



Australian Government

National Health and Medical Research Council

CORPORATE PLAN 2025-26



NHMR C

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Acknowledgement of Country

NHMRC acknowledges the Traditional Custodians of country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.



Message from the CEO

On behalf of the National Health and Medical Research Council (NHMRC), I am pleased to present the NHMRC Corporate Plan 2025-26.



It is an exciting time for health and medical research as we work towards Australia's first National Health and Medical Research Strategy. Led by its independent Chair, Ms Rosemary Huxtable AO PSM, and supported by the Department of Health, Disability and Ageing and NHMRC, the strategy will set a unified national direction to strengthen and leverage Australia's world-leading research capability to deliver health, social and economic outcomes for the Australian community.

Public consultation on the draft strategy is taking place over the second half of 2025, as we head towards its implementation from 2026.

The strategy aims also to optimise the substantial funding that supports health and medical research – including from NHMRC, the Medical Research Future Fund (MRFF) and other Australian Government programs, as well as through states and territories, industry, philanthropy and private investment – and to foster greater coordination to create a more productive and efficient research ecosystem.

Now that our new joint advisory committees are established and meetings are well underway, the work to progress greater alignment and coordination between the MRFF and NHMRC's grant program funded through the Medical Research Endowment Account (MREA) will continue this year. To date, this new shared structure between the funding agencies has enabled NHMRC Council and the MRFF's Australian Medical Research Advisory Board (AMRAB) to provide streamlined advice on the health and medical research landscape and align our funding data, policies and processes more closely. Examples of some of our shared policy statements are given below.

NHMRC funding for research is provided through a range of competitive research grant programs and is one part of a complex funding system that supports scientific discovery in Australia. NHMRC supports high-quality research that advances medical knowledge and, ultimately, delivers health benefits to the Australian community. We remain committed to upholding rigorous peer review processes that ensure funding decisions are fair, transparent, and grounded in the highest standards. We will also continue to implement evidence-based improvements to further strengthen the quality and integrity of peer review decision making.

Within the coming year, NHMRC will continue to foster Australian participation in international and global networks and collaborative health and medical research, strengthening our ties with global funding agencies and organisations. Shifts in the geopolitical environment, technological developments, including artificial intelligence (AI), and global health challenges like climate change and pandemic preparedness, all underlie the growing importance of global collaboration.

NHMRC is engaged in active discussions with other international research funders, including through the Heads of International Research Organisations (HIROs), about the significant policy and strategic challenges facing global research efforts. I am confident that we can continue to foster international partnerships and provide funding opportunities for researchers to collaborate across borders.

I was pleased also to host the international Board of the Human Frontier Science Program (HFSP) Organization at NHMRC offices in Canberra from 6-8 July 2025. HFSP is an international initiative that supports cutting-edge research in the life sciences, with a strong emphasis on interdisciplinary and international collaboration.

NHMRC is committed to embedding equity in health research, with the aim to address systemic barriers that drive health inequity. We will continue to apply an equity lens across our grant program and policies, and this year we will focus on developing an initiative to support research that promotes health equity for rural, regional and remote communities. We also continue to apply initiatives to achieve gender equity in grant funding and to drive equitable outcomes for Aboriginal and Torres Strait Islander researchers and communities.

NHMRC is also committed to reducing health inequities and ultimately improving health outcomes for all by addressing gaps in our understanding of sex and gender differences in health and medicine. In 2024, NHMRC and the Department jointly authored and released a new Statement on Sex, Gender, Variations of Sex Characteristics and Sexual Orientation in Health and Medical Research. This year, NHMRC and the Department will progress implementation of the statement in grant application and assessment processes for both NHMRC and MRFF grant programs.

We will continue to actively promote consumer and community involvement, including participation in grant assessment and other NHMRC activities. This year we will continue our collaboration with the Consumers Health Forum of Australia and the Department (for the MRFF) in progressing the review of the Statement on Consumer and Community Involvement in Health and Medical Research, which is expected to be released in late 2025, following extensive stakeholder consultation with research funders, research institutions, researchers and the community.

Equity and community involvement are key pillars for building and maintaining community trust in science, which is more important than ever. Also foundational to community trust is maintaining the highest standards for the conduct of research – including rigorous methodology, transparency and ethical conduct.

This year, together with the Australian Research Council, we will continue to engage the research community in a dialogue on strengthening confidence in the integrity of Australian research and fostering public trust in science. We will also continue to maintain guidance on the ethical conduct of research, including continuing to oversee the implementation of a clinical trial in mitochondrial donation through the work of the Embryo Research Licensing Committee and undertaking a review of the Australian Code for the Care and Use of Animals for Scientific Purposes.

NHMRC also maintains the highest standards for robust, evidence-based and transparent processes for developing health advice and guidelines. This year, NHMRC is progressing the development of clinical practice guidelines for Myalgic Encephalomyelitis / Chronic Fatigue Syndrome (ME/CFS) – which will provide long awaited advice on the diagnosis and management of ME/CFS within primary care. NHMRC is also developing new national guidelines for the care of trans and gender diverse people under 18 with gender dysphoria, and progressing the review of the Australian Dietary Guidelines. Each of these guidelines will be underpinned by a rigorous review of the available evidence and follow transparent development and decision-making processes, informed by experts, and the views of consumers, community groups and other people affected by the guidelines.

There is much to do in the coming year and now more than ever, our focus on building a culture that embraces innovation will be critical in supporting the health and medical research sector to continue to deliver on improvements to the health and wellbeing of all Australians.

This year will see us embark on our refresh project for NHMRC's end-to-end grant management system, Sapphire. This project marks a shift in how the platform will be hosted, supported and developed, reflecting our ongoing commitment to building confidence in Sapphire - reducing administrative burden, optimising data capability and building an innovation culture. We are also continuing to explore the use of AI and LLMs (large language models) to provide new insights into NHMRC's data and support research impact reporting and evaluation.

As we enter this new financial year, I commend the resilience, hard work and commitment of our fantastic staff at NHMRC that make all this possible. We are also proud to work with the Australian health and medical research sector that ensure the success of NHMRC's mission of building a healthy Australia.

Statement of preparation

As the accountable authority of NHMRC, I present the *NHMRC Corporate Plan 2025-26*, which covers the four-year period of 2025-26 to 2028-29. It has been prepared as required under paragraph 35(1)(b) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and section 16 of the *National Health and Medical Research Council Act 1992* (NHMRC Act).



Professor Steve Wesselingh
Chief Executive Officer

15 July 2025

NHMRC's values



INTEGRITY

Doing the right thing



TRANSPARENCY

Building trust



EXCELLENCE

Achieving the highest standard



INNOVATION

Driving positive change



COLLABORATION

Working together


















INCLUSION

Embracing equity and diversity

NHMRC Corporate Plan 2025-26

Building a Healthy Australia

PURPOSE	<div>INVESTMENT</div> <div>Create knowledge and build research capability through investment in the highest-quality health and medical research and the best researchers.</div>	<div>TRANSLATION</div> <div>Drive the translation of health and medical research into public policy, health systems and clinical practice and support the commercialisation of research discoveries.</div>	<div>INTEGRITY</div> <div>Maintain a strong integrity framework underpinning rigorous and ethical research promoting community trust.</div>									
NHMRC Council and Committees (including shared NHMRC-MRFF advisory committees)												
STRATEGY	<div>STRATEGIC PRIORITIES</div> <div>Support the National Health and Medical Research Strategy</div> <table><tr><td colspan="2">Harmonise the MRFF and MREA</td><td>Maintain excellence in peer review</td></tr><tr><td>Champion consumer involvement</td><td>Embed equity in health research</td><td>Bolster confidence in research integrity</td></tr><tr><td colspan="2">Foster translation and commercialisation</td><td>Promote prevention and public health</td></tr></table> <div>HEALTH PRIORITIES</div> <div><div>Aboriginal and Torres Strait Islander health</div><div>Artificial intelligence in health</div><div>Emerging health threats and emergencies</div><div>Multiple long-term conditions</div></div>			Harmonise the MRFF and MREA		Maintain excellence in peer review	Champion consumer involvement	Embed equity in health research	Bolster confidence in research integrity	Foster translation and commercialisation		Promote prevention and public health
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Champion consumer involvement	Embed equity in health research	Bolster confidence in research integrity										
Foster translation and commercialisation		Promote prevention and public health										
COOPERATION	<table><tr><td>Consumers and community groups</td><td>Industry organisations</td></tr><tr><td>Commonwealth agencies</td><td>States and territories</td></tr><tr><td>International and global partners</td><td>Philanthropic organisations</td></tr></table> <div>Researchers and research organisations</div>			Consumers and community groups	Industry organisations	Commonwealth agencies	States and territories	International and global partners	Philanthropic organisations			
Consumers and community groups	Industry organisations											
Commonwealth agencies	States and territories											
International and global partners	Philanthropic organisations											
Governance and accountability												
OPERATING CONTEXT	<div><div>OPERATING ENVIRONMENT</div><div><div>CAPABILITY PRIORITIES</div><div><div>Optimise ICT and data capability</div><div>Refresh the Sapphire grants platform</div></div><div>RISK OVERSIGHT AND MANAGEMENT</div><div><div>Stabilise financial sustainability</div><div>Enhance external communications and outreach</div><div>Build an innovation culture</div></div></div></div>											
ACTIVITIES	<div>INVESTMENT</div> <div><ul style="list-style-type: none">Research strategy and policyGrant opportunitiesGrant Hub service deliveryGrant administrationSapphire capability</div>	<div>TRANSLATION</div> <div><ul style="list-style-type: none">Research translation strategyInternational engagement strategyResearch impact reportingGuidelines developmentGuidelines standards and approvals</div>	<div>INTEGRITY</div> <div><ul style="list-style-type: none">Research integrity frameworkResearch quality strategyHuman and animal research ethics guidelinesEmbryo research regulation</div>									
PERFORMANCE	<div><ul style="list-style-type: none">High-quality researchBroad range of research areasCommunity needsEffective and efficient reviewResearch capability and equity</div> <div><ul style="list-style-type: none">Evidence-based healthClinical practice guidelinesPublic health guidelinesEnvironment health guidelinesImpact case studies</div> <div><ul style="list-style-type: none">Responsible and ethical conduct of research, including research involving human embryos</div>											

Purposes

NHMRC's purposes support our mission of *building a healthy Australia* and collectively capture NHMRC's legislated functions.



