



Joint Action on Networks of Expertise on Cancer

Milestone 3.3

Annual Report I

[28.11.2025]

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Abbreviations Acronyms

Abbreviation/acronym	Definition
RSYD	Region of Southern Denmark
SoS	Socialstyrelsen
BS	Biosistemak
OIL	The Institute of Oncology Ljubljana
EF	Evaluation Framework
GA	Grant Agreement
JA	Joint Action
JANE-2	The second Joint Action on Networks of Expertise
KPI	Key performance indicators
MS	Member states
NoE	Networks of Expertise
WP	Work package
M5, M9, M12, M18, M24 etc.	Represents months in the project timeline: Month 5, Month 9, Month 12, Month 18, Month 24, etc.



TABLE OF CONTENT

1	Summary	6
2	Introduction	7
3	Progress overview - Key Performance Indicators	9
3.1	KPI – Methodology and reporting process	9
3.2	Overview of KPI results	9
4	Key learnings	16
5	Conclusion	18
6	Enhancing kpi progress evaluation in jane-2.....	19
7	Annex	20
7.1	List of KPIs per WP included in this report.....	20
7.2	List of KPIs scheduled to be included in the second Annual report of JANE-2.....	43



1 SUMMARY

The first Annual Report confirms that the second Joint Action Network of Expertise-2 (JANE-2) is advancing in line with the established milestones and remains on schedule with the deliverables outlined in the Grant Agreement (GA). The majority of the key performance indicators (KPIs) are being achieved to a satisfactory and meaningful extent.

This report is a milestone (MS3.3 Annual Report) that presents the annual overview of KPIs (MS3.1) defined by each Work Package (WP) within JANE-2, as established in the Evaluation Framework. Each annual reporting period encompasses a specific set of indicators, as defined by the respective WPs.

The indicators for the first reporting period (November 2024–October 2025) include data from the following WPs: WP1 Project Management & Coordination, WP2 Dissemination & Communication, WP3 Evaluation, WP5 Complex and Poor Prognosis Cancers, WP7 Survivorship, WP8 Personalised Primary & Secondary Cancer Prevention and WP10 Hi-Tech Medical Resources.

Of the 11 WPs, 7 have defined KPIs to be reported in the first reporting period. Of 22 KPIs in total, all were reported, 20 were achieved, 2 were delayed. In summary, the achievements include:

- The Health Policy Platform has been established and has held round-table discussions (WP1).
- Policy actions have been described by the respective Networks of Expertise (NoEs) and synergies with EUnetCCC have been defined (WP1).
- The JANE-2 website has been updated, has attracted >440,000 views and a dissemination strategy has been established (WP2).
- KPIs have been defined, data has successfully been collected through REDCap, a Network-Wide Dashboard (Dashboard) visualization tool has been established, and an evaluation strategy has been developed (WP3).
- Estimates of partner satisfaction has been delayed due to a postponed annual meeting for JANE-2 (WP3).
- Quality indicators for pancreatic cancer and lung cancer have been defined (WP5)
- Meetings with synergic initiatives have been performed (WP7)
- Expert interviews on screening policies have been performed, methodologies for risk factor mapping have been identified and systematic review work has been initiated (WP8)
- A stakeholder conference for personalized screening has been delayed and a policy brief has been rescheduled to month 24 (M24) due to a typographical error that misassigned its deadline (WP8)
- Governance recommendations for a NoE on Hi-tech medical resources have been established, and a high number of centres, regions and countries are supported (WP10)

2 INTRODUCTION

The first Annual Report provides a concise overview of the progress achieved during the initial year of JANE-2, with particular emphasis on the attainment of internal milestones and deliverables. In relation to this report, it is essential to refer to the Evaluation Framework (D3.1), developed earlier on in this project, Month 5(M5). The framework provides the rationale behind the creation of the list of KPIs, the methodology applied, and the processes for systematic data collection. It establishes the foundation upon which the results presented in the Annual Report are built. It combines systematic data collection, analysis, and regular reporting through a digital Reporting Tool and a JANE-2 Dashboard. These tools facilitate efficient submission and review of performance data, enabling the identification of both successes and areas requiring further attention. In line with the GA, the main aim is to provide a clear and relevant summary of current status, supported by available data on each KPI.

As stated in the GA, the first report is a milestone (MS3.3) and a strategic document to monitor the progress of KPI achievements, serving as a strategic tool monitoring KPIs to ensure transparency, accountability, and ongoing alignment with the objectives.

The report focuses on the first year and provides an overview of progress and status in relation to the defined KPIs. When feasible the report includes additional descriptions of delays of successful initiatives. As indicated in Table 1, this first report includes KPIs due to be reported in the first year. Some of the KPIs are due to be reported in later stages of the project. A more detailed and comprehensive overview will be presented in the second annual evaluation report.

Month	Date	WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	WP10	WP11
First annual report												
M9	31/07/2025	✓	✓	✓								
M12	01/10/2025	✓	✓	✓		✓		✓	✓		✓	
Second annual report												
M18	01/04/2026	✓	✓			✓		✓			✓	
M24	01/10/2026	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓
Third annual report												
M30	01/04/2027	✓	✓				✓				✓	✓
M36	01/10/2027	✓	✓	✓	✓		✓	✓	✓	✓	✓	
Final report												
M42	01/04/2028		✓					✓				
M48	01/10/2028	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Table 1: reporting timeline per WP

Colour coding indicates reporting periods grouped under each Annual Report (e.g., M9 and M12 for the first report; M18 and M24 for the second). Dates represent cumulative coverage from the project start (November 2024) up to the indicated month. Data for subsequent periods include only the months between them (e.g., M12 covers months 10-12).



