



Delivering impact

c/can
in Tbilisi,
Georgia.

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Foreword

The journey of Tbilisi's collaboration with the City Cancer Challenge (C/Can) marks a significant milestone in transforming cancer care, not only within the city but across Georgia. Since Tbilisi became the first European city to join the C/Can network in 2019, we have witnessed the power of collaboration in tackling one of the most critical health challenges facing our society today.

Through a unified effort, over 174 health professionals from 27 institutions, along with invaluable input from more than 100 patients, we have successfully identified key barriers in our cancer care system and implemented locally tailored solutions. This partnership has allowed us to develop and roll out a comprehensive strategy to enhance cancer care services, from early detection to treatment, with a focus on improving quality, accessibility, and sustainability.

Tbilisi has set an inspiring example of how a city can lead the way in transforming cancer care through a collaborative, evidence-based approach. We are honored to be part of this journey and look forward to deepening our partnership to ensure that every Georgian patient has access to the care they need.

Isabel Mestres
CEO, C/Can

Our collective efforts have already resulted in a number of transformative achievements. These include the development of standardised management guidelines for breast and cervical cancer, the creation of a robust cancer registry, the introduction of telepathology to enhance diagnostic accuracy, and the establishment of new cancer diagnostic reimbursement policies under the Universal Healthcare Programme. These accomplishments not only contribute to better patient outcomes but also set a national precedent for scaling up cancer care across Georgia.

As we look ahead, the path is clear. The momentum we have built together with C/Can will continue to drive improvements in the country's healthcare system. Our focus in the coming phase will be to expand and strengthen the systems we've put in place, ensuring that every patient in Georgia has access to high-quality, timely cancer care. We will continue to deepen our collaboration, focusing on workforce development, digital solutions for multidisciplinary team coordination, and further policy integration to ensure the sustainability of these efforts.

Tbilisi's collaboration with City Cancer Challenge has been an invaluable step toward advancing cancer care in Georgia. By aligning local expertise with international best practices, we are creating a sustainable, patient-centred cancer care system that will benefit not only our capital but the entire nation.

Mikheil Sarjveladze

Minister of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia.

The Ministry of Health of Georgia remains fully committed to the long-term success of this initiative. Together, with the support of C/Can and our international partners, we will continue to lead the way in delivering a future where every Georgian has access to the cancer care they deserve.

We are proud of the progress we've made and excited for the next chapter in this transformative journey.



Mr. Mikheil Sarjveladze

Minister of Internally Displaced Persons
from the Occupied Territories, Labour,
Health and Social Affairs of Georgia



Mrs. Isabel Mestres

CEO
City Cancer Challenge (C/Can)

Executive summary

Tbilisi's journey with the City Cancer Challenge (C/Can) as a first European city began officially in February 2019 with the signing of a Memorandum of Understanding. Over the course of several years, the city underwent a transformative process, which included mapping key stakeholders, conducting a comprehensive needs assessment in collaboration with local leaders and experts, and organising multiple committee meetings to analyse challenges and identify priority actions.

KEY ACHIEVEMENTS AT A GLANCE

- › **174 health professionals from 27 institutions** engaged in shaping cancer care solutions.
- › **Expansion of cancer medicine coverage** under Georgia's Universal Healthcare Program.
- › **28 completed outputs across 8 project areas**, including development of cancer management guidelines, pathology protocols, e-module for primary healthcare doctors on early cancer signs and symptoms, cancer diagnostic pathways, development plans for different areas and policy recommendations for different aspects of cancer care.
- › **With the effective operations of the City Executive Committee encouragement to formalise a National Cancer Board** under the Ministry of Health to oversee long-term cancer control strategies.
- › Facilitate establishing a central in-hospital pharmacy in accordance with international standards. **Scientific training and knowledge exchange** for 25 health specialists through global partnerships.
- › **First Global Breast Cancer Initiative (GBCI) Workshop in Georgia**, paving the way for a city-wide Breast Cancer Action Plan.

A COLLABORATIVE, EVIDENCE-BASED APPROACH

Tbilisi's cancer care transformation began with a **comprehensive needs assessment**, engaging over 174 professionals and more than 100 patients to identify gaps and define priority actions. A **multi-disciplinary City Executive Committee (CEC)** was formed to oversee the process, supported by a Technical Committee of cancer care experts. Their work led to the development of a **city-wide roadmap** outlining eight targeted projects addressing **quality cancer care, diagnostics, education, and cancer registry**.

- › The creation of the **oncology pharmacies** inside the hospitals
- › Standardised **cervical cancer management guidelines**, approved by the Ministry of Health.
- › A **comprehensive cancer registry** manual to improve data collection, reporting, and policy decision-making.
- › Implementation of **quality control protocols** in pathology, imaging, and radiotherapy.
- › Strengthened **oncology training programmes**, enhancing education for medical and nursing professionals.