Legislative context

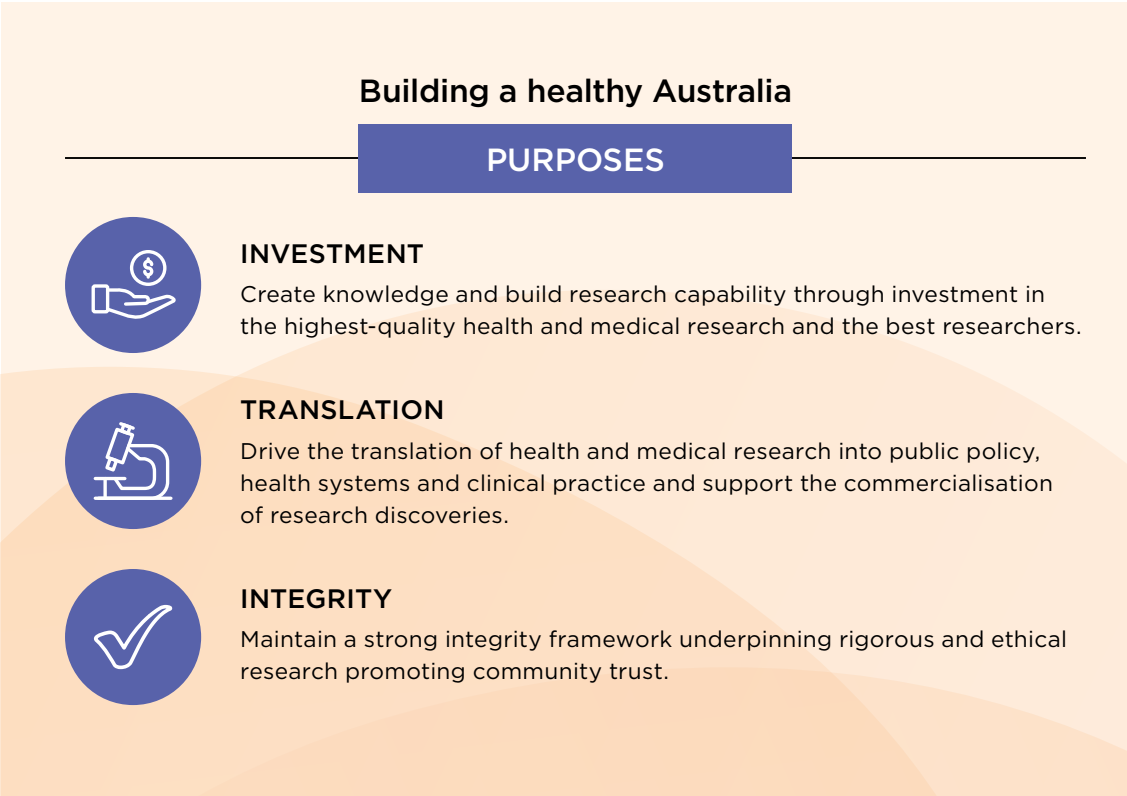
NHMRC is an independent statutory authority within the Health, Disability and Ageing portfolio. We operate under the *National Health and Medical Research Council Act 1992* (NHMRC Act), *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and *Public Service Act 1999*.

The NHMRC Act establishes NHMRC’s core functions as being to:

- fund health and medical research and training (through the application of the Medical Research Endowment Account), and
- issue guidelines and advise the community on improving health (including on the prevention, diagnosis and treatment of disease and the provision of health care) and on ethical issues relating to health.

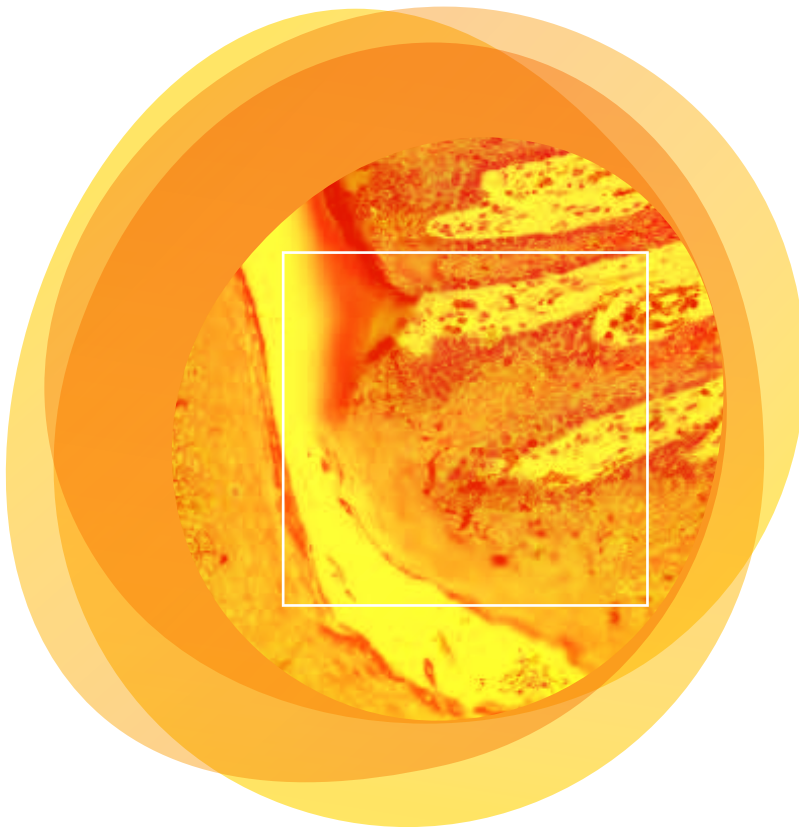
NHMRC also administers and has legislated functions under the *Research Involving Human Embryos Act 2002* and the *Prohibition of Human Cloning for Reproduction Act 2002*. In addition, NHMRC exercises some functions under the *Medical Research Future Fund Act 2015*.

Figure 1: NHMRC’s mission and purposes



Strategy

The NHMRC Act requires the CEO to develop a strategy for health and medical research and to identify major national health issues likely to arise during the period covered by this plan. In considering these issues, the CEO consults with NHMRC Council, its Committees and the Minister before determining issues that are within NHMRC's scope.

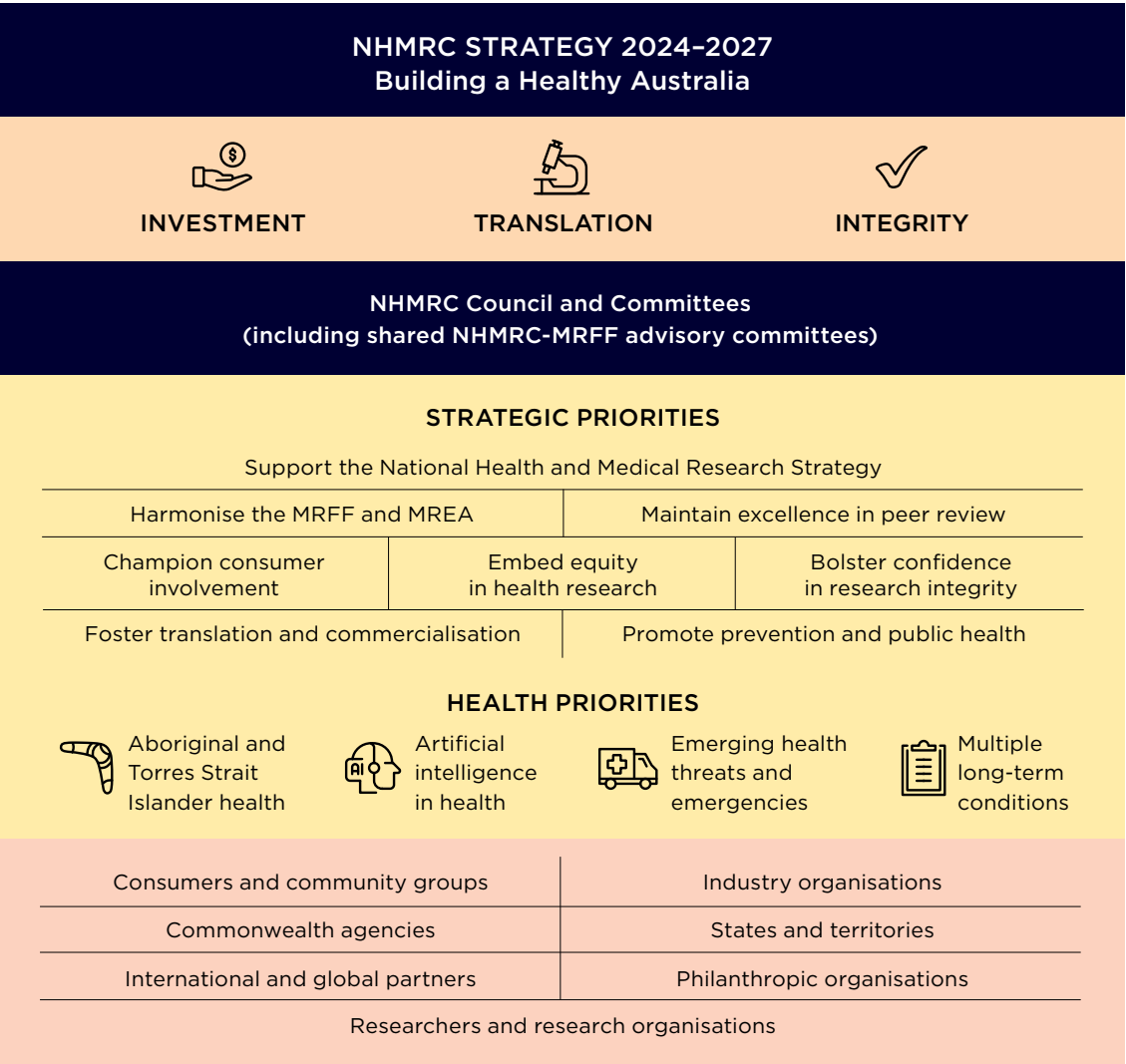


Overview

NHMRC’s strategy for health and medical research helps to focus our activity to ensure we achieve our mission of building a healthy Australia, and contributes to the broader research and innovation system in Australia.

