

EUROPEAN COUNTRIES CONSULTATION:

Anchoring EUCCC Certification
in National Realities

WP5 – Inclusion, Certification and
Adherence to EUCCC Certification

GREECE COUNTRY PROFILE



Co-funded by
the European Union

THE EUROPEAN COMPREHENSIVE CANCER CENTRE NETWORK





Context: existing certification systems and organization of cancer care

Quality assurance emerging as a national priority

In 2020, a law established the National Organization for Quality Assurance in Health (ODIPY) under the supervision of the Ministry of Health. This body is tasked with improving the quality of healthcare services and developing:

- A national quality strategy for health services
- Standards and assessment frameworks
- A dashboard for automated measurement of key performance indicators
- A national health map and data-driven strategic planning¹.

The ODIPY quality assurance process consists in several phases: a self-assessment questionnaire, on-site visits and audits and setting up indicators. Subsequently, hospitals are given customised goals according to their level of performance. Such a process can concern either separate departments or the whole hospital.

In parallel, the General Oncology Hospital of Athens “AGIOS SAVVAS” is OECD certified as cancer center and has acquired the “comprehensive cancer center” status.

Organization of cancer care²

There are oncology-specific stand-alone hospitals across the country, as well as university hospitals with major oncology units, two major paediatric hospitals and oncology units in the majority of big hospitals.

Cancer care infrastructure is highly concentrated in large urban areas in Greece, where most specialised oncology units are located.

In particular, almost two out of three hospitals and clinics providing oncology care are located in Athens and Thessaloniki.

Patients living in rural and remote areas face significant geographical barriers to access services for diagnosis, treatment and follow-up. Consequently, nearly a quarter of cancer patients perceive long distances and transportation difficulties as barriers to accessing care.

Despite the recognised benefits of care concentration for clinical outcomes, cancer care in Greece remains fragmented.

Establishment of cancer care networks has been recommended since the early 2010s, with the potential to enhance coordination across care settings and facilitate dissemination of knowledge and clinical practice guidelines among organizations and health professionals. Although evidence demonstrates that such initiatives tend to improve clinical outcomes and potentially reduce costs, no significant progress has been made.

Greece has currently two CCCN pilot hospitals (lung cancer and gynecological cancer), one of which is also a CCC pilot within the joint action.

Greece also lacks comprehensive cancer centers across the country. However, according to recent announcements, AGIOS SAVVAS Hospital has become the first OEI accredited comprehensive cancer center in Greece, with other hospitals in Athens and Thessaloniki expected to follow.

Identified barriers against the implementation of EUCCC certification in Greece

- **Lack of a culture of cooperation between hospitals.** Patient freedom to choose their treatment facility has contributed to a competitive dynamic between hospitals, impeding the development of formalised networks.
- **Activity-based payments** have recently been introduced in Greece. While it should improve transparency in the system, it is unclear to what extent this might exacerbate competition between hospitals.
- **Lack of harmonisation of medical records**, incl. oncology. Currently, hospitals have their own IT systems. A process conducted by the Ministry of Health has started however to ensure interoperability between systems in the near future.

Identified enablers towards the implementation of EUCCC certification in Greece

- The **small size of the country and the easy mobility of patients** also provides opportunities for fluid exchanges within the cancer care and research community.
- **The central government is willing to support the infrastructure and capacity-building** for establishing EUCCCs in the country.
- **Cancer plans in Greece are dynamic** and take into account the feedbacks from EU projects.
- **Strong interest and political support for EUnetCCC** in Greece.
- **A political will to create networks and improve cooperation** between hospitals.

Conditions for successful EUCCC certification implementation in Greece

- **Pursuit and consolidation of the reforms aimed at improving the infrastructure** of research and care.
- **Further systematisation and formalisation of minimal case volume thresholds for surgery.** They are currently not used systematically and the information regarding case volume is not made public yet. It is hoped participation in CCCNs (WP9) will make their adoption and publication obligatory thus improving both transparency of information and quality of care.

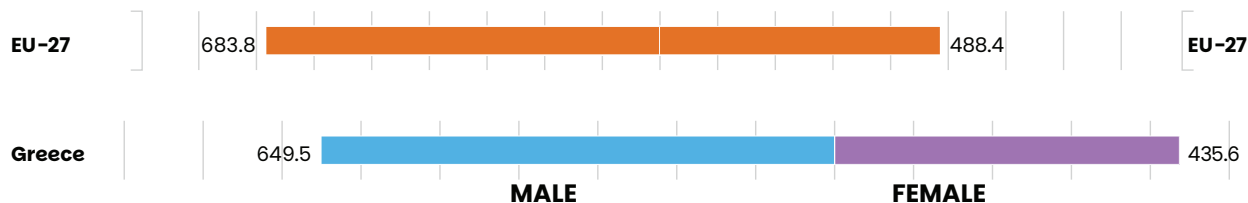
Number of OECI-certified CCCs: 1

Number of EUCCC pilot centers: 1

Epidemiology: incidence, mortality and survival rates

Incidence rate:

Estimated incidence, both sexes, all sites but non-melanoma skin, 2022 (per 100 000 population)



Mortality rate:



Survival rates:

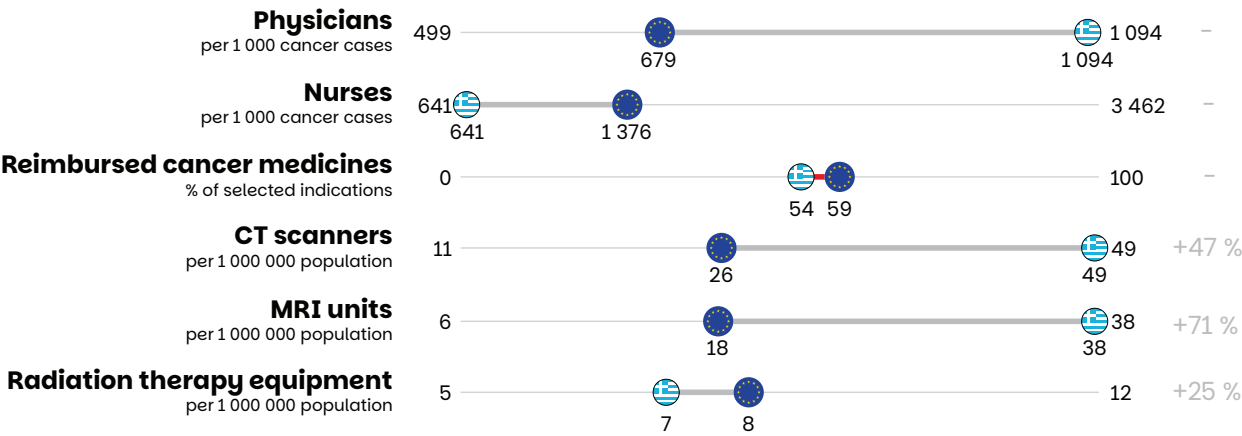
For the selection of cancers:



Risk factors



Human resources and infrastructure



Number of clinical trials: 498

Endnotes

- 1. Actions in hospitals in the country Archives • ODIPY
- 2. EU Country Cancer Profile: Greece 2025 | OECD



**For more information,
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