

EUROPEAN COUNTRIES CONSULTATION:

Anchoring EUCCC Certification
in National Realities

WP5 – Inclusion, Certification and
Adherence to EUCCC Certification

NORWAY COUNTRY PROFILE

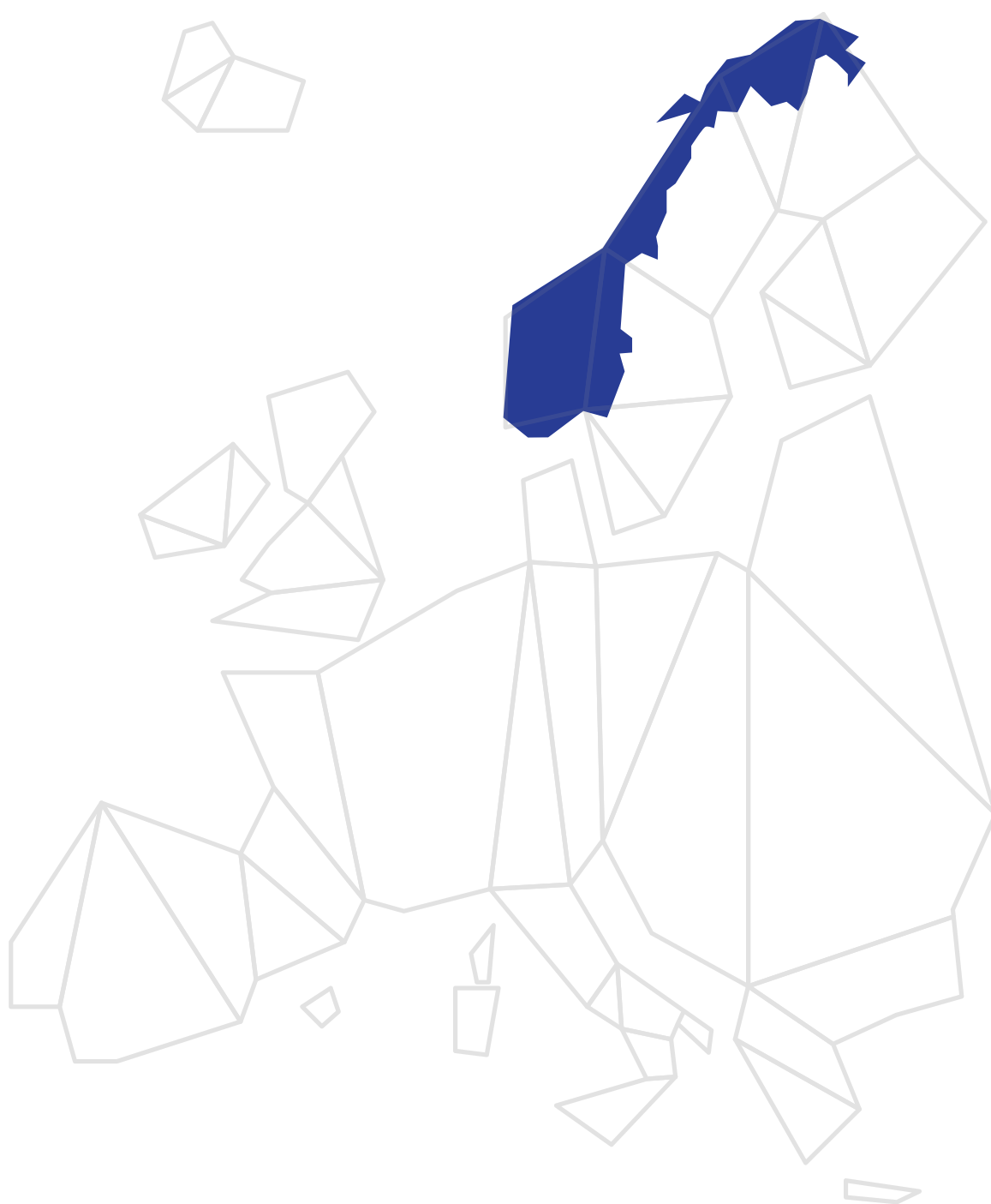


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THE EUROPEAN COMPREHENSIVE CANCER CENTRE NETWORK





Context: existing certification systems and organization of cancer care

Strong political support for CCC certification

The first Norwegian cancer strategy was published in 1968. The current edition, the 7th, was published in early 2025. The strategy “Joint Actions Against Cancer” (2025–2035) outlines 17 main targets, one of them being that the whole population of Norway should have access to an internationally recognised Comprehensive Cancer Center. To reach this goal, one respective university hospital in all four health regions should be certified as a CCC.

