



## Towards a World Platform for Breast Unit Accreditation

## **EUSOMA: A European View**











# **Specialist Breast Unit Accreditation**

- The EC 2016 deadline?
- What are specialist breast units?
- The accreditation process
- Summing up









# **Specialist Breast Unit Implementation**

- The EC 2016 deadline?
- What are specialist breast units?
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- Summing up









# **EBCC 2 - 1998**









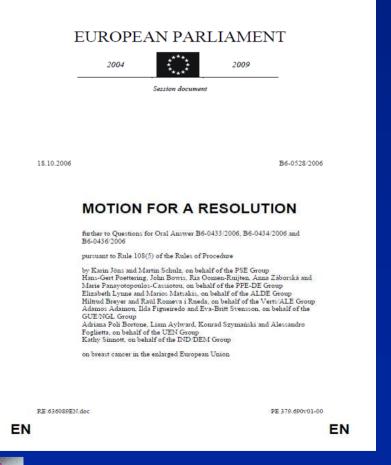








### **European Parliament**



to ensure Nationwide provision of interdisciplinary breast centres in accordance with EUn **Guidelines by 2016, since** treatment in an interdisciplinary breast centre has been proven to raise chances of survival and to improve the quality of life, and calls on the Commission to deliver a progress report on every two years

[...] Calls on the Member States







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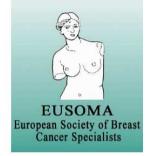








## **Specialist Breast Units**



#### The requirements of a specialist breast unit

	EUROPEAN JOURNAL OF CANCER 43 (2007) 660-675	
	available at www.sciencedirect.com	<b>BIC</b>
270 PA	ScienceDirect	
ELSEVIED	journal homepage: www.ejconline.com	A gene vers in langua anna an anna anna anna anna anna a

#### **Position Paper**

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Guidelines on the standards for the training of specialised health professionals dealing with breast cancer

European guidelines for yoully assumate in bound cannot screening and diagouids ------











#### The requirements of a specialist breast unit

### **Objectives:**

- The make available to all women in Europe the highest quality breast services
- To define the standards for such services
- To recommend voluntary certification AND audit of breast units in order that these services can be recognisable to patients, practitioners and health authorities as being of high quality











#### The requirements of a specialist breast unit

### **General requirements:**

- Critical mass and multidisciplinary team
- Clinical Director
- **Protocols**
- Audit
- Multidisciplinary team clinical meetings
- Screening
- Communication and Patient Information













#### The requirements of a specialist breast unit

- Specialist Breast Surgery and Oncoplastic surgery
- Specialist Breast Radiology (Imaging)
- Specialist Breast Pathology
- Specialist Clinical Oncology
- Specialist Radiation Oncology
- Specialist Breast Nursing
- Other services:



Specialist clinics, genetics, psychological support etc.









#### EUROPEAN JOURNAL OF CANCER 46 (2010) 2344-2356



**Position Paper** 

#### Quality indicators in breast cancer care

M. Rosselli Del Turco <sup>a,\*</sup>, A. Ponti <sup>b</sup>, U. Bick <sup>c</sup>, L. Biganzoli <sup>d</sup>, G. Cserni <sup>e</sup>, B. Cutuli <sup>f</sup>, T. Decker <sup>g</sup>, M. Dietel <sup>c</sup>, O. Gentilini <sup>h</sup>, T. Kuehn <sup>k</sup>, M.P. Mano <sup>j</sup>, P. Mantellini <sup>i</sup>, L. Marotti <sup>a</sup>, P. Poortmans <sup>l</sup>, F. Rank <sup>m</sup>, H. Roe <sup>n</sup>, E. Scaffidi <sup>h</sup>, J.A. van der Hage <sup>o</sup>, G. Viale <sup>p</sup>, C. Wells <sup>q</sup>, M. Welnicka-Jaskiewicz <sup>r</sup>, Y. Wengstöm <sup>s</sup>, L. Cataliotti <sup>t</sup>









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## টটে Great Britain & Ireland 2012 %%



More than 3600 hotels & restaurants so fit any budget. From Mendly guesthouses to luxury hotels, gastropubli to stained restaurants.





