Review of Health and Medical Research in Australia
Terms of Reference

Preamble
Australia has long been home to some of the best scientific researchers and medical pioneers in the world. The successes of our researchers – both as individuals and as part of organisations – have meant less disease, better care, and improved quality of life and longevity for Australians.

All Australians benefit from the outcomes of health and medical research, as research is translated into improved primary and hospital care, aged care, and better preventative health strategies. Our national economy also benefits, as research findings lead to the development of innovative new industries as well as productivity benefits through better health outcomes.

The Commonwealth Government has been a consistent supporter of health and medical research. Government expenditure continues at record levels through the National Health and Medical Research Council (NHMRC). In 2010 the NHMRC committed $784.9 million across its funding schemes, and the 2011 Federal Budget provided a 4.3% increase in funding to the NHMRC. In addition, the Government, through the Health and Hospitals Fund, has committed $700 million to building and upgrading health and medical research and training facilities across Australia. There are further significant investments in health and medical research by other Commonwealth agencies such as the Commonwealth Scientific and Industrial Research Organisation (CSIRO), the Department of Innovation, Industry, Science and Research (DIISR), the Australian Research Council (ARC) and the Department of Education, Employment and Workplace Relations (DEEWR); by industry; by State governments; and to a lesser extent; by non-government organisations and through philanthropy.

Context
However, the landscape is changing. Over the last two decades the following changes have emerged:

- The burden of disease in Australia has altered. Chronic diseases, including those associated with ageing, and mental illness, are now the leading causes of morbidity and mortality.

- The sequencing of the human genome and the information and communication technology revolution have each accelerated our acquisition of new knowledge, while also transforming the type of resources and training required to apply these new initiatives in clinical practice.

- Twenty years ago, individuals and small groups could initiate and carry out meaningful research. This has changed, and in most cases significantly larger groups, often interdisciplinary in nature, are now required. New and emerging technologies make it easier for larger groups to work together to achieve more meaningful outcomes, but also require new types of support.

- There is growing recognition of the importance of translating discoveries from basic research into treatment rapidly, and ensuring that research breakthroughs become clinical practice.

- Australian’s health sector is undergoing significant structural reform and it is important that research activities align with this process, and can be used to assess which of the changes are of greatest value.
 Whereas Australia has been highly successful in research and development up to the proof of concept stage, there is broad agreement that significant opportunities exist to improve our success in turning these discoveries into outcomes, including commercial ventures, as noted in a number of recent studies (Grant Review 2004; Cutler Review 2008).

Given this, and the fact it has been more than a decade since the last strategic review of health and medical research (Wills 1998), it is timely for government as a major direct (NHMRC, CSIRO, hospitals, primary care) and indirect (taxation incentives, philanthropy) investor to consider how to optimise the future environment for health and medical research in this country in a fiscally sustainable manner.

Among other things, this requires a clear understanding of the current investment in this sector from both the government and the private sector, including industry, non-government organisations and philanthropy. There also needs to be a sharp focus on what the Government’s investment is buying and how the Commonwealth Government can get greater buy-in and involvement from other sectors.

**The Panel**

The Government has established an expert Panel of prominent individuals with experience in and understanding of: health and medical research; health service delivery to the community; business; and philanthropy, to conduct an independent review of health and medical research in Australia. Panel members have credibility among all the key stakeholder groups, relevant expert knowledge and extensive experience in advising governments.

The Panel will have access to expert advice, literature reviews and other information to inform its decision making process. It will be supported in utilising external technical assistance in key thematic areas through workshops and international best practice information. The Panel will be supported by an independent Secretariat.

**Matters for Review**

The review will take into account broader Government policy, including the Government’s fiscal strategy, and will focus on optimising Australia’s capacity to produce world class health and medical research to 2020, including reference to the following matters:

1. The need for Australia to build and retain internationally competitive capacity across the research spectrum, from basic discovery research through clinical translation to public health and health services research.
2. Current expenditure on, and support for, health and medical research in Australia by governments at all levels, industry, non-government organisations and philanthropy; including relevant comparisons internationally.
3. Opportunities to improve coordination and leverage additional national and international support for Australian health and medical research through private sector support and philanthropy, and opportunities for more efficient use, administration and monitoring of investments and the health and economic returns; including relevant comparisons internationally.
4. The relationship between business and the research sector, including opportunities to improve Australia’s capacity to capitalise on its investment in health and medical research through commercialisation and strategies for realising returns on Commonwealth investments in health and medical research where gains result from commercialisation.
5. Likely future developments in health and medical research, both in Australia and internationally.
6. Strategies to attract, develop and retain a skilled research workforce which is capable of meeting future challenges and opportunities.

7. Examine the institutional arrangements and governance of the health and medical research sector, including strategies to enhance community and consumer participation. This will include comparison of the NHMRC to relevant international jurisdictions.

8. Opportunities to improve national and international collaboration between education, research, clinical and other public health related sectors to support the rapid translation of research outcomes into improved health policies and practices. This will include relevant international comparisons.

9. Ways in which the broader health reform process can be leveraged to improve research and translation opportunities in preventative health and in the primary, aged and acute care sectors, including through expanded clinical networks, as well as ways in which research can contribute to the design and optimal implementation of these health reforms.

10. Ways in which health and medical research interacts, and should interact, with other Government health policies and programs; including health technology assessments and the pharmaceutical and medical services assessment processes.

11. Ways in which the Commonwealth's e-health reforms can be leveraged to improve research and translation opportunities, including the availability, linkage and quality of data.

12. The degree of alignment between Australia’s health and medical research activities and the determinants of good health, the nation’s burden of disease profile and national health priorities, in particular “closing the gap” between indigenous and non indigenous Australians.

13. Opportunities for Australia’s health and medical research activities to assist in combating some of the major barriers to improved health globally, especially in the developing world.

Timeframes