

Appendix to the Strategy for CANCER RESEARCH 2025-2027

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Introduction

The Strategy for Cancer Research 2025–2027 constitutes the overall framework for the work of the Aarhus Comprehensive Cancer Centre (CCC) in the field of cancer research during the period 2025–2027. The present Appendix to the Strategy for Cancer Research serves as a supplement to the strategy itself and further elaborates on priorities related to the cancer research strategy.

Based on its self-evaluation submitted in November 2024 and the audit visit conducted by the Organization of European Cancer Institutes (OECI) in April 2025, Aarhus CCC has developed seven action plans within the field of cancer research. These action plans are embedded in an overarching improvement plan for Aarhus CCC. The action plans related to cancer research are managed by the established CCC Research Council, which is thus able to identify, qualify and develop the areas on which Aarhus CCC will focus in order to strengthen cancer research at Aarhus University Hospital, in collaboration with Central Denmark Region and Aarhus University.

Improvement Plan

To achieve the ambitions outlined in the Cancer Research Strategy 2025–2027, Aarhus CCC has chosen to prioritise its development initiatives within a consolidated improvement plan. This plan is intended to function as both an implementation and governance tool for the execution of the Cancer Research Strategy. The development initiatives are described in full in the Appendix to the Strategy for Cancer Research 2025–2027 (reference: Appendix to the Strategy for Cancer Research).

The improvement plan related to cancer research aims to support and promote research of the highest quality within the field of cancer by strengthening collaboration and competencies, as well as enhancing the integration of research into clinical practice for the benefit of patients.

Challenges and Needs

Aarhus CCC requires a clearer and more coherent organisation of cancer research across several organisational levels.

- At departmental level, the absence of uniform data registration, structures and procedures across departments poses a risk of inconsistent assessment of research projects and limits opportunities for collaboration and quality assurance across research activities within Aarhus CCC.
- There is also a lack of an objective and standardised internal evaluation system to ensure consistent quality in the assessment of research applications.
- At hospital level and in collaboration with Aarhus University, Aarhus CCC lacks a comprehensive overview of research data and research groups/units, which hampers both coordination and strategic management. The absence of a shared system for registering research data – including trials, results and finances – reduces opportunities for effective coordination, transparency and quality assurance of the centre's research activities.
- Furthermore, there is a need for a formalised overview of the use of animal facilities, biobanks and the handling of biological samples. The lack of systematisation and centralisation in this area limits quality assurance, transparency and opportunities for research utilisation of samples.
- Finally, there is a lack of a systematic framework for external advisory input to support the continued development of cancer research at AUH/AU, including future cancer research strategies.

Strategic Initiatives

Launched Strategic Initiatives, Second Half of 2025

- To strengthen overall research quality and ensure a more coordinated approach to cancer research, an independent CCC Research Council has been established, constituted on 18 September 2025. The Council serves as a central forum for advice, prioritisation and quality assurance across the centre's research activities (reference: Terms of Reference for the CCC Research Council).
- Minimum standards are simultaneously being defined for department-specific clinical research councils, and a systematic process for organising and appointing members to such councils is being initiated in all CCC-relevant departments. This will ensure uniform organisation and strengthen local research leadership (reference: Terms of Reference for Department-Specific Clinical Research Councils (CRC)).
- To enhance quality and standardise research-supporting workflows, common policies and standard operating procedures are being developed for the conduct of clinical trials through Clinical Research Units within the field of cancer (reference: Policy for Clinical Research Units).
- An external Scientific Advisory Board (SAB) has been established to provide independent, internationally anchored advice on the centre's research strategy and development. The SAB will also serve as an advisory body for future cancer research strategies (reference: Terms of Reference for the SAB).
- An internal policy for handling research grant applications is being developed to ensure consistency, transparency and high quality in the evaluation of grant submissions prior

to submission. As part of this, a systematic overview of applications, evaluation processes and success rates will be established, enabling a more strategic approach to funding applications (reference: Central Procedure for Evaluation of Research Grant Applications).

