



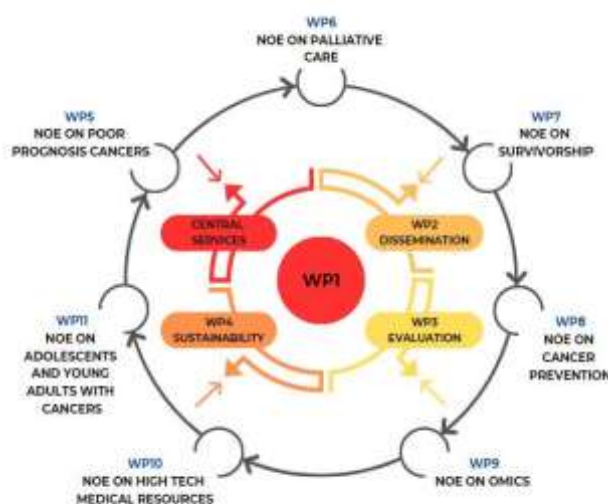
JANE-2 Joint Action on Networks of Expertise on Cancer EU funded Joint Action

**Building new Networks of Expertise (NoEs) in oncology:
An Ambitious Vision for Tackling Healthcare at EU level**

2nd Newsletter-November 2025

The EU Joint Action on Networks of Expertise on Cancer (JANE-2) (<https://jane-2.eu/>) (2024-2028), launched on November 1st, 2024, involves 133 organizations from 29 European countries. It is coordinated by Fondazione IRCCS Istituto Nazionale dei Tumori (INT), Italy, and co-funded by the European Union with 40.5 million EUR.

JANE-2 aims at building **seven Networks of Expertise (NoEs)** in the area of oncology that will transform the way cancer care will be delivered at EU level.

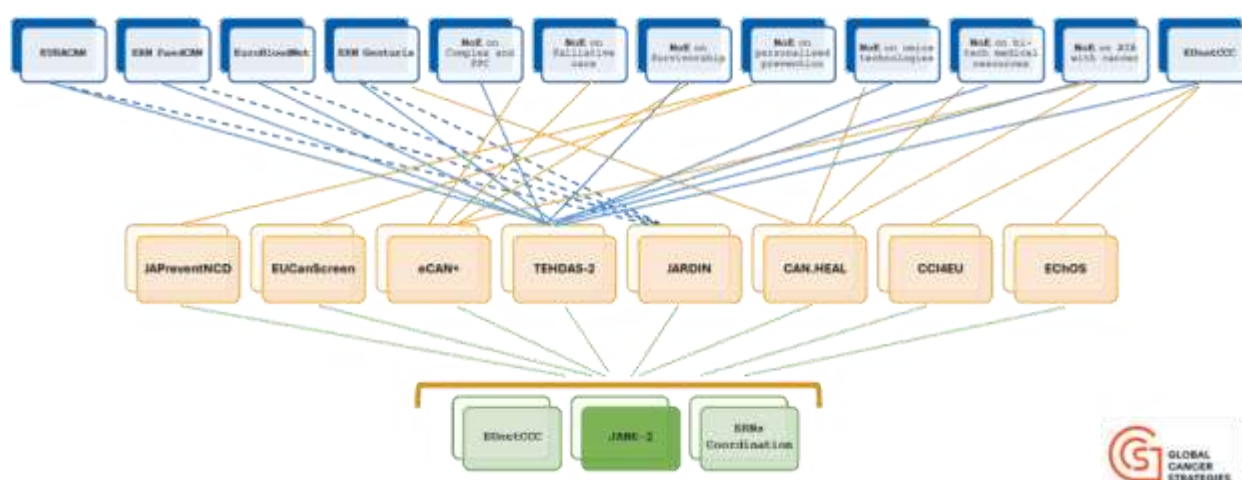


The NoEs will offer services and tools that strengthen cancer-related efforts across Europe—supporting professionals, researchers and institutions. While they will not deliver direct patient care, they will contribute through actions such as:

- Producing guidelines and recommendations
- Developing quality criteria
- Conceiving healthcare organizational models
- Promoting advocacy/policy/awareness

- Supporting education (of professionals, patients and the public)
- Promoting research
- Supporting patient engagement

