

14 July 2023

Medical Research Future Fund
Department of Health and Aged Care
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To whom it may concern,

RE: Improving alignment and coordination between the Medical Research Future Fund and Medical Research Endowment Account

We welcome the opportunity to provide a submission to the consultation on the alignment and coordination of the Medical Research Future Fund and the Medical Research Endowment Account.

Background

For more than 70 years, the Australian Healthcare and Hospitals Association (AHHA) has been the national voice for public healthcare, maintaining its vision for an effective, innovative, and sustainable health system where all Australians have equitable access to healthcare of the highest standard when and where they need it.

As a national peak body, we are uniquely placed, in that we do not represent any one part of the health system. Rather, our membership spans the system in its entirety, including – public and not-for-profit hospitals, Primary Health Networks, community, and primary healthcare services.

Our research arm, the Deeble Institute for Health Policy Research connects universities with a strength in health systems and services research, ensuring our work is underpinned by the evidence.

Through these connections, we provide a national voice for universal high-quality health care. It is a voice that respects the evidence, expertise, and views of each component of the system while recognising that siloed views will not achieve the system Australians deserve.

Response

The stakeholder consultation on reforming Medical Research Future Fund (MRFF) and Medical Research Endowment Account (MREA) administration and governance structures is an opportunity for meaningful improvements to grant funding of health research in Australia. As the primary funding source for Australian health research, any alterations to streamline the current grants system must be aligned with the needs and priorities of the Australian healthcare system and the community.

As a precursor to developing a national health and medical research strategy, the selection and implementation of a proposed model must consider implications for health services and systems research and their fundamental contribution to advancing Australians' health and wellbeing. It is of critical importance that advances made to the administration of both funds, value a diversity of expert input throughout application assessments, are especially recognised and built upon.

Health services and systems research

Health services and systems research is the study of the funding, organisation, and delivery of health services to provide evidence that influences policy and improves public health. To date, investment in research through the MRFF and MREA has primarily focused on clinical and epidemiological research. However, research that focuses on health policy, health economics, health services and more directly on the structure, function, resilience, and capacity of the health system is urgently needed.

Health services and systems research underpins effective management and delivery of services through a multidisciplinary approach and should be aligned with the health system's needs. The benefits of impactful health services and systems research are characterised by the following:

- Improved patient access, satisfaction, experiences and quality of life;
- Improved care quality and safety;
- Reduced burden of disease and improved population health;
- Improved affordability through improved system efficiencies, and reducing low value care;
- Improved health workforce capacity, productivity, and response preparedness; and
- The capacity of the sector to adapt to a changing health system environment.

Supporting health systems research

Events in recent years have highlighted the need to support health systems research that identifies patterns within the health system, its policies, and structures for better management of systems shock (COVID-19 pandemic), natural disasters (bushfires), and slow longitudinal challenges (chronic disease, increasing health systems costs) in an economic, rigorous manner that incorporates the complexity of the problems we face.

In consideration of this, any future administration of the MRFF and MREA must focus more on research outcomes aimed at improving the structure, function, resilience, and capacity of the Australian healthcare system. To better reflect the needs of the health system, health systems research that translates evidence into practice, innovative models of care delivery, policy and public health improvements should be prioritised.

While retaining the unique and valuable aspects of both funds for achieving different objectives, there is a need for a clear, consistent, and accessible application process for researchers engaged in health systems research to participate, with associated assessment metrics relevant to these disciplines. This process should be reinforced through increased transparency in decision-making to foster stakeholder trust.

Current inadequacies between grant stream application processes have been identified in the consultation discussion paper, where it has been suggested that "some clinicians are unaware how their research fits into Australia's health and medical research strategy," and are consequently self-selecting out of grant applications. This outcome leaves Australian healthcare poorer by depriving the system of valuable clinician-led research and is incompatible with long-term ambitions to reform the health system.

Funding models through both grant streams must also properly consider the unique aspects of health systems research which arise from interdisciplinary approaches and strong collaborations between the health sector, universities, and industry, and where outcomes and impacts are gained over the long term. Appropriate research funding is needed to create robust evidence for sustained

health system improvement. Explicitly, health systems research requires the ability to include scalable pilot studies, that are assessed and funded locally, as part of research in local health networks rather than via a national assessment process. However, these projects require extended support for evaluation and the scalability of high-quality outcomes. Accommodation of differing research methodologies through MRFF and MREA grants is necessary to support the delivery of high-quality research and high-quality care.

By reforming MREA and MRFF grant processes and priorities to support and target health services and systems research, research funding can be more appropriately aligned to strategic objectives in current public health strategies and an upcoming national health and medical research strategy.

The MRFF and MREA have been established with complementary purposes to advance Australia's national wellbeing through advancements in our health. This can only be achieved through support for governance structures, systems objectives, and grant processes which acknowledge the pivotal role played by health services and systems research.

Yours sincerely,



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