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## Consultation purpose

The Australian Medical Research and Innovation Strategy (Strategy) is determined by the Australian Medical Research Advisory Board (AMRAB). The current Strategy covers the period 2016-2021, with the next Strategy (2021-2026) to be registered before 8 November 2021. The [Medical Research Future Fund Act 2015](#) (MRFF Act) requires AMRAB to undertake a consultation process before determining a Strategy.

The Australian Medical Research and Innovation Priorities (Priorities) that are in force must be consistent with the Strategy. Therefore, the Priorities are being revisited at the same time to ensure their alignment with the next Strategy.

As required by the MRFF Act, the current Strategy was developed to ensure a coherent and consistent approach is adopted in the funding of medical research and innovation from the MRFF. In determining the current Priorities, a number of matters were taken into account, such as burden of disease, delivery of practical benefits to and greatest value for Australians, and complementarity to other financial assistance for medical research and medical innovation.

### *AMRAB is seeking your views on the current Strategy and the related Priorities*

AMRAB is interested in hearing your reflections on the current Strategy and the related Priorities, specifically your views on:

- whether they could be improved to better meet their purpose set out in the MRFF Act
- the critical current and future issues and factors the next Strategy and Priorities should address to guide Medical Research Future Fund (MRFF) investments and options to address these, and
- how the Strategy and Priorities can account for the significant impact of COVID-19 on health services and the research sector.

This consultation is an opportunity to ensure that an updated Strategy is meeting its purpose as described in the MRFF Act, accounting for critical current and future issues and factors (e.g. primary prevention), and will continue to allow the MRFF to fund research to address national health priorities and deliver practical benefits from medical research and medical innovation to Australians.

It is important to keep in mind that the MRFF is not the sole funding source for health and medical research in Australia. It is a priority-led fund that is additional, and complementary, to existing medical research and innovation funding, such as the National Health and Medical Research Council, which mainly funds investigator-led projects and programs.

The consultation process will consist of:

- this document as guide
- a webinar on 28 September 2021 – see page 10
- a Roundtable with key stakeholders by invitation on 30 September 2021 – see page 11
- written submissions through the Consultation Hub to be completed by 11 October 2021 – see page 10.

## Introduction

The MRFF, established through the MRFF Act, is an endowment fund preserved in perpetuity that provides a secure additional revenue stream for health and medical research and innovation in Australia.

The MRFF provides grants of financial assistance to support health and medical research and innovation. These grants support the translation of research to improve the health and wellbeing of all Australians.

The MRFF is managed by the Future Fund Board of Guardians, which invests the assets of the Fund. The Board of Guardians is required to maintain the nominal value of the credits made to the MRFF in order to enable a predictable and secure ongoing flow of funding for health and medical research and innovation.

To guide the funding disbursements from the MRFF, the independent AMRAB must determine a Strategy and the related Priorities through a consultation process. In line with the [MRFF funding principles](#), the Government considers which initiatives will reduce burden of disease, provide practical benefits, and deliver greatest value for all Australians. The Australian Government takes the Priorities into account when making funding decisions.

### *Australian Medical Research and Innovation Strategy*

The MRFF Act specifies that:

- AMRAB must determine a Strategy for ensuring that a coherent and consistent approach is adopted in providing financial assistance under the Act for medical research and medical innovation that is in force for 5 years
- in determining the Strategy, AMRAB takes into account the national strategy for medical research and public health research prepared for the purposes of paragraph 16(2)(c) of the *National Health and Medical Research Council Act 1992*, as well as any other relevant matter.

The current Strategy (2016-2021) has provided a wide-ranging platform that has allowed the MRFF to be responsive to current health challenges, while continuing to fund projects that stimulate health and medical research across the entire research pipeline and achieve the MRFF's strategic objectives.

### *Australian Medical Research and Innovation Priorities*

The MRFF Act specifies that AMRAB must determine Priorities for providing financial assistance for medical research and medical innovation that are in force for 2 years – the current Australian Medical Research and Innovation Priorities 2020-22 are due to expire in November 2022.

