messages!

# Why focus on Translational Research?



Earth to Mars travel time average 150-300 days

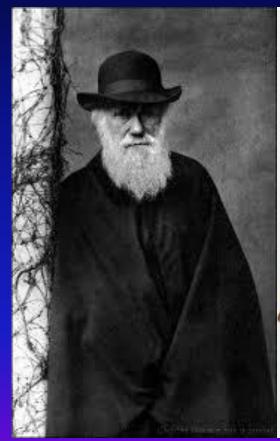


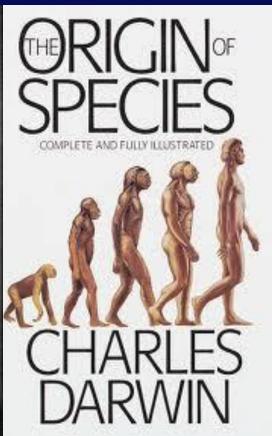
Basic research to clinical practice average 17 years

Source: Westfall, J. M., Mold, J., & Fagnan, L. (2007). Practice-based research - "Blue Highways" on the NIH roadmap. JAMA, 297(4), p. 403.

### What is the need for Excellence?

- "Survival of the fittest"
- Competitive operating environment
- Excellent performance is a necessity
- Improved TR to reduce lags
- Better patient benefit & outcomes





## What is the need for Excellence?

- Collaborations in TR
- Excellent Centers
- Europe wide
- Shared resources
- Formal entry
- EC support

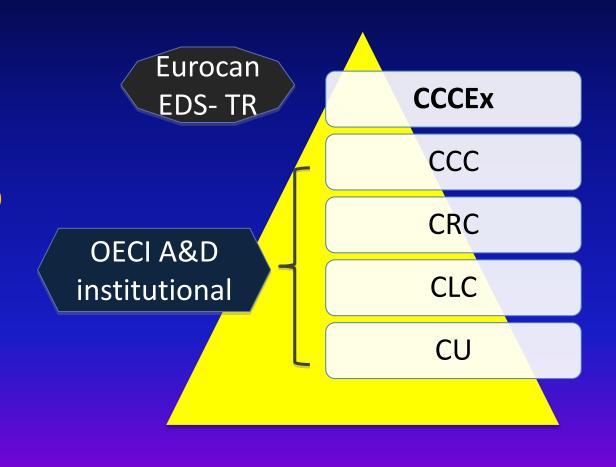






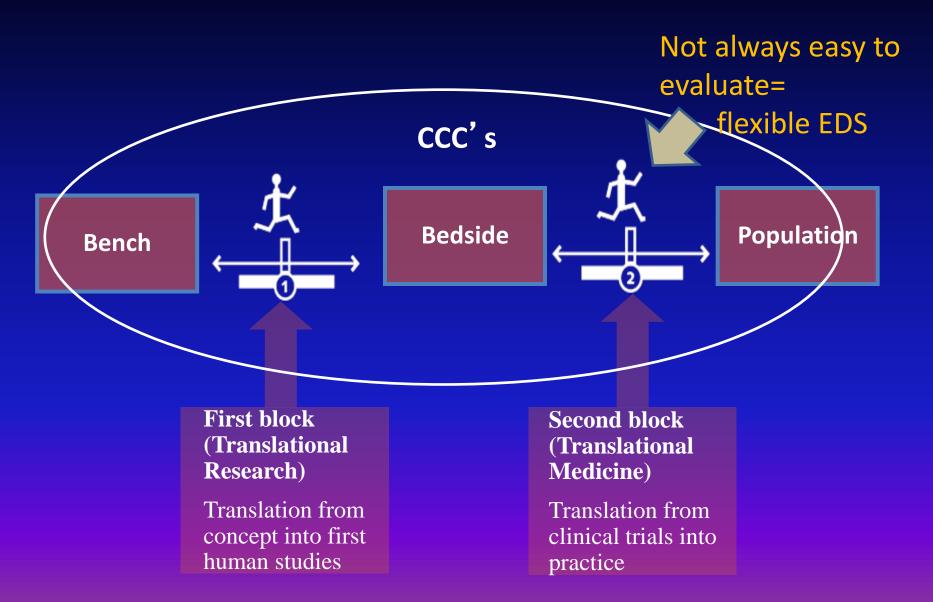
#### What is the basis for & where to assess Excellence?