The report is primarily intended for WP leaders , co-leaders, task-leaders, consortium members, and for the European Commission, but will be accessible to external stakeholders to promote transparency and engagement.

The Annual Reports are issued yearly as separate documents; however, their level of detail and scope will develop over time as the JANE-2 project advances and additional data becomes available. This iterative approach helps ensure that the evaluation remains adaptive and responsive, while fostering a shared understanding among partners and stakeholders and supporting the project’s sustainability and long-term impact.

3 PROGRESS OVERVIEW - KEY PERFORMANCE INDICATORS

This chapter provides an overview of the project’s progress to date, including the methods used to track KPIs and the results observed. The following sections outline the KPI methodology and reporting process, followed by an overview of the KPI results.

3.1 KPI – Methodology and reporting process

The Evaluation Framework plays a key role in ensuring consistent monitoring of progress toward the objectives of the Joint Action (JA). To support this, KPIs were developed for each Core Work Package (WP1-4) and NoE (WP5-11), categorized into process, output, and outcome indicators. These KPIs were carefully designed based on SMART criteria to ensure alignment with the overarching goals, relevance, and measurability. Data collection is structured using the REDCap tool, with WP and NoE leaders responsible for adherence to the reporting schedule. WP3 oversees compliance with deadlines and addresses delays as needed. All data are integrated into a dashboard to support decision-making and ensure the Annual Report accurately reflects progress and informs strategic actions within JANE-2.

3.2 Overview of KPI results

During the reporting period for the first Annual Report, 22 KPIs were scheduled. As indicated in Table 2, 20 KPIs were achieved and 2 were delayed. Due to a drafting error early in the project, the deadline for a KPI planned for M12 (KPI8-1) was mistakenly switched with the deadline for a KPI originally scheduled for M24 (KPI8-6). After correcting this error and assigning the deadlines to the appropriate reporting periods, the total number of KPIs scheduled for the first Annual Report remained 22.

KPI Status	Count	% of Total
● Achieved	20	90,9%
● Delayed	2	9,1%
● Not Reported	0	0%
● Not included in this period	1	-

Table 2: Distribution of Achieved, Delayed, and Unreported KPIs

In this report, all KPIs scheduled for reporting were submitted, and the reporting percentage reflects whether their statuses were entered in REDCap on time. Based on this, 54.55% of KPIs were reported on time, while 45.45% were submitted late but still within the first 13 months of the project and therefore met the Annual Report deadline. Of the late submissions, 55.56% were from the M9 reporting period.



WP1 Project Management & Coordination

- KPI1-1 Number of round table discussions organized - ● **Achieved (M12)**
 - 3 Round tables have been held through EU Health Policy Platform with relevant cancer-related joint actions and projects to discuss synergies and create a task force. The completion criteria for number of round table discussions was set to a minimum of 1 per year and a minimum of 4 during the JANE-2 project timer.

- KPI1-2 Percentage of deliverables submitted on time - ● **Achieved (M9)**
 - This process indicator has been fully completed, with 100% of deliverables in JANE-2 submitted on schedule.

- KPI1-3 Percentage of milestones achieved on time - ● **Achieved (M9)**
 - This process indicator has been fully completed, with 100% of milestones in JANE-2 submitted on schedule.

- KPI1-5 Policy Action Reports - ● **Achieved (M12)**
 - Policy actions have been described in the specific annual reports by the respective NoEs

- KPI1-6 Synergies with EUnetCCC - ● **Achieved (M9)**
 - The JANE-2 Coordination Team has actively worked to develop synergies with the JA EUnetCCC. In summer 2025, the two Coordination Teams conducted a mapping exercise to assess partner participation across both JAs and related cancer projects, identifying overlaps, synergies, and shared responsibilities. JANE-2 and EUnetCCC collaborated at key events to strengthen their partnership. EUnetCCC presented its perspective at the JANE-2 Kick-off Meeting, and JANE-2 contributed to two sessions at the EUnetCCC Annual Meeting in Paris in November 2025. The synergies are important, as the NoEs under JANE-2 will provide services for the Comprehensive Cancer Centres launched through EUnetCCC, ensuring close collaboration and alignment moving forward.

WP2 Dissemination & Communication

- KPI2-3 Upgraded website - ● **Achieved (M9)**
 - The upgraded website has been successfully implemented. It features mobile compatibility, social media integration, and an improved navigation system that enhances accessibility and ensures the information presented is current. This deliverable has been reported on the EU Funding & Tenders Portal.



- KPI2-4 Development of the JANE-2 dissemination strategy - ● **Achieved (M9)**
 - The dissemination strategy has been successfully established to facilitate clear and effective communication of project information, results, and outcomes to all consortium partners, key stakeholders, and the general public. This deliverable has been uploaded to the EU Funding & Tenders Portal.

- KPI2-7 Number of website views - ● **Achieved (M12)**
 - There have been 444.500 views of the JANE-2 website between November 2024 (M1) and October 2025 (M12). This exceeds the completion criteria that was set at 100 views per month.

WP3 Evaluation

- KPI3-1 Success in data collection - ● **Achieved (M12)**
 - All KPI data reporting have been submitted through REDCap on within the reporting period.

- KPI3-2 List of KPI available - ● **Achieved (M9)**
 - A list of KPIs has been developed in collaboration with all WPs for JANE-2. They are available on request and are attached to Deliverable 3.1 (Evaluation Strategy). They have also been uploaded on the JANE-2 website under WP3 Evaluation and on the JANE-2 MS Teams Platform under WP3 Evaluation.