IMPACT BEYOND THE CITY: A MODEL FOR NATIONAL SCALE-UP

Tbilisi's progress has set a **national precedent**, with key policies and frameworks now influencing cancer care across Georgia. With support from C/Can, the Ministry of Health has supported the creation of in-hospital pharmacies to strengthen health system efficiencies and deliver improved oversight of medication dispensing and quality assurance.

LOOKING AHEAD: NEXT STEPS FOR SUSTAINED IMPACT

Building on this success, Tbilisi is entering the **next phase** of engagement, focusing on:

- › **Further expansion of the cancer registry** to improve data completeness and inform policy decisions.
- › **Scaling up digital solutions for multidisciplinary team (MDT) coordination** across key hospitals.
- › **Strengthening training programs** for oncologists, radiologists, pharmacists and nurses to sustain knowledge exchange.
- › **Deepening collaboration with international partners** to enhance patient support services.



Through continued partnership, investment, and commitment, Tbilisi is proving that sustainable, locally-led solutions can transform cancer care—not just within the city, but across Georgia and beyond.

174

health professionals
engaged

27

local institutions
working together

28

outputs across
8 project areas

About City Cancer Challenge (C/Can)

Where you live and who you are shouldn't determine the quality of cancer care you receive.

Yet across the world—and especially in low- and middle-income countries—millions face barriers to life-saving diagnosis, treatment, and care.

City Cancer Challenge (C/Can) is a global, impact-driven NGO that empowers cities to drive locally-led, sustainable change in cancer care. Founded on the belief that cities are the frontlines of health system transformation, C/Can works hand-in-hand from the ground up with local governments, healthcare professionals, and civil society to co-create solutions tailored to the realities of each city's health system.

Through our City Engagement Process Framework (CEPF), C/Can empowers cities to identify priorities, implement cancer care solutions, and strengthen health systems. By leveraging local ecosystems, we drive context-specific, community-owned change that improves access to care and builds the foundations for national scale-up. Our model strengthens local knowledge and partnerships—laying the groundwork for broader health system transformation.

Since launching, C/Can has supported over 5,500 healthcare professionals and reached 67.5 million people across 16 cities in LMICs. We know our model works. But we can't do it alone.

Read on to discover how Kumasi's journey with C/Can is transforming cancer care and setting a model for change across Ghana and beyond.

From Situation Analysis to Tailored Solutions

Tbilisi's transformation in cancer care began with a comprehensive, data-driven situation analysis, designed to map challenges and co-create locally relevant solutions. Guided by a multi-sectoral City Executive Committee (CEC) and a Technical Committee of local experts, the process engaged 174 health professionals across 27 institutions, along with patient representatives, to ensure an inclusive, evidence-based approach.

UNDERSTANDING THE GAPS: THE SITUATION ANALYSIS REPORT

Between June and September 2019, an extensive city-wide needs assessment was conducted to **identify critical barriers** in cancer care delivery. The analysis revealed:

- › **Fragmented cancer care pathways**, delaying timely diagnosis and treatment.
- › **Lack of standardised protocols** for imaging, pathology, and radiotherapy services.
- › **Gaps in workforce capacity**, particularly in oncology training and multidisciplinary care.
- › **Limited access to quality diagnostic and treatment services**, affecting patient outcomes.

These insights shaped the foundation for Tbilisi's cancer care strategy, ensuring that all subsequent interventions were locally relevant, technically sound, and sustainable.

FROM FINDINGS TO ACTION: CO-DESIGNING SOLUTIONS

In response to the identified gaps, **eight project areas** were prioritised, each with a dedicated team of cancer care professionals. These teams worked through **collaborative workshops and expert consultations** to develop structured, evidence-based solutions, ensuring each initiative was tailored to Tbilisi's unique healthcare landscape.

The result was a **comprehensive roadmap** outlining priority actions across key areas:

- › **Standardising cancer care** through new management guidelines for breast and cervical cancer.
- › **Developing a cancer registry manual** to improve data collection and policy planning.
- › **Upgrading pathology services** with quality control measures and creating specifications for digital telepathology.
- › **Strengthening imaging and radiotherapy** through harmonised protocols and workforce training.
- › **Accessing cancer diagnostics**, supported by national reimbursement policies.
- › **Improving medical education** by developing recommendations on oncology training programs.

Each project was designed with a system-wide approach, ensuring that improvements in one area (e.g., pathology) would positively impact other aspects of care (e.g., faster diagnosis and referral).



IMPLEMENTATION AND INTEGRATION: TURNING PLANS INTO IMPACT

By 2023, these initiatives had translated into tangible results, including:

- › **Endorsement of new cancer care guidelines** by the Ministry of Health, setting national standards.
- › **Successful integration of telepathology** to support real-time, remote diagnostics.
- › **Capacity-building programs** for oncologists, radiologists, and medical physicists.
- › Harmonising high-quality data collection, data synchronisation, and completeness by developing a cancer registry manual.