- To support the professional development of research environments across hospital and university, a mapping of available seminars and thematic conferences for cancer researchers is being initiated. This overview will be made easily accessible across Aarhus CCC in collaboration with the Translational Cancer Network at Health, Aarhus University (reference: Annual Overview of Conferences and Seminars at AUH/AU Health).
- A comprehensive data overview of Aarhus CCC's total research activity and results will be established, followed by the definition of clear performance targets at departmental and hospital level as a basis for future evaluation and strategic prioritisation. Research performance data will be made available in a new research data domain within the Central Denmark Region's data warehouse (BI portal), for presentation in Aarhus University Hospital's key performance dashboards, research dialogue meetings, employee development interviews, etc., as well as for biennial CCC reports.
- Work is also underway towards the implementation of a uniform, centre-wide digital system for the management and reporting of clinical trials across the hospital. This will be supported by a standardised process for identifying potential patients for participation in clinical studies.
- Finally, a policy for patient recruitment to clinical trials is being developed, including initiatives to increase the visibility of relevant and available studies in clinical settings. (reference: Policy for Recruitment of Patients to Clinical Research Trials) It is also part of the joint research strategy between AU Health and AUH that research should include all population groups and actively involve patients. Research must benefit patients regardless of socioeconomic status, age, ethnicity or gender, and therefore as many patient types as possible should be included in research projects (reference: Strategy for Clinical Health Science Research 2023–2027).

Planned Strategic Initiatives, First Half of 2026

- Aarhus CCC aims to establish an overview of the centre's research groups and clinical research units, as well as a clear organisational structure for these entities. Such a structure will support coordination, transparency and strategic development of research activities.
- The centre will also develop a Quality Assurance Plan (QAP) and a policy for internal audit of clinical cancer research. The purpose is to ensure systematic quality control, uniform standards and continuous improvement of Aarhus CCC's research practices. This will be supplemented by regular monitoring of research group performance using defined targets to track development and identify areas requiring targeted action.
- As part of strategic resource management, possibilities will be explored for defining a consolidated research financial statement for the cancer area at centre level, including the distribution of internally allocated resources and externally obtained funding. Both internal and external funds at both university and hospital level will be calculated. The aim is to create a comprehensive overview of the financial resources used for research activities within the centre, thereby supporting prioritisation, transparency and long-term strategic planning. When publishing the financial statement, due consideration will

be given to which management levels require access to specific components, in accordance with standard accounting principles.

- A policy for biobanks and animal facilities, as well as an overview of their use, will also be developed. This will ensure responsible handling, optimal accessibility and utilisation, and high quality in the management of biological samples and experimental facilities.
- To support patients' opportunities to participate in relevant research projects, reference will be made to an external overview of available clinical trials via the National Clinical Trial Overview, a national database under development (reference: National Clinical Trial Overview). This will help ensure that all cancer patients have access to information about relevant trial participation opportunities.
- A communication strategy for clinical trials will also be developed, covering the publication of ongoing studies and their results both internally within the organisation and externally to patients/relatives, policymakers and relevant stakeholders. The aim is to promote transparency, strengthen knowledge sharing and increase awareness of the centre's research activities. This strategy will, among other things, build on the developed Knowledge Portal (reference: Knowledge Portal: Patient Involvement in the Research Process).
- Finally, a policy for the clinical implementation of new evidence-based practices will be initiated, based on both internal and external research as well as internal quality assurance projects, to ensure that new evidence is rapidly and safely translated into improved patient care.
- As part of the centre's knowledge and documentation framework, a cancer research report will be produced every two years, providing a comprehensive overview of research activities, results and development trends. To support this, the above-mentioned research data warehouse must first be established. The research report will be used for strategic and data-driven development across Aarhus CCC, including by the Aarhus CCC Steering Committee, the CCC Research Council and the Scientific Advisory Board. It may also be used in collaboration between AUH and AU Health within the cancer field.

The Initiatives in a Broader Context

The initiatives described above primarily concern the establishment of a stable and quality-oriented research foundation. The organisational framework for research activities is expected to be clearly defined, with responsibilities and expectations made explicit for both researchers and management. Ultimately, these initiatives have a clear objective: to benefit patients. Accordingly, the initiatives described in this Appendix aim to enhance research quality at Aarhus CCC for the benefit of patients.

To support strategic development and strengthen research environments, improved access to research data from Aarhus University and Aarhus University Hospital is considered essential. Such access will promote attention to areas such as research implementation, optimal use of research resources and patient involvement in clinical studies, while also helping to reduce silo formation between research environments. This will enhance mutual insight and increase synergy across research efforts.

Aarhus CCC's strategic initiatives are expected to be implemented within a broader and national context. Consequently, CCC research activities are aligned with the national Cancer Plan V (reference: Cancer Plan V), the national Health Reform (reference: Health Reform 2024), the Strategy for Clinical Health Science Research 2023–2027 at Aarhus University Hospital and Aarhus University (reference: Strategy for Clinical Health Science Research 2023–2027, AUH and AU Health), and Aarhus University Hospital's designated development areas.