- OECI A&D
- Eligibility
- Expand EDS scope
- Part 1 Criteria (NKI)
  - 4 Deliverables
    - -Draft (2011-12)
    - -Pilot (2013-14)
    - -Results (2015)
    - -Report (2016)

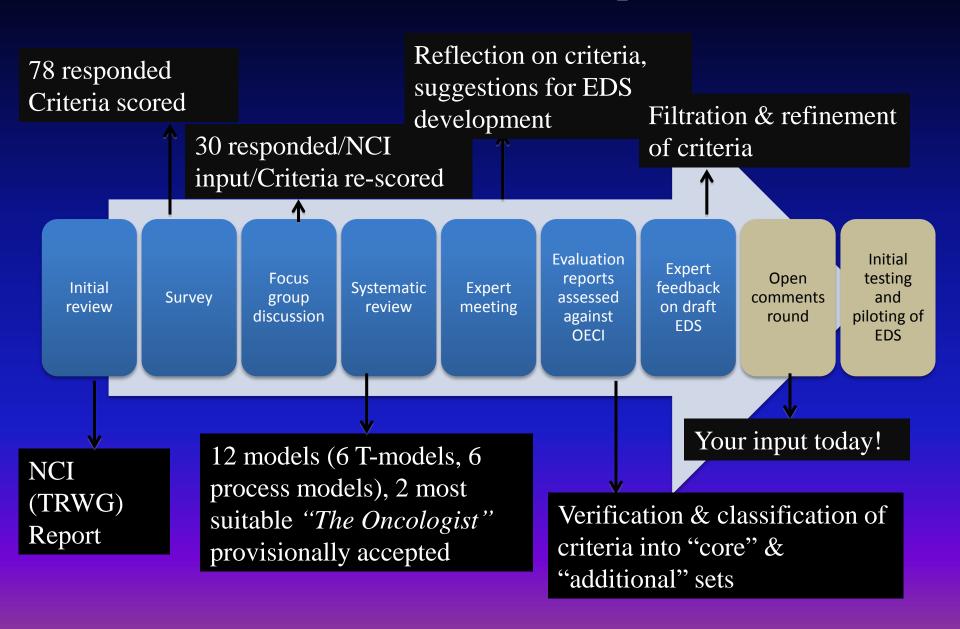


• Part 2 Indicators (IGR)

#### How can we assess excellence?



## Stakeholder consensus to develop EDS- methods



## Consensus findings

- Avoid bureaucracy
- Keep it slim
- Qualitative criteria
- Basic, translational & clinical
- Core & additional criteria
- Respected peer review experts
- Keep it flexible for interpretation



#### DRAFT EDS - 10 themes

- 1. Organizational policy & strategy
- 2. Financial management
- 3. People management
- 4. Collaborations
- 5. Research infrastructure
- 6. Clinical trials management
- 7. Innovation research outputs
- 8. Center profile
- 9. Training and development
- 10. Patient clinical experience

# People management

Core- Mechanisms are in place to support clinicians to do lab and translational research (e.g. number of clinicians undertaking research aimed at a PhD)

Additional- Effective support for junior staff in setting project and career goals

# Clinical trials management

• Core- Availability of clinical trials unit/translational research board to discuss clinical trials initiative and to select the most promising protocols.

 Additional- Percentage of patients included in clinical trials is significant

# Financial management

• Core- Majority of the grants (at least 60%) have been obtained through a process of external peer review.

 Additional- Significant percentage of income has been obtained from philanthropy in the past 5 years

## Who will assess excellence?

External governance (European Academy of Cancer Sciences)



## When will Excellence be assessed?

- Open comments round (Oct 2012)
- Initial testing (Jan-March 2013)
- Pilot (May 2013- May 2014)

#### Other activities

•Added value of OECI A&D programme (Oct 2012-Mar 2013)

# 4 take home messages

- Translational "process"
- Minimised bureaucracy
- Qualitative approach
- OECI & Eurocan –
   institutional labels (CCC,
   CRC, CCCEx)



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