This bottom-up, locally-led approach has positioned Tbilisi as a leader in evidence-based cancer care planning, ensuring that interventions remain sustainable and adaptable to future needs.



Completed Outputs: Transforming Cancer Care in Tbilisi

Through a collaborative, multi-sectoral approach, Tbilisi has successfully implemented **28 key outputs across 8 priority areas**, driving tangible improvements in cancer care quality, diagnosis, and treatment.

1. Quality of Cancer Care project aimed at ensuring that cancer patients are treated following a multidisciplinary approach and can access the best achievable care given the available and affordable services in the city, also to provide evidence-based, resource-stratified recommendations to clinicians and policy-makers on the management of invasive cancers (breast and cervical) and enable effective functioning of organisational structures, through a multidisciplinary teams (MDT) regulation. This will in turn contribute to the reduction of inequities in access to quality cancer care, increase the quality of cancer care, the patients' survival and their quality of life. Outputs completed include:

- a. Presentation of a draft resolution to the Ministry of Health, aiming to establish and operationalise multidisciplinary teams in centres treating breast and/or cervical cancer patients.
- b. Adapted Breast Cancer Guidelines: Adaptation of guidelines for the management of invasive breast cancer to improve the quality of care (MoH approval process)
- c. Adapted Cervical Cancer Guidelines: Adaptation of guidelines for the management of invasive cervical cancer to enhance care standards (Approved by MoH).



2. Pathology project: developed guidelines and introduced procedures to ensure harmonisation of quality in the pre-analytical, analytical and post-analytical pathology phases across all licensed city pathology laboratories. This will, in turn, contribute towards the adoption of core common procedures that are critical to ensure timely and quality pathology diagnosis of cancer, which will improve the quality and standardisation of pathology diagnosis. Outputs completed include:

- a. Pathology Laboratory Quality Norms: Development of a norm defining quality criteria and minimal requirements for pathology laboratories (Approved by MoH).
- b. Pathology Quality Control Manual: Creation of a quality control manual, including standard operating procedures and standard pathology reports (Approved by MoH).
- c. Sample Handling and Transportation Quality Protocol: Establishment of a quality protocol for sample taking, handling, and specimen transportation (Approved by MoH).
- d. Telepathology Program Specifications: Specifications for setting up a telepathology program to facilitate remote pathology consultations (Endorsed by CEC).



3. Imaging project: developed guidelines to ensure the harmonisation of quality in the radiology and nuclear medicine services across the city and plan for future expansion of services. As a result, the different departments and relevant local regulators will have the tools to assess the quality of existing services according to relevant local technical specifications and international benchmarks. Furthermore, the project will enable the development of a common city approach towards the expansion of services and local training of technologists.

- a. Standardised Radiology Report: Development of a standardised radiology report with core elements for staging breast and cervical cancer (Endorsed by CEC).
- b. Radiology Quality Assurance Guidelines: Creation of quality assurance guidelines for radiology to ensure high-quality imaging services (Endorsed by CEC).
- c. Nuclear Medicine Quality Assurance Guidelines: Development of quality assurance guidelines for nuclear medicine practices (Endorsed by CEC).
- d. Radiation Technologist Syllabus: Designing a syllabus for the common training of radiation technologists in radiology, nuclear medicine, and radiotherapy (Endorsed by CEC).
- e. Pet/CT and Cyclotron Plan: Formulation of a development plan for Pet/CT imaging and cyclotron facilities (Endorsed by CEC).



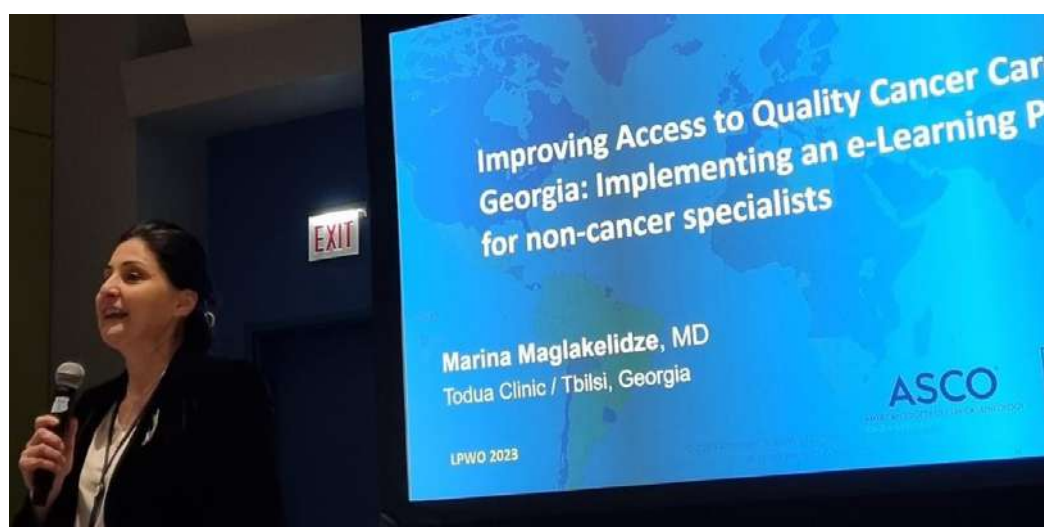
4. Radiotherapy project: produced the guidelines for implementing a quality assurance program of radiotherapy services in the city and developed a common city plan to ensure access to quality radiotherapy services in the short-, medium- and long- terms, which includes the creation of local capacity to train medical physicists that will improve quality and safe radiation therapy within the network of city hospitals. The project contributes to the quality of cancer care, part of which is the guidelines for implementing a quality assurance program of radiotherapy services in the city. Developed outputs:

- a. Radiotherapy Quality Assurance Program: Establishment of a quality assurance program for radiotherapy, following QUATRO methodology and obtaining a quality proofing certificate (Endorsed by CEC).
- b. Radiotherapy development plan with short (2 years), medium (5 years) and long-term (10 years) goals (Endorsed by CEC).
- c. Radiation Medical Physicist Syllabus: Designing a syllabus for the common training of radiation medical physicists in radiotherapy and nuclear medicine, along with radiation therapists (RTTs) (Endorsed by CEC).



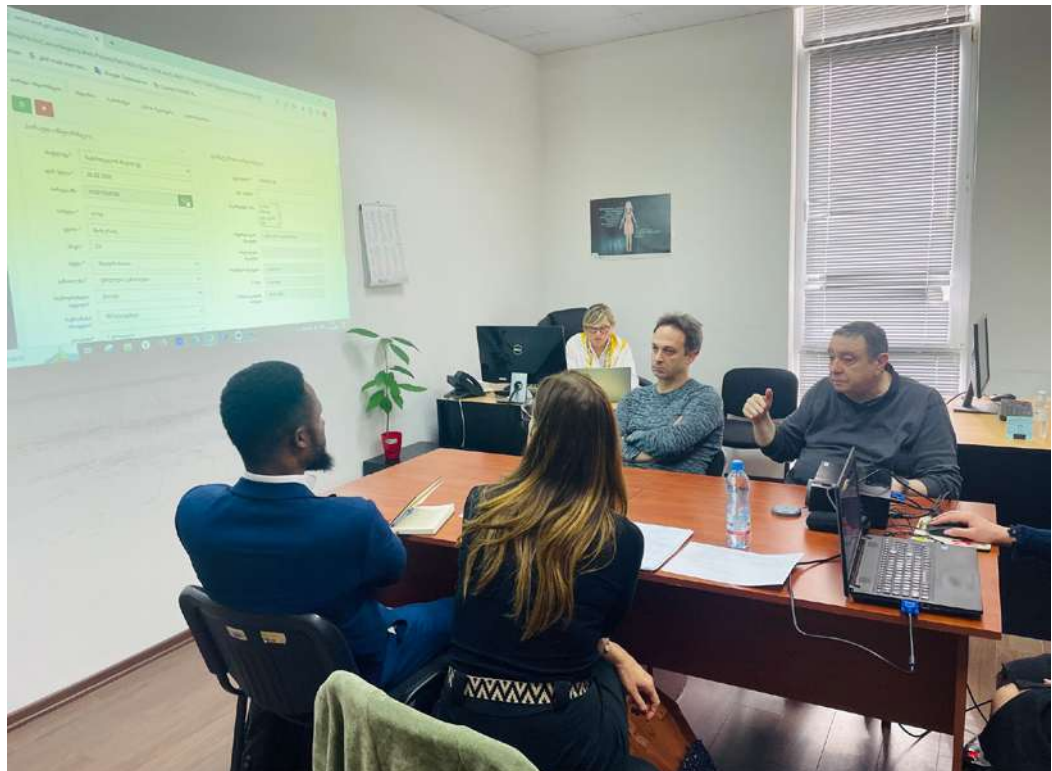
5. Training and Education Project: aimed at strengthening the cancer care workforce in the city of Tbilisi by developing concrete actions at the undergraduate level, post-graduate level and on-the-job training in line with international benchmarks and best practices. It developed and implemented cancer care training modules targeted to non-cancer medical specialists, including primary healthcare professionals.

