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## ***AMA submission – Australian Medical Research and Innovation Five Year Strategy***

**Submitted by:** Australian Medical Association (AMA)

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The AMA welcomes this opportunity to provide input to the development of the Australian Medical Research and Innovation Five year Strategy.

The AMA represents members across the full spectrum of medical practice and medical interests. These members have been alerted to the MRFF consultation and the opportunity to make submissions directly to the MRFF on research priorities. Other than these comments in relation to the Strategy, the AMA is not making specific proposals for research priorities.

### **MRFF strategy and priority process**

The AMA looks forward to publicly-funded medical research that demonstrably improves the health of Australians, including through preventive health and population health research. The MRFF should foster and enable a robust medical research culture, creating an expanding body of completed medical research as well as increasing medical research capacity.

In doing so, the MRFF strategy and priority setting process will be enhanced by drawing directly on the expertise and existing investment in research priority setting in the National Health and Medical Research Council (NHMRC). The MRFF should be used to maximum effect and impact by taking account of the strong health and medical research already funded by NHMRC, and targeting areas of ‘value add’ research.

### **Healthcare challenges**

The major challenges facing Australia’s health system and healthcare are generally well-understood. These challenges should provide the starting point and destination for medical research.

They include ageing of the population, increasing prevalence and burden of chronic disease and the increasing volume of care. They also include how healthcare is provided and the operation of factors that help or hamper clinical care.

They appear against the backdrop of a broadly effective and reasonably cost effective system, judged against international outcome and cost comparisons, but a system with significant room for improvement.

For example, within this overall context, access to healthcare and the achievement of health outcomes are mixed across different individuals and sub-population groups. Research can inform whether and to what extent such variations occur and how improvements can be made.

Research can also inform how the health needs of ageing population can best be addressed and how the burden of chronic disease can be reduced, across the spectrum of prevention, population health, primary and acute care, and more effective care strategies including better coordinated care and transitions between types of healthcare.

In addition, two areas that tend to be less well-served by medical research currently are health systems and health financing, in the context of Australia's particular health system and financing arrangements.

Important questions in these areas that research can help inform include what are overall funding needs for healthcare, how well do current health financing mechanisms work in supporting clinical care and from other perspectives, including patients, providers and funders, how do different financing mechanisms and responsibilities interact, what is the potential need for and applicability of other health financing models, given trends in health costs and likely pressures.

Finally, a direct challenge to the achievement of outcomes from medical research is translation and implementation. These are a focus for research in themselves, but can also be advanced by requiring (or at least encouraging) individual medical research to explicitly address how the research findings can be implemented.

The AMA remains interested in the progress of research undertaken under the strategy and priorities. The provision to set priorities on a bi-annual basis will provide a natural opportunity to check-off with stakeholders on progress of the strategy.

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