

THE UNIVERSITY OF TASMANIA SUBMISSION TO THE SENATE INQUIRY INTO THE MEDICAL RESEARCH FUTURE FUND BILL 2015

The University of Tasmania broadly supports the Universities Australia submission to the Senate inquiry into the Medical Research Future Fund (MRFF) Bill 2015 (The Bill) and recognises that a 'whole of system' approach to funding medical research would be a positive outcome.

The Bill raises some unresolved issues for the higher education sector. For example, the potential interactions between the NHMRC and the MRFF, the need for a coordinated approach to medical research infrastructure, research training, research commercialisation and the translation of medical research to improved health outcomes.

The interaction between the NHMRC and the MRFF might require greater consideration of how to generate the strategic research coordination to influence the cultural, institutional and financial drivers of medical and health research and their translation into clinical practice. In the UK this approach occurs through the Office for Strategic Coordination of Health Research that sits above their Medical Research Council and National Institute for Health Research. This model might be considered in coordinating the MRFF.

The Bill might usefully clarify the relationship between the Australian Medical Research Innovation Strategy and Priorities, the National Research Priorities and the health and medical priorities of the States and Territories. For example, the University of Tasmania's health and medical research activities are influenced by the needs of the Tasmanian population, reflected in a formal partnership with the State government. Better overall coordination ensures the best use of public research funds.

With an increased focus on public support of medical research (through the existing support from the NHMRC) and added support from the MRFF, there is some concern that non-medical research (basic and applied) might suffer both a relative and absolute decline in public support. The consequences of an uneven support of research in Australian universities could well have far-reaching implications on national and international rankings. Most ranking systems are sensitive to the size and prioritising of research funding.

Of particular concern to the University is the need to clarify an overall framework of public investment in medical and health research. That framework should consider the appropriate scale and direction of long-term public investment in medical research, appropriate partnerships as well as the number and specialisation of medical research institutes and university medical research facilities. A more coordinated approach might improve the return and efficiency of Australian medical research.

With opening the MRFF to the private and public sectors, the current publically supported institutions – especially those in the university sector – that operate in a regulated peer-review environment, will be keen to understand the incentives and constraints placed on those with a more commercial orientation in public/private partnerships and in the private sector. We seek to understand how public funds and the increased contribution from philanthropic sources will be used to address public medical and health needs as well as meeting commercial expectations.

The proposed Bill should deliver a rigorous and transparent mechanism for identifying national health and medical research priorities as well as a strategy for their delivery (and reporting) through a competitive funding process. Once identified the process for attracting and evaluating research proposals would require a more explicit commitment to a national and international peer-review system of quality control.

The Bill indicates the powerful role of an Advisory Board in managing the MRFF and providing advice to government (through the Minister to the Cabinet) about its use, but the membership, constituency and powers of this Board are insufficiently clear. Additional effort is needed to ensure that priority setting is evidence-based and driven by demonstrated need rather than short-term political expediency.

Australian medical research is highly regarded internationally and has received many accolades both to individuals and as a system. We have also seen significant translation of publicly-funded basic research into commercially successful products (e.g. Cochlear, ResMed, Gardasil, CSL). Each of these areas of success has depended ultimately on the nature of the decision-making for funding, which for the past 60 years has been peer-review driven. We support continuation of such a system into the MRFF.

An ongoing dilemma for research in Australian universities that the MRFF Bill could address is the meeting the indirect (unsupported) cost of research. Currently a great deal of the research supported by public funds (particularly though national competitive research grants) fails to fund the full costs of research personnel, infrastructure, training consumables and a range of associated costs, leaving universities to pay an additional 65-100% beyond the value of the grants from their own resources. These additional costs limit the competitiveness of Australian research and require extensive cross subsidies.

The University of Tasmania welcomes the MRFF concept, looks forward to working with the Australian government during the implementation of the funds, suggests that additional work would improve the focus and effectiveness on the proposed Bill and commends one of the key recommendations of the McKeon Review (2013) that medical research should have a direct translational impact on health care delivery.