Cancer Plan V: Research plays a central role in Cancer Plan V as a driver of quality development and innovation. The plan emphasises the need for better and more systematic use of health data to generate evidence for treatment and to tailor cancer care to individual patients. This aligns closely with Aarhus CCC's research initiatives, which likewise prioritise a systematic and data-driven approach to strengthening the quality of cancer research. Furthermore, there is a shared ambition to break down silos and enhance cross-sector collaboration. Overall, the initiatives point towards a shared vision of creating a transparent, data-driven and innovative research environment in which new knowledge is rapidly translated into improved diagnostics, treatment and follow-up for cancer patients.

Health Reform 2024: While the national Health Reform 2024 does not focus primarily on research, its implementation and associated legislative packages include significant provisions directly related to research and data access, such as faster and more efficient approval processes for trials. In addition, the reform addresses health inequality, and Aarhus CCC therefore anticipates an increased focus on cross-sectoral research and patient involvement across socioeconomic divides. Elements that Aarhus CCC also supports and actively works to promote.

Strategy for Clinical Health Science Research 2023–2027: There are strong intended overlaps between Aarhus CCC's initiatives and the AU–AUH research strategy entitled *Strategy for Clinical Health Science Research*. Both focus on strengthening research leadership and establishing structures that promote quality and transparency. The strategy supports Aarhus CCC's ambitions for overview and governance through targeted leadership development and the use of research dialogue meetings. Furthermore, both place strong emphasis on patient involvement and broad inclusion in the research process.

Areas of Strength and Emerging Environments

We believe that the most effective way to improve prevention, early detection and treatment of cancer is to combine a general strengthening of cancer research environments at Aarhus CCC with targeted efforts to identify and support existing areas of strength as well as emerging research environments that are growing. The Appendix to the Strategy for Cancer Research 2025–2027 therefore places particular emphasis on creating shared frameworks that enable strong environments to maintain their high international level, while allowing new and promising environments to emerge and grow.

Further development of existing areas of strength and support for emerging environments requires clear organisation, strong leadership anchoring and access to relevant data. Aarhus CCC's prioritisation and focus on areas of strength and emerging environments in future cancer research strategies will be conducted methodically through the CCC Research Council, based

on data and with substantial involvement of Aarhus CCC's research leaders and chaired professors. This approach will allow mapping of existing strengths, identification of emerging environments and highlighting of research with significant clinical impact. This methodological work will be supported by quality and organisational initiatives, including the Research Support Office at Aarhus University, the Hospital Administration at Aarhus University Hospital, and external scientific advice via the Aarhus CCC Scientific Advisory Board, collectively sharpening both direction and standards.

Finally, continuous monitoring of cancer research environments' resources, outputs, research finances and use of infrastructures such as biobanks and animal facilities will ensure that investments and organisational structures support precisely those areas in which Aarhus CCC demonstrates strength or development potential.

In this way, a coherent and sustainable framework is created for both maintaining the centre's areas of strength and providing optimal growth conditions for emerging environments—for the benefit of Aarhus CCC, Aarhus University Hospital and Aarhus University.

References (mostly in Danish)

Aarhus CCC ([website](#))

Appendix to the Strategy for Cancer Research (website: TBA)

Terms of Reference for the CCC Research Council ([website](#))

Standard Procedure for Clinical Research Units (e-doc and website: TBA)

Terms of Reference for Department-Specific Clinical Research Councils (CRC) (e-doc and website: TBA)

Terms of Reference for the Scientific Advisory Board (website: TBA)

Central Procedure for Evaluation of Research Grant Applications (e-doc and website: TBA)

Annual Overview of Conferences and Seminars at AUH/AU Health ([website](#))

Policy for Recruitment of Patients to Clinical Research Trials (website: TBA)

Key Performance Overview of Research in the BI Data Warehouse (accessible only to employees in Central Denmark Region) (website: TBA)

Strategy for Clinical Health Science Research 2023–2027, AUH and AU Health ([website](#))

Knowledge Portal: Patient Involvement in the Research Process ([website](#))

Cancer Plan V: A Better Life With and After Cancer ([website](#))

Health Reform 2024 ([website](#))

National Clinical Trial Overview ([website](#))

Translational Cancer Network, Health ([website](#))

Published February 2026