- KPI3-3 Dashboard visualization tool put in place - ● **Achieved (M12)**
 - The Dashboard visualization tool has been put in place in coordination with WP1. The Dashboard is available on the JANE-2 MS Teams Platform for WP leads, co-leads and task leaders. A report on this milestone has been shared with JANE-2 partners and been uploaded to the JANE-2 MS Teams Platform under WP3 Evaluation.

- KPI3-4 Evaluation strategy developed - ● **Achieved (M9)**
 - A comprehensive evaluation framework has been developed to ensure a structured approach to assessing the JA and to define the roles and responsibilities of consortium partners in the evaluation process. The document sets out the methodology, tools and plan for the continued analysis of the results achieved. This deliverable has been uploaded to the EU Funding & Tenders Portal and to the JANE-2 MS Teams Platform under WP3 Evaluation.

- KPI3-6 Percentage of consortium partners that are satisfied with the project progress and results - ● **Delayed (M12)**
 - This KPI has been delayed because the joint JANE-2/EUNetCCC annual meeting scheduled for November 2025 was cancelled. Since the satisfaction feedback can no longer be collected in person, WP1 is developing an email-based survey to ensure accessible and meaningful evaluation.

WP4 Sustainability

No KPIs were due for reporting within this WP during the current period. Activities have focused on laying the groundwork for upcoming deliverables and ensuring that the necessary structures for data collection and performance monitoring are in place. Relevant indicators will be tracked and reported in the next reporting cycle.

WP5 Complex & Poor Prognosis Cancer

- KPI5-6 Definition of quality care indicators in pancreatic and lung cancer - ● **Achieved (M12)**
 - Quality care indicators have been defined to ensure a meaningful evaluation of the activities carried out by the NoE.

WP6 Palliative Care

No KPIs were due for reporting within this WP during the current period. Activities have focused on laying the groundwork for upcoming deliverables and ensuring that the necessary structures for data collection and performance monitoring are in place. Relevant indicators will be tracked and reported in the third reporting cycle.

WP7 Survivorship

- KPI7-1 Meetings and/or communications with synergic initiatives - ● **Achieved (M12)**
 - Meetings and communications with synergic initiatives have been successfully carried out, including interactions with other projects under European funding frameworks described in the GA, collaborations with other WPs within JANE-2, and consultations with external experts and stakeholders such as patient organizations. During the first year of JANE-2, 88.4% of communications were successful, exceeding the acceptance criterion of a 75% success rate. The Communication Success Rate is calculated as: $(\text{Number of Meetings or Communications Held}) / (\text{Number of Synergic Projects Identified}) \times 100$.



WP8 Personalised Primary & Secondary Cancer Prevention

- KPI8-1 Number of expert interviews conducted to analyse screening policies across EU - ● **Achieved (M12)**
 - A total of 12 expert interviews have been conducted to analyze screening policies across the EU, exceeding the established acceptance criteria of 10 interviews. These interviews provide in-depth insights into current screening policies, trends, and gaps, ensuring that the recommendations produced are evidence-based and actionable.

- KPI8-2 Number of methodologies identified for mapping risk factors - ● **Achieved (M12)**
 - The KPI target of identifying three methodologies for mapping risk factors has been achieved. The systematic review protocol has been finalized, and work is underway, focusing on lifestyle factors and the integration of exposome data to enhance polygenic risk scores (PRS) for cancer prevention. Preliminary results from PubMed, including over 300 relevant studies, indicate that approximately 40% of cancers and 50% of cancer-related deaths could be attributed to modifiable risk factors. The literature search is being expanded to additional databases to accelerate progress, with a first draft of conclusions expected by the end of the year. All colleagues involved in the task are progressively engaged as the work advances, and registration of the protocol in PROSPERO or OSF is under consideration.

- KPI8-3 Number of systematic reviews that have reached an advanced stage in the research process, with defined protocols, established workgroups and roles, and the initiation of the records screening phases - ● **Achieved (M12)**
 - Five out of seven systematic reviews have reached an advanced stage, surpassing the expected progress threshold of four. Each review has established defined protocols, workgroups, and roles, and has initiated the records screening phase. Specifically, the cost-effectiveness review is nearing completion of data analysis, while reviews on PRS clinical utility, genomics, radiomics, and metabolomics have completed title and abstract screening. The remaining two reviews have registered protocols on the OSF platform and have begun the first screening phase, following additional discussions to ensure well-structured approaches for capturing clinical-utility data.

- KPI8-4 Number of protocols of systematic reviews on genetic/epigenetic cancer risk markers developed and applied (until records screening) - ● **Achieved (M12)**
 - Four systematic review protocols on genetic and epigenetic cancer risk markers have been developed and applied, exceeding the completion target of three. The responsible group has completed all necessary data collection and verification activities in line with the project timeline. The decision to include a fourth review was made to comprehensively address emerging subthemes identified during the project's development, ensuring a more thorough evidence base for tailoring prevention strategies according to individual risk.

- KPI8-5 Organization of a stakeholder meeting/conference to refine personalized screening recommendations - ● **Delayed (M12)**
 - The KPI timeline has been adjusted to M24 to ensure improved alignment with the project's overall schedule and the intensity of ongoing activities.

- KPI8-6 Development of a policy brief summarizing the findings and recommendations of suitable guidelines and indicators for implementing and evaluating future personalized prevention plans - ● **Not included in this period**
 - This KPI is marked as delayed, but actually, this does not accurately reflect the situation. In fact, the situation reflects a swap of deadlines between KPI 8-1 and KPI 8-6. KPI 8-1 was originally described as having a deadline in M24; however, this should have been M12, as it precedes KPI 8-6. Although KPI 8-6 is marked as delayed, it is not actually behind schedule. It is planned for completion in M24 and will be included in the second annual report. As the original list of KPIs constitutes an approved and submitted milestone, this KPI is included in the present report to ensure full transparency in the reporting.