In 2024, the NHMRC CEO endorsed strategic and health priorities for 2024–2027, which are at the core of the strategy. The development and implementation of NHMRC’s strategy and priorities is overseen by NHMRC Council and Committees, and subject to review by the NHMRC CEO as required as part of the annual corporate plan.

Figure 2: NHMRC’s strategy for 2024–2027



NHMRC Council and Committees

The CEO is supported in fulfilling the legislative functions under the NHMRC Act by the expert and independent advice of NHMRC Council, Principal Committees and other committees and expert working groups.

Through NHMRC Council and Committees, researchers, healthcare professionals and consumers contribute to the work of NHMRC and provide a bridge to the community, industry and the research and health sectors. They help guide NHMRC's strategy for health and medical research.

As part of new collaborative arrangements with the Department of Health, Disability and Ageing to progress and improve alignment and coordination between the Medical Research Future Fund (MRFF) and NHMRC's Medical Research Endowment Account (MREA), a shared NHMRC-MRFF advisory committee structure has been in effect since 1 July 2024.

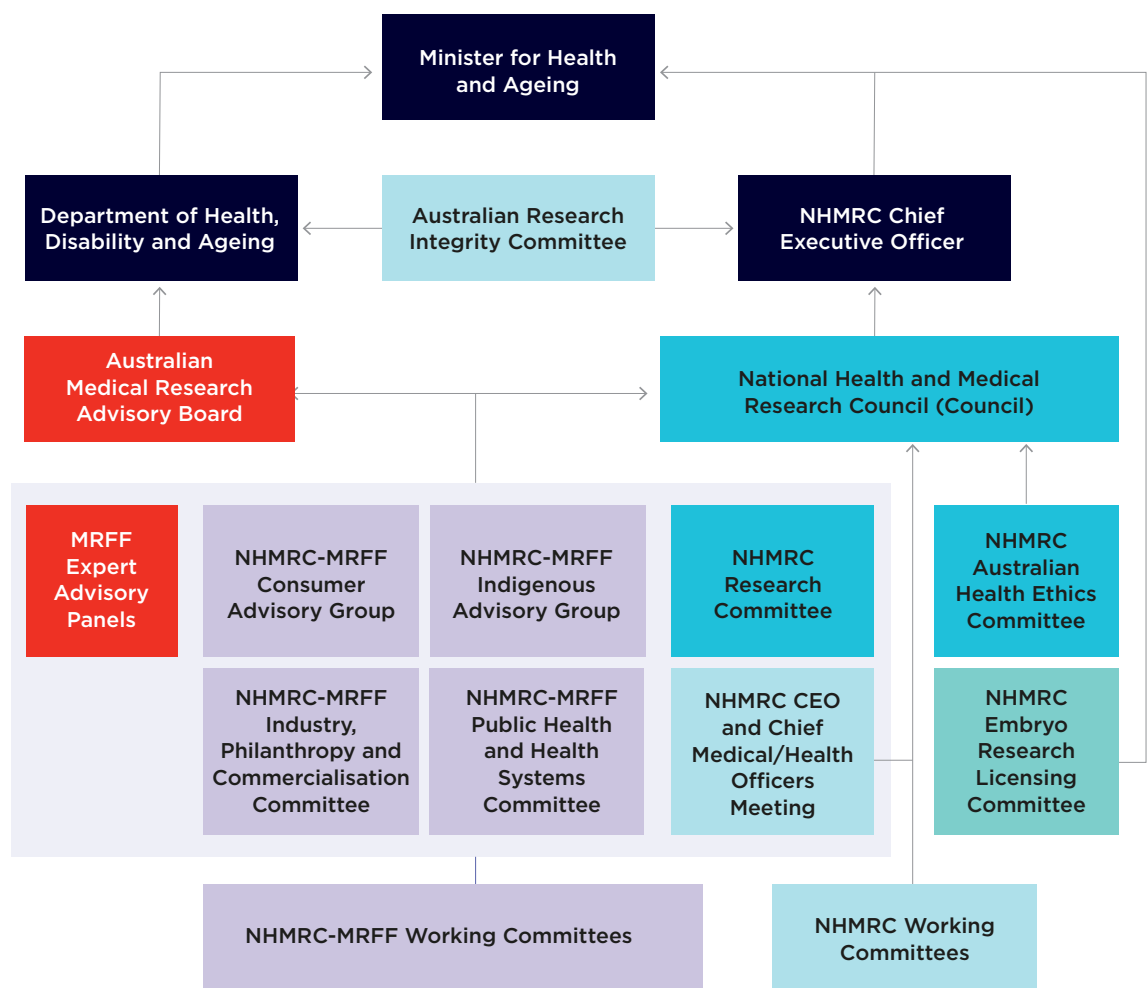
As part of these arrangements, NHMRC Council and the MRFF's Australian Medical Research Advisory Board (AMRAB) are working closely together to provide holistic advice on the health and medical research landscape in Australia, including on the MRFF and the MREA, supported by a range of shared or linked advisory committees.

These NHMRC-MRFF advisory committees are focused on stronger engagement with industry and philanthropy, clinicians and policy makers across the health system, consumers and the community, and with Aboriginal and Torres Strait Islander health researchers and communities.

NHMRC Council, Principal Committees and NHMRC-MRFF advisory committee arrangements, as well as other NHMRC committees that support the full range of NHMRC functions, are shown in Figure 4.

NHMRC Council and Principal Committees are appointed every 3 years, with the 2024-2027 triennium ending on 30 June 2027.

Figure 3: NHMRC and MRFF advisory committee arrangements



Strategic priorities

NHMRC’s strategic priorities are areas of focused activity where NHMRC will lead (or make significant contributions to) policy, programs, initiatives or activities that directly contribute to building a healthy Australia.

The NHMRC CEO, in consultation with NHMRC Council and Committees, has endorsed new strategic priorities for 2024–25 and beyond, as outlined in Table 1. In general, these priorities are expected to guide NHMRC activity for up to 3 years (until 2027) but may be reviewed annually. Planned actions in 2025–26 are also outlined, as well as incorporated in NHMRC’s key activities.

Table 1: NHMRC’s strategic priorities for 2024–2027

Strategic priority	Overview	Planned actions in 2025–26
Support the National Strategy	Working with the Department of Health, Disability and Ageing to develop a new and cohesive National Health and Medical Research Strategy.	Finalise and release the National Strategy within the next 12 months commencing with consultation on the draft National Strategy in the second half of 2025, including roundtables, workshops and written submissions.
Harmonise the MRFF and MREA	Working with the Department to optimise synergies and create alignment in policy and operations and governance between the MRFF and MREA.	Continue to use the shared advisory structure through Council/AMRAB and expert advisory committees to create alignment in policy and operations. Further opportunities to optimise synergies and create alignment to be considered in the context of the National Strategy implementation.
Champion consumer involvement	Strengthen the involvement of consumers and the community in health and medical research.	A revised NHMRC and Consumers Health Forum of Australia <i>Statement on Consumer and Community Involvement in Health and Medical Research</i> is expected to be released in late 2025, following extensive stakeholder consultation with research funders, research institutions, researchers and the community.
Maintain excellence in peer review	Innovate, evaluate and enhance the ways researchers are assessed when applying for grant opportunities to ensure our processes are equitable, evidence-informed, and continue to support high-quality research.	Continue to implement actions aligned with NHMRC’s framework for peer review and responsible research assessment, with a focus on peer reviewer training, expanding the role of consumers in peer review, refining score descriptors, providing feedback to applicants and rewarding excellence in peer review.

Strategic priority	Overview	Planned actions in 2025–26
Bolster confidence in research integrity	Working with the Australian Research Council and research leaders to enhance quality and integrity in research, which is also foundational to maintaining community trust in science and medicine.	Progress discussion about potential reform of the national research integrity framework, as well as updating NHMRC-specific policies and processes to bolster the management of research integrity matters, including serious misconduct and fraud, and promoting high-quality research practices with the release of the <i>Good Institutional Practice Guide</i> .
Embed equity in health research	Address the structural racism and other systemic barriers that drive health inequity through research policy and funding initiatives that promote equitable outcomes for Aboriginal and Torres Strait Islander researchers, women, and rural and remote communities.	Evaluate the 2025 pilot that required all applicants to a grant opportunity to describe how their proposed research could benefit Aboriginal and/or Torres Strait Islander health, continue to monitor the impact of gender equity measures and to explore options to support for rural, regional and remote health research.
Foster translation and commercialisation	Develop evidence-based strategies that strengthen translation of research and promote greater commercialisation of innovative research.	Work with advisory committees and stakeholders to review and refresh NHMRC's Research Translation Strategy for 2026 and beyond.
Promote prevention and public health	Promote prevention and public health through the development of evidence-based advice, guidelines and strategies to strengthen research in these areas.	Progress the review of the Australian Dietary Guidelines due for public consultation in 2026; the review of Nutrient Reference Values with a focus on iodine and selenium in 2025; and progress updates to the Australian Drinking Water Guidelines and the Recreational Water Guidelines.

Health priorities

NHMRC's health priorities articulate areas of focus across NHMRC activities that deal with major national health issues.

In identifying health priorities, the NHMRC CEO takes into consideration other Australian Government priorities and activities, including [Australia's national science and research priorities](#), and the [MRFF strategy and priorities](#), and where NHMRC activity can build on or contribute to these activities, as well as unique areas of activity that reflect NHMRC's purposes and mission of building a healthy Australia.

In general, NHMRC's health priorities reflect broad health challenges and emerging issues where national capacity or capability in health and medical research is most needed, rather than specific diseases. They also reflect NHMRC's role in promoting the highest standards and ethics in health and medical research.

