



REPLIES OF THE EUROPEAN COMMISSION

TO THE EUROPEAN COURT OF AUDITORS' SPECIAL REPORT

on **Europe's Beating Cancer Plan**

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This document presents the replies of the European Commission to observations of a Special Report of the European Court of Auditors, in line with Article 265 of the [Financial Regulation](#). These replies are to be published by the European Court of Auditors together with the Special Report.

I. THE COMMISSION REPLIES IN BRIEF

The European Commission welcomes the special report of the European Court of Auditors (ECA) on Europe's Beating Cancer Plan (the 'Cancer Plan').

The Cancer Plan was adopted in February 2021 as the EU's renewed commitment to improving cancer prevention, early detection, diagnosis and care, as well as quality of life of patients and survivors across the continent. Across these four pillars, and further horizontal themes (research and innovation, childhood cancers, and inequalities), the Cancer Plan set up ten flagship initiatives and 32 further actions. This represented the largest ever financial commitment to cancer policy at EU level at the time. The implementation of the Cancer Plan is well underway, and the vast majority of actions have been initiated and are being put into practice. A Cancer Plan review published in February 2025 concluded that four years after its adoption, it remains highly relevant, and that continuing to implement ongoing actions should be the major focus to achieve the Cancer Plan's objectives. Indeed, the mission letter from the President of the Commission for the 2024-2029 mandate tasked the Commissioner for Health and Animal Welfare with ensuring the implementation of the Cancer Plan.

The Commission recognises the report's acknowledgement given to the Cancer Plan's comprehensive approach and its meaningful contribution to coordinating and implementing actions to fight cancer at national level. The ECA report further highlights how the Cancer Plan was built based on strong stakeholder involvement and previous EU-level cancer initiatives, significantly expanding their scope, while confirming that the flagship initiatives are advancing well.

The Commission welcomes the ECA report's emphasis on cancer inequalities, aligned with the strong focus on inequalities in the Cancer Plan. The European Cancer Inequalities Registry, a Cancer Plan flagship initiative, provides a useful tool to identify inequalities across the whole cancer care pathway and to guide future initiatives and investments. Additionally, as a horizontal theme, it is reflected in numerous Cancer Plan actions. As highlighted by the ECA report, inequalities still widely persist between and within Member States, underlining the need for ongoing efforts in this area.

The Commission considers the large number of Cancer Plan actions, which are supported by various funding instruments, as a key strength of the Plan. Efforts are underway and will continue to ensure that actions are well coordinated and complementary. As noted by the ECA, long-term sustainability of the actions depends to a large degree on national uptake and follow-up. This is important given that, according to the Treaty on the Functioning of the European Union (Article 168(7)), the definition of health policy and the organisation and delivery of health services and medical care, as well as the management of health services and medical care and the allocation of the resources assigned to them, is a Member State competence.

While the Commission takes note of the ECA's views on post-2027 financing for the Cancer Plan, it is not in a position to make any funding commitments going beyond the current Multiannual Financial Framework, while noting that several ongoing actions run until at least 2029. However, the Commission agrees with the establishment of a monitoring framework to assess the progress in achieving the Plan's objectives. This will complement and build on instruments and analyses such as the Implementation Roadmaps and the 2025 Cancer Plan review, as well as align with the scope and capabilities of respective funding programmes. As the ECA report notes, the impact of the Cancer Plan will only be visible in the long term, and assessing the impact of some actions at Member State level that are attributable to EU action may not be possible, therefore any future assessment will have to mainly focus on output and results in relation to the Cancer Plan objectives.

II. REPLIES TO THE RECOMMENDATIONS

Recommendation 1: Tailor key initiatives to member states' needs and capacities

The Commission should:

(a) identify and assess potential overlaps between projects funded within the framework of Europe's Beating Cancer Plan, and identify and promote future synergies;

(Target implementation date: 31 December 2027)

The Commission **accepts** recommendation 1(a).

Identifying and promoting synergies is an ongoing priority. Each Member State-led Joint Action under the EU4Health Programme, for example, includes a mandatory work package on sustainability, and many further efforts are taken at Commission level or encouraged within the projects to ensure long-lasting impact of actions. The Commission agrees that it will require additional efforts in light of more key initiatives progressing.

(b) work with member states to identify ways of ensuring the sustainability of projects;

(Target implementation date: 31 December 2027)

The Commission **accepts** recommendation 1(b).

Many early Cancer Plan actions and projects were of a preparatory nature, presenting the first EU level actions of their kind. As these reach more maturity and enter the implementation and uptake at Member State-level stage, sustainability questions indeed will become increasingly relevant. The Commission considers that strong collaboration with Member States in implementing the Cancer Plan is already ongoing, and the Commission will continue to ensure this.

Most notably, the cancer sub-group under the Expert Group on Public Health was set up to serve as the main joint governance body at Member State level for the Mission on Cancer and the Cancer Plan, ensuring alignment between cancer research and cancer policy. It is comprised of representatives from the Ministries of Research and of Health. The sub-group has the objective to advise the Commission on the implementation of both initiatives, to inform the Commission about relevant national actions, to report on challenges in implementation, and to deliver recommendations on concrete actions. The exchanges in this forum foster national uptake of projects and strive to ensure alignment with Member States' interests and needs.

(c) using the results obtained through the key initiatives, prioritise a core set of EU wide initiatives that can be expected to maximise impact and better address inequalities.

(Target implementation date: 31 December 2027)

The Commission **accepts** recommendation 1(c).

The Cancer Plan and its ongoing actions already reflect priorities as defined in close collaboration with Member States and other stakeholders. Considerations on how to best sustain those EU initiatives with highest impact, are ongoing. These considerations are an integral part of the programming process under the EU4Health Programme as well as Horizon Europe, including on cancer, in close collaboration with Member States and other stakeholders. This will become more crucial as the implementation of the Cancer Plan advances.

Recommendation 2: Strengthen monitoring and evaluation of Europe's Beating Cancer Plan

The Commission should:

- (a) set up a monitoring framework, comprising output, result and, when feasible, impact indicators for all actions and objectives, so that it can assess the progress and impact of Europe's Beating Cancer Plan in all member states;**

(Target implementation date: (31 December 2027)

The Commission **accepts** recommendation 2(a).

The Commission agrees with the establishment of a Cancer Plan-wide monitoring framework, taking into account and building on existing monitoring arrangements of the relevant funding programmes and actions.

As acknowledged in Recommendation 2a, assessing the impact at Member State level may not be possible in some actions. In general, it is a challenging task to identify appropriate indicators which can be clearly linked to EU action and to isolate the impact of EU measures in public health in general from actions taken at national level, as the EU has limited competence in this area, with only a supportive and coordinating role. Moreover, such impacts may only be fully manifested in the longer term, as also noted by the ECA's report¹. Therefore, the monitoring framework will mainly focus on outputs and results, with the main goal of assessing progress of Europe's Beating Cancer Plan implementation.

- (b) use this framework to evaluate the results, relevance and contribution of these actions, including to reducing inequalities within and between member states.**

(Target implementation date: 31 December 2030)

The Commission **accepts** recommendation 2(b).

The Commission agrees that an evaluation in 2030 is appropriate. As the Cancer Plan review was concluded in 2025, and given that actions are still being implemented in line with the main task set out in the mission letter to the Commissioner for Health and Animal Welfare, namely to ensure the implementation of the Plan, the Commission considers that 2030 would be a practical and meaningful point in time to evaluate in a holistic way results and contributions of the actions.

¹ See ECA observations 17 and 56