### **EUARB** European Voluntary Breast Unit Accreditation

- ECN
- EA a competent stakeholder
- IARC



• EC – DG Sanco, DG Enterprise and the JRC









## **EUARB**

### **European Voluntary Breast Unit Accreditation**



	Item5.2
	ECN
	EA/GA(11)21_Annex
Y	- 181 -
X	For Information
X	- 181 -

Annex to the report on the ECN project to the General Assembly 2011\_1 in Berlin

General considerations concerning the implementation of Accreditation and Conformity assessment in breast cancer units (EUABR) – summary of the discussion between Jane Beaumont, Tuija Sinervo and Hanspeter Ischi





#### 2nd International Congress of Breast Disease Centers 2012



## **European Cancer Care Certification**



Certification procedures in compliance with the European Regulation UNI CEI EN 45011-1999 UNI EN ISO 19011-2003



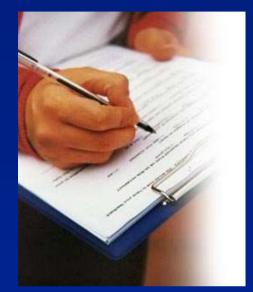














Performance on quality indicators Q1









### **EUSOMA Certification process** for quality in comprehensive and multidisciplinary breast care



### A key aim of the EUSOMA Network is building a common database







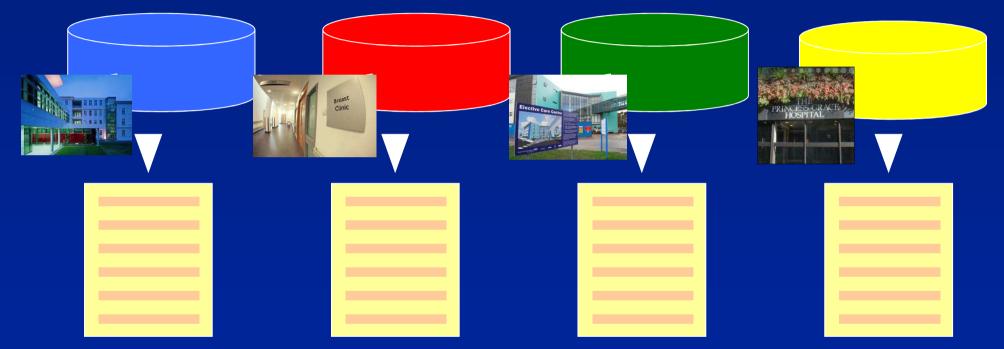


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## **EUSOMA Certification process**

for quality in comprehensive and multidisciplinary breast care



The Units are asked to provide data transfer (anonimized) to the Eusoma Network Database on an annual basis.