International accreditations:

- OECI: One hospital is CCC certified, while two others are in the process of becoming certified. Other University hospitals also express CCC-ambitions. Additionally, five local hospitals are interested in becoming CCs.
- ERN (European Health Reference network): Certified and member on child cancer, gynaecological cancer and sarcomas

The following developments are expected in the near future concerning the deployment of certification systems:

A University hospital is currently participating as a field test site in EUnetCCC.

Organization of cancer care

In Norway, hospitals are organised as hospital trusts. These are distributed under four regional hospital trusts. Hospitals are either university hospitals or local hospitals, all general and thus not cancer specific. Although most hospitals are public, there are also private local hospitals. For different types of cancer and treatments, there are agreements that some cases should be treated either in the central regional university hospital or in the local hospital.

Cancer Patient Pathway Reform

Since 2015, waiting times of 28 diagnose-based cancer patient pathways have been tracked. The reform is called a logistics reform. The reform also entailed the introduction of cancer patient coordinators, to ensure a better flow in the pathways.

National Cancer Registry

All cancer cases in Norway are reported to the National Cancer Registry (est. 1952). The organization collaborates with the clinical community in Norway and develop yearly National Quality Registries for several cancer types. These are published and are available for everyone.

Formal networks

There are existing formal networks on several levels:

- **Regional:** Regional MDT-meetings. Within the South-East region, a cancer care leadership group consisting of heads of cancer departments was established three years ago, with support from the government. The leader of Oslo University Hospital CCC is also the leader of this regional leadership network. The latter will be a CCC hub, with the existing budgets of the institutions. Additionally, joint regional initiatives will have access to regional budgets, such as in the case of precision medicine.
- **National:** MTBs, tumour-based professional groups creating guidelines, and national leadership network for the four regions.

Depending on capacity, patients may choose where to be treated.

Identified enablers towards the implementation of EUCCC certification in the country

- Strong political commitment to achieving full CCC coverage, explicitly stated in the 2025–2035 Cancer Strategy.
- The structure of the health regions with collaborating university and local hospitals, correspond well to the idea of coverage of CCC access in the population.
- The university hospitals comprise care and research.
- A large share of cancer patient pathways are cross-institutional. Thus the logic behind coordination is visible for involved institutions, and the CCC certification brings legitimacy to create coordination across organizational lines.
- The CCC certification and EUCCC network can also be considered a tool for external collaboration, for instance with municipalities and international projects.
- The CCC certification mean establishing improvement processes both within and between the hospitals.
- OUS CCC have many years of experience of having a CCC governance structure, with ex officio leaders in the Cancer Center Board.

Conditions for successful EUCCC certification implementation in the country

- The strengths of EUCCC certification must be conveyed:
 - EUCCC as a part of the political vision of creating equal care. Not focusing on each center's excellence or recognition.
 - The network activities will build upon the shared vision and give opportunities for members from all levels of comprehensiveness.
 - The opportunity for capacity building is unique.
 - There is no fee to become a EUCCC now because of the project.
- Maintenance and administration should perhaps be financed on national level.

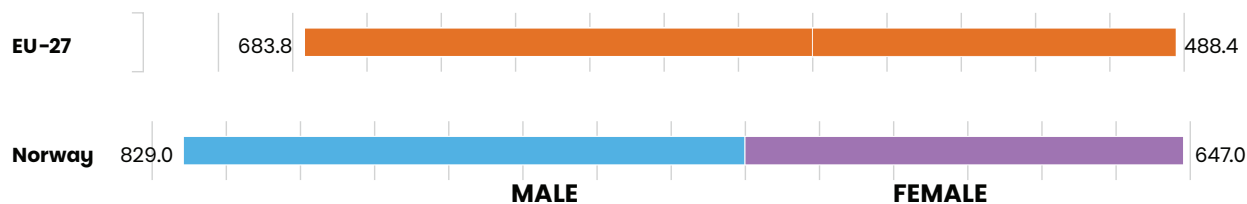
Number of OECI-certified CCCs: 1

Number of EUCCC pilot centers: 2

Epidemiology: incidence, mortality and survival rates:

Incidence rate:

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

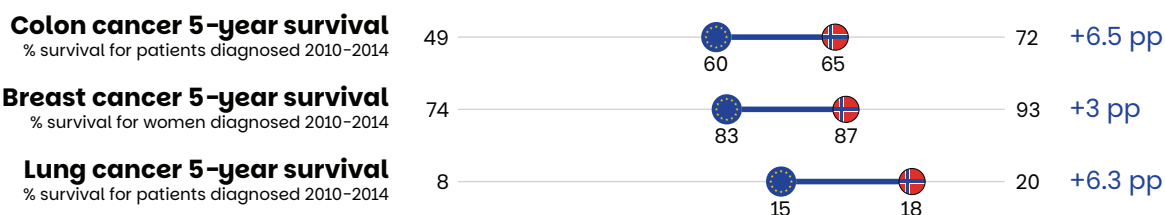


Mortality rate:

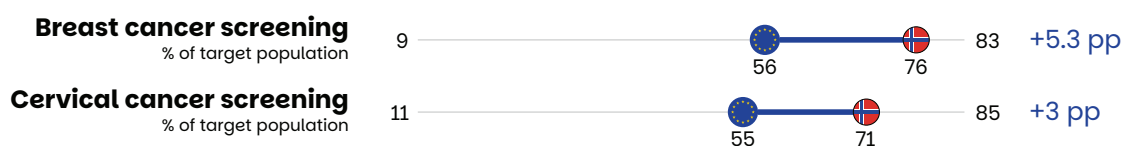


Survival rates:

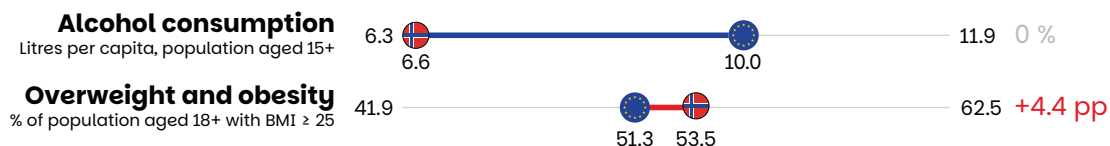
For the selection of cancers:



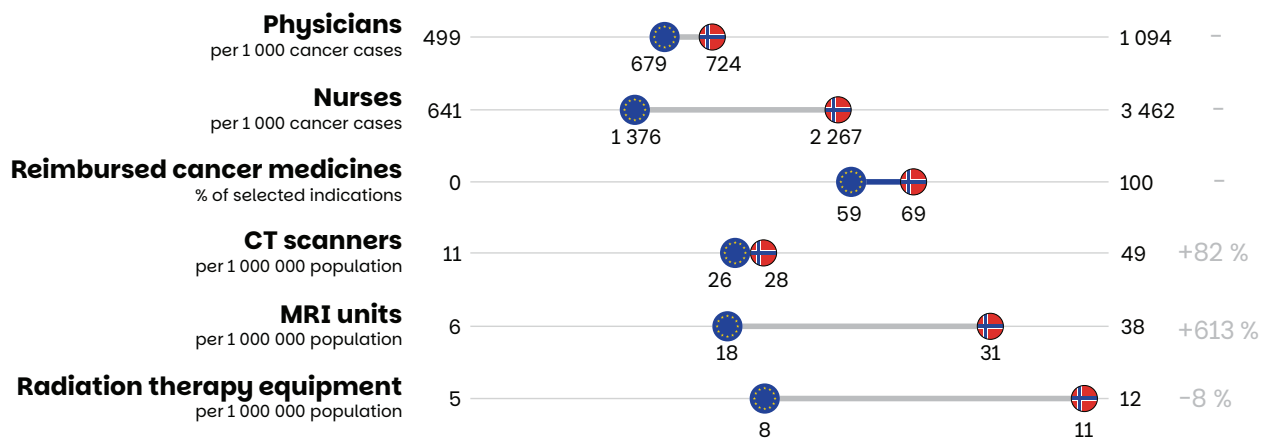
Screening performance



Risk factors



Human resources and infrastructure



Number of clinical trials: 427



**For more information,
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