- a. Cancer Education Policy Recommendation: Policy recommendation to medical universities to strengthen cancer care education at the undergraduate level (Endorsed by CEC).
- b. Postgraduate Training Program Review: Policy recommendation to the Institute of Postgraduate Medical Education and Continuous Professional Development to review the training program for medical oncology, radiation oncology, and surgical oncology (Endorsed by CEC).
- c. Continuous Medical Education (CME) Resolution: Presentation of a draft resolution to the Ministry of Health to ensure the availability of continuous medical education in all licensed cancer treatment centers (Endorsed by CEC).
- d. Training Modules for Non-Cancer Specialists: Development and implementation of cancer care training modules tailored for non-cancer medical specialists, including primary healthcare professionals.
- e. Draft resolution to the Institute of Postgraduate Medical Education and Continuous Professional Development to develop and implement cancer care education and training modules targeted to oncology nurses.



6. Cancer Registry (I) Project: provides policy recommendations for harmonisation of high-quality data collection from the various medical facilities that are offering different services to cancer patients in the city that will improve coverage and completeness of cancer information for better use in public health surveillance, planning, evaluation and resource allocation. Developed outputs:

- a. Cancer Registry Policy Guidance: Drafting policy guidance to harmonise high-quality data collection, synchronisation, completeness, and dissemination from cancer care institutions to the National Center for Disease Control and Public Health (Approved by MoH).
- b. Patient Data Authorisation Advocacy: Development of an advocacy document to streamline patient data authorisation with other forms of informed consent (Endorsed by CEC).



7. Cancer Diagnostic Reimbursement Project: contributed to the biggest gap in cancer care in Georgia - cancer diagnostics are not covered by UHC. The project provided diagnostic service packages for all types of cancer, budget forecast model and evidence and arguments in favour of reimbursement of the cost of diagnostic procedures and services for cancer, aiming to increase access to early cancer diagnosis, which will, respectively, improve cancer outcomes by providing care at the earliest possible stage. Developed outputs:

- a. Diagnostic Test Packages: Compilation of a list of diagnostic test packages to increase access and reimbursement for cancer diagnostics (Endorsed by CEC).
- b. Budget analysis: Detailed budget impact forecast scenario for the inclusion of diagnostic reimbursement on the basis of available epidemiological data (Endorsed by CEC).
- c. Cancer diagnostic pathways.



8. Requirements for quality cancer care Project: supports the MoH of Georgia to develop standard requirements for quality medical and surgical oncology services based on international standards and practical experience. Those standards guide the Georgian MoH in its decisions to accredit cancer services in the country. One of the recommendations “Having the unit or central pharmacy for safe preparation and handling of oncology medicines. Establishing a central pharmacy in accordance with international standards” has been implemented by MoH and with that Georgian cancer patients receive their medicines directly at medical facilities, eliminating the need to purchase and transport them from pharmacies. This allows patients to focus solely on their recovery. Developed outputs:

- a. Report development based on the analysis of the existing official documents regarding the cancer services (medical oncology and cancer surgery (Endorsed by CEC).
- b. Recommended regulations to ensure provision of high-quality systemic oncology treatment and cancer surgery services to be considered by the MoH (Endorsed by CEC, Recommendations implementation process started by MoH).
- c. Dissemination workshop with MoH and cancer care providers (Completed).



IMPACT & NEXT STEPS

These outputs have set a new standard for cancer care in Georgia, with several initiatives now being scaled nationally. Moving forward, efforts will focus on expanding digital solutions, strengthening workforce training, and deepening policy integration to ensure long-term sustainability.

Capacity Development Activities: Strengthening Expertise and Collaboration

As part of the C/Can Tbilisi initiative, targeted capacity-building programmes have empowered local healthcare professionals with specialised training, global knowledge exchange, and hands-on experience in cancer care. These capacity development activities were introduced along with the execution of city projects.

A Multidisciplinary Cancer Management Course (MCMC) was organised in partnership with ASCO to provide capacity building on MDT clinical case discussion. The breast and cervical cancer teams of Quality of Cancer Care project participated in MCMC and participated in MDT clinical case discussion with the experts nominated by ASCO, ASCP and IAEA.



Best Practice Sharing. 25 health specialists in pathology, medical imaging, surgery, medical oncology, radiation oncology, nursing and supporting/palliative care conducted fully-sponsored scientific visits to reference centres to learn about best practices. It was also an opportunity to create professional networks with peers in the reference centre they visited, for further collaboration and exchange of knowledge and practice.

- ◆ The specialists of palliative care, medical oncology, radiation oncology and nurses took part in Catalan Oncology Center, Barcelona, Spain and the Hospital del Mar, Barcelona, Spain.



- ◆ Imaging Experts visited the Policlinico S.Orsola-Malpighi, Bologna, Italy, Wiener Gesundheitsverbund Klinik Ottakring (Wilhelminenspital), Vienna, Austria and Clinical Hospital Centre Zemun, Belgrade, Serbia.
- ◆ The cancer registry specialists visited the National Cancer Institute, Ukraine.
- ◆ The cervical and breast surgeons visited the Hospital del Mar, Barcelona, Spain.