By the end of JANE-2, the NoEs will be **inclusive, sustainable**, and ready to collaborate with other European oncology initiatives. To enhance collaboration across Europe, JANE-2 has launched a restricted network hosted on the European Commission's Health Policy Platform, entitled **EU Health Networks: Synergies and Challenges**. The network aims to foster cooperation, knowledge exchange, and joint problem-solving, crucial in the development of new EU health networking. Regular meetings are held every two months to bring together cancer-related Joint Actions, EU projects, and European Reference Networks (ERNs), including: **ECHoS, JARDIN, TEHDAS-2, CAN.HEAL, eCAN+, EUCanScreen, JA PreventNCD, CCI4EU, ERN-EURACAN, ERN-PaedCAN, ERN-EuroBloodNet, ERN-GENTURIS, EUnetCCC**.



During the first year of JANE-2's implementation, significant progress was made towards the objectives of the project. The developments per work package/NoE, so far, are described as follows:

WP1 Project management and Coordination

As the first year of JANE-2 has been completed, the Coordination Team continues to champion collaboration and networking across Europe's cancer community. Two successful gatherings of the Restricted Network hosted by JANE-2 on the European Commission (EC) Health Policy Platform entitled, *EU Health Networks: Synergies and Challenges*, took place on 26 May and 30 September, 2025. These sessions brought together Coordinators of Joint Actions, EU projects and European Reference Networks working in the field of cancer. The aim is to further discussions on the 13 key questions raised in Joint Action JANE 1's *Green Paper*, addressing issues such as the sustainability of EU health initiatives, interaction between the EU and Member States, links between healthcare and research, developments in the IT and AI landscape, and patient engagement.

Throughout the year, the Coordination Team has taken part in a range of collaborative events, including the EUnetCCC Kick-Off; the HaDEA showcase event held last February; a CANHEAL Plenary; a EUonQoL General Assembly; a EUCanScreen meeting to foster synergies; and a Danish EU Presidency Event. JANE-2 also maintains close collaboration with the EC, including active participation in the Cancer Mission Board.

A key milestone this year was the first online brainstorming meeting of the JANE-2 Policy Board, held on 30 June, 2025. This newly established body brings together Competent Authorities from the 29 participating countries, alongside representatives of national health ministries and other decision makers. The Board will focus on addressing challenges and setting priorities for the seven NoEs from a Member State perspective.

Looking ahead, the Coordination Team contributed to two sessions at the Annual meeting of JA EUnetCCC, which took place in Paris on 6-7 November, 2025. JANE-2 aimed to help shape discussions on the strategic role of EU health networks in delivering coordinated and impactful responses to Europe's cancer challenges.

WP2 Dissemination and Communication

The Dissemination Strategy Plan (DSP) (Deliverable 2.2) was developed outlining the dissemination approach and implementation framework for JANE-2. It defines the guiding principles that will ensure the effective coordination of dissemination and communication activities related to the project's throughputs, outputs, and outcomes, thereby enhancing the visibility, accessibility, and impact of JANE-2 throughout its implementation.

To address this complexity of JANE-2 consortium and maximize the outreach and relevance of dissemination efforts, the DSP adopts an Audience-Based Dissemination Strategy (ABDS), prioritizing three main target audiences: the medical community, patient advocacy groups, and policy makers. The dissemination activities will be structured around these key pillars. Digital tools such as the upgraded project website, internal intranet systems, and institutional social media platforms will serve as the main dissemination channels. These will be complemented by bespoke communication tools and resources—including surveys and media engagement—integrating both internal and external dissemination efforts.



In the context of a dynamic interaction with the partners, WP2 team worked on the improvement of the website making it even more inclusive and user friendly. A new **“Patient Information Corner”** was developed to offer accessible, reliable, and patient-friendly content. This dedicated section will serve as a central hub for individuals seeking information about cancer care services, support networks, and relevant activities under JANE-2 and the Networks of Expertise (NoEs). Additionally, a separate section was created dedicated to the Restricted Network EU Health Networks – Synergies and Challenges hosted by JANE-2 on the European Commission's Health Policy Platform, highlighting the collaboration and the development of synergies with ongoing EU Joint Actions, projects and initiatives following Europe's Beating Cancer Plan.