The Priorities must be consistent with the Strategy that is currently in force and are considered by the Minister for Health before the Australian Government decides on the disbursement of funding from the MRFF.

The MRFF Act requires AMRAB to take into account the following when determining the Priorities:

- the burden of disease on the Australian community
- how to deliver practical benefits from medical research and medical innovation to as many Australians as possible
- how to ensure that financial assistance provided through the MRFF provides the greatest value for all Australians

- how to ensure that financial assistance provided through the MRFF complements and enhances other financial assistance provided for medical research and innovation
- any other relevant matters.

The third set of Priorities were developed by AMRAB following a national consultation process in 2020. They were developed to ensure investment in research is flexible and meets the needs of the changing health and medical research landscape. They also support continued funding of national health priorities to guide research, helping to improve its effectiveness and efficacy to deliver better health outcomes whilst ensuring a focus on prevention and equity of access will provide a sustainable health system for all Australians. They remain consistent with the vision, aim, objectives and six strategic platforms identified in the current Strategy (2016-2021).

### *The 10-Year Investment Plan for the MRFF*

As part of the 2019-20 Budget, the Government announced a \$5 billion, [10-year investment plan](#) for the MRFF that directs MRFF funding into four themes.

- Patients. Funding innovative treatments, supporting clinical trials, and delivering more advanced health care and medical technology to improve the health of all Australians.
- Researchers. Supporting our researchers to make breakthrough discoveries, develop their skills and progress their careers in Australia.
- Research missions. Helping researchers think big to tackle significant health challenges through investment, leadership and collaboration.
- Research translation. Moving research ideas from the lab to the clinic, so that medical discoveries become part of clinical practice for GPs, specialists and hospitals and non-hospital based health services/systems.

There are 20 initiatives under these themes, funded over 10 years to harness innovation, provide vital infrastructure, improve patient outcomes, and generate jobs and economic growth.

The 10-year investment plan provides a framework within which MRFF funding is disbursed with regard to the Strategy and Priorities. The Strategy, Priorities and the 10-year investment plan provide transparency and predictability to researchers and industry about the strategic objectives of MRFF disbursements.

### *MRFF Investments to date*

Information on how the MRFF has provided financial assistance for medical research and medical innovation is captured in a financial assistance report (report). As required by the MRFF Act, the report covers the time period when the most recent Priorities were in force.

To date, two reports have been tabled in Parliament, for Priorities ([2016-2018](#)) and Priorities ([2018-2020](#)).

The report for Priorities (2018-2020) highlighted the increases in MRFF funding that has continued to support and promote developments in current and future health and medical research projects, including:

- 79 grant opportunities opened across 20 MRFF initiatives; and
- 366 grants — with a combined value of \$983.1 million — were awarded; this is a significant increase in funding since the 2016–2018 report.

As at 31 July 2021, the MRFF has provided \$1.8 billion of funding to support 670 projects.

A summary of the disbursement of MRFF funds from its inception to date under the MRFF themes and initiatives is included as [Attachment A](#).

### *The MRFF Monitoring, Evaluation and Learning Strategy, 2020-21 to 2023-24*

The [MRFF Monitoring, Evaluation and Learning Strategy](#) sets out the principles and approach for monitoring and evaluating the MRFF and allows the Department to assess impact and outcomes of funding to ascertain whether the MRFF is achieving its intended objectives. It will also support continuous refinement and improvement of MRFF initiatives over the course of the 10-year investment plan.

The Monitoring, Evaluation and Learning Strategy provides a conceptual framework for the MRFF that integrates the aims, visions, objectives and impact measures from the five MRFF outcome measures identified in AMRAB's inaugural Strategy 2016-2021. It also defines the measures of success, with their relative contribution towards the five MRFF outcomes (impact measures) on each of the eight measures of success.

In line with the MRFF 10-year investment plan, AMRAB will consider how the next Strategy can continue to guide ongoing assessment of the performance of the MRFF.

## Context of Strategy and Priority Setting

This first Strategy (2016-2021) and related Priorities set out the vision, aims and objectives for the MRFF. They have provided a wide-ranging platform that has allowed the MRFF to be responsive to the current health challenges, while continuing to fund projects that stimulate health and medical research across the entire research pipeline and achieve the MRFF's strategic objectives.

