

EUROPEAN COUNTRIES CONSULTATION:

Anchoring EUCCC Certification
in National Realities

WP5 – Inclusion, Certification and
Adherence to EUCCC Certification

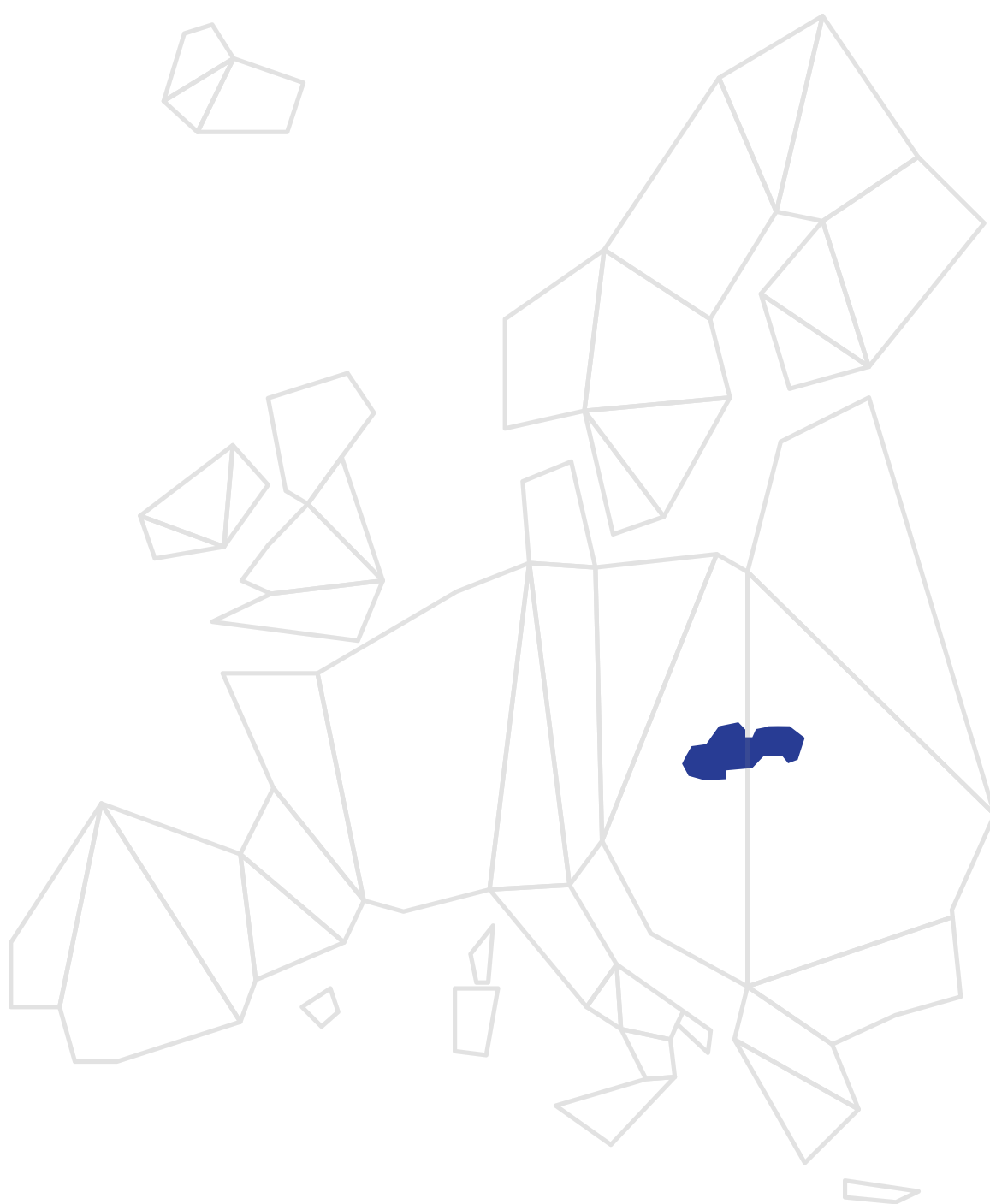
SLOVAKIA COUNTRY PROFILE



Co-funded by
the European Union



THE EUROPEAN COMPREHENSIVE CANCER CENTRE NETWORK



Context: existing certification systems and organization of cancer care

No mandatory certification system in place

Slovakia has no mandatory certification system in place for its hospitals. ISO certifications for laboratories are mandatory and are therefore widespread, while other ISO certifications are in use but are not compulsory.

Organization of cancer care¹

The Slovak Republic has three institutes specialised in cancer care, 14 clinical oncology departments, and 2 lung cancer centers.

There is currently no formal division of treatment between facilities. The Ministry of Health is deploying huge efforts to set up a stratification of institutes, including the type of treatment, type of surgery, etc., but this system is not yet operational, especially in the area of control and consequences regarding compliance with the stratification settings.

The National Cancer Institute (**Národný onkologický ústav**, NOU) is the country's primary specialized center for oncology care. The National oncology institute (**Národný onkologický inštitút**) is part of the NOU as a research and oncology coordination unit for NOU and the whole of Slovakia.