Finally, a leaflet/flyer was created in order to reflect the aim of the Joint Action and the scope of the NoEs. The flyer is an important tool for the promotion of the activities and goals of the Joint Action, designed in a format that could serve as a template of upcoming leaflets and promotional material and can be downloaded to users' devices using QR code.



Looking ahead, WP2 team is planning the design and launch of additional promotional material (leaflets, podcasts etc.) and organization of info days/workshops addressing targeted audiences (policy makers, health professionals, citizens).

WP3 Evaluation

Ensuring a transparent and meaningful approach to evaluation remains central to our work in JANE-2. In recent months, the Evaluation Work Package has advanced several core activities and deliverables that enhance shared understanding, collaboration, and performance monitoring across the project. The latest updates are outlined below.

The **Evaluation Framework (Deliverable 3.1)** has been successfully delivered. Developed collaboratively, this framework provides a shared foundation for performance assessment across the Joint Action and Networks of Expertise. Its purpose is to ensure consistency and clarity in evaluation while minimizing administrative burden, supporting partners in progressing their work effectively.

Additionally, the **JANE-2 Dashboard (Milestone 3.2)** has been successfully launched. Now fully operational, the dashboard offers a central and transparent platform for monitoring key performance indicators (KPIs). By presenting factual data aligned with the agreed key performance indicators, it enables timely tracking, shared understanding, and stronger oversight of project performance.

Moreover, the **first annual collection of KPI data** has been concluded, providing a baseline for the progress from the first project year.

Looking ahead, WP3 team has initiated work on the co-development of NoE-specific evaluation frameworks and impact indicators, with the first meetings already held and the full set planned for completion within this year. In parallel, preparations have begun for the next phase of KPI refinement in collaboration with Work Packages to ensure KPIs continue to reflect meaningful and up-to-date measures of progress. Work is also underway to assess partner satisfaction with the development of JANE-2 to date.

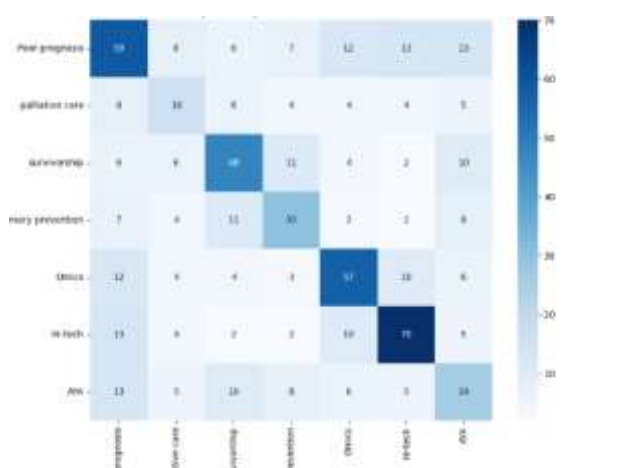
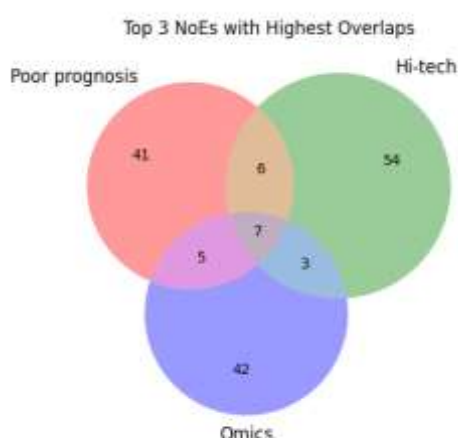
WP4 Sustainability

WP4 on Sustainability has been advancing under a task focused on identifying key stakeholders and assessing their needs in relation to the future development and sustainability of each Network of Expertise (NoE). This effort builds on the groundwork laid during JANE-1 and aims to support the prioritization of service deployment based on stakeholder expectations.

The first step in this activity was a comprehensive desk review to identify potential stakeholders for each NoE, drawing from JANE-1 documentation and updated materials from the initial phase of JANE-2. The list

included organizations from diverse sectors such as patients and the public, healthcare professionals and providers, public health agencies, policymakers, industry, and others. These stakeholders were further classified according to the roles they could play within the NoEs—users, partners, or customers—based on their potential contribution to future services. Each network validated and refined this preliminary list.