The primary aim of research priority setting is 'to gain consensus about areas where increased research effort including collaboration, coordination and investment will have wide benefits'<sup>1</sup>. Common priority setting criteria include consideration of: magnitude of a health problem, the likelihood of reducing disease burden, cost-effectiveness, the present level of knowledge, current resourcing, equity considerations, sustainability, ethical aspects and local research capacity<sup>2</sup>.

### *Impacts of COVID-19*

The health and medical research sector has been at the forefront of contributions to global efforts to understand and control the COVID-19 pandemic.

Given the rapidly evolving circumstances and impacts of the pandemic in Australia, there continues to be uncertainty within the health and medical research sector about its ability to continue to operate at its previous capacity. Potential impacts on operations, including local lockdowns, campus shutdowns and institutional restrictions on travel, have affected on the ability of sector to progress research. The changing financial situation of Australian universities may also impact on health and medical research, especially for early to mid-career researchers. The pandemic has also disproportionately impacted on women and this is likely to have flow-on effects on the health and medical research sector.

During Australia's response to the pandemic, the health services have been modified or required to operate in new or different ways. While the rapid implementation of telehealth has immediately improved Australian's access to health care, there is the potential for new and/or emerging health issues to arise over time. This could include, for example, the long-term impacts of COVID-19, later diagnosis of cancer due to delayed cancer screening, extra support being required to help manage health and wellbeing due to prolonged lock downs, and impacts on care as a result of the health system being under strain.

The pandemic will have direct and indirect influences on how health and medical research and innovation can improve the health and wellbeing of Australians.

### *Considering Burden of Disease*

Burden of Disease (BOD) measures 'the difference between a population's actual health and its ideal health (that is, if everyone lived as long as possible and no one lived with illness or injury' (AIHW). It uses the summary metric of disability-adjusted life years (DALY).

- The Australian Burden of Disease Study 2018 includes 219 diseases, as well as estimates of the burden attributable to 40 individual risk factors, such as alcohol use and physical inactivity.
- Living with illness or injury (non-fatal burden) caused slightly more total disease burden than dying prematurely (fatal).
- In 2018, the 5 disease groups that caused the most burden (total disease burden) (65%) were cancer, musculoskeletal conditions, cardiovascular diseases, mental & substance use disorders and injuries.
- The leading 5 diseases causing burden (% of total DALY) in 2018 were: coronary heart disease (6.3%), back pain & problems (4.5%), dementia (4.0%), chronic obstructive pulmonary disease (3.5%), lung cancer (3.2%).

- Total rates in Australian have reduced by 13% between 2003 and 2018 due to a 24% decline in fatal burden.
- 38% of disease burden could have been avoided or reduced as modifiable risk factors are involved (most importantly tobacco use and obesity).

Australia's methodology for estimating national burden of disease is well-established. While global BOD studies have been effective in identifying worldwide problems and neglected tropical diseases, this lens means rarer ('orphan') diseases and treatments can be neglected despite large numbers of people being affected.<sup>3</sup> BOD does not account well for comorbidity and multimorbidity – common in ageing populations<sup>4</sup> or availability of effective preventative measures. Equity issues may be neglected as a result of the focus of the BOD on the opportunity for disease reduction.<sup>3</sup>

Perhaps the most important limitation of BOD for a *research funder* is that it 'measures problems and not the value of solutions'.<sup>5</sup> Some countries do use BOD to guide research investment.<sup>6</sup> Despite its limitations BOD data is an important consideration along with other matters specified in the MRFF Act, for national health and medical research priority setting. This does not limit consideration of diseases not categorised to be of a higher burden, such as other chronic and infectious diseases, including emerging diseases, which would satisfy other matters for priority consideration under the MRFF Act.

### *Considering the Value of Research*

Government funding has an important role to play in supporting research to address national needs, including inequities in health care and outcomes, areas of underinvestment, and the translation of outcomes to impact to ensure benefits for the community. A focus on 'public good' research investment allows Government to complement and align with other funders such as private investors and not-for-profit foundations and organisations.