The NHMRC CEO, in consultation with NHMRC Council and Committees, has endorsed refreshed health priorities for 2024–2027, as outlined in Table 2. The refreshed priorities were informed by advice from NHMRC committees on actions to support implementation of the previous triennium's health priorities, including previous and existing investments and horizon scanning of these and other emerging health issues.

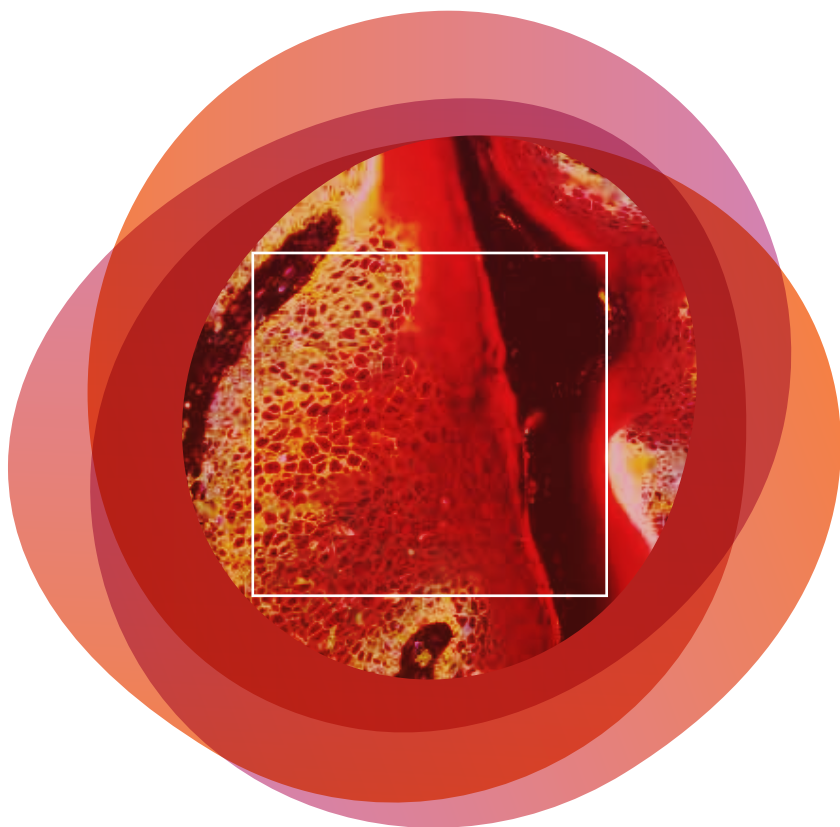
Table 2: NHMRC’s health priorities for the 2024–2027 triennium

Health priority	Overview	Actual and planned actions to address the health priorities
Aboriginal and Torres Strait Islander health	Promoting wellness and health equity for Aboriginal and Torres Strait Islander people.	<ul style="list-style-type: none">• 2024 NHMRC-CIHR Canadian Consortium on Neurodegeneration in Aging (CCNA): Indigenous Health Research• 2025 NHMRC Global Alliance for Chronic Diseases (GACD): Strengthening Health Systems Funding Call• 2025 Targeted Call for Research: Aboriginal and Torres Strait Islander health – Addressing Violence for Safer Families and Communities
Artificial intelligence in health	Promoting the integration of artificial intelligence into health and medical research, and its safe, ethical, equitable and effective application in health care.	<ul style="list-style-type: none">• 2025 NHMRC-EU Collaborative Research Grant Scheme• 2025 NHMRC e-ASIA Joint Research Program• NHMRC-AMED 2024 Collaborative Research Scheme: Adopting Sustainable Partnerships for Innovation and Research Ecosystem (ASPIRE)• NHMRC is currently engaged in strategic dialogue with Switzerland on potential collaborative opportunities in 2026.
Emerging health threats and emergencies	Identifying and targeting emerging health threats and emergencies, including working with partners towards a One Health research approach to climate change, health and our environment, biodiversity, and antimicrobial resistance.	<ul style="list-style-type: none">• 2024 Targeted Call for Research: Climate-related health impacts and effective interventions to improve health outcomes• 2024 NHMRC-EU Collaborative Research Grant Scheme• 2024 NHMRC e-ASIA Joint Research Program• 2025 Centres of Research Excellence, in partnership with the Department of Foreign Affairs and Trade.• 2025 NHMRC e-ASIA Joint Research Program• 2025 NHMRC-EU Collaborative Research Grant Scheme• NHMRC is currently engaged in strategic dialogue with international partners on potential collaborative opportunities in 2026.
Multiple long-term conditions	Identifying, preventing, and managing multiple chronic conditions and greater integration of living with multiple long-term conditions into research.	<ul style="list-style-type: none">• 2024 NHMRC e-ASIA Joint Research Program• 2025 NHMRC e-ASIA Joint Research Program• 2024 NHMRC-GACD: Management of Multiple Long-Term Conditions• 2025 NHMRC-EU Collaborative Research Grant Scheme• 2025 Targeted Call for Research: Addressing the Needs of People with High Healthcare Service Utilisation

Cooperation

NHMRC partners with others to support the achievement of its purposes and ensure our priorities and national leadership align with government directions and meet the research and health needs of the community.

NHMRC's major collaborative partnerships and other cooperative relationships and engagement mechanisms are outlined in this section. NHMRC does not have any subsidiaries.



Consumers and community groups

NHMRC engages with the community across all areas of its activity, including undertaking public consultation during the development of health guidelines, and on ethical issues in health research and health care.

We engage with consumer and community groups to identify representatives to participate in our committees, in peer review processes, in guidelines development and in public consultation. We also promote opportunities to be involved in NHMRC activities openly, including issuing open calls for nominations to our Principal Committees, and notifications of public consultations on open forums such as social media.

We invite consumer, community and professional organisations to identify health issues that may benefit from targeted research funding, to ensure that health and medical research is meeting the needs of the Australian community. We also provide leadership and guidance to the health and medical research sector on consumer and community involvement.

Industry organisations

NHMRC engages with industry organisations to foster research translation and impact, including involving business representatives in our committees and peer review processes, and inviting submissions from industry in public consultation processes.

NHMRC will be expanding its industry engagement activities over the period of this plan, including engaging with biotech and other health-connected companies, with a focus on fostering the translation and commercialisation of Australian research to ensure local production and supply of treatments and devices that benefit the Australian community.

Government relations and other research funders

NHMRC engages with other government agencies, including other Commonwealth agencies, state and territory health departments, international partners, and philanthropic organisations to deliver its strategy for health and medical research.

Department of Health, Disability and Ageing (and other portfolio agencies)

NHMRC collaborates with the Department on national strategies and priorities for health and medical research, including coordination and harmonisation between the MRFF and the MREA grant programs, and with the Department and Cancer Australia on administering grant opportunities.

By working together, we aim to simplify access for researchers, make efficient use of government resources and achieve our shared objectives to support Australian research and improve the health of Australians.

We collaborate with the Department, and other Health portfolio agencies and statutory office holders, to support governance, ethics review and legal frameworks for human research, clinical trials and gene technology.

NHMRC also works with the interim Australian Centre for Disease Control, and other areas of the Department and portfolio agencies (including FSANZ¹, TGA², ACSQHC³ and AIHW⁴) to promote the use of evidence to improve public health, environmental health and clinical practice, including undertaking evidence-based reviews and developing health guidelines.

Australian Research Council

We collaborate with the Australian Research Council and Universities Australia to promote the highest standards of ethics and integrity in research in line with the *Australian Code for the Responsible Conduct of Research*, the *National Statement on Ethical Conduct in Human Research* and the *Australian code for the care and use of animals for scientific purposes*.

Through the Australian Research Integrity Committee, jointly established by NHMRC and the ARC, we undertake reviews of institutional processes used to manage and investigate potential breaches of the Code and contribute to community confidence in the integrity of Australia's research effort.

Other Commonwealth agencies

NHMRC also works with other Commonwealth agencies to coordinate priorities and investment in health and medical research and to contribute to and support government policies and initiatives affecting the research sector. This includes the Departments of Industry, Science and Resources, Education, Foreign Affairs and Trade, and others.

1 Food Standards Australia and New Zealand

2 Therapeutic Goods Administration

3 Australian Commission on Safety and Quality in Health Care

4 Australian Institute of Health and Welfare

States and territories

NHMRC works with state and territory governments to foster best practice in the conduct of research, use of evidence and national consistency in health standards. Together, we identify gaps and priorities for research investment and support the translation of research into policy and practice.

International and global partners

NHMRC engages strategically with international funding agencies to support high-quality collaborative international research through bilateral and multilateral arrangements that align with the NHMRC International Engagement Strategy. For example, participating in cooperative grant programs that foster health research collaboration in the Indo-Pacific region and contribute to regional research capacity building through the e-ASIA Joint Research Program.

We contribute to global health strategies and benefit from membership in international science programs, such as the Human Frontier Science Program, which promotes excellence and international collaboration in innovative life sciences research.

Philanthropic organisations

NHMRC collaborates with philanthropic organisations to support high-quality health and medical research in areas of mutual interest, including supporting philanthropic funders to leverage NHMRC's excellence in peer review.

Researchers and research organisations

NHMRC collaborates with researchers and research organisations, both formally and informally on research policy and support for health and medical research.

NHMRC-approved Administering Institutions implement policies and practices that support NHMRC objectives, including ensuring that NHMRC research is carried out in an ethical, responsible and competent manner.

