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Message from the CEO

We are living through an extraordinary moment in human history. The COVID-19 pandemic is affecting every aspect of our lives and we do not yet know how it will end, or how it will change the way we live and the work we do in the years ahead. At the National Health and Medical Research Council (NHMRC), in a time of such uncertainty, we are focused on what we can do today and in the foreseeable future to contribute to the health and well-being of the Australian community.

NHMRC has a unique set of roles. As the Australian Government’s lead agency for funding health and medical research, NHMRC invests in the creation of knowledge about the mechanisms underlying health and disease and in the development of better ways to prevent and treat ill health. We support the translation of evidence from research into public health policy and clinical practice, and we promote the highest standards of research ethics and integrity. Through these roles, NHMRC has helped to build an outstanding Australian health and medical research sector — a national resource whose calibre and value have been clearly demonstrated throughout the response to COVID-19.

During 2020–21, NHMRC will continue to support the health and medical research sector to meet the health needs of the Australian community. We are ensuring that NHMRC-funded researchers have the flexibility to pivot their existing research to COVID-19 where that makes sense, or to delay their projects while they contribute to the clinical or public health response or experience other disruptions to their research. We have adjusted the timing and peer review processes of the 2020 grant program in recognition of the enormous impact of the pandemic on the research sector, and will make further adjustments if necessary. We are providing guidance to peer reviewers on considering the impact of the pandemic on research proposals.

Funding for COVID-19 research will be available through the majority of NHMRC grant schemes in 2020–21 and we anticipate that many researchers will want to bring their expertise and energy to bear on the great challenge of this pandemic. Future funding for COVID-19 research will add to the support NHMRC has already provided through the Australian Partnership for Preparedness Research on Infectious Disease Emergencies (APPRISE) Centre of Research Excellence. APPRISE was awarded a five-year NHMRC grant from 2016 to 2021 to build national research preparedness for major infectious disease outbreaks. In early 2020, NHMRC provided an additional $2 million to APPRISE to undertake rapid research in direct response to the COVID-19 emergency. APPRISE has also attracted significant philanthropic and other research funding and is playing a central role in Australia’s pandemic response.

The Medical Research Future Fund (MRFF) has been a crucial source of funding for urgent research on COVID-19 vaccines, therapies and respiratory illness, as well as research on the health impacts of the 2019–20 bushfires. NHMRC’s role in supporting the Department of Health to deliver MRFF programs is an important priority over the period of this plan. We have increased our capacity and will continue to refine NHMRC’s grants hub service offering to support delivery of planned MRFF grant opportunities and to respond flexibly to deliver urgent funding calls.

NHMRC will continue to support a research-led, evidence-based health response to the COVID-19 pandemic. One way we are doing this in 2020–21 is by supporting the work of the National COVID-19 Health and Research Advisory Committee. The committee was established in April 2020 to provide rapid and evidence-based advice to the Chief Medical Officer with the aim of preventing new COVID-19 cases, optimising treatment of current cases, and assisting the health system to deal with the pandemic as it progresses. This work will continue for as long as the committee’s advice is needed.

Through the Australian Health Ethics Committee, we are developing an ethics framework to support decision-making during the COVID-19 pandemic, informed by strong engagement with health consumers and the community. Responding to the COVID-19 pandemic is challenging us all to make rapid, responsible and ethical decisions to protect ourselves and others. The framework will guide ethical decision-making and policy development in public health, clinical care and research. It will ensure that consumers and the community are involved in decision-making and that care is not compromised nor discriminatory, especially for the most vulnerable members of our community.

NHMRC understands the importance of consumer and community involvement in health and medical research. We undertake public consultation on public health matters, for example in the development of health guidelines and advice. Consumer and community representatives are appointed to NHMRC
Corporate Plan 2020–21 National Health and Medical Research Council

Council and Principal Committees, and our Community and Consumer Advisory Group provides strategic advice on our policies and programs. In early 2020, we released a suite of resources to help researchers, research organisations, consumers and community health organisations to engage effectively together. In 2020–21 and beyond, we will continue to strengthen our engagement with consumers and the community across all areas of NHMRC activity.