Research funding decisions need to take account of costs and the feasibility of proposed investigations.<sup>3</sup> There are important elements of values created by research such as improved wellbeing, hope and social connection that are sometimes (but not necessarily) neglected in metrics focused on physical health outcomes or economic returns.

It is important also to consider the distribution of funds across the portfolio of grants, bearing in mind that research budgets are limited and all choices have an opportunity cost. While value for money is usually considered at the level of individual research proposals in Australian grant selection criteria, comparative value for money across research proposals is often overlooked.<sup>7</sup> Although it is complicated to estimate cost-effectiveness of research<sup>8</sup>, a comprehensive framework for doing this has been developed by Australian researchers.<sup>9</sup> Such an analysis should take into account the stage of the research: it is easier to demonstrate the cost-effectiveness of applied research that is close to producing impact<sup>3</sup> but it is also important to recognise the need for research along the entire pipeline, from basic science to translation to impact.

Finally, value requires the consideration of the tricky issues that make impact of successful research more or less likely. Have end-users (such as health services, industry or consumers) been engaged throughout? Is there a commercial market and investor appeal? Does the health system have the necessary absorptive capacity? Is there a funder with remit and political support likely to be able to use the results to implement widespread change to benefit the Australian population? Are they able to invest over the required timeframe? Are the pre-conditions necessary for implementation (e.g. workforce) present? Is the proposed solution affordable and also feasible within existing funding arrangements?



## The Investment Funds Legislation Amendment Bill 2021

The [Investment Funds Legislation Amendment Bill 2021](#) (the Bill) is currently before the Australian Parliament. The Bill proposes changes to a number of pieces of legislation including the MRFF Act. The changes made by the Bill will enhance the ability of the Future Fund Board of Guardians and the Future Fund Management Agency to continue investing the funds held in the MRFF for the benefit of future generations of Australians.

Specific changes to the MRFF Act are intended to improve the effectiveness and streamline the administration of the MRFF including aligning the timing of the Strategy and Priorities. It is proposed that the duration of future Australian Medical Research and Innovation Strategies will change from 5 years to 6 years and the duration of future Australian Medical Research and Innovation Priorities will change from 2 years to 3 years. Possible implications for this consultation are presented at [Attachment B](#).

## Consultation questions

### Overview

The MRFF Act specifies that AMRAB must determine a Strategy and Priorities to support the operation of the MRFF.

### Strategy

The MRFF Act specifies that AMRAB must determine a Strategy for ensuring that a coherent and consistent approach is adopted in providing financial assistance for medical research and medical innovation.

With that in mind:

1. Could the current [Strategy](#) be altered to better meet the purpose set out in the MRFF Act? If so, how?
2. What are the most critical current and future issues and factors impacting on the health system, including primary prevention, and on the health and medical research sector that the next Strategy needs to address?
3. Suggest options for how the next Strategy could address these critical issues and factors?
4. Given the new and significant impact of COVID-19 on health services and health research, how should the new Strategy address COVID-19 related topics and impacts?

### Priorities

The MRFF Act specifies that AMRAB must determine Priorities for providing financial assistance for medical research and medical innovation. The Priorities must be consistent with the Strategy that is in force. In determining the Priorities, the AMRAB must take into account the following:

- a. the burden of disease on the Australian community;
- b. how to deliver practical benefits from medical research and medical innovation to as many Australians as possible;
- c. how to ensure that financial assistance provided under this Act provides the greatest value for all Australians;
- d. how to ensure that financial assistance provided under this Act complements and enhances other financial assistance provided for medical research and medical innovation;
- e. any other relevant matter.

With that in mind:

1. Could the current [Priorities](#) be improved to better address the requirements under the MRFF Act? If so, how?
  - This could include consideration of what elements of the Priorities work well to guide MRFF investments and what could be improved for research translation and impact?
2. What are the most critical current and future issues for the health system and the health and medical research sector that the next Priorities need to address through research translation/implementation?
3. Suggest options for how the next Priorities could address these critical issues?
4. Given the new and significant impact of COVID-19 on health services and health research, how should the new priorities address COVID-19 related topics?

