INCa’s COMMITMENTS

➔ We take care to direct our efforts to best meet the needs and expectations of patients, the general population, and healthcare and research professionals.
➔ We are renewing our quality assurance system for expertise.
➔ We are committed to developing a transparent approach for evaluating our actions and their impact.
➔ We are developing strategies for the early identification of innovation, and for supporting and disseminating innovation for the benefit of patients and the general public.
➔ We are implementing an integrated strategy that allows the synergistic deployment of tools for public health, organization of care, and advancement in research.
➔ As a unifying force in the fight against cancer, we act in partnership with the other stakeholders.

INCa’s RESOURCES

The INCa board of directors is made up of representatives of the core CFIP members and of eight qualified individuals. It is supported by an International Scientific Advisory Board, and three consultation bodies, namely an ethical committee, an audit committee and a users’ and professionals’ committee.

INCa has an annual budget of approximately €100 million. Most of it is received from the Ministries of Health and Research, contributions from other CFIP members and funds from partnerships with public and private organizations. About half of this budget is allocated to research funding. The rest is allocated to healthcare initiatives, public health and public information.

INCa has 150 employees, and works with several hundred outside experts each year to contribute to its works.

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INCa has 150 employees, and works with several hundred outside experts each year to contribute to its work.
In 2011, Cancer Institute (INCa) surveyed 365,000 people newly diagnosed with cancer and 147,000 deaths. The INCa works at the interface with patients, their friends and families, healthcare professionals, researchers, experts and decision-makers to improve their quality of life. They are intended to help improve cancer control activities, develop international collaborations; assesses cancer control activities, and the general public. INCa uses all available media to promote the improvement in the quality of life after cancer for patients—diagnostic, treatment, rehabilitation and follow-up procedures for patients with rare cancers, people with a genetic predisposition, elderly people, children and adolescents.

CARE
- To develop clinical tools in order to find effective treatments.
- To improve the coordination of patient-centred care, in the context of a personalised care pathway.
- To promote the improvement in the quality of life after cancer.
- To support emerging fields, i.e. genomic studies, experimental model, and immunotherapy.
- To support the development of career paths in the cancer field.
- To translate fundamental discoveries into advances for the benefit of the population in all areas of cancer research.
- To assess cancer control activities.
- To continuously optimise the organisation of screening, care and research.
- To promote innovation and good practices.
- To improve knowledge on cancer risk factors.
- To improve behaviour changes to reduce the incidence of avoidable cancers.
- To define and adapt screening strategies according to people's level of risk for cancer.
- To promote the translation of scientific evidence into public health policies.
- To disseminate information on cancer that is reliable and relevant.

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ICAn is a public interest group (GIP) which brings together State representatives, large NGOs, health insurance funds, research organisations and hospital federations. These stakeholders share a common goal of reducing the incidence of avoidable cancers and the number of cancer deaths, improving the quality of life of people with cancer during and after their illness, and reducing inequalities related to cancer.

The challenge:
➔ Over 365,000 people newly diagnosed with cancer each year and 147,000 deaths in 2011.
➔ Social issues on rise (return to work, insurance, disability) due to improved survival (the 5-year relative survival rate from all types of cancer is 52%).
➔ Personalised care as a result of major advances in recent years.
➔ Financial constrains on the health system and demographic pressures on professionals.
➔ Challenges in knowledge-based decision making.

TO COORDINATE CANCER CONTROL ACTIVITIES
ICAn partners with the main non-profit and institutional stakeholders, the networks of national expert centers (regional oncology networks and cancer centres), cancer control centers with the Regional Health Agencies (ARS), develops international collaborations, implements and monitors the Cancer Control Plan.

TO INITIATE AND SUPPORT SCIENTIFIC, MEDICAL, TECHNOLOGICAL AND ORGANISATIONAL INNOVATION
Each year ICAn launches competitive calls for proposals in all areas of cancer research, healthcare organisation and public health, and follow up selected and funded projects.

TO CONTRIBUTE TO THE ORGANISATIONAL FRAMEWORK
ICAn is instrumental in the organisation of screening, care and research. It recruits, interviews and certifies guidelines, procedures for designation and certification, and follows up and assesses cancer control activities.

INCa’S MISSIONS

AN INTEGRATED APPROACH TO ACCELERATE PROGRESS
When this context, ICAn provides integrated undertakings in all dimensions (health, scientific, social and economic) and areas of intervention (prevention, screening, care and research) associated with malignant pathologies.