WP9 Omics Technologies

No KPIs were due for reporting within this WP during the current period. Activities have focused on laying the groundwork for upcoming deliverables and ensuring that the necessary structures for data collection and performance monitoring are in place. Relevant indicators will be tracked and reported in the next reporting cycle.

WP10 Hi-tech Medical Resources

- KPI10-6 Recommendation for future governance of the NoE on Hi-tech medical resources - ● **Achieved (M12)**
 - The recommendation for the future governance of the NoE on Hi-tech Medical Resources has been completed, meeting the KPI target. This recommendation provides a foundation for ensuring the continued development and long-term sustainability of the network. This deliverable have been uploaded to the EU Funding & Tenders Portal and to the JANE-2 MS Teams Platform under WP10 Hi-Tech Medical Resources.

- KPI10-7 Number of centers, regions and countries supported - ● **Achieved (M12)**
 - The KPI has been achieved, with a total of 86 centres, regions, and countries supported, exceeding the completion target. This support has contributed to facilitating the adaptation of Clinical Practice Guidelines into standards of care, strengthening less advanced centres and countries, and accelerating the translation of innovation into patient benefit—helping to ensure equitable, evidence-based care across the EU.



WP11 Adolescents & Young Adults with Cancer

No KPIs were due for reporting within this WP during the current period. Activities have focused on laying the groundwork for upcoming deliverables and ensuring that the necessary structures for data collection and performance monitoring are in place. Relevant indicators will be tracked and reported in the next reporting cycle.

4 KEY LEARNINGS

During the first year of JANE-2, the groundwork has been laid for future progress. The Core WPs and the NoEs have initiated their work. In general, their KPIs have also successfully been submitted and achieved according to schedule. Based on the evaluation of reported KPIs, and additional information from WPs, the following key learnings was identified on the progress of JANE-2, that could guide the next phase of implementation:

JANE-2's progress is aligned with the milestones and on schedule with deliverables in the GA. KPI 1_2 and 1_3 have been fully completed, with 100% of deliverables and milestones in JANE-2 submitted on time.

Synergies have been identified, and long-term responsibilities need to be defined. Synergies within the WPs of the JANE-2 project, as well as between JANE-2 and other ongoing EU initiatives, have been identified and mapped. This represents an important step toward fostering collaborative activities and ensuring efficient project management. These initiatives relate to JAs (like JA PreventNCD, EUCanScreen, EUnetCCC, eCAN+, TEHDAS2, JA PCM and JARDIN), EU Projects (like CAN.HEAL, CCI4EU, ECHoS) and Health Networks such as ERNs. The extensive synergies have also been mapped, e.g. within the HPP Restricted Network and relevant partners in various WPs in JANE-2 have in many cases interacted and coordinated work plan with other ongoing EU-initiatives. In line with the recent evaluation from the Commission, identification of synergies and alignment will be important for future efficient work and for defining long-term sustainability of the NoEs.

Project satisfaction remains to be evaluated. Data on project satisfaction was planned to be collected through satisfaction surveys during the General Assemblies. As the first JANE-2 annual meeting was cancelled, data on percentage of consortium partners that are satisfied with the project progress and results has been delayed. This will be adjusted to a new plan for data collection.

Continuous refinement of KPIs is necessary. The KPIs included in this report were defined at an early stage of the project (M5), with the aim of supporting oversight of progress and the achievement of the JA objectives. As the JANE-2 project progresses and matures, new indicators might become relevant. Some of the original indicators might need justified adjustments. This kind of development could be expected from any kind of performance indicator model. Iterative refinement is necessary for the KPIs to accurately reflect changing priorities during the project. To ensure continued evaluation with indicators relevant for the success of JANE-2, and in line with the evaluation strategy, annual revision of the KPIs will be necessary during the project.

Generic KPIs could be relevant for horizontal evaluation across the NoEs. The objective of JANE-2 is to establish seven NoEs related to cancer. The primary goal of these NoEs is to stimulate joint development and share knowledge within the different areas. The growth and success of each NoE will thereby ensure the success of JANE-2. For this purpose, generic KPIs may be used as a complement to the current, specific KPIs. The specific KPIs are individual for each WP, some of them aligned with milestones and deliverables. Generic KPIs would be common for all NoEs and could be used for evaluation of common factors important for growth and success of each NoE, such as the level of development, functioning and establishment.

Further on, there are dependencies and synergies within a project such as JANE-2. Fulfilment of activities or performances within WPs depend on other activities within the project. These interdependencies could, if found relevant, be measured by a new set of **generic, cross-cutting KPIs for evaluation across WPs**, in addition to current KPIs that are specific to the performance of each WP.

Additional information on KPIs could deepen insights.

Quantitative KPIs for JANE-2 provide basic status but lack context on why or how results were achieved or delayed. To improve understanding, reports should include qualitative explanations from WPs, especially for delayed KPIs—detailing reasons, actions taken, and new timelines. Successfully met KPIs can be verified by documented evidence, but when this isn't sufficient, a process for gathering more information should be implemented. This added context will help WP3 track progress and manage issues effectively, and incorporate lessons learned and insights.

Learnings from the reporting process.