**Note: each field will have a word limit of 200 words.**

## Consultation Process

AMRAB has agreed the following means will be used to conduct a national consultation on the next Strategy and related Priorities. All details and booking arrangements for the consultation are available on the [MRFF website](#). We invite the Australian public, organisations with expertise in health and medical research and innovation, consumer representatives, clinicians and health services managers to contribute to this process.

The consultation process will commence in September 2021 through an online consultation hub to provide opportunities for written submissions to be considered. A targeted webinar and virtual roundtables on specific issues and themes will also provide opportunities to inform AMRAB's deliberation. AMRAB will consider all feedback from the consultation process, including written submissions, and draw on your contributions to refresh the Strategy and Priorities.

Information about consultation activities will be provided on the [MRFF Website](#). You can receive the latest information, by subscribing to the MRFF newsletter.

### *Public Submissions*

Online public submissions opened from 20 September 2021 on the Health Department's Consultation Hub, which can be accessed from the [MRFF website](#).

Submissions are to be provided using the online form on the Consultation Hub. Respondents are asked to identify themselves and if they are affiliated to an organisation. There are word limits and there is no allowance for attachments.

Those making a public submission are reminded that this is not an opportunity to submit proposals for funding. Rather, the explicit purpose of the public submission opportunity is to solicit opinions and perspectives on what AMRAB should consider in determining the next Strategy and related Priorities.

Submissions **will not** be considered if:

- it is a proposal for a grant or a specific request for funding; or
- the submission does not align with the requirements of the MRFF Act.

AMRAB has also determined Principles of Engagement (see below) that Stakeholders are asked to have regard to in developing their submissions. Multiple submissions are welcome, however duplicates will not be considered.

Respondents will have an opportunity to indicate consent to have their submission made public on the MRFF website. The decision to post consenting public submissions on the website will be that of AMRAB. All submissions will be reviewed and analysed by the Australian Government Department of Health's Health and Medical Research Office (HMRO) to inform AMRAB's considerations.

### *Public Forums via webinar*

AMRAB has committed to holding a public forum via webinar, providing an opportunity for attendance from stakeholders from all States and Territories in September 2021 with further details to be provided on the [MRFF website](#).

Stakeholders will receive a presentation from AMRAB about the consultation process and AMRAB's perspectives about the Strategy and related Priorities refresh. Stakeholders will also have the opportunity to ask questions to inform their approach to their written submission.

## *Targeted Roundtable Discussions via videoconference*

AMRAB will hold a targeted roundtable to engage with specific stakeholder groups to address particular issues arising from the written submissions. Invitations will be limited and subject to the decision of AMRAB.

## Principles of engagement

In conducting this consultation process, AMRAB has determined the following principles for engagement. Individuals, representatives and organisations are asked to respect these principles in articulating points of view and position statements on the direction of a new Strategy and related Priorities.

1. Support for research excellence is paramount, and reference should be made to the [MRFF Funding Principles](#).
2. Appreciate that the MRFF is intended to be transformational - it is a once in a generation opportunity to benefit Australians.
3. Avoid duplication of priorities and effort, and where appropriate identify opportunities to leverage opportunities through collaboration with the purpose of maximising impact.
4. Appreciate the focus on whole-of-system benefit, and stakeholders are encouraged to think beyond single disease or study self-interest.
5. Recognise the importance of priority identification that promotes health and social justice, eliminates discrimination and protects access and equity.
6. Focus on how a refresh of the current Strategy can continue to allow the MRFF to fund national health priorities that improve research effectiveness, efficacy, quality and safety to deliver improved health outcomes and a sustainable health system for all Australians.
7. Focus on how the Priorities can continue to operate on a refreshed Strategy, including reframing to be more outcome-oriented.
8. Be cognisant of the Government's \$5 billion, [MRFF 10-year investment plan](#), announced as part of the 2019–20 Budget. Submissions should focus on how the priorities may inform funding decisions within the 10-year plan themes and initiatives rather than seek to redefine them.
9. Be cognisant of the [MRFF Monitoring, evaluation and learning strategy 2020-2021 to 2023-2024](#) which sets out the principles and approach used to monitor and evaluate the MRFF.
10. Recognise that whole-of-government approaches are needed to address some complex issues in health and medical research, including indirect costs, research quality and evaluation.
11. Be respectful of other stakeholder perspectives, experiences and opinions.