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EUSOMA Data Collection					🚹 🔹 🔝 🔹 🖶 🗣 🔂 Pagi <u>n</u> a 👻 🥸 Strum					
Data Quality indicators	Indicato	rs Select the indicator f All indicators	rom the list	t to	compare i	ts re:	sult with the benc	nmark:		
Daw 200 otre are				ł	Filter:					
Analysis Browse	PO1	Positive or suspicious pre-operative cyto/histological diagnosis	385 / 438	-	87.9%		6 miss. (1.4%)	385	6 53	
Frequency	P02	Positive pre-operative cyto/histological diagnosis	382 / 438	-	87.2%	~	6 miss. (1.4%)	382	6 56	
Pivot tables Mean	12C	Immediate reconstruction	26 / 178	=	<mark>14.6%</mark>		4 miss. (2.2%)	26 4 152	2	
Dates	12D	Immediate reconstruction done in pN0 (DCIS and invasive <=30 mm)	13/73	=	17.8%	X	0 miss.	13 60		
Documentation	13A2*	Single operation following pre-operative diagnosis of Ca (C5,B5)	326 / 382	=	85.3%	х	0 miss.	326	56	
Introductory guide Indicators definition	14	Ductal carcinoma in situ (DCIS) without axillary dissection	35 / 38	=	92.1%	Х	8 miss. (17.4%)	35	83	
	14F*	In situ (grade I and II) without axillary dissection or SN	6/24	-	25%		5 miss. (17.2%)	6 <mark>5</mark>	18	
	15A	Breast conservation surgery in pT1 cases	155 / 197	=	78.7%	Х	6 miss. (3%)	155	<mark>6</mark> 42	
Logout	15B	Breast conservation surgery in carcinoma in situ up to 20 mm	22 / 40	=	55%		3 miss. (7%)	22 <mark>3</mark>	18	
Created by Mariano Tomatis for CPO Piemonte	16B3	Clear margins (>1 mm) after last operation	247 / 252	=	98%	1	19 miss. (7%)	247	19 5	
	17B	No frozen section if tumour diameter up to 10 mm	32 / 60	=	53.3%	Х	9 miss. (13%)	32 <mark>9</mark>	28	
	18A	More than 9 sentinel lymphnodes removed (II+III levels)	195 / 210	=	92.9%	Х	2 miss. (0.9%)	195	2 15	
	18C	Hormonal receptors measuring available	390 / 391	=	99.7%	~	1 miss. (0.3%)	390	1 1	
	18D	Histopathological grading available (invasive)	389 / 389	=	100%	~	3 miss. (0.8%)	389	3	
	21A2	Operation within 30 days after decision to operate	712/724	=	98.3%	~	82 miss. (10.2%)	712	82 12	
	LS7	pN0 with sentinel lymphnode only	143 / 241	=	59.3%	X	9 miss. (3.6%)	143 <mark>9</mark>	98	





## **EUSOMA Certification process** for quality in comprehensive and multidisciplinary breast care









- To date ECCC has certified 27 breast units
- Germany, Switzerland, Italy, Austria and Belgium









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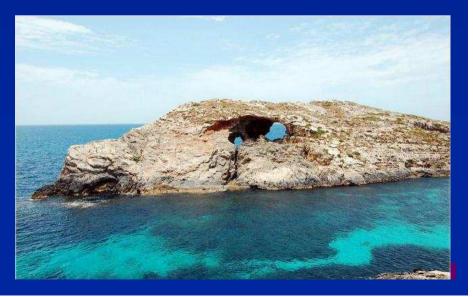
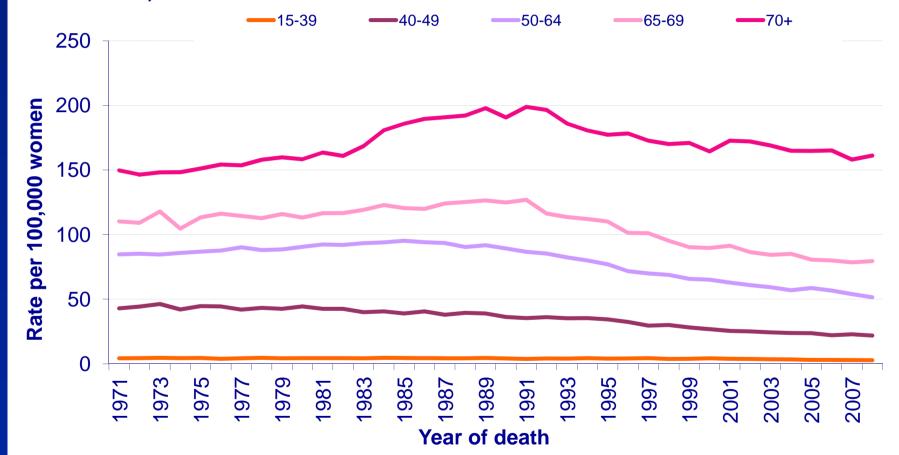








Figure 2.3: Age-specific mortality rates, breast cancer, females, UK, 1971 - 2008













## Meeting the 2016 Deadline: Specialist Breast Unit Implementation



- The EU directive is long overdue
- At the moment the processes needs to achieve a standardised EU protocol for breast unit accreditation is making very slow progress
- In the mean time EUSOMA presses ahead with its certification process
- EUSOMA is convinced that it has a simple and workable model for accreditation that ensures that women with breast cancer receive high quality care



The EC has now funded the EUARB