Expert visit to Tbilisi Clinical Institutions.

Specialists from Hospital del Mar and Catalan Oncology Center, including a surgeon, radiation specialist, pathologist and medical oncologist, visited Tbilisi. The visit was dedicated to sharing experiences, visiting clinics locally, sharing recommendations related to patient-oriented service delivery, but also focused on the improvement of a multidisciplinary approach that was identified as one of the gaps in the needs assessment process.

Expanding Diagnostic Capabilities.

IAEA Experts from Austria and Italy visited Tbilisi with the aim of identifying the opportunities regarding the expansion of capabilities of diagnostic imaging and nuclear medicine. The visit of international experts was aimed at assessing the demand for PET-CT, developing recommendations and conducting the awareness-raising workshop.

Peer-group best practice learning sessions.

Several TeleECHO sessions were conducted to share the key learnings and best practices in executing the city projects among peers in C/Can cities that were facilitated by the global experts from C/Can partners.

Leadership Programme for Women in Oncology (LPWO).

One local cancer care professional successfully completed LPWO, which was organised in collaboration with ASCO. The program provided mid-career-level members with leadership skills training and experiences to become future leaders in different areas of medicine.



Collaboration for Research Methods Development in Oncology (CReDO) workshop.

C/Can supported one local professional, a radiation oncologist, to participate in the CReDO workshop on clinical research capacity development, which was organised by Tata Memorial Hospital in Mumbai, India. The goal was to provide researchers with comprehensive training in various aspects of clinical trial design and help to develop research ideas into structured protocols.



The **first Global Breast Cancer Initiative (GBCI) Framework Implementation Workshop** was held on 4 – 5 December 2023 in Tbilisi, Georgia. With the support of the Georgian Ministry of Health, C/Can and WHO ran a workshop with clinical experts from the city of Tbilisi to develop and refine Breast Cancer Action Plan (BCAP) to integrate what was learned from the local experts to establish a stepwise implementation strategy to meet the priorities that the Georgian Ministry of Health has defined. BCAP has been submitted to the MoH.



Ongoing projects

1. Cancer Registry (II) Project: addresses the main quality issues of the Tbilisi Cancer Registry, improving the coverage, completeness and reporting of cancer information for effective public health surveillance, planning, evaluation and resource allocation. Planned outputs:

- a. Assessment of the quality of cancer registration processes, identifying gaps and producing the appropriate recommendations
- b. Data assessment on cancer-related vital statistics
- c. Updating of the cancer registration process
- d. Dissemination of Cancer Registration processes changes

Learnings

What worked well

- A Multi-sectoral Engagement: The C/Can engagement process provided a platform for collaboration across multiple sectors, allowing an extensive assessment of the gaps in cancer care and the development of comprehensive solutions to address the identified priorities. C/Can cycle I demonstrated successful collaboration between public, private and international stakeholders.
- City-led solutions: The solutions were developed by local health professionals who understand the local needs better. As a response, their work was followed by tangible results and achieved impact for the Georgian cancer patients.
- Impact beyond cancer care: the outputs completed provide readily implementable solutions that comprehensively address cancer care with an overarching impact on the entire health system.
- Part of the International network: the C/Can engagement facilitated networking opportunities with the international cancer community, allowing establishment of communication, sharing of knowledge and collaboration for cancer care.

Challenges

- Lack of time: The majority of stakeholders involved in the C/Can process are healthcare professionals with very busy schedules, providing medical care. This leaves them with limited time for involvement in other activities, thus slowing their contribution.

Opportunities

- The C/Can Tbilisi cycle I produced instrumental documents for all aspects of cancer care delivery including project plans, SOPs, policy recommendations, training modules, development and quality assurance plans that can be used for fundraising to further their implementation.
- The C/Can Tbilisi Cycle I established a positive environment to formalise a new Cancer Board working under the MoH. The Cancer Board identifies the challenges related to cancer care, provides solutions and endorses the final decisions.
- The engagement provided opportunities to Tbilisi stakeholders for connection with International partners and the International cancer community that can be leveraged beyond the C/Can process.

Looking ahead

On 13 February 2025, the Government of Georgia and City Cancer Challenge (C/Can) signed a four-year Collaboration Agreement, reaffirming their shared commitment to strengthening cancer care in the country. Encouraged by the achievements in Tbilisi, this renewed partnership signals the start of a new phase of technical cooperation aimed at delivering significant improvements in the cancer care landscape. The collaboration will focus on strengthening early diagnosis, ensuring timely and high-quality diagnostics, and enhancing treatment pathways.

As a clear demonstration of its commitment, the Government of Georgia will transition the oversight of C/Can activities from the Tbilisi City Executive Committee to the newly established National Cancer Board, operating under the Ministry of Health. This institutional shift reflects a strategic move toward national ownership, improved coordination, and long-term sustainability of cancer care initiatives supported by C/Can.

