NSW Health and Medical Research Strategic Review - Phase 2 Consultation: Submissions close 5pm Monday 26th September 2011

The New South Wales (NSW) Government is undertaking a review on the current performance of health and medical research in NSW and recommending a strategic plan covering the next ten years.

The Review is being led by Mr Peter Wills, AC, with the support of a Review Committee which has been appointed by Minister Skinner (Minister for Health and Minister for Medical Research). The Review will assess the current performance of health and medical research in NSW, make recommendations on how the sector can be improved, better coordinated and leveraged; and propose ways in which the NSW health needs, clinical trials and commercialisation capacity can be better supported or expanded. For more information about the Strategic Review go to http://www.health.nsw.gov.au/omr/review/

The Strategic Review is undertaking widespread consultation with health and medical research experts and members of the public.

The first consultation phase was undertaken from 21 July to 15 August 2011. More than 350 people participated through an online survey open to all stakeholders; and/or a series of roundtable discussions and individual interviews with a broad range of stakeholders. The themes emerging from the on-line survey, group and individual interviews have informed the development of the NSW Health and Medical Research Strategic Review Issues Paper.

This second phase of consultation (5 September to 26 September 2011) will elicit feedback on the Issues Paper.

The third phase of consultation (24 October to 14 November 2011) will elicit feedback on the Draft Interim Report.

We invite all interested parties to contribute to the open submission process on the Issues Paper by completing this online questionnaire. The questionnaire comprises 5 sections:

- 1. Details of Respondent
- 2. Preliminary Strategy Framework
- 3. Options for Action
- 4. Potential Outcomes
- 5. Other Comments

The Issues Paper and a copy of the questionnaire are available at

http://www.health.nsw.gov.au/omr/review/

If you have any documents that you feel would be useful to the Review, please send to omr@doh.health.nsw.gov.au

Respondents are unable to print a copy of this questionnaire upon completion. Copies are available on request from the Office of Medical Research on omr@doh.health.nsw.gov.au

Details of respondent are required, but other sections can be completed at the user's discretion.					
Name	g.*				
Di	r Louise Dunn				
Orga	nisation *				
А	Australian Society for Medical Research				
Email	*				
as	smr@alwaysonline.net.au				
attribu	sent that excerpts or quotes from this submission can be used in the review reports and uted to the author * TE: All submission authors will be listed in an appendix of the final report.				
⊗	Yes				
0	No				
	of Respondent (your main role) ase choose only one response				
\circ	Research Administration				
\circ	Student				
\circ	Researcher 6+ Years post doc				
\circ	Researcher 0-6 Years post doc				
\circ	Research Assistant/ Technician				
\bigcirc	Research Manager				

\circ	Health Services Manager
\circ	Clinician-Researcher
\circ	Clinician / Health Practitioner
\circ	Policy Maker
⊗	Other
If othe	er, please specify
D	Director, Australian Society for Medical Research NHMRC Postdoctoral Fellow
_	loyer / Place of Work or Study (your main employer) ease choose only one response
0	University
\circ	Hospital / Health Service
\circ	Research Institute
\circ	Government
\circ	Finance
\circ	Industry
\circ	Non-Government / Not for Profit Organisation
⊗	Other
If othe	er, please specify
1	Australian Society for Medical Research
	s of Research Involvement (your main focus) ease choose only one response
\circ	Basic/Biomedical
\circ	Population Health
\circ	Health Services
0	Health Policy

\circ	Clinical Research			
※	Other			
If othe	r, please specify			
D	irector, Australian Society for Medical Research			
	A Preliminary Strategy Framework for health and medical research in NSW is presented in the Issues Paper.			
Is the	Preliminary Strategy Framework comprehensive?			
※	Yes			
0	No			
0	Don't know			
Is the	Preliminary Strategy Framework useful?			
⊗	Yes			
\circ	No			
0	Don't know			

Please provide feedback on the Preliminary Strategy Framework

H O' CC SC	he Preliminary Strategy Framework clearly defines the ongoing strengths and current weaknesses of MR in NSW in comparison to other states, Australia and our global performance; opportunities to vercome the weaknesses and improve overall performance have been identified. However, a critical omponent of the medical research arm appears not to be individually addressed - the need for basic cience as a foundation of medical research as discussed in point a) in the "Options for Action" omments section. Moreover, the exceptional real-dollar returns for investment in medical research or NSW are not extrapolated from Australian data. Nor is the Australian data mentioned in the Issues					
aı	aper, albeit one slide (121) in the accompanying Fact Base. In seeking further commercialisation nd investment in HMR in NSW it would seem prudent to state the Australian values, if not the ISW data should it be presently delineated, as discussed in point b) in the "Options for Action".					
	Strategic Review Advisory Committee has proposed Options for Action to improve health and cal research in NSW.					
Do th	ne proposed Options for Action address the key issues for health and medical research in 17?					
※	Yes					
0	No					
0	Don't know					

Are there other important Options for Action?