Ensuring efficient and seamless reporting requires that all parties involved have a clear understanding of the process, including timelines, and that the necessary systems and technologies are fully operational from the start. For JANE-2, a detailed reporting mechanism was implemented using REDCap surveys for tracking KPIs. The KPI reporting process was introduced to WP leaders before the first reporting period (M9), and a quick guide on KPI Reporting was developed by the WP3 team to ensure the process was as smooth and straightforward as possible. Additionally, a workflow was established in collaboration with the Coordination team to align indicator reporting timelines with other JANE-2 processes, and for those responsible for WP reporting, to receive instructions via email every six months.

Various challenges were encountered during the reporting process. Engaging partners proved difficult, particularly in securing the active involvement of WP leaders in identifying and nominating responsible individuals for KPI reporting. Greater clarity in the initial guidance and additional time for onboarding would likely have enhanced both participation and overall understanding of the requirements.

Technical difficulties also emerged in relation to granting access to the REDCap tool. Due to various levels of technical knowledge, there were some communication issues or misunderstandings. For future reporting periods, this can be mitigated by early involvement of local IT departments.

The Dashboard visualization tool was put in place during M12, and the process of collecting feedback from users is ongoing. This tool integrates REDCap data reported by WPs, using Power BI. By visualizing KPIs, the Dashboard enables access and understanding of gathered process information for all consortium partners. For future reporting, the Dashboard will provide enhanced possibilities for monitoring and analysis.

The first KPI reporting period was associated with some network access problems, resulting in reporting delays during M9 reporting. These issues were resolved by M12, thus not resulting in any missing data for this first annual report.

Some limitations emerged due to the timing constraints of the KPI reporting deadline for the majority of KPIs at 12 months, and the initially scheduled deadline for the Annual Report at the same time point. This was solved by extending the deadline for the Annual Report by one month, thus providing some time for data management, analysis and compiling the report.



5 CONCLUSION

Overall, JANE-2 has demonstrated strong and steady progress throughout the first reporting period. The first Annual Report confirms that the project is advancing in line with the established milestones and remains on schedule with the deliverables outlined in the GA. The majority of the KPIs are being achieved to a satisfactory and meaningful extent, reflecting a solid foundation of implementation, quality and coordination.

Valuable synergies have been identified both across WPs and between JANE-2 and other EU initiatives, contributing to added value and strengthened collaboration within the broader ecosystem. At the same time, the reporting period has shown that ongoing refinement of KPIs will be essential. The current indicators were defined at an early stage of the project, and as JANE-2 continues to evolve and mature, adjustments will be required to ensure that progress monitoring remains relevant, accurate, and impactful. In addition, the development of more generic KPIs may support horizontal evaluation across the NoEs.

Key learnings from this initial reporting cycle will be incorporated into the continuing development of the monitoring and reporting framework. This includes improvements such as ensuring easier access to reporting tools, adjusting the level of detail required in reporting, exploring opportunities for additional qualitative assessment mechanisms, and refining data collection timelines and processes in preparation for the next reporting period. These enhancements will help secure meaningful, efficient, and streamlined reporting going forward, supporting the continued success of the JA and the NoEs.



6 ENHANCING KPI PROGRESS EVALUATION IN JANE-2

The Annual Report is a milestone and a strategic document to monitor the progress of KPI achievements. As the project progresses and matures, the Annual Report will also adapt. During the second project year, WP3 will initiate activities aiming to improve the evaluation of KPI progress in JANE-2. Learnings and progression of the project and the WPs, and key learnings from the first Annual Report will provide the foundation for these activities.

During the first six months of the second project year of JANE-2, the following activities are scheduled:

- **Overview and analysis of learnings from the first annual report.** Learnings gained from the WPs during the first year, as well as key learnings and gaps from the first Annual Report will be collected and analysed. Adjustments to improve the KPI reporting process will be identified and analysed.
- **KPI revision process.** The KPI revision process will identify necessary adjustments and the potential drafting of generic KPIs. These KPIs aim to reflect the development and functioning of the NoEs during JANE-2 and to help identify interdependencies. This process will be led by WP3 and performed in collaboration with other WPs. Detailed decisions on KPI-setting will be made in dialogue with Coordination, allowing flexibility for thorough discussion and well-founded conclusions.
- **Adjustments of the reporting process.** WP3 will develop and implement the necessary adjustments of the reporting process, identified during the analysis of the learnings from the first Annual Report, in collaboration with other WPs. This includes ensuring the availability of relevant information for understanding the reported KPIs, as well as making any overarching improvements to the reporting process.

During the second year of JANE-2, the updated KPIs, along with any new KPIs identified during the KPI revision process, will be reported at M18 and M24 and included in the second Annual Report. The list of the current KPIs can be found in the annex.

7 ANNEX

7.1 List of KPIs per WP included in this report

Indicator	KPI1-1
Definition	Number of round table discussions organized
Justification	Round tables will be held through the EU Health Policy Platform with relevant cancer-related JAs and projects to discuss synergies and create a task force.
Type of indicator	Process
Methodology	Quantitative
Data source(s)	Agenda, meeting minutes
Data collection instrument	Meeting minutes
Responsible	WP1
Periodicity of data collection	M12; M24; M36; M48
Completion criteria	4
Acceptance criteria	4
Observations	More than one round table discussion might be held per year, but at least one per year is expected



Indicator	KPI1-2
Definition	Percentage of deliverables submitted on time
Justification	Process indicator to check the completion of the project on time
Type of indicator	Process
Methodology	Quantitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	Deliverables available in the Funding and Tenders European Commission portal
Responsible	WP1
Periodicity of data collection	Every 9 months
Completion criteria	100%
Acceptance criteria	≥80%
Observations	



Indicator	KPI1-3
Definition	Percentage of milestones achieved on time
Justification	Process indicator to check the completion of the project on time
Type of indicator	Process
Methodology	Quantitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	Means of verification defined in the GA for each milestone
Responsible	WP1
Periodicity of data collection	Every 9 months
Completion criteria	100%
Acceptance criteria	≥80%
Observations	

Indicator	KPI1-5
Definition	Policy Action Reports
Justification	Each NoE separately and jointly will discuss and identify policy actions to undertake to address healthcare networking challenges. These actions will be described in specific annual reports.
Type of indicator	Output
Methodology	Qualitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	List of policy actions undertaken
Responsible	WP1
Periodicity of data collection	M12; M24; M36; M48
Completion criteria	4
Acceptance criteria	4
Observations	One Policy Action Report per year is expected. Related milestone: MS5; MS6; MS7; MS8.