The Ministry of Health, Slovak Oncology Society, NOI, National Center for Health Information and other institutions and experts collaborated to develop implementation plans for the National Oncology Plan via updated Action Plans for 2021–25. A new cancer plan is currently being drafted for the period 2026–2030, in which the concept of CCCs should be included.

The aspiration is to constitute a consortium-based CCC between the National Cancer Institute and 6 other partners, followed by a cancer network of all players in a way to cover the population in the entire country. A key aim of this network would therefore be to transfer knowledge from CCCs to other centers, to achieve standardised high-quality care across the whole country.

Identified barriers against the implementation of EUCCC certification in Slovakia

○ Legal and financing obstacles

NOI has identified areas in which a legislative change would be necessary in order to allow for the establishment of CCCs. However, there is possible reticence from policymakers to change legislation since some aspects would also relate to Health Insurance Fund legislation, which complexifies changes.

Examples include the National Health Insurance Fund setting a financing model for multidisciplinary teams (MDTs), and lifting barriers currently impeding the development of clinical trials, in particular academic clinical trials.

○ Financial obstacles

No additional financing is currently dedicated for the establishment of CCCs or creation of networks. The only financing available at the NOU is for financing care, no additional resources are allocated for development projects.

○ Regional disparities

Division in 8 self-governing regions with different economic possibilities: Bratislava is considered a rich region and cannot therefore apply for certain EU funding, even though most institutions (for example Academy of Sciences, research institutes) are based there.

○ **Lack of funding for research and nursing staff shortages** which, however, vary greatly between regions

Identified enablers towards the implementation of EUCCC certification in Slovakia

○ **Cooperation between institutions** exists but is often informal, the establishment of the CCC and the networks could help institutionalise these relationships.

Conditions for successful EUCCC certification implementation in Slovakia

○ Adoption of the EUCCC concept in the new cancer plan.

○ Political support and legislative changes will be necessary for successful adoption of the CCC idea in Slovakian reality.

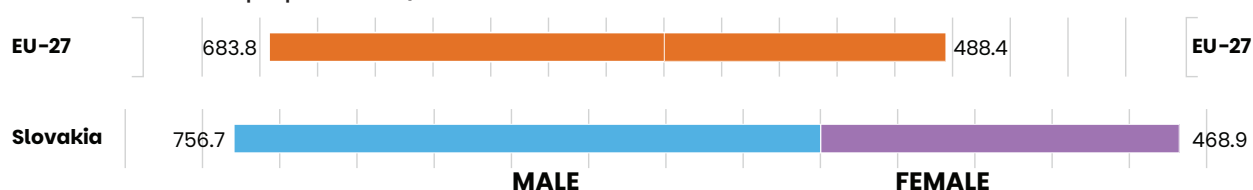
Number of OEI-certified CCCs: 0

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:

Cancer mortality
ASMR per 100 000 population



Survival rates:

For the selection of cancers:

Colon cancer 5-year survival
% survival for patients diagnosed 2010-2014



Breast cancer 5-year survival
% survival for women diagnosed 2010-2014



Lung cancer 5-year survival
% survival for patients diagnosed 2010-2014



Screening performance

Breast cancer screening
% of target population



Cervical cancer screening
% of target population



Colorectal cancer screening
% of target population



Risk factors

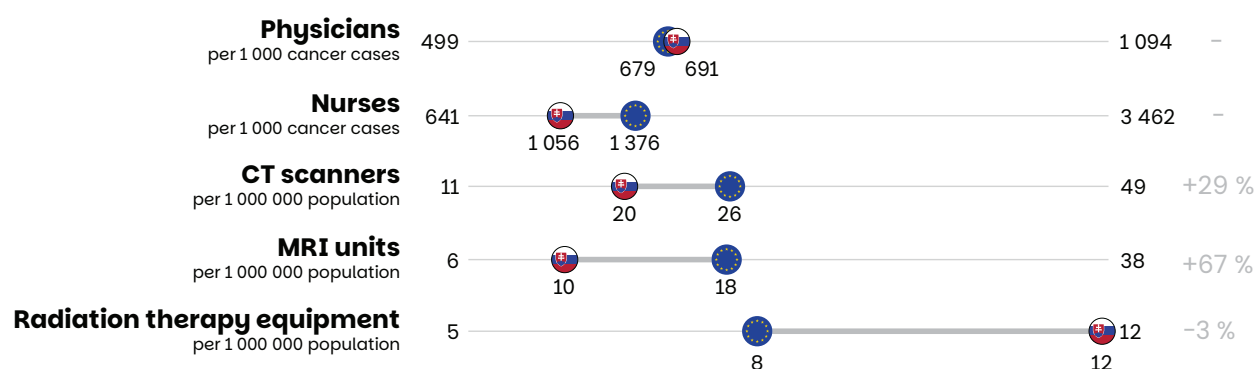
Daily smoking
% of population aged 15+



Alcohol consumption
Litres per capita, population aged 15+



Human resources and infrastructure



Number of clinical trials: 199

Endnotes

1. EU Country Cancer Profile: Slovak Republic 2025 | OECD



**For more information,
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