**IMPORTANT NOTE:** This consultation process is not an opportunity for the submission of funding proposals. MRFF initiatives operate consistent with the [Commonwealth Grants Rules and Guidelines](#) and are offered in line with the Government's [MRFF Funding Principles policy](#). Opportunities to submit proposals may only occur within the parameters of grant opportunities advertised via [GrantConnect](#).

## Further Information

### Key Contacts

For any questions relating to this consultation please contact the Department of Health's HMRO team via [MRFF@health.gov.au](mailto:MRFF@health.gov.au).

### Staying Informed

Monitor the [MRFF website](#) as it will be regularly updated with notifications of opportunities to either engage with AMRAB or reflect on the ongoing national conversation.

### Useful documents

- [Australian Medical Research and Innovation Strategy 2016-2021](#)  
<https://beta.health.gov.au/resources/publications/australian-medical-research-and-innovation-strategy-2016-2021>
- [Australian Medical Research and Innovation Priorities 2020-2022](#)  
<https://beta.health.gov.au/resources/publications/australian-medical-research-and-innovation-priorities-2020-2022>
- [Medical Research Future Fund Act 2015](#)  
<https://www.legislation.gov.au/Details/C2016C00406>
- [Investment Funds Legislation Amendment Bill 2021](#)  
[https://www.aph.gov.au/Parliamentary\\_Business/Bills\\_Legislation/Bills\\_Search\\_Results/Result?bld=r6759](https://www.aph.gov.au/Parliamentary_Business/Bills_Legislation/Bills_Search_Results/Result?bld=r6759)
- [MRFF 10-Year Funding Plan](#)  
<https://www.health.gov.au/resources/publications/medical-research-future-fund-mrff-10-year-investment-plan>
- [MRFF Funding Principles](#)  
<http://beta.health.gov.au/resources/publications/medical-research-future-fund-mrff-funding-principles>
- [MRFF Monitoring, evaluation and learning strategy 2020-2021 to 2023-2024](#)  
<https://www.health.gov.au/resources/publications/mrff-monitoring-evaluation-and-learning-strategy-2020-21-to-2023-24>
- [MRFF Financial Assistance Report 2016-2018](#)  
<https://www.health.gov.au/resources/publications/financial-assistance-to-support-the-australian-medical-research-and-innovation-priorities-2016-2018>
- [MRFF Financial Assistance Report 2018-2020](#)  
<https://www.health.gov.au/news/report-on-financial-support-for-medical-research-and-innovation>
- [MRFF Investment Initiatives](#)  
<https://www.health.gov.au/initiatives-and-programs/medical-research-future-fund/all-mrff-initiatives>
- [AMRAB membership background](#)  
<https://beta.health.gov.au/committees-and-groups/australian-medical-research-advisory-board-amrab>
- [Commonwealth Grants Rules and Guidelines](#)  
<https://www.finance.gov.au/resource-management/grants/>
- [GrantConnect](#)  
<https://www.grants.gov.au/>
- [National Health and Medical Research Council](#)  
<https://www.nhmrc.gov.au>
- [Business Grants Hub](#)  
<https://industry.gov.au/smallbusiness/Pages/Business-Grants-Hub.aspx>

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## Attachments

### *Attachment A: MRFF Investment in Research to Date*

The Medical Research Future Fund (MRFF) has provided over \$1.8 billion of funding to support Australian researchers address both national and global health challenges from its commencement in 2016 to 31 July 2021.

Over the past five years the platforms and priorities provided through the MRFF's Strategy and Priorities have guided research investment in key areas of strategic need, including in response to emerging health challenges such as the bushfires and the COVID-19 pandemic which has impacted populations on a global level.

In July 2020, the MRFF reached maturity at \$20 billion with the Government's final credit of \$3.2 billion. This sustainable source of funding will continue to support important health and medical research projects over the long term, informed by the the Australian Medical Research and Innovation Strategy and Priorities.