Indicator	KPI1-6
Definition	Synergies with EUnetCCC
Justification	Annual meetings will be organized jointly with EUnetCCC to boost synergies between both actions. These meetings will help to maintain active engagement with partners and stakeholders, and function as key platforms for information, dissemination and communication.
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Agenda, presentation slides.
Data collection instrument	Agenda
Responsible	WP1
Periodicity of data collection	M3; M18; M33; M48
Completion criteria	4
Acceptance criteria	4
Observations	Kick-off Meeting (Year 1), 2 General Assemblies (Years 2, 3) and Final Conference (Year 4). The Annual Meetings organised with EUnetCCC correspond to the JANE-2 General Assemblies and Final Conference. Related Deliverable: D1.2

WP2 Dissemination & Communication

Indicator	KPI2-3
Definition	Upgraded website
Justification	An upgraded new website, mobile friendly and connected to social media, enhances the accessibility and understanding of the navigation system, and ensures that the information displayed is up to date
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Website
Data collection instrument	Website verification
Responsible	WP2
Periodicity of data collection	M6
Completion criteria	1
Acceptance criteria	1
Observations	<p>The new website dedicated to Joint Action JANE-2 will provide links connecting the visitors with JANE's website (background information) and related projects (i. e. EUnetCCC, ERNs). The JANE-2 website will be linked to social media and be mobile friendly.</p> <p>Related Deliverable: D2.1.</p>



Indicator	KPI2-4
Definition	Development of the JANE-2 dissemination strategy
Justification	The dissemination strategy is necessary to ensure an effective communication of information, findings and outcomes to all the consortium partners, the relevant stakeholders and the public in general
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	Deliverable available in the Funding and Tenders European Commission portal
Responsible	WP2
Periodicity of data collection	M8
Completion criteria	1
Acceptance criteria	1
Observations	Related Deliverable: D2.2

Indicator	KPI2-7
Definition	Number of website views
Justification	Website views represent the interest the project has created among stakeholders and the general public
Type of indicator	Outcome
Methodology	Quantitative
Data source(s)	Website views counter
Data collection instrument	Views recount
Responsible	WP2
Periodicity of data collection	M12; M18; M24; M30; M36; M42; M48.
Completion criteria	100 views per month
Acceptance criteria	≥70 views per month
Observations	This indicator will be monitored every 6 month starting from the M6; when the JANE-2 website is expected to be launched. For acceptance criteria 420 views per reporting period should be achieved; for completion criteria 600 views per reporting period.

WP3 Evaluation

Indicator	KPI3-1
Definition	Success in data collection
Justification	Percentage of indicators (process, output and outcome) that have been appropriately and timely been reported to the evaluation team
Type of indicator	Process
Methodology	Quantitative
Data source(s)	WPL reported indicators in the online data reporting tool (REDCap)
Data collection instrument	Online data reporting tool (REDCap)
Responsible	WPLs responsible for the indicator reporting and WP3 for the monitoring
Periodicity of data collection	M12; M24; M36; M48
Completion criteria	100%
Acceptance criteria	≥80%
Observations	



Indicator	KPI3-2
Definition	List of KPI available
Justification	Specific, measurable, achievable, relevant and time-bound key performance indicators are needed to accurately measure the process, outcomes and impact of JANE-2 JA
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	KPIs list available in the Funding and Tenders European Commission portal
Responsible	WP3
Periodicity of data collection	M5
Completion criteria	1
Acceptance criteria	1
Observations	Process, output and outcome indicators are expected for all WPs. Related Milestone: MS3.1



Indicator	KPI3-3
Definition	Dashboard visualization tool put in place
Justification	To ensure that all consortium partners can easily access and understand the gathered process information, a dashboard that clearly visualizes key performance indicators (KPIs) is essential
Type of indicator	Output
Methodology	Quantitative
Data source(s)	To be defined
Data collection instrument	Dashboard available
Responsible	WP3
Periodicity of data collection	M10
Completion criteria	1
Acceptance criteria	1
Observations	Dashboard with graphical visualization of the KPIs accessible. Related Milestone: MS3.2



Indicator	KPI3-4
Definition	Evaluation strategy developed
Justification	This framework is essential in order to give a structured approach to evaluate the Joint Action and clarify the role of consortium partners in the evaluation process. The aim of this document is to provide the methodology and tools for the evaluation of the performance of the JA, as well, as the plan for the further analysis of the obtained results.
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	Deliverable available in the Funding and Tenders European Commission portal
Responsible	WP3
Periodicity of data collection	M7
Completion criteria	1
Acceptance criteria	1
Observations	Related Deliverable: D3.1