The initial analysis across the seven NoEs recorded 308 stakeholder entries, representing 225 unique entities. This review revealed a significant number of common stakeholders identified across the different networks, highlighting strong interconnectivity and potential synergies. Venn diagrams illustrate the NoEs with the highest shared stakeholders, while a heatmap shows the depth of collaboration across all seven networks:



This preliminary analysis underscores the importance of shared stakeholders in driving collective impact and enhancing the effectiveness of collaborative initiatives. Understanding these connections is essential for sustainability: in the future, these stakeholders may act as observers, occasional participants, or even formal partners—through membership contributions—or as customers purchasing services, thereby supporting the financial viability of the networks.

Next steps: A Needs Assessment survey will be disseminated to gather insights on stakeholder expectations. These findings will support the service design and prioritization, ensuring alignment with stakeholder interests and reinforcing the long-term sustainability of the NoEs.



In early spring two new Network of Expertise (NoE) were launched within WP5; The Pancreatic NoE and the Lung Cancer NoE. With these two launches, the NoEs for pancreatic and lung cancers are now fully initiated, and planning is underway for a robust program of activities. Discussions include developing quality parameters, mapping care pathways, building educational programs, and designing collaborative research frameworks.

So far, the **Pancreatic NoE** has had two meetings with a third meeting scheduled in November. Its aim is to foster multidisciplinary collaboration to improve quality of care, accelerate research, and integrate national

and regional networks. Early discussions have focused on clinical care standards, translational research and engaging with European advocacy groups and initiatives. The **Lung Cancer NoE** officially kicked off in late spring and builds on existing efforts such as the SOLACE project and aims to improve lung cancer outcomes by aligning clinical guidelines, quality indicators, and innovation pathways across Europe.

A **Survey on Complex and Poor Prognosis Cancers (PPC)** has been conducted within the Member States and covered topics such as:

- National priorities and barriers in PPC care
- Existing patient pathways, MDTs, clinical registries, and trials
- Palliative care integration
- Education and awareness initiatives
- Policy frameworks and opportunities for joint action

The questionnaire collected relevant overviews and is complemented by online interviews with the respondents to check and clarify status and opinions. So far, **21 national surveys have been completed while 9 are still pending**. Out of all planned meetings, 11 have been finalized, 8 are scheduled or awaiting scheduling, and only a few still need to be rescheduled or confirmed.

Overall, the survey and meeting process is well advanced, with most activities either completed or close to completion.



WP6 is establishing a European **Network of Expertise** to ensure that high-quality palliative care becomes an integrated part of routine oncology across all levels of the health system. The work is led by Oslo University Hospital (NO) with co-leadership from Fondazione IRCCS Istituto Nazionale dei Tumori (INT).

The work is organized around four interconnected tasks: **(1)** clarifying concepts and delivery, **(2)** developing digital pathways with PROMs, **(3)** harmonizing education and competence, and **(4)** defining indicators to monitor integration. All tasks are grounded in stakeholder co-production in collaboration with national and pan-European resources.

Progress is overseen through bi-weekly meetings with task leads/co-leads and regular exchanges with partners across participating countries to ensure methodological and timeline alignment. WP6 is coordinated with European professional/policy bodies and related EU projects to maintain consistency in terminology, education frameworks, PROM-enabled pathways, and indicator design.

A WP6 position paper was submitted for peer review in September 2025. It outlines European challenges and the rationale for strengthened integration, clarifies WP6's role across the four tasks, and presents a shared framework aligned with the EU Mission on Cancer and Europe's Beating Cancer Plan.

WP6 organized the dedicated JANE-2 meeting and a WP6 session within the **14th International PRC Seminar** at Oslo University Hospital (16–19 September 2025), with over 100 participants from Europe and beyond. Discussions focused on addressing key barriers to integration and aligning tools across tasks to support common understanding and coordinated implementation in participating countries.

Task-specific progress:

Task 1: Agreed common definitions and finalized a national survey on organization and delivery.

Task 2: Prepared surveys on PROM use, institutional readiness, and structural barriers.

