



# **Post-Acute Sequelae of COVID-19 (PASC) Research Plan Expert Advisory Panel**

## **Terms of reference**

### **Preamble**

The Medical Research Future Fund (MRFF) [Emerging Priorities and Consumer-Driven Research initiative](#) is providing \$613 million over 10 years from 2022-23 to support research to improve patient care, translate new discoveries into clinical practice and encourage researchers to work together with consumers.

This initiative will provide \$50 million in funding to support the Government's priority of improving outcomes for those experiencing Post-Acute Sequelae of COVID-19 (PASC), also known as long COVID, through the development and implementation of the MRFF PASC Research Plan, which will support delivery of the National PASC Plan.

### **Purpose of the Expert Advisory Panel (EAP)**

The EAP will provide the Minister for Health and Aged Care advice on research investments required to meet the following objectives:

- generate evidence on the current and future impacts of PASC in the specific Australian context (including individual health and wellbeing, carers, communities, health system)
- design and evaluate clinical pathways and models of care, co-led by general practitioners and primary care, for Australians with PASC, including to address inequities in access and outcomes
- generate new therapeutic approaches to prevent the occurrence of PASC and/or improve health outcomes for individuals with PASC.

In developing advice, the EAP is to consider priority populations, including but not limited to people living in rural, regional and remote communities, First Nations, and Culturally and Linguistically Diverse people.

## Key deliverables

The EAP will provide advice on priorities for research investment by developing the MRFF PASC Research Plan, outlining the short (1-2 years) and medium (3-4 years) term priorities for the \$50 million made available through the MRFF.

In doing so, the EAP will consider the outcomes the [House of Representatives Inquiry into Long COVID and Repeated COVID Infection](#), the National PASC Plan, and national (including state and territory based) and international knowledge and experiences. The EAP will also consider existing Australian Government investments in PASC, including the Long COVID Register managed by the Australian Institute of Health and Welfare.

## Membership

The EAP will consist of up to 9 members including the Chair and an international member.

The international member will be a researcher with expertise in PASC and/or other post-viral syndromes, who understands the Australian system and relevant activities occurring internationally. At least one member will be a consumer representative.

All other members will have research or clinical expertise or experience in PASC and/or other post-viral syndromes or health service delivery with a focus on primary care and health system implementation.

An [Australian Medical Research Advisory Board \(AMRAB\)](#) representative will be selected to attend EAP meetings to support the strategic alignment of MRFF PASC Research Plan priorities with the MRFF more broadly.

Professor Michael Kidd, Deputy Chief Medical Officer Primary Health Care and Adjunct Professor Ruth Stewart, National Rural Health Commissioner, will be ex-officio members.

## Term

Members will be selected and appointed by the Minister for Health and Aged Care for a 6-month term, to establish the MRFF PASC Research Plan by July 2023.

## Member applications for MRFF funding

Members will be ineligible to apply for funding from the MRFF PASC Research Plan grant opportunities that open during the term of the EAP and for one year following the cessation of the EAP. Members will be able to apply for MRFF grant opportunities outside of the MRFF PASC Research Plan during this time.

## Categorisation of PASC

There are broadly 3 categories through which the term 'PASC' can be understood, as each generally requires different levels and types of health care.

1. Post-viral syndrome: Short-term and most common. Symptoms of post-viral syndrome generally self-resolve within 3 to 6 months. People with post-viral syndrome may require management in primary care, including support and reassurance from their General Practitioner.
2. Disease and organ-specific conditions: Some people will experience medical conditions following COVID-19 that are medically explainable and readily diagnosable. In addition to management in primary care, supported by allied health, these people will require access to specialist care for management.
3. Medically unexplained conditions: A small proportion of people will experience medically unexplained sequelae that persist beyond 3 to 6 months, are difficult to diagnose and manage, and require specific multidisciplinary care; such as postural orthostatic tachycardia syndrome, fibromyalgia syndrome, and post infectious fatigue syndrome.

Some consideration should also be given to those who develop post-Intensive Care Unit (ICU) syndrome following ICU admission due to COVID-19.

## Logistical Arrangements

- EAP meetings will be held on an as required basis and at the discretion of the Chair.
  - It is expected that 3-6 meetings will be required to draft the MRFF PASC Research Plan.
- If a member is unable to attend, proxies will not be permitted.
- If required, arrangements will be made to seek agreement to items utilising out-of-session arrangements.
- Papers for meetings will be provided to EAP members at least one week prior to the scheduled meeting.
- The Australian Government Department of Health and Aged Care will be the Secretariat for the EAP. For non-urgent inquiries the following email address can be utilised: [MRFF@health.gov.au](mailto:MRFF@health.gov.au).

## Quorum

- Five members of the EAP are required to be in attendance at any meeting for a quorum to be achieved.
- If the Chair is unavailable to attend a scheduled meeting, the AMRAB member, or an identified deputy chair will assume this role.

## Declarations of Interest

Members must abide by the [MRFF Declaration of Interest Policy Statement](#). The Statement, and supporting documents, enables members to be aware of their obligation to disclose any

relevant interests that they may have, and to ensure that they effectively and consistently manage any conflicts of interest. All interests will be published on the MRFF website.

## **Remuneration**

Remuneration is provided for EAP members, with details outlined in the Member's Instrument of Appointment.

## **Implementation of the MRFF Research Plan**

The EAP will provide the MRFF PASC Research Plan to the Minister for Health and Aged Care for approval.

The Health and Medical Research Office will use the Research Plan to design grant opportunities that address the priorities for investment.

- Grant opportunity guidelines will be published on GrantConnect ([www.grants.gov.au](http://www.grants.gov.au)).
- Grant administration services will be managed by the National Health and Medical Research Council.

Applications received under each grant opportunity will be evaluated competitively through independent Grant Assessment Committees comprising Australian and international assessors with relevant expertise and experience.

Following recommendations from the Grant Assessment Committees, the Government will announce the successful recipients.