While the COVID-19 pandemic is the focus of attention, other diseases continue to affect the health of Australians. With an annual budget of more than $850 million for its grant program, NHMRC will invest in high quality health and medical research and capacity building across a broad range of disease areas and health issues – from prevention to improve community health and well-being, to advances in the treatment and care of people facing health emergencies or living with chronic conditions. Throughout the four-year period of this plan, we will ensure funding opportunities are available for health and medical research in the laboratory, the clinic and the community to meet both the immediate and the long-term health needs of the Australian population.

NHMRC continues to identify major national health issues for priority driven funding and to deliver targeted calls for research that reflect national, local and community priorities. Three significant new initiatives will be advanced in 2020–21. NHMRC will award up to $10 million to a National Network for Aboriginal and Torres Strait Islander Health Researchers and up to $10 million to a multidisciplinary, collaborative network across Australia to improve health outcomes and outlooks for people living with mental illness. We will also open a competitive funding call for a $10 million Special Initiative in Human Health and Environmental Change, which aims to improve Australia’s preparedness for and responsiveness to human health threats from changing environmental conditions and extreme weather events. Each of these initiatives will build research capacity in important areas of national need, complementing research investments through NHMRC’s general schemes and the MRFF.

Both the NHMRC and MRFF grant programs rely on the excellence of our peer review processes and our grant management systems. During 2020–21, we will continue to refine grant application, peer review and grant management processes, and provide expanded peer reviewer training. We will continue to develop and deploy our new grant management system—Sapphire. We will also build and use evaluation and data capabilities to monitor the performance of NHMRC’s grant program.

NHMRC will maintain a leadership role in the development of robust, evidence-based public health, environmental health and clinical advice. Of particular importance during 2020–21, NHMRC will release revised Australian guidelines to reduce the health risks from drinking alcohol, commence a review of the Australian Dietary Guidelines and undertake the evidence evaluation for the Department of Health’s Natural Therapies Review.

Now more than ever, NHMRC’s success will depend on the resilience, hard work and commitment of many people, both within and outside the agency. Having successfully made the transition to new ways of working during the pandemic, NHMRC’s staff are well placed to meet the challenges of the year ahead. We will continue to engage with government, researchers, research institutions and other stakeholders to understand and meet their expectations. We will draw on the advice of NHMRC Council, Principal Committees and other advisory groups as we refine and implement our plans. Together, we will continue to fulfil NHMRC’s mission of building a healthy Australia despite the momentous challenges and uncertainties of the time.

Statement of preparation

As the accountable authority of NHMRC, I present the NHMRC Corporate Plan 2020–21, which covers the periods of 2020–21 to 2023–24. 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 Anne Kelso AO
Chief Executive Officer
National Health and Medical Research Council
Purposes

NHMRC’s purposes support our mission of building a healthy Australia. They reflect NHMRC’s legislated functions to fund health and medical research and training, and to issue guidelines and advise on improving health outcomes, through prevention, diagnosis and treatment of disease and the provision of health care. They also reflect NHMRC’s role in promoting the highest standards of ethics and integrity in health and medical research.

NHMRC’s purposes align with the three strategic themes of investment, translation and integrity.

Figure 1: NHMRC’s strategic themes and purposes

<table>
<thead>
<tr>
<th>THEME</th>
<th>INVESTMENT</th>
<th>TRANSLATION</th>
<th>INTEGRITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Function</td>
<td>Fund high quality health and medical research and build research capability.</td>
<td>Support the translation of health and medical research into better health outcomes.</td>
<td>Promote the highest standards of ethics and integrity in health and medical research.</td>
</tr>
<tr>
<td>Purpose</td>
<td>Create new knowledge and build research capability through investment in the highest quality health and medical research and the best researchers.</td>
<td>Drive the translation of health and medical research into clinical practice, policy and health systems and support the commercialisation of research discoveries.</td>
<td>Maintain a strong integrity framework underpinning rigorous and ethical research and promoting community trust.</td>
</tr>
</tbody>
</table>