Indicator	KPI3-6
Definition	Percentage of consortium partners that are satisfied with the project progress and results
Justification	The percentage of partners that believe that JANE-2 is performing well and reaching the objectives expected.
Type of indicator	Outcome
Methodology	Quantitative
Data source(s)	Satisfaction surveys completed during the General Assemblies
Data collection instrument	Satisfaction surveys completed during the General Assemblies
Responsible	WP3 leader
Periodicity of data collection	M12; M24; M36; M46
Completion criteria	≥80%
Acceptance criteria	≥65%
Observations	Data will be provided after every General Assembly and reviewed by WP3 every 12 months

WP5 Complex & Poor Prognosis Cancer

Indicator	KPI5-6
Definition	Definition of quality care indicators in pancreatic and lung cancer
Justification	Definition of quality care indicators is essential to ensure a meaningful evaluation of the activities carried out by the NoE
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Email communication with WP3
Data collection instrument	Extraction of document from email communication with WP3
Responsible	WP5
Periodicity of data collection	M12
Completion criteria	1
Acceptance criteria	1
Observations	Related Task: 5.2; In collaboration with EUnetCCC project

WP7 Survivorship

Indicator	KPI7-1
Definition	Meetings and/or communications with synergic initiatives
Justification	This indicator will measure the success of contacting and meeting with synergic initiatives, including other projects within any European funding framework already described in the Grant Agreement, other WP within JANE2 and consultations and collaborative meetings held with external experts and stakeholders (such as patient organizations described in the GA).
Type of indicator	Process
Methodology	<p><u>Quantitative</u></p> <p>Communication success Rate (%): Communications and/or meetings established per identified synergic projects and/or synergic JANE2 WP (as described in GA)</p> <p>Communication success Rate</p> <p>$= (\text{Number of Meetings or Communications Held}) / (\text{Number of synergic projects identified}) \times 100$</p>
Data source(s)	Communications and invitations to meetings (Teams, Zoom or similar)
Data collection instrument	Excel
Responsible	HSJD and Sciansano
Periodicity of data collection	M12; M24
Completion criteria	Communication success Rate: 100%
Acceptance criteria	Communication success Rate: 75%
Observations	Related Task: T7.1

WP8 Personalised Primary & Secondary Cancer Prevention

Indicator	KPI8-1
Definition	Number of expert interviews conducted to analyse screening policies across EU
Justification	Interviews provide in-depth insights into current screening policies, trends, and gaps, ensuring that recommendations are evidence-based.
Type of indicator	Process
Methodology	Quantitative
Data source(s)	Document available at JANE2 internal platform
Data collection instrument	Expert opinions, national screening policy documents
Responsible	FMUP (Rui Amaral Mendes), COA (João Macedo), Task 8.2 High Contributors
Periodicity of data collection	M24
Completion criteria	15
Acceptance criteria	10
Observations	Related to NoE on Personalised Cancer Prevention, experts will be selected from diverse health policy and screening domains across Europe.

Indicator	KPI8-2
Definition	Number of methodologies identified for mapping risk factors
Justification	This indicator is relevant for monitoring of JANE-2 progress because it shows to what extent the mapping process is advancing. This will include lifestyle factors that contribute to cancer risk. An important methodological development foreseen is the creation of an approach integrating functionally genetic and epigenetic (environmentally-altered) factors and their variation over time together with an exposome risk score representing diverse lifestyle factors towards an integrated risk score for numerous cancers in pertinent populations.
Type of indicator	Process
Methodology	Quantitative
Data source(s)	Internal document on the JANE2 platform (MS Teams).
Data collection instrument	Systematic review protocols, API query frameworks, data abstraction forms, socioeconomic data harvesting, integration data warehouse schemas, metadata cataloguing templates
Responsible	All task 8.3 partners
Periodicity of data collection	M12
Completion criteria	3 methodologies identified
Acceptance criteria	1 methodology identified is the minimum level of the indicator for it to be considered sufficient
Observations	

Indicator	KPI8-3
Definition	Number of systematic reviews that have reached an advanced stage in the research process, with defined protocols, established workgroups and roles, and the initiation of the records screening phases
Justification	Tracks the progress of systematic reviews that aim to identify the clinical utility of personalized prevention strategies. Achieving at least 4 out of 6 reviews in progress ensures the timely collection and synthesis of available scientific evidences useful for the development of D1 and D2
Type of indicator	Process
Methodology	Quantitative
Data source(s)	Group meeting minutes, protocols, and screening phase documentation (e.g. Rayyan software)
Data collection instrument	Progress tracking sheets (e.g. Excel)
Responsible	FPG (task leader) and partners highly involved in task (IOCN, BOCOC, COA, FMUP, REUH, LU, ICO, IBB-PAN, PSCUH, NHRF, MOH CY)
Periodicity of data collection	M12
Completion criteria	6
Acceptance criteria	4
Observations	Monthly meetings will be held for all 6 reviews to track their progress even before M12, with the task coordination group. Each review team will periodically update a shared file to keep the rest of the group informed. By M12, the progress of all reviews will be monitored, and the protocol for each review should be finalized and closed.