The following table outlines the disbursement of funding from the MRFF since its inception. Further information about the themes and initiatives through which MRFF funding has been disbursed is accessible from the [MRFF page](#) of the Department of Health website.

MRFF Initiative	Total Expended and Committed (since 2016) \$m	Total Funding Agreements (since 2016)
<b>Patients</b>	<b>564.847</b>	<b>220</b>
Emerging Priorities and Consumer Driven Research	336.292	91
Clinical Trials Activity	212.290	120
Global Health	16.265	9
<b>Researchers</b>	<b>238.615</b>	<b>135</b>
Frontier Health and Medical Research	151.109	38
Researcher Exchange and Development within Industry	32.000	1
Clinician Researchers	55.507*	96
<b>Research Missions</b>	<b>426.595</b>	<b>179</b>
Australian Brain Cancer Mission	21.791	8
Million Minds Mental Health Research Mission	64.809	18
Genomics Health Futures Mission	150.533	43
Dementia, Ageing and Aged Care Mission	40.113	27
Indigenous Health Research Fund	56.803	17
Stem Cell Therapies Mission	25.624	27
Cardiovascular Health Mission	57.923	30
Traumatic Brain Injury Mission	8.999	9
<b>Research Translation</b>	<b>549.780</b>	<b>136</b>
Preventive and Public Health Research	159.723	72
Primary Health Care Research	13.852	11
Rapid Applied Research Translation	64.880	27
Medical Research Commercialisation	146.300	7
National Critical Research Infrastructure	152.143	12
Research Data Infrastructure	12.883	7
<b>TOTAL</b>	<b>1,779.838</b>	<b>670^</b>

*^Figure of 670 is made up of 668 Awarded Grants and 2 Announced Grants \*Figure for Clinician Researchers does not include indexation calculated separately and paid at specific times across the life of the funding agreements  
Figures are as at 31 July 2021*



## *Attachment B: Proposed changes to the Medical Research Future Fund Act 2015*

The proposed changes to the MRFF Act are set out in Schedule 3 of the Bill, and are intended to improve the effectiveness, and streamline the administration of the MRFF.

### ***If the Act commences before the end of 8 November 2021***

#### *Strategy*

- The new Strategy resulting from the upcoming consultation will be a 6-year strategy (the *Australian Medical Research and Innovation Strategy 2021-2027*).
- Rationale: The current Strategy, the *Australian Medical Research and Innovation Strategy 2016-2021* is a 5-year strategy and ceases at the end of 8 November 2021. Irrespective of when the Act commences, the current Strategy will cease and will need to be replaced by a new Strategy.

#### *Priorities*

- The Priorities resulting from the upcoming consultation *will be new Priorities* (the *Australian Medical Research and Innovation Priorities 2021-2024*) and will be in effect for 3-years, ceasing to be in force at the end of 8 November 2024.
- Rationale: The current Priorities, the *Australian Medical Research and Innovation Priorities 2020-2022*, are 2-year priorities but will cease to be in force at the end of 8 November 2021 (i.e. a year early). The new Priorities will be required to come into force at the same time as a new Strategy is registered.

### ***If the Act commences after the end of 8 November 2021***

#### *Strategy*

- Upon passing of legislation, the 5-year Strategy will become a 6-year Strategy, and cease to be in force at the end of 8 November 2027.
- Rationale: The new Strategy resulting from the upcoming consultation will initially be registered as a 5-year Strategy (as required by the current legislation). Should the Act come into force after 8 November 2021, transitional provisions will automatically update the timeframes for the Strategy to 2021-27.

#### *Priorities*

- Upon passing of legislation, the current Priorities will cease. Priorities resulting from the upcoming consultation will then be registered as the new Priorities and these will cease to be in force at the end of 8 November 2024.
- Rationale: The current Priorities, the *Australian Medical Research and Innovation Priorities 2020-2022*, will be in force until the legislation is passed.

A summary of the changes is available on the MRFF website at:

<https://health.gov.au/resources/publications/proposed-changes-to-the-medical-research-future-fund-act-2015>.