Figure 2: NHMRC’s strategy for health and medical research

BUILDING A HEALTHY AUSTRALIA

INVESTMENT

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

TRANSLATION

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

INTEGRITY

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

COMMUNITY INVOLVEMENT

Healthier Australians  Informed consumers  Better clinical care  Improved health care system  Reduced health inequities  Economic benefit through innovation and improved productivity
Strategy for health and medical research

NHMRC’s strategy for health and medical research is underpinned by our strong commitment to the highest quality and standards of research and health advice. We fund research across the spectrum from discovery to implementation science. We balance the needs of the community, government and the research sector, supporting both investigator-initiated and priority-driven research. We understand the important contribution that health and medical research makes to creating knowledge and improving lives.

The themes of investment, translation and integrity represent NHMRC’s strategy for health and medical research for the period covered by this plan. We will:

• create knowledge and build research capability through investment in the highest quality health and medical research and the best researchers

• drive the translation of health and medical research into clinical practice, policy and health systems and support the commercialisation of research discoveries, contributing to an Australian health system that is research-led, evidence-based, efficient and sustainable, and

• maintain a strong integrity framework, which underpins rigorous and ethical research, and relevant and evidence-based guidelines, thereby promoting community trust.

NHMRC’s strategy for health and medical research is depicted in Figure 2.

Community involvement

As shown in Figure 2, community involvement is essential to, and underpins, NHMRC’s strategy for health and medical research. All three strategic themes draw on the lived experience of the community and consumers. To help ensure meaningful engagement of the community and consumers throughout all stages of health and medical research and health care, NHMRC developed and released a suite of resources in a Toolkit for Consumer and Community Involvement in Health and Medical Research in early 2020.

Through consultation processes and participation in NHMRC advisory committees, a wide spectrum of Australians can contribute directly to ensuring the excellence of NHMRC’s work and promoting trust in the integrity and value of science and in health decision-making. We will continue to engage with NHMRC’s Community and Consumer Advisory Group during 2020–21 to drive stronger community involvement and consumer engagement across all of our activities.
Strategic priorities

The National Health and Medical Research Council Act 1992 (NHMRC Act) requires the CEO to identify major national health issues likely to arise in 2020–21 and during the four-year period covered by this plan. In considering these issues, the CEO consults with the Council, its committees and the Minister before determining the issues that are within NHMRC’s scope.

NHMRC also operates on a triennial basis, with the Council and Principal Committees reappointed every three years. The current triennium runs from 1 July 2018 until 30 June 2021. As we near the end of this triennium, NHMRC will review its strategic priorities with a longer-term outlook.

The following major issues, which were identified at the beginning of this triennium, remain current and relevant for the period covered by this plan:

- Resilience to environmental change, emerging health threats and emergencies.
- Improving the health of Aboriginal and Torres Strait Islander peoples including through research that builds capacity in Aboriginal and Torres Strait Islander researchers and addresses health disparities.
- Issues related to the end of life and the delivery of palliative and supportive care.
- Integrated and coordinated approaches to chronic conditions.
- Harnessing the power of data and analytical technologies.
- Improving research quality to maximise the rigour, transparency and reproducibility of NHMRC-funded research.

These major health issues represent NHMRC’s strategic priorities. They are addressed through NHMRC’s strategy for health and medical research and our key activities, and informed by expert advice. The key actions planned for 2020–21 to address each of our strategic priorities are outlined in Table 1. These priorities and actions are informed by engagement with the community and health consumers, including but not limited to expert advice from NHMRC’s Community and Consumer Advisory Group.

Table 1: Implementing NHMRC’s strategic priorities

<table>
<thead>
<tr>
<th>STRATEGIC PRIORITY</th>
<th>KEY ACTIONS PLANNED FOR 2020–21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resilience to environmental change, emerging health threats and emergencies</td>
<td>• Support the national COVID-19 research effort by continuing to offer flexibility for NHMRC-funded researchers to pivot their research to COVID-19, where appropriate, and by supporting