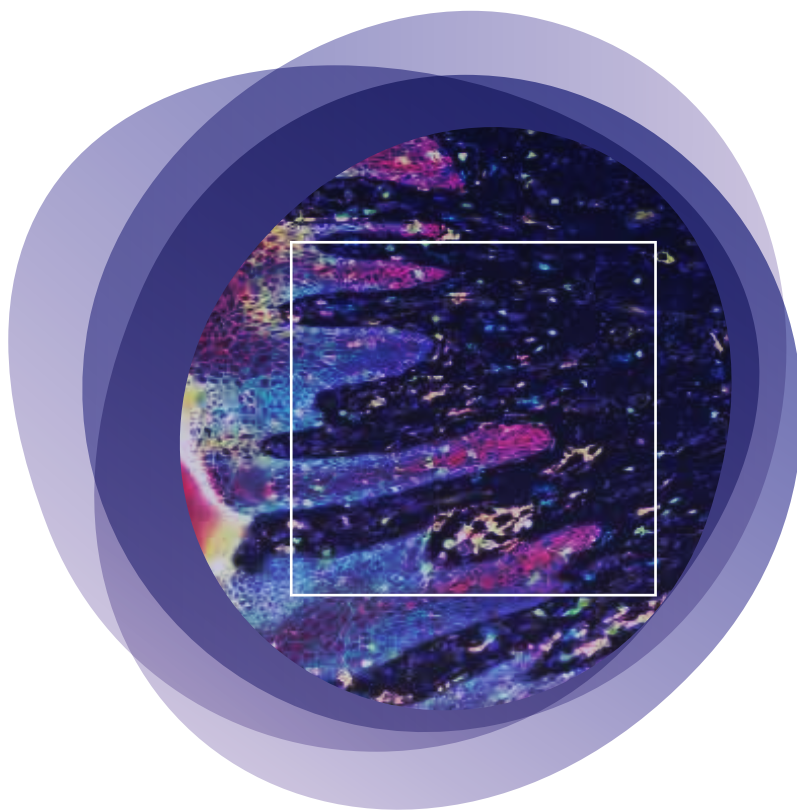
We consult with universities, medical research institutes, learned academies and other peak bodies in the health and medical research sector to seek advice and evaluate our activities.

We work with Cochrane Australia to support the translation of research into policy and practice and promote robust frameworks to support evidence-based decision making.

We work with domestic and international organisations such as the Australian Research Data Commons (ARDC) and ORCID (Open Researcher and Contributor ID) to support digital infrastructure and data-sharing initiatives, including the use of persistent identifiers for research, scholarship, and innovation.

Operating context

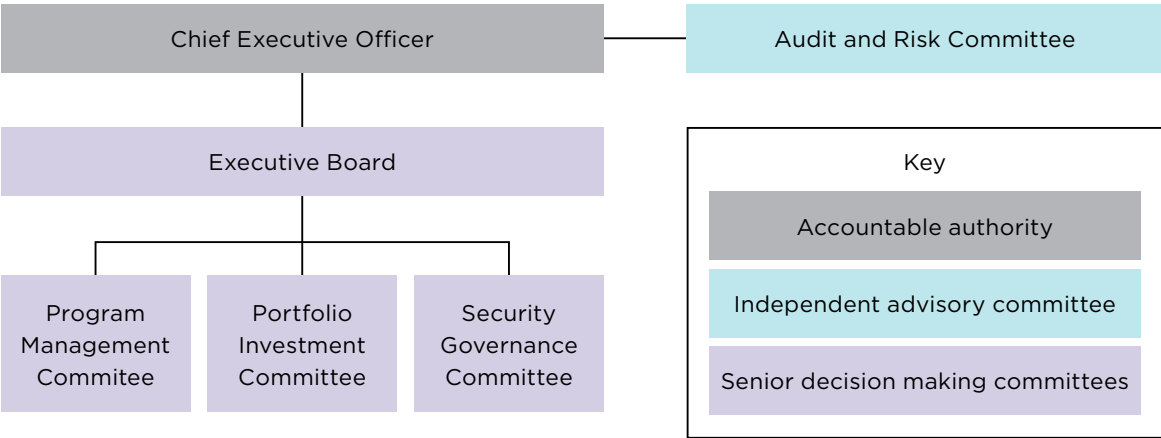
NHMRC takes into consideration its operating context in determining its priorities and key activities to achieve its purposes. This section outlines the environment in which NHMRC operates and our risk oversight, including key risks and its management, over the 4-year period of this plan.



Governance and accountability

NHMRC operates within a strong governance, integrity and accountability framework that supports efficient and effective performance. NHMRC’s corporate governance committees (shown in Figure 4) play an important role in supporting achievement of our purposes.

Figure 4: Overview of NHMRC’s corporate governance structure



Executive Board provides oversight, managing risk and monitoring performance of the agency. It is the key management committee that supports the CEO in fulfilling their responsibilities as the accountable authority under the PGPA Act and other relevant legislation.

Executive Board is supported by three senior decision-making committees; the Program Management Committee (oversees the effective delivery of the NHMRC grant program and supporting systems), the Portfolio Investment Committee (oversees resource distribution and effective project management) and the Security Governance Committee (oversees effective management of security operations, risks and issues).

The Audit and Risk Committee provides independent advice to the CEO on the appropriateness of financial and performance reporting, risk management and internal control mechanisms.

Environment

NHMRC's operating environment is influenced by a range of factors that affect how we deliver our activities.

Over the 4-year period of this plan NHMRC's is likely to be affected by:

- Emerging individual and population health issues, the lived experience of consumers and the community in the health system, changing demographics (e.g. ageing population), and trends and changes in burden of disease.
- Changes to health policy, care, services and systems, including the interplay between government (including the role of states and territories), industry, community organisations and providers.
- Rapid innovation in the use of technology in research and in health, including the risks and opportunities posed by artificial intelligence.
- Increasing cybersecurity risks and impacts, including from external threats (e.g. deliberate hacking) and unauthorised data access.
- Trends and policy in data access, sharing and transparency, including greater sharing of public sector data and open science movements affecting research data and results access and sharing.
- Australian Government's reform initiatives and policy developments, including responses to major reviews and consultations, including reforms focused on integrity, fraud and corruption control, as well as APS capability to deliver modern, people-first policy and services.
- The broader Australian and global social and economic context, including changing geopolitical dynamics and the impact of misinformation on trust in science.

Each of these factors has been taken into consideration in planning NHMRC's key activities and identifying strategic and operational risks, which are regularly reviewed and adjusted as needed.



Risk oversight and management

NHMRC engages with risk to achieve its purposes and improve business efficiency, in line with our risk appetite and tolerances.

Our positive risk culture requires us to have a sound understanding of appropriate risk acceptance and to apply it to daily decision-making processes. NHMRC's risk appetite recognises that it is not possible, or necessarily desirable, to eliminate all risks inherent in our work. Accepting some degree of risk promotes innovation and recognises the limits of what we can control. Our risk tolerance varies with a greater willingness to accept risks in pursuit of strategic objectives than for operational matters.

Key enterprise risks and risk tolerances relevant to the 4-year period covered by this plan are outlined in Table 3. Our risk tolerances reflect the maximum risk that we are willing to take. A high tolerance indicates that we are prepared to accept exposure to the risk in order to achieve our strategic objectives, whereas a low to very low risk tolerance indicates that we take action to minimise exposure to the risk and/or take immediate corrective action where required. Led by its Executive Board, NHMRC implements strategies for identifying, managing and escalating emerging risks across our all areas of our operations.

NHMRC's *Risk Management Policy and Framework 2023-2026* provides the foundations and organisational arrangements for risk management within the agency and supports officials to identify, document and use risk information. All staff have a role in identifying and managing risks as part of their day-to-day activities. We augment our enterprise risk oversight and management with project-level risk management.



Table 3: Enterprise risks, risk tolerances and controls

	Risk description	Risk tolerance	Primary control/s
Investment	Adequate funding opportunities are not available to talented researchers to contribute to the improvement of human health.	Low	<ul style="list-style-type: none"> • Maintain delivery of grant schemes, with adjustments (e.g. to timing) as needed to respond to public health emergencies or other major disruptions. • Identify the best researchers and research through robust, independent, expert peer review.
	Grant application and review processes are an unreasonable burden on researchers and peer reviewers.	Low	<ul style="list-style-type: none"> • Undertake regular surveys of peer reviewers to assess the burden and opportunities to improve processes. • Continue to refine the grant management system, Sapphire, to support peer review processes. • Implement a streamlined process where appropriate, to reduce the workload, broaden participation and shorten the time needed for peer review.
	Poor fiscal control or financial management adversely impacts NHMRC's ability to operate.	Low	<ul style="list-style-type: none"> • Manage resources in accordance with agreed budgets, ensure oversight by the relevant governance body and make financial decisions at the appropriate level. • Undertake regular independent review of the internal control and financial frameworks, including as part of internal and external audits. • Maintain systems and processes to ensure accurate and timely payment of NHMRC and MRFF grants administered by NHMRC.
Translation	Health advice and guidelines are inaccurate, do not comply with national and international best practice, or fail to adhere to principles for evidence-based advice.	Low	<ul style="list-style-type: none"> • Use the best available scientific methods for rating the certainty of evidence and making recommendations and follow transparent development and decision-making- processes. • Consider declarations of interests and carefully manage any perceived and actual conflicts of interest, both prior to appointments and during the term of expert committees.
	Needs and feedback of stakeholders, including researchers and consumers, are not adequately taken into account which adversely affects achievement of the end goals for the community.	Low	<ul style="list-style-type: none"> • Promote, and provide resources to support, consumer and community involvement in research at all stages. • Release guidelines for a period of public consultation to allow the Australian community to comment. • Obtain advice from Council and Principal Committees on emerging sectoral concerns and issues.