- a) While it is canvassed in "5.3 Build an Innovative Research Culture: 5.3.1a Develop Career Paths for Researchers" that increased support for early career researchers, post-doctoral fellowships and personal funding is required to strengthen the workforce there remains strong preferential language in assisting clinical-translational research foremost. Basic science is a requisite for translational medicine research, and vice versa, as unmet clinical needs in medicine generate scientific endeavour. These two arms of medical research should be represented as inexorably linked and a continuum necessary for research excellence.
- b) The real-dollar value exceptional return for investment in Australian HMR is conspicuously absent from the Issues Paper and lightly represented in the Fact Base. It is also unclear if this information is available pertaining specifically to NSW. This information would seem necessary given the stated need to enhance engagement with commercial partners and venture capital. For example, "the return on investment in Australian HMR is around 117%, surpassed only by that of the mining (159%) and wholesale/retail sectors (438%). The health research and development return on investment is also well above that the average gross rate of return presented within the Productivity Commission (2007) review (65%-85%). In real-dollar values, for every dollar invested a maximum of \$6 in health benefits to Australians is returned..." [Access Economics. Exceptional Returns II: The Value of Investing in Health Research & Development in Australia. In; 2008, http://www.asmr.org.au/Publications.html]

From the Options for Action in the Issues Paper and any additional actions you identified in your response above, please nominate what you consider to be the five priority actions needed to improve health and medical research in NSW

- 1. Reducing the "fragmented" system of HMR funding in NSW & strategically investing in HMR
- 2. Building a globally-relevant research capacity through NSW Government funding & infrastructure
- 3. Workforce: Development and retention of basic science, translation and clinical medicine researchers
- 4. Investment and collaboration with industry, commercialisation opportunities & venture capital
- 5. Building an innovative research culture

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For each action, please provide a rationale or evidence to support your priorities

Please send any supporting documents to omr@doh.health.nsw.gov.au

- 1. NSW-funded HMR is perceived as disparate/inaccessible with no discrete department to deal with
- 2. VIC-funded HMR is out-performing NSW HMR per capita
- 3. As addressed in Issues Paper Section 4.4
- 4. As addressed in Issues Paper Section 4.5 & 4.7
- 5. As addressed in Issues Paper Section 5.3

medical research in NSW. Are the Potential Outcomes appropriate?				
○ No				
O Don't know				
Please provide specific feedback on the Potential Outcomes				
The three broad Potential Outcomes collectively address and highlight the benefits that arise from investing in HMR in NSW. A metric that is not canvassed is the retention of basic scientists, translational researchers and clinician researchers within NSW. This is critical as many early caree researchers make the decision to follow the funds, both interstate (Victoria and Queensland) and overseas, or along other career paths.				

The Strategic Review Advisory Committee has identified three Potential Outcomes for health and

Please provide any other comments you may have that relate to the Issues Paper.

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	ase provide any facts, case studies or additional references to support the Review. Please send any supporting documents to omr@doh.health.nsw.gov.au
	People Make Research Happen - Planning the Health and Medical Research Workforce 2010-2019. Prepared for The Australian Society for Medical Research by Dr Deborah Schofield, Sydney, October
	2009. Research Resea
	Perceptions in Health and Medical Research — Rewards and Career Concerns of Australian Medical Researchers. Written by Dr Sarah Meachem in The Australian Society for Medical Research
	Newsletter, August 2008.
	Exceptional Returns - The Value of Investing in Health R&D in Australia II. Prepare for the Australian Society for Medical Research by Access Economics, Canberra, June 2008.
TL -	ank you for making a submission to the New Couth Weles Health and Madical Description
	ank you for making a submission to the New South Wales Health and Medical Research
Slíč	ategic Review.
The	ere will be one further opportunity to contribute to the Strategic Review through providing

comment on the Draft Interim Report from 24 October to 14 November 2011.