Together, we look forward to building on our joint vision and improving the quality and accessibility of cancer care for the city.

Partnership

City Cancer Challenge and the Georgian Ministry of Health would like to thank all partners that have been involved in the initiative in Tbilisi, Georgia, including:

Financing partners

All networks of C/Can Funding partners supporting the CEPF with a special contribution from Swiss Development Agency, Roche and, MSD and Boehringer Ingelheim.

Technical partners

World Health Organization, American Society of Clinical Oncology (ASCO), American Society of Clinical Pathology (ASCP), International Atomic Energy Agency (IAEA), International Society of Nurses in Cancer Care (ISNCC), Catalan Oncology Center, Hospital Del Mar, Policlinico S.Orsola-Malpighi, Wiener Gesundheitsverbund Klinik Ottakring, Clinical Hospital Centre Zemun, National Cancer Institute.

Contact

CONTACT INFORMATION



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Annex

Annex 1 | Composition of the City Executive Committee

CITY EXECUTIVE COMMITTEE

Name	Position and institution
Tamar Gabunia	First Deputy Minister, Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia
Gela Chiviashvili	Head of the Department, Department of Healthcare and Social Services, Tbilisi City Hall
Maka Maglakelidze	Deputy Director, Todua Medical Center / Georgian Oncologist Association
Nia Sharikadze	Head of the Medical Oncology Department, Mardaleishvili Medical Center
Ekaterine Sanikidze	Director, Georgia Patients' Union, UICC Member Organization
Ana Mazanishvili	President, Europa Donna Georgia

Annex 2 | Composition of City Technical Committee

GROUP:	LEADER OF THE GROUP:
Basic Oncology Services	Nia Sharikadze Head of Oncology Department at Mardaleishvili Medical Centre

Members of the Committee Specialists

Laboratories

- | | |
|---|---|
| 1. Pathology | Armaz Mariamidze
Head of Pathology Research Center, Tbilisi central hospital (former railway hospital) |
| 2. Clinical laboratory | |
| 3. Hematology laboratory and Blood Bank | Maia Khutsishvili
Head of Laboratory of Oncology Research Center (Mardaleishvili Medical Center), S. Khechinashvili University Clinic - Head of Laboratory, Head of Laboratory of Tbilisi Cancer Center |
| | Levan Avalishvili
Director of Jo Ann Blood Bank |

Medical imaging

- | | |
|---------------------|---|
| 4. Radiology | Maka Kutateladze
Regional Hospital: "Medical Corporation Evex" Radiologist |
| 5. Nuclear Medicine | Natalia Shengelia
Nuclear Medicine Specialist, Head of Nuclear Medicine Division of Radiology Medicine Center |

Medical Oncology (adults)

- | | |
|------------------------------|---|
| 6. Medical Oncology (adults) | Ivane Kiladze
Todua Medical Center, Head of Oncology and Haematology Unit |
| 7. Oncohaematology (adults) | Nino Sharashenidze
Hematologist of M. Zodalava's Hematology Center, High Technological University Clinic, Head of Oncohematology and Bone Tissue Transplantation Center |

Paediatric Oncology

- | | |
|--|---|
| 8. Paediatric Oncology | Nino Totogashvili
Iashvili Clinic, Head of Oncohemological Department for Children |
| 9. Paediatric Oncohaematology | |
| 10. Bone Transplantation (adult and pediatric) | Tamar Kvachadze
Head of Hematology and Bone Transplantation Department, New Hospitals |

Members of the Committee Specialists

Radiotherapy

11. Radiotherapy

Nata Jankarashvili

Todua Medical Center, Head of Radiation Oncology Department

Surgical Care

12. Cancer surgery

Konstantine Mardaleishvili

Head of Scientific Research Center for Oncology (Mardaleishvili center), Tbilisi State Medical University Head of Department of dentistry, head and neck tumors).

Palliative and Supportive Care

13. Specialist in palliative and supportive care

Ioseb Abesadze

Universal Medical Center, Head of palliative care

GROUP:

Management of cancer care services

GROUP LEADER:

Maka Maglakelidze

Head of Oncology Department of Todua Medical Center (Deputy Director)

Members of the Committee Specialists

14. Specialist in professional education and training

Tamar Rukhadze

Ivane Javakishvili State University Vice Dean of the Faculty of Medicine of Tbilisi State University, Professor; Head of Clinical Oncology Department of Clinical Medicine Institute

15. Manager of a cancer services

16. Specialist in finance / budget

Tegniz Verulava

Health Care, Health Organization, Public Health, Health Policy, Health Sociology, Quality of Medical Services, Insurance, Social Medicine, Managed Health Care, Healthcare Management, Analyst full professor at Ilia State University

17. Specialist in statistics

Lela Serebrakova

Need to be confirmed, Expert in Health Financing

Nino Gredzelidze

NCDC Department of Statistics, senior specialist

GROUP:

Quality of cancer care

GROUP LEADER:**Nana Mebonia**

Head of NCDs Department, National Centre for Disease Control and Public Health of Georgia (NCDC)

Members of the Committee Specialists

- 18. Medical ethic
- 19. Cancer management guidelines and clinical protocols
- 20. Cancer registry
- 21. Expert in work safety

Ekaterine Sanikidze

(GPU)

Amiran Matitashvili

Head of Georgian Group of Young Oncologists Association, Oncologist at Mardaleishvili Clinic

Maia Kereselidze

Head of Medical Statistics Department, NCDC)

Eka Shekhlidze

Tbilisi State Medical University, Department of physics, biophysics, biomechanics and information technologies, responsible persio for nuclear and radiation workplace safety

GROUP:

Community Access

GROUP LEADER:**Ekaterine Sanikidz**

GPU, Head of Cancer Support Group

Members of the Committee Specialists

- 22. Expert in primary health care
- 23. Specialist on the network of oncology services providers
- 24. Coordinator of patients' survey

Mari Shikashvili

Caritas Czech Republic in Georgia, Quality improvement for primary healthcare in Georgia, Lead expert)

Sophio Kakaleishvili

Tvildiani Medical School

Anna Mazanishvili

Europe Donna Georgia, patient support organization

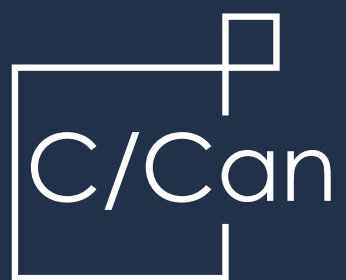
Annex 3 | List of participating Institutions

1. Todua Clinic
2. Mardaleishvli Medical Center
3. Caucasus Medical Center
4. Pathology Research Center
5. Universal Medical Center
6. Institute of Clinical Oncology
7. High Technology Medical Centre, University Clinic
8. National Center of Urology
9. Aversi Clinic
10. Radiation Medicine Center
11. National Screening Center
12. Khechinashvili University Clinic
13. Tbilisi Cancer Center (former Tbilisi Oncology Dispansery)
14. New Vision
15. Consilium Medulla-multiprofile clinic
16. Zodelava Hematology Center
17. Health House
18. Aladashvili University Clinic
19. Eristavi National Center of Experimental and Clinical Surgery
20. Zurab Shakarashvili Onco-haematological Clinic Lifemed
21. Innova
22. TSMU First University Clinic
23. New Hospitals
24. Megalab
25. Institute for Personalized Medicine
26. M. Iashvili Children's Central Hospital
27. German Hospital

Annex 4 | List of project teams and project coordinators

Project	Project Coordinator	Project team members
1. Quality of cancer care	Nino (Nia) Sharikadze Nana Mebonia	Irakli Sikharulidze Dina Kurdiani Ivane Kiladze Alexander Sulava Mardaleishvili Medical Centre Tako Esakia Armaz Mariamidze Natalia Jankarashvil Natalia Shengelia Amiran Matitashvili Ani Khmaladze Tiko Azanishvili Katie Bakanidze Lasha Turkiashvili Ioseb Abesadze
2. Pathology	Armaz Mariamidze	David Makaridze Ketevan Kankava Lali Tsivtsivadze Giorgi Didava Maya Sarishvili Alex Baidoshvili Giorgi Burkadze
3. Imaging	Natalia Shengelia	Tsisia Kakhadze Misha Baramia Maka Kutateladze Giorgi Tsivtsivadze
4. Radiotherapy	Natalia Jankarashvil	Maia Topeshashvili Keti Bakanidze Irakli Zumbadze Tiko Metreveli Beso Sokurashvili

Project	Project Coordinator	Project team members
5. Training and Education	Maka Maglakeidze	Irakli Kokhreidze Tamar Rukhadze Giorgi Kevlishvili Ana Bolkvadze Zaza Bokhua Ana Khmaladze
6. Cancer Registry I	Maia Kereselidze	Nino Grdzeldze Konstantin Kazanjan Nana Mebonia
7. Cancer Diagnostic Reimbursement	Irina Javakhadze	Nino (Nia) Sharikadze Natalia Jankarashvili Armaz Mariamidze Mariam Kutateladze Natalia Shengelia Dina Kurdiani Irakli Sikharulidze Tamar Rukhadze Ani Khmaladze Marina Maglakelidze Nino Cholokashvili
8. Requirements for quality cancer care	Irina Javakhadze	Tamar Esakia Maria Iacenko Mariam Samkharadze Archil Sharashenidze Davit Maisuradzei
9. Cancer Registry II	Maia Kereselidze	Konstantin Kazanjan Nino Chkhaberidze



<https://citycancerchallenge.org/>