Task 3: Anchored the undergraduate baseline via the EAPC Atlas; prepared e-surveys for residency and specialization aligned with European frameworks.

Task 4: Advanced the evidence base and prepared qualitative interviews and a Delphi process for a core indicator set.

WP6 supported the launch of the **Regional Physician Network for Palliative Care** in South-Eastern Norway, illustrating local anchoring for outreach and future piloting.



The **Survivorship NoE** continues to advance according to the established timeline, with all initial tasks progressing as planned and the framework effectively implemented.

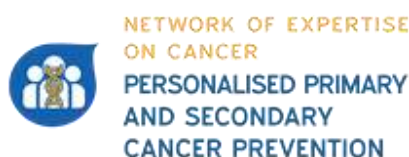
Task 7.2 (IGG) successfully finalized the distribution of the Survivorship Care Survey by the end of August 2025, achieving an impressive **80% response rate**. Data analysis is now underway and is expected to conclude by November.

Task 7.3 (ACC) completed the methodological framework and initiated a bibliographic review, resulting in a preliminary list of seven pillars defining the Survivorship Care Programme. A Delphi consensus protocol has been designed, engaging participants with diverse responsibilities. A key body within this process, the **Delphi Steering Committee**, has been established to lead initial discussions on the proposed pillars. The first round of committee meetings is scheduled to take place between mid-October and mid-December.

Task 7.4 (NKUA) is finalizing its work plan, which outlines an interactive process to define the vision and conceptual framework of the Capacity-Building Programme. The plan also includes a detailed, step-by-step activity roadmap.

The NoE leadership (HSJD & Sciensano) has continued to provide guidance and support across all tasks. It has also fostered synergies with other NoEs within JANE2 (WP6, WP8 and WP11), and external initiatives such as **INE-CSC**, and **PanCare4AYA**. Additionally, the Spanish Society of Medical Oncologists (**SEOM**) has joined the network as a Collaborative Stakeholder.

Finally, the NoE was invited by postdoctoral researcher Juliën Vos (University of Amsterdam) and Professor Larissa Nekhlyudov (Harvard Medical School) to participate in a global Delphi study launched in September 2025 to identify outcome measures for high-quality survivorship care. This marks a significant milestone, marking the **first time the Survivorship NoE has actively taken part in an external research project**, contributing directly to knowledge generation within the survivorship community.



Building momentum, the network is translating cross-disciplinary collaboration into tangible progress across education, policy, research, and evaluation. Efforts focus on deepening stakeholder engagement,

advancing systematic reviews, and strengthening international cooperation to accelerate personalized prevention and early detection across Europe.

Following the development of a comprehensive questionnaire through regular coordination meetings, the Health Policy team conducted interviews with key institutions such as the Danish Cancer Society, Portuguese National Oncology Program, Romanian National Institute of Public Health, Icelandic Cancer Society, Inspire2Live (Global Patient Advocacy Organization with Professional Volunteers), Asociación Española Contra el Cáncer, Sarcoma Unit of HUC Tenerife representing the Oncology Medical Society, Women Cancer Europe and DG SANTE. In November, further consultations with stakeholders from Lithuania, France, Germany, and Italy are underway aiming to inform robust policy recommendations.

Review protocols on personalized prevention initiatives and clinical utility of omics (covering genomics and epigenomics, proteomics, transcriptomics, metabolomics, and radiomics) have now been finalized. Four systematic reviews are already in the screening phase, with two moving into advanced stages. Exciting progress ahead!

The Genetic and Epigenetic Risk team completed its data collection and validation activities, delivering four systematic review protocols, exceeding the initial target, and ensuring alignment with the project timeline.

Evaluation activities focused on consolidating remaining KPIs and initiating collaboration with WP3 to define new performance and impact indicators for the next reporting phase.

Representing the network at the THCS partnership meeting in Cluj-Napoca on 7 October 2025, Dr. Delia Nicoară from IOCN, Romania, explored synergies between JANE-2 and THCS initiatives, highlighting the contribution in shaping evidence-based, citizen-centered policies for cancer prevention across Europe, fostering innovation and cooperation across research, policy, and practice.