	Risk description	Risk tolerance	Primary control/s
Integrity	Research misconduct, including alleged fraud or corruption in research, is not adequately investigated and addressed and/or inadequate controls are placed on NHMRC-funded researchers.	Low	<ul style="list-style-type: none"> Require funded institutions, as a condition of NHMRC funding, to investigate and appropriately manage allegations of research misconduct and notify NHMRC in specific circumstances. Manage allegations of research misconduct, fraud or corruption reported to NHMRC in accordance with approved policies and processes. Apply precautionary (and where warranted consequential) actions to researchers and research institutions implicated in research integrity matters to protect the integrity of NHMRC processes and funding. Use data collected, including from the Institutional Annual Compliance Reporting, to monitor appropriateness of policies and controls.
	There is unethical, fraudulent or corrupt conduct or systematic non-compliance by staff, service providers or contractors.	Very Low	<ul style="list-style-type: none"> Maintain a robust internal control framework, including fraud and corruption control, supported by regular education for staff, service providers or contractors and availability of resources. Undertake regular independent review of the fraud and corruption control and assurance frameworks and ongoing compliance monitoring, including as part of audits. Uphold the APS values in everything we do, reinforced by a respectful work culture and leadership behaviours that model ICARE and the NHMRC Values.
	Foreign interference in NHMRC-funded research or other activities compromises Australia's national interests.	Low	<ul style="list-style-type: none"> Require NHMRC Administering Institutions to meet obligations of the University Foreign Interference Taskforce's <i>Guidelines to Counter Foreign Interference in the Australian University Sector</i> (UFIT Guidelines). Monitor and measure Administering Institutions' awareness of, and compliance with, the UFIT Guidelines.
	Critical business systems, data or grant scheme integrity is compromised through the inappropriate use of new technology (such as artificial intelligence).	Low	<ul style="list-style-type: none"> Require all external users to adhere to the NHMRC Policy on Use of Generative Artificial Intelligence in Grant Applications and Peer Review. Maintain appropriate System Security Plans, System Risk Management Plans and Security Assessments and perform annual reviews of the NHMRC Cyber Security Strategy.

	Risk description	Risk tolerance	Primary control/s
Capability	Innovative information and communications technology (ICT) solutions operate suboptimally or increase the burden on stakeholders.	Moderate	<ul style="list-style-type: none"> • Maintain an appropriate governance structure to oversee project management and budgets, including regular review of risks, security and issues. • Design and test ICT solutions with internal and external users and implement enhancements over time, as feasible and where most needed.
	Sustainability of operations and/or security of information held by NHMRC ICT platforms is threatened by malicious cyber activity.	Low	<ul style="list-style-type: none"> • Maintain security controls within the ICT architecture, regularly monitor cyber threats and security risks, assess the effectiveness of existing controls and implement remediation actions promptly as needed. • Deliver and, where required, stabilise and enhance core ICT systems to provide reliable, highly available services to support NHMRC operations.
	A suitable, appropriately skilled workforce that enables the achievements of NHMRC's objectives is not maintained.	Low	<ul style="list-style-type: none"> • Recruit and retain staff to support the range of NHMRC activities and support staff to learn relevant skills.
	The health, safety, or wellbeing of NHMRC staff, contractors or visitors is compromised.	Very low	<ul style="list-style-type: none"> • Maintain, and when needed activate, the Business Continuity Plan to respond to public health emergencies and other critical events. • Monitor the work environment and rectify identified safety issues in a timely manner. • Actively continue to monitor staff welfare and wellbeing and address any issues as a priority.
	Business outcomes are compromised by the actions of third-party providers.	Low	<ul style="list-style-type: none"> • Maintain a series of frequent account, service and operational coordination meetings between NHMRC and its partners to ensure third-party providers understand expectations and meet these. • Establish and maintain provider relationships which foster trust, respect and transparency with third-party providers.

Capability

NHMRC has also identified specific capability priorities requiring focused activity in 2025-26 and over the period of this plan. Each of these priorities will help build and maintain the critical capabilities NHMRC needs to achieve its mission and purposes in both the short and long term.

Table 4: NHMRC’s capability priorities for 2025-26 and beyond

Capability priority		Overview
1	 Optimise ICT and data capability	Improve core ICT and data capabilities through ongoing maturation of service delivery, ICT governance, project delivery, and data/information management practices.
2	 Refresh the Sapphire grants platform	Strengthen the Sapphire grants management system by building a centralised, maintainable, and resilient platform that is value for money, reduces the administrative workload and builds confidence.
3	 Stabilise financial sustainability	Mature NHMRC’s approach to oversight and assurance over the agency’s annual operating budget and project investment, including embedding the robust multi-year internal budget and embedding stronger financial governance and compliance frameworks.
4	 Enhance external communication and outreach	Engage with the community and stakeholders through a repertoire of communication and outreach activities, that seek to involve consumers and stakeholders in NHMRC activities, support community trust in medical science, and promote the role of NHMRC-funded research in improving the health of the community.
5	 Build an innovation culture	Foster a work environment that energises NHMRC employees, removes organisational barriers and provides tools that support innovative practices, creates opportunities for collaboration, and celebrates new ideas, creative solutions and innovation successes.

In addition to the capability priorities identified above, NHMRC will continue to build and maintain its capability across the following broad capability areas.

Integrity and transparency

NHMRC is focused on fostering stakeholder confidence through a culture of accountability, transparency and integrity.

NHMRC's strategies and plans in this area include:

- Maintain a culture of integrity and accountability through transparent reporting and systems for addressing concerns, including reviewing fraud and corruption controls.
- Maintain an effective financial/resource management framework, including strengthening internal budgeting processes
- Deliver a comprehensive internal audit and risk management program, guided by our Audit and Risk Committee, to underpin continuous quality improvement across all activities.

2025-26 Target under the APS Strategic Commissioning Framework

NHMRC is continuing to focus on APS capability by ensuring core work is not outsourced inappropriately, in line with the APS Strategic Commissioning Framework.

NHMRC's target is to reduce by 2 contractor roles in core ICT functions by the end of 2025-26 with financial savings to follow in 2026-27.

In 2025-26, NHMRC is also seeking to transition enabling ICT services from an outsourced service provider model to a hybrid model using in-house capability supplemented by managed service delivery only where it is more efficient and cost effective to do so.

Workforce and culture

NHMRC is focused on fostering workplace strategies that cultivate and strengthen workforce capabilities, including reducing outsourcing of core work and ensuring the delivery of operational outcomes within a culture of excellence.

NHMRC is also committed to fostering a workplace culture that values diversity and inclusion and employee wellbeing, where all employees feel safe, valued and respected. Our workplace culture also champions the values and behaviours that make NHMRC unique and helps us achieve our purposes.

NHMRC's strategies and plans in this area include:

- Develop a workforce strategy that addresses challenges and harnesses our opportunities to build a capable, adaptable and future ready workforce.
- Continue to embed NHMRC's culture (values and behaviours) across our activities to build a high-performing, engaged and productive workforce.
- Invest in internal capability development through the implementation of our Learning and Development Strategy to foster a culture of innovation, continuous learning and growth.
- Develop current and emerging leaders to build leadership capacity, with a focus on recognising intersectionality and psychosocial factors to foster a respectful and supportive work environment.
- Strengthen our commitment to diversity and inclusion by delivering a Diversity and Inclusion Strategy and associated action plans (e.g. LGBTQIA+, CALD and RAP action plans) to foster a culture of respect and belonging.
- Deliver effective internal communication that creates an environment where trust, collaboration and ideas sharing thrive.

Safety and security

NHMRC continues to prioritise safety and security of its personnel, data and information, and business continuity.

NHMRC's strategies and plans in this area include:

- Maintain a safe workplace through its Health and Wellbeing Strategy that proactively addresses physical and psychosocial risks and encourages staff involvement, ownership and support.
- Strengthen operational resilience through the introduction and management of an updated Business Continuity Plan which ensures the organisation is well prepared to respond to and recover from potential major business disruptions.
- Deliver and implement a comprehensive Security Plan to enhance and advance security maturity and governance, and to build a culture of security awareness.
- Strengthening NHMRC's safety and emergency management to meet relevant legislation and Australian standards.
- Protect NHMRC's information, data and resources by continuing to implement the priorities outlined in the Cyber Security Strategy and Information and Data Strategy.

ICT and data capability

In addition to actions to address the related capability priority, NHMRC's strategies and plans in this area include:

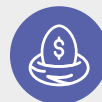
- Finalise and launch the ICT Strategy, which will define the technology vision, direction, priorities and initiatives to deliver NHMRC's activities and strategic priorities.
- Deliver the Cyber Security Strategy, which outlines the approach the agency will take to mitigate cyber security threats.
- Finalise the Data and Information Strategy, which will define the priorities for enhancing the current information and data maturity levels.
- Implement the NHMRC Grant System Strategy, which is guiding the refresh of NHMRC's grants management platform – Sapphire.
- Continue to support NHMRC's digital transformation journey to enable efficient and timely services to be delivered to our key stakeholders.



**Refresh the Sapphire
grants platform**



**Optimise ICT
and data capability**



**Build an
innovation culture**

Communication and outreach

In addition to actions addressing the related capability priority, NHMRC's communication and outreach strategies aim to strengthen engagement, visibility, and trust across the health and medical research sector, and include:

- Recognise and celebrate excellence, diversity and leadership in Australian health and medical research
- Enhance external communication to foster trust, build positive stakeholder relationships, and uphold NHMRC's brand integrity, credibility, and reliability.
- Deliver clear, timely, and accessible information through a range of channels, including media, digital platforms, publications, and events.
- Support strategic initiatives and policy implementation through targeted communication and stakeholder engagement.
- Promote awareness of NHMRC's role, funding opportunities, and research impact to diverse audiences.