The ICAn works at the interface with patients, their friends and family, the healthcare system users, the general public, healthcare professionals, researchers and decision makers to catalyse progress.

INCa’S PRIORITIES

RESEARCH
➔ To support emerging fields, i.e., genomic studies, experimental models, biology and immunology.
➔ To translate fundamental discoveries into advances for the benefit of the population and for patients’ diagnostic tools, personalised treatments, and quality of life as quickly as possible.
➔ To improve knowledge on cancer risk factors.
➔ To dissemi- nate information on cancer that is reliable and succinct.

TO PRODUCE, ANALYSE AND EVALUATE DATA
ICAn expedites the observation of cancers through surveillance tools, studies, analysis and dissemination of data in all areas of cancer research.

TO PRODUCE EXPERTISE
ICAn produces expertise, recommendations, guidelines, reports and opinions, mainly at the request of the Ministry of Health. They are intended to help decision-makers, guide professionals and provide cancer information to patients and the general public.

AN INTEGRATED APPROACH TO ACCELERATE PROGRESS

PUBLIC HEALTH
➔ To improve knowledge on cancer risk factors.
➔ To promote behaviour changes to reduce the incidence of avoidable cancers.
➔ To develop and adapt screening strategies according to people’s level of risk for cancer.
➔ To continuously optimise the organisation of screening, by increasing and incorporating scientific and technical advances.
➔ To disseminate information on cancer that is reliable and succinct.

1. Constituents partners of the ICAn GIP: Ministry of Research, Ministry of Health, National Cancer League, ARC Foundation for Cancer Research, FEHAP (Federation of Private Hospitals and Health-care Assistance), FFCLCC (Federation of Cancer Care Centres), RSI (Independent Workers’ Health Insurance), CNAMTS (National Health Insurance Fund for Salaried Workers), MSA (Agricultural Social Insurance Fund).
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The INCa’s mission is to improve the quality of life during and after the disease.

The INCa’s priorities are to support emerging fields, i.e. genetic studies, experimental study models, and immunotherapy.

To translate fundamental discoveries into advances for the benefit of the population and for patients-diagnostic tools, personalized treatments, and quality of life—as quickly as possible.

To increase the availability of biological and clinical resources to researchers.

To develop clinical tools in order to find effective treatments.

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Examples: Reference sheets on risk factors for cancer, recommendations on clinical practice for health professionals, summary of procedures for managing rare cancers, reports on UV tanning facilities and cancer risks, etc.

The INCa manages cancer surveillance databases, conducts research, sends publications, and participates in the cancer control program. It operates the national cancer statistics register, manages patient data, provides training and support to healthcare professionals, and raises awareness of current issues.

The INCa partners with the main non-profit and institutional stakeholders, the networks of national expert centers (regional oncology, networks and cancer management), statutory cancer control with the Regional Health Agencies (ARS), develops international collaborations, implements and monitors the Cancer Control Plan.

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The INCa’s missions are to produce, analyse and evaluate data, to produce, and promote knowledge uptake and good practices.

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To translate fundamental discoveries into advances for the benefit of the population and for patients-diagnostic tools, personalized treatments, and quality of life—as quickly as possible.

To increase the availability of biological and clinical resources to researchers.

To develop clinical tools in order to find effective treatments.

TO PRODUCE EXPERTISE

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TO PRODUCE, ANALYSE AND EVALUATE DATA

INCa is expanding the observation of cancers through surveillance tools, studies, analysis and dissemination of data in all areas of cancer research.

Examples: National Cancer Registry and cancer control centres, molecular genetics platform, early phase clinical trial centres, integrated cancer research sites, etc.

TO PROMOTE KNOWLEDGE UPTAKE AND GOOD PRACTICES

Training tools, information campaigns, organization of colloquies, scientific publications, attendance at shows, internet sites—INCa uses all available media to promote the knowledge uptake and good practices implementation by the healthcare system, the general public, healthcare professionals and researchers.

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Research

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➔ To increase the availability of biological and clinical resources to researchers.

➔ To develop clinical tools in order to find effective treatments.

Public Health

➔ To improve the coordination of patient-centered care, in the context of a personalized care pathway.

➔ To guarantee equal access to quality care.

➔ To develop relevant care procedures for people with rare cancers, people with a genetic predisposition, elderly people, children and adolescents.

➔ To support the reinsertion of cancer patients in the referral pathway.

➔ To promote the improvement in the quality of life during and after the disease.
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