Co-lead Prof. Stefania Boccia, from FPG-UCSC Italy, represented the network at the EUnetCCC Annual meeting in Paris during the session “Joining forces for early detection: Synergies to scale-up prevention and screening efforts across Europe,” exploring how collaboration across EU initiatives can accelerate the uptake of personalized prevention and early detection.



The Omics NoE has spent its first year establishing the foundation for its core mission: to support fast and efficient integration of omics technologies into EU healthcare systems to improve clinical decision-making in precision oncology with access for all.

A comprehensive survey is being developed to map the current state of omics implementation in cancer care, availability and needs regarding training and education on omics technologies, and requirements for transdisciplinary partnerships. This survey is critical for assessing the current state of the field, mapping needs and inequalities, and will be disseminated along with other NoEs' surveys in collaboration with an external service provider.

Tools under development

Among the objectives of our NoE is to deliver adaptable and sustainable tools to support the NoE's members and stakeholders ;

- *The ELSI Navigator for Omics Technologies.* This modular toolkit will be a crucial resource on ethical and legal aspects of omics implementation. Four modules will help stakeholders navigate the complex interplay of EU regulations (e.g. GDPR, IVDR, AI Act, ...) in cancer care and research. We aim to launch the first version of this interactive support tool early in 2026 and encourage all interested parties to try it out. Real-world use cases will feed the toolkit, ensuring comprehensiveness, currency and relevance.
- *The Matchmaker Platform.* We are designing a development pathway for the beta version of this platform with the aim of connecting academics, clinicians, industry and patient representatives to foster collaborations that prioritize omics implementation into cancer research and care.

First Pluriannual Expert Consultation

A major pillar of the Omics NoE is our pluriannual expert consultations. The first consultation is currently ongoing and aims to develop a future vision and roadmap for the integration of innovative omics technologies into cancer research and care. The consultation was started with two surveys on the topics of single-cell, spatial and integrative omics, and will culminate in an online workshop on 4 December. This event will build our expert community and prioritize the needs to be tackled by the NoE's services.

We look forward to an impactful year ahead as we transition from foundational activities to delivering tangible guidance and tools.



NoE High-Tech Medical Resources (WP10) has had a productive and successful year, marking several important milestones for the NoE as a whole. One of the key achievements has been the delivery of the WP10 governance model, the first official deliverable for the work package. This comprehensive model establishes the overall governance structure of the NoE and provides seven tailored governance models, one for each of the NoE's specialized domains. The proposed governance structure of the NoE is built to be effective during the Joint Action period and sustainable beyond it. The deliverable highlights the need for alignment with other JANE2 NoEs and ongoing Joint Actions to ensure long-term impact and promote European coordination. The deliverable was completed and submitted to the JANE 2 coordination team ahead of schedule, by the end of August.

Building on this momentum, NoE on Hi Tech is preparing for its annual meeting, which will take place in Paris on November 5th. Domain leaders will participate in person, while all other NoE partners will join through a hybrid session to ensure broad engagement. The meeting will be an opportunity to reflect on the accomplishments of the first year, review progress across domains, and collaboratively plan the work for the year ahead. It will also serve as a practical working session to advance the next two deliverables, ensuring that each domain continues to move forward in alignment with the NoE's objectives.

Another exciting initiative within WP10 is the joint work with NoE on Omics on a collaborative publication inspired by the European Commission's consultation on IVDR/MDR. This paper aims to bring together expertise from across the network and to contribute to the European dialogue on regulatory frameworks that support innovation in oncology. Several domain leaders and co-leaders are already actively contributing to this effort.

Through these collective achievements, WP10 continues to strengthen the foundations of the NoE, fostering collaboration, knowledge sharing, and concrete progress towards its mission of advancing excellence and accessibility in cancer research and care across Europe.



The NoE on AYAs with cancer is progressing according to the planned timeline, with the initial tasks advancing as expected and the framework now effectively in place.

A comprehensive governance model for the AYA NoE was developed (T11.1). This model defines the network's structure, roles, responsibilities, and interfaces. The governance specifies committees, boards, and transversal priority task forces, each with explicit objectives, coordinators, membership profiles, meeting frequency, reporting lines, and an evaluation framework for ongoing monitoring. Collaboration with active stakeholders from scientific societies (SIOPE, EHA), existing initiatives (ENTYAC) and patient advocates (CCI-E, YCE) is ongoing and in formalization process.