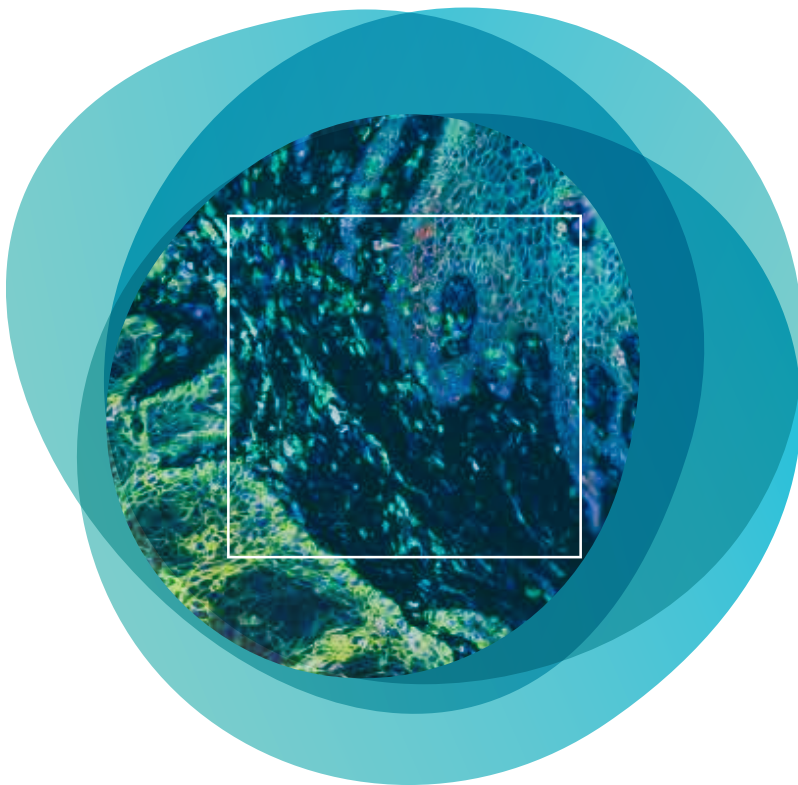


Enhance external communication and outreach



Activities

NHMRC achieves its purposes and mission of *building a healthy Australia* by delivering a range of activities. Our key activities are grouped below by broad type of activity, which align with the primary purpose to which the type of activity contributes, noting that many activities support achievement across more than one purpose.





INVESTMENT

- Research strategy and policy
- Grant opportunities
- Grant Hub service delivery
- Grant administration
- Sapphire capability



TRANSLATION

- Research translation strategy
- International engagement strategy
- Research impact reporting
- Guidelines development
- Guidelines standards and approvals



INTEGRITY

- Research integrity framework
- Research quality strategy
- Human and animal research ethics guidelines
- Embryo research regulation

Key activities

Key activities in 2025–26 and extending over the period of this plan are outlined below. Our key activities are informed by our operating context and include specific strategies, plans and other activities to implement our strategic priorities, health priorities and capability priorities.



INVESTMENT

Create knowledge and build research capability through investment in the highest-quality health and medical research and the best researchers.

Research strategy and policy

- Work with the Department of Health, Disability and Ageing to develop a National Health and Medical Research Strategy.
- Work with the Department of Health, Disability and Ageing to harmonise advisory structures, policies and operations across the two grant programs.
- Revise and promote the Statement on Consumer and Community Involvement in Health and Medical Research (2016), in collaboration with the Consumers Health Forum of Australia.
- Strengthen equity, diversity and inclusion in health and medical research through NHMRC and MRFF funded research activities and initiatives.
- Commit to continuous evaluation and improvement of NHMRC grant program policies, processes and outcomes.

Grant opportunities

- Deliver funding schemes that invest in the best researchers and research to meet Australia's diverse health and medical research needs and invest in innovative and collaborative research projects.
- Deliver targeted calls for research that responds to unmet or emerging health needs and reflects national, state and territory, and consumer and community priorities.
- Deliver funding schemes that focus on translation into policy, practice and products, including encouraging partnerships with policy makers or industry engagement and the commercialisation of research outcomes where appropriate.

Grant Hub service delivery

- Work with the Department of Health, Disability and Ageing to deliver MRFF grant schemes effectively and efficiently, leveraging NHMRC's grant processes and capability, to achieve program and policy outcomes and complement NHMRC funding schemes.
- Provide grant hub services to diverse partners (e.g. philanthropic trusts, foundations and other funders) who seek to deliver bespoke grant programs, or leverage NHMRC's established grant program, to support prioritised research.

Sapphire capability

- Refine and consolidate our grant management system (Sapphire) to improve the efficiency and effectiveness of grant application, peer assessment and post-award management processes.

Grant administration

- Manage and respond to inquiries from grant applicants and grantees, and manage active grants.
- Maintain and monitor compliance with NHMRC’s policies and requirements.



TRANSLATION

Drive the translation of health and medical research into public policy, health systems and clinical practice and support the commercialisation of research discoveries.

Research translation strategy

- Embed research in health-related systems by promoting successful collaborations between health services, researchers and end-users, including through the accreditation of NHMRC Research Translation Centres.
- Consider opportunities to foster greater translation and commercialisation of Australian research to ensure local production and supply of treatments and devices that benefit the Australian community.

International engagement strategy

- Create opportunities for Australian researchers to collaborate internationally, facilitate international networks and collaborative research partnerships and explore opportunities to work with international partners on policies and strategies to address shared health priorities, build regional capacity and promote international best practice in research.

Research impact reporting

- Promote, communicate and measure the impact of NHMRC-funded research.
- Explore the use of AI and LLMs (large language models) to provide new insights into NHMRC’s data and support research impact reporting and evaluation.

Guidelines development

- Develop and update guidelines in public, clinical and environmental health to support consistent standards, promote prevention and public health and inform clinical, policy and regulatory decisions.

Guidelines standards and approvals

- Promote best-practice evidence review and standards, including support for rapidly updated and living guidelines, Guidelines for Guidelines and approval of third-party public health and clinical practice guidelines.



INTEGRITY

Maintain a strong integrity framework underpinning rigorous and ethical research promoting community trust.

Research integrity framework

- Promote research integrity, including maintaining the Code and other guidance, and supporting the work of the Australian Research Integrity Committee.

Research quality strategy

- Promote the highest standards of research practice, including engaging with the research sector on good practice and developing guidance in key areas.

Human and animal research ethics guidelines

- Maintain national standards, codes and guidelines that promote best practice in research governance and ethics review processes and provide guidance on ethical issues in health.

Embryo research regulation

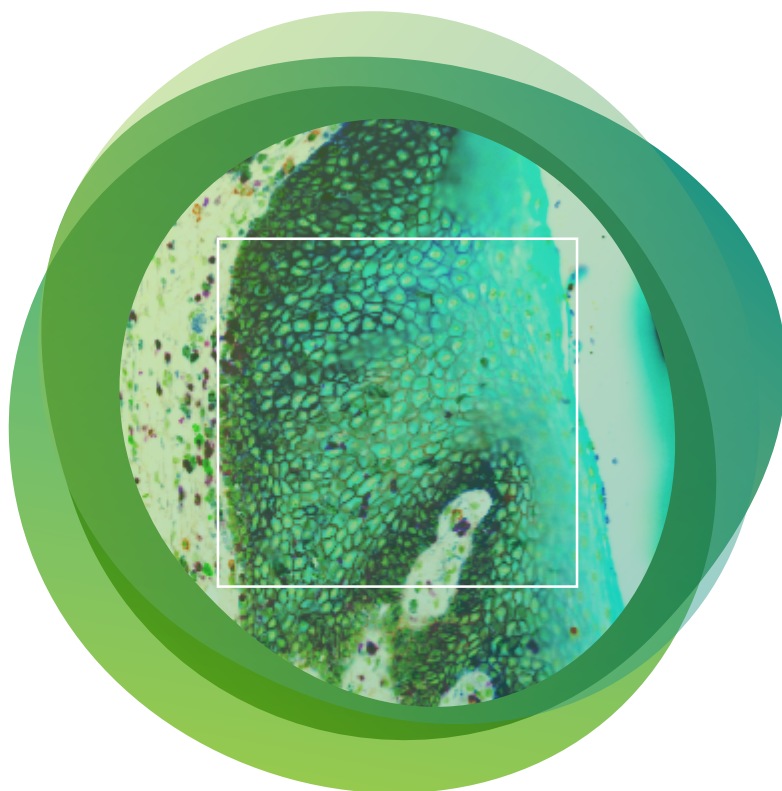
- Administer the *Research Involving Human Embryos Act 2002* (RIHE Act) and the *Prohibition of Human Cloning for Reproduction Act 2002* (PCHR Act), through the work of the Embryo Research Licensing Committee.

Table 5: Links between key activities and priorities

Key activity	Strategic priority								Health priority				Capability priority			
	Support the National Strategy	Harmonise the MRFF and MREA	Maintain excellence in peer review	Champion consumer involvement	Embed equity in health research	Bolster confidence in research integrity	Foster translation and commercialisation	Promote prevention and public health	Aboriginal and Torres Strait Islander health	Artificial intelligence in health	Emerging health threats and emergencies	Multiple long-term conditions	Optimise ICT and data capability	Refresh the Sapphire grants platform	Optimise financial sustainability	Enhance communication and outreach
Research strategy and policy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓
Grant opportunities			✓	✓	✓		✓	✓	✓	✓	✓	✓		✓		✓
Grant Hub service delivery			✓						✓	✓	✓	✓		✓	✓	✓
Sapphire capability		✓	✓										✓	✓	✓	✓
Grant administration		✓				✓							✓	✓		✓
Research translation strategy	✓			✓	✓		✓	✓	✓	✓	✓	✓				✓
International engagement strategy	✓				✓		✓	✓	✓	✓	✓	✓				✓
Research impact reporting	✓							✓					✓			✓
Guidelines development				✓		✓	✓	✓	✓	✓	✓	✓			✓	✓
Guidelines standards and approvals				✓		✓	✓	✓	✓	✓	✓	✓				✓
Research integrity framework						✓										✓
Research quality strategy				✓		✓										✓
Human and animal research ethics guidelines						✓			✓	✓						✓
Embryo research regulation						✓										

Performance

NHMRC assesses and communicates its performance by measuring its achievement against the performance measures outlined in this section, as well as through evaluation activities guided by the NHMRC Evaluation Strategy.





INVESTMENT

- High-quality research
- Broad range of research areas
- Community needs
- Effective and efficient review
- Research capability and equity



TRANSLATION

- Evidence-based health
- Clinical practice guidelines
- Public health guidelines
- Environment health guidelines
- Impact case studies



INTEGRITY

- Responsible and ethical conduct of research, including research involving human embryos

Performance measures

Achievement of NHMRC’s purposes will be measured and assessed over the period of this plan using the performance measures outlined below.

The detailed performance measures and targets, including the sources of information and methodologies that will be used to measure and assess performance against each target, are outlined below. A mix of qualitative and quantitative targets are included. The reporting period for each target is also outlined. Most targets are reported against every year, which helps provide an assessment of NHMRC’s performance over time.



INVESTMENT

Create knowledge and build research capability through investment in the highest-quality health and medical research and the best researchers.

Research grants in basic science, clinical medicine, public health and health services research meet the health needs of Australians, and include national, state and territory and community priorities*

Target/s	Methodology	Measure type	Reporting years
1 Grants are awarded, based on expert peer review, across the full spectrum of health and medical research areas.*	Quantitative assessment of the distribution of the value of new grants awarded in the financial year by broad research area.	Output	2025-26 2026-27 2027-28 2028-29
2 Targeted and priority-driven research funding calls are initiated to address areas of unmet need.	Qualitative assessment of how targeted and priority-driven funding meets a research gap and how the unmet need was identified.	Output	2025-26 2026-27 2027-28 2028-29

*This performance target is included in, but has been revised for clarity since, the publication of the 2025-26 Portfolio Budget Statements.

Research funding is invested effectively and efficiently through expert peer review against published assessment criteria, including an overall consideration of value with money.

Target	Methodology	Measure type	Reporting years
3 Better matching of peer reviewers to applications, improving application-centric peer review in applicable schemes, and reduced burden on peer reviewers.	Analysis of the peer review process, including level of self-reported suitability matching of peer reviewers to applications, feedback from reviewers and measurement of time spent on peer review.	Efficiency and effectiveness	2025-26 2026-27 2027-28 2028-29

Research grants are awarded that aim to improve health outcomes for Aboriginal and Torres Strait Islander people.*

Target	Methodology	Measure type	Reporting years
4	More than 5% of NHMRC's annual budget is awarded to research that aims to improve health outcomes for Aboriginal and Torres Strait Islander people.*	Quantitative assessment of new grants awarded in the financial year. Funding is categorised as 'Indigenous health research' through a combination of Indigenous Research Excellence Criteria (IREC) assessment and reviewing each funded grant against a range of investigator provided data classifications including fields of research, keywords, grant titles and media summaries.	Output
			2025-26
			2026-27
			2027-28
			2028-29

* This performance target is included in, but has been revised for clarity since, the publication of the 2025-26 Portfolio Budget Statements.

Capacity and capability are built and strengthened by supporting Aboriginal and Torres Strait Islander health researchers.

Target	Methodology	Measure type	Reporting years
5	3.4% of NHMRC's annual grants awarded to lead chief investigators of Aboriginal and Torres Strait Islander descent.	Quantitative assessment of the percentage of new grants awarded in the financial year to lead chief investigators of Aboriginal and/or Torres Strait Islander descent.	Output
			2025-26
			2026-27
			2027-28
			2028-29
6	Report on the number of Aboriginal and Torres Strait Islander chief investigators.	Quantitative reporting on the number of chief investigators of Aboriginal and/or Torres Strait Islander descent currently funded (active grants) across all NHMRC schemes.	Output
			2025-26
			2026-27
			2027-28
			2028-29

NHMRC grants support a gender inclusive health and medical research workforce.

Target	Methodology	Measure type	Reporting years
7	Gender inequities in NHMRC funding outcomes are reduced.	Quantitative assessment of the number of grants, amount of funding awarded and funded rates by gender, and whether measures have been applied to reduce gender disparities. The assessment covers all NHMRC grant schemes (collectively) and key schemes (Investigator and Ideas Grants) separately and considers gender equity in grant distribution across career stages.	Output and effectiveness
			2025-26
			2026-27
			2027-28
			2028-29



TRANSLATION

Drive the translation of health and medical research into public policy, health systems and clinical practice and support the commercialisation of research discoveries.

Support an Australian health system that is research-led, evidence based, efficient and sustainable.*

Target	Methodology	Measure type	Reporting years
8 Develop and/or approve public and environmental health and clinical practice guidelines.*	Review of NHMRC records to identify all CEO approvals/issuances in the reporting period and NHMRC Council records that also demonstrate that Guidelines are developed consistent with NHMRC standards for guidelines under subsection 7(1) of the NHMRC Act 1992, as well as records that demonstrate progress of guidelines under development.	Output	2025-26 2026-27 2027-28 2028-29

*This performance measure/target is included in the Portfolio Budget Statements.

Report on the impact of the research funded by NHMRC.

Target	Methodology	Measure type	Reporting years
9 Demonstrate and communicate how NHMRC-funded research is contributing to improvements in the health, society and economy of Australia.	Qualitative and in-depth assessment of the impact of NHMRC-funded research using a case study approach. Case studies are selected where beneficial impacts can be connected to NHMRC funding.	Effectiveness	2025-26 2026-27 2027-28 2028-29
10 Demonstrate the outputs, outcomes and impacts of a selection of NHMRC grants in a specific area.	Quantitative analysis such as economic, bibliometric and/or a AI-enabled approaches (large language model) to provide comprehensive insights on the impact of NHMRC-funded research, including innovation metrics (e.g. patents, start-ups, etc.) and health interventions (e.g. drugs, public health policy, regulation, etc.). The area of focus and time period is identified by the NHMRC CEO and a complete list of relevant NHMRC grants is generated to match to external datasets.	Effectiveness	2026-27 2028-29



INTEGRITY

Maintain a strong integrity framework underpinning rigorous and ethical research promoting community trust.

Research is conducted responsibly, ethically and with integrity in Australia.*

Target	Methodology	Measure type	Reporting years
11 Research integrity matters are managed appropriately by Administering Institutions in line with the requirements of the <i>Australian Code for the Responsible Conduct of Research</i> .*	Quantitative assessment using NHMRC's annual survey of Administering Institutions (Institutional Annual Compliance Report) to ensure that the Code and its supporting Guides have been implemented in institutional processes and that required notifications of integrity matters are made in line with the NHMRC Research Integrity and Misconduct Policy 2019. Qualitative analysis of Australian Research Integrity Committee reviews of the processes used by Administering Institutions to conduct integrity investigations in line with the requirements of the Code.	Effectiveness	2025-26
			2026-27
			2027-28
			2028-29

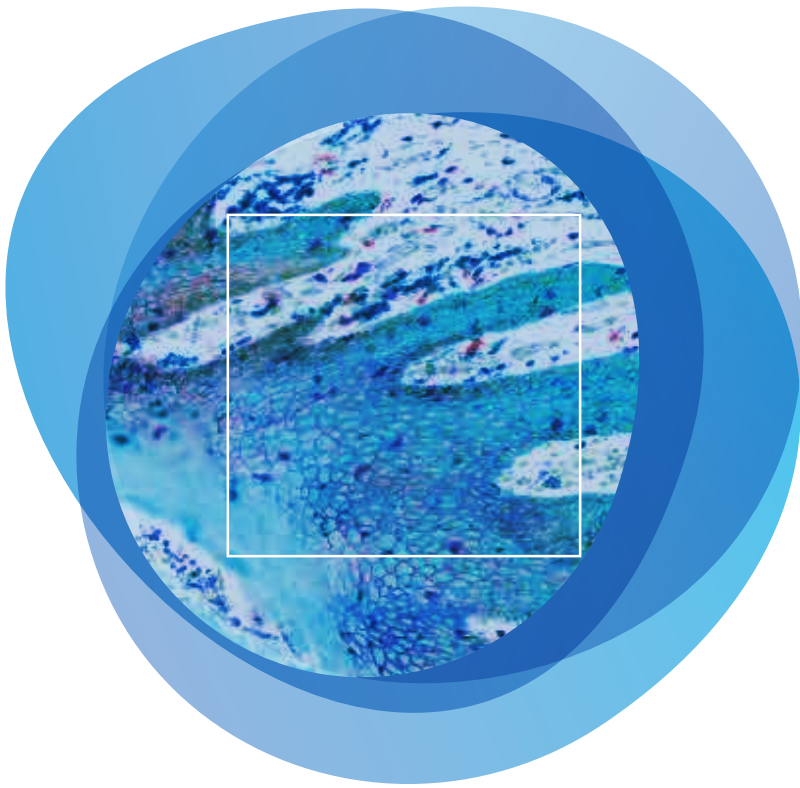
*This performance measure/target is included in the Portfolio Budget Statements.

Research involving human embryos is conducted ethically and legally in accordance with appropriate licence conditions.

Target	Methodology	Measure type	Reporting years
12 Compliance with regulatory requirements under the <i>Research Involving Human Embryos Act 2002</i> .	Qualitative assessment from inspections and six-monthly reports is used to calculate the number and type of incidents of non-compliance with licence conditions by each licence holder in the period, as well as how quickly and effectively any actions to redress non-compliance (as required by the regulator) are actioned by the licence holder.	Effectiveness	2025-26
			2026-27
			2027-28
			2028-29

Appendix A:

List of requirements



The NHMRC Corporate Plan 2025–26 has been prepared in accordance with the requirements of:

- section 16 of the *National Health and Medical Research Council Act 1992* (NHMRC Act)
- subsection 35(1) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act)
- subsection 16E(2) of the *Public Governance, Performance and Accountability Rule 2014* (PGPA Rule).

Table 7 below details the requirements met by this corporate plan and the page reference(s) for each requirement.

Table 7: Corporate plan requirements

Requirement	Legislation reference	Page(s)
Introduction <ul style="list-style-type: none">• statement of preparation: a statement that the plan is prepared for paragraph 35(1)(b) of the PGPA Act• the reporting period for which the plan is prepared• the reporting periods covered by the plan	16E(2) PGPA Rule	7
Purposes	16E(2) PGPA Rule	10–11
Strategy <ul style="list-style-type: none">• a national strategy for medical research and public health research	16(2) NHMRC Act	16–17
Health priorities <ul style="list-style-type: none">• the CEO’s assessment of the major national health issues that are likely to arise during the period• the manner in which the CEO proposes to perform their functions in dealing with those issues during the period	16(2) NHMRC Act	18–19
Operating context <ul style="list-style-type: none">• cooperation• subsidiaries (where applicable)• environment• risk oversight, including key risks and its management• capability	16E(2) PGPA Rule	20–23 N/A 26 28–31 33
Key activities	16E(2) PGPA Rule	40–43
Performance <ul style="list-style-type: none">• performance measures• targets for each performance measure	16E(2) PGPA Rule	46–49