Indicator	KPI8-4
Definition	Number of protocols of systematic reviews on genetic/epigenetic cancer risk markers developed and applied (until records screening)
Justification	Collecting evidence on clinically useful risk markers is the starting point for tailoring prevention according to individual risk
Type of indicator	Process
Methodology	Quantitative
Data source(s)	WP8.5 team (international registries for registered protocols)
Data collection instrument	Protocols developed according to PRISMA guidelines
Responsible	Task leader, with the support of contributors to the task
Periodicity of data collection	M12; M24; M36; M48
Completion criteria	3
Acceptance criteria	1
Observations	



Indicator	KPI8-5
Definition	Organization of a stakeholder meeting/conference to refine personalized screening recommendations
Justification	A stakeholder meeting ensures that the developed recommendations are widely supported and actionable.
Type of indicator	Output
Methodology	Quantitative
Data source(s)	WP8 internal platform
Data collection instrument	Meeting/conference minutes, stakeholder feedback
Responsible	FMUP, COA, and WP8 Leaders
Periodicity of data collection	M12
Completion criteria	1
Acceptance criteria	1
Observations	Minimum of 30 key participants from relevant organizations attending, including national and regional policy makers, scientists, CCC and primary care units, patient organizations

Indicator	KPI8-6
Definition	Development of a policy brief summarizing the findings and recommendations of suitable guidelines and indicators for implementing and evaluating future personalized prevention plans
Justification	A policy brief will serve as a concrete deliverable to guide the adoption of personalized screening approaches.
Type of indicator	Outcome
Methodology	Quantitative
Data source(s)	WP8 internal platform
Data collection instrument	Findings from expert interviews and stakeholder meeting
Responsible	Task 8.2 members (High and Low contributors)
Periodicity of data collection	M12
Completion criteria	1
Acceptance criteria	1
Observations	Related to NoE on Personalised Cancer Prevention, for acceptance criteria, policy brief should be reviewed and validated by at least 3 experts. Policy brief will integrate omics and AI-based insights into screening strategies.

WP10 Hi-tech Medical Resources

Indicator	KPI10-6
Definition	Recommendation for future governance of the NoE on Hi-tech medical resources
Justification	Recommendations for future governance in the NoE is necessary to ensure the development and sustainability of the network
Type of indicator	Output
Methodology	Quantitative
Data source(s)	Funding and Tenders European Commission portal
Data collection instrument	Deliverable available in the Funding and Tenders European Commission portal
Responsible	WP10
Periodicity of data collection	M10
Completion criteria	1
Acceptance criteria	1
Observations	Deliverable uploaded in the Funding and Tenders Portal. Related Deliverable: D10.1

Indicator	KP110-7
Definition	Number of centres, regions and countries supported
Justification	Infrastructural and procedural support such as facilitating the implementation of the adaptation of Clinical Practice Guidelines into standards of care, help for less advanced centres/countries and speeding up the road from innovation to patient benefit are crucial to ensure that quality and evidence-based care is available for all EU citizens
Type of indicator	Outcome
Methodology	Quantitative
Data source(s)	WP10 participants
Data collection instrument	Report of centres, regions and countries supported from WP10 participants
Responsible	WP10 leaders
Periodicity of data collection	M12; M24; M36; M48
Completion criteria	1
Acceptance criteria	1
Observations	



7.2 List of KPIs scheduled to be included in the second Annual report of JANE-2.

	M9	M12	M18	M24
WP1				
KPI1-1 Number of round table discussions organized		x		x
KPI1-2 Percentage of deliverables submitted on time	x		x	
KPI1-3 Percentage of milestones achieved on time	x		x	
KPI1-4 Advocacy toolkit				x
KPI1-5 Policy Action Reports		x		x
KPI1-6 Synergies with EUnetCCC	x		x	
WP2				
KPI2-3 Upgraded website	x			
KPI2-4 Development of the JANE-2 dissemination strategy	x			
KPI2-7 Number of website views		x	x	x
WP3				
KPI3-1 Success in data collection		x		x
KPI3-2 List of KPI available	x			
KPI3-3 Dashboard visualization tool put in place		x		
KPI3-4 Evaluation strategy developed	x			
KPI3-6 Percentage of consortium partners that are satisfied with the project progress and results		x		x
WP4				
KPI4-1 Percentage of stakeholders engaged in needs assessment				x
KPI4-5 Added-value of the NoE portfolio validation workshop				x
WP5				
KPI5-1 Percentage of invited MSs participated in the survey about PPC			x	
KPI5-6 Definition of quality care indicators in pancreatic and lung cancer		x		
KPI5-7 Protocol for the clinical study in selected focus group				x
KPI5-8 Development of educational portfolio based on mapping existing resources			x	



WP7		
KPI7-1 Meetings and/or communications with synergic initiatives	x	x
KPI7-2 Survey response rate (%)		x
KPI7-3 Capacity-building and training efforts survey response rate		x
KPI7-4 Structure of the Survivorship NoE and established expert Working Groups		x
KPI7-5 Number of key components integrated by Survivorship care model		x
KPI7-6 Capacity building program structure		x
WP8		
KPI8-1 Number of expert interviews conducted to analyse screening policies across EU	x	
KPI8-2 Number of methodologies identified for mapping risk factors	x	
KPI8-3 Number of systematic reviews that have reached an advanced stage in the research process, with defined protocols, established workgroups and roles, and the initiation of the records screening phases	x	
KPI8-4 Number of protocols of systematic reviews on genetic/epigenetic cancer risk markers developed and applied (until records screening)	x	x
KPI8-5 Organization of a stakeholder meeting/conference to refine personalized screening recommendations	x	
KPI8-6 Development of a policy brief summarizing the findings and recommendations of suitable guidelines and indicators for implementing and evaluating future personalized prevention plans		x
WP9		
KPI9-1 Number of expert consultation proceedings		x
KPI9-5 Beta version of JANE MMv0 available		x
WP10		
KPI10-5 Report on tools for patients developed for each hi-technology domain		x
KPI10-6 Recommendation for future governance of the NoE on Hi-tech medical resources	x	
KPI10-7 Number of centres, regions and countries supported	x	x



WP11	
KPI11-4 Number of training courses developed directed at different multidisciplinary stakeholders	x
KPI11-6 Number of implementations of AYAs dedicated programs	x