Task-specific progress:

T11.2 Development of AYA dedicated programs: a scoping review regarding AYA dedicated programs is currently underway, and data extraction has been completed. Final results are expected in Feb 2026.

T11.3 Development of clinical recommendations: mapping of existing guidelines and recommendations through a bibliographic search in the main databases and in the repositories of relevant scientific societies and networks has been completed. A priority list of recommendations to be developed has been established.

T11.4 Development of training on cancer in AYA: a first draft of the curriculum syllabus has been prepared, outlining core modules (clinical, psychosocial, survivorship, fertility, policy/access and research/clinical trials).

T11.5 Promotion of clinical cancer research in AYA: age-based cancer group definitions have been refined through epidemiological analysis to better reflect the underlying biology and to identify priorities. Collaboration is planned with the ACCELERATE FAIR initiative to complete the current landscape of early clinical trials for AYA and assess the consequences in terms of rapid access to innovation, with expert volunteers currently being recruited.

T11.6 Monitoring AYA cancer indicators: the first objective of the task is the identification and definition of quality healthcare indicators for AYAs; all theoretical and planning work was completed. The identification of the use of quality indicators in different European healthcare settings is ongoing.

Next steps: an introductory manuscript on the NoE summarizing its scope, objectives and methodology is ready for submission; an online survey involving will be launched in the coming months to identify existing practices, gaps, and variations across the different areas on AYAs scope; the completion of the scoping review regarding AYA dedicated programs; the definition of the methodological approaches for the appropriate development of clinical recommendations and guidelines; the final confirmation and prioritization of the training curriculum topics among partners.

Upon completion of the first year, NoE on High-tech Medical Resources (WP10) and NoE on Adolescents and Young Adults (AYA) with cancer (WP11) organized annual meetings, both of which took place in Paris, on 5th November 2025:

The Annual Meeting of NoE on High-tech Medical Resources (WP10) brought together all domain leaders and co-leaders to participate in person, and the rest of the WP10 consortium joined us for an online session. The meeting focused on the NoE's goals for the second year of JANE 2, namely its next two key deliverables: the patient information tool, and the compilation paper on emerging uses of hi-tech innovation in described domains and implications and strategies for access across Europe. Along with that, the meeting was an opportunity to bring all hi-tech domains of JANE 2 together to discuss, share experiences and broaden the scope of their work through strong collaboration and hard work.



The Annual Meeting of the NoE on Adolescents and Young Adults (AYA) with cancer (WP11) brought together task leaders, European partners, patient organizations, and professional societies. The agenda featured plenary sessions, focused breakout discussions for each strategic priority, a collective wrap-up, and a forward-looking exchange on future AYA initiatives at European level.

Participants reiterated the core mission of JANE2: moving from the preparatory work of the first Joint Action (JANE) to the implementation of a fully operational Network of Expertise supporting both national and European Oncology communities. The NoE aims to strengthen collaboration, integrate existing resources, address cross-cutting challenges such as rare and AYAs with cancer, and develop a sustainable model that can continue beyond the joint action funding period.

The strategic priorities for AYA patients focus on highlighting the objective of building a cohesive European framework that connects existing national initiatives, develops dedicated programs and clinical guidelines, enhances professional training, promotes research and access to clinical trials, and defines AYA-specific quality indicators. Strong governance and long-term sustainability were emphasized as essential preconditions for success. The approach seeks to embed national efforts within a broader, European “network of networks” to improve care pathways and outcomes for young people with cancer.

The collaboration with SIOPE, ENTYAC, CCI Europe, and Youth Cancer Europe reinforced the importance of multidisciplinary and the meaningful inclusion of ongoing initiatives and patient perspectives in all NoE

activities. Their involvement is central to ensuring that the NoE remains comprehensive, evidence-informed, and patient centered.



Finally, members of the JANE-2 consortium were involved in sessions of the Annual Meeting of EUnetCCC, held in Paris, on 6th-7th November 2025, to foster synergies between the two Joint Actions and strengthen collaborations across EU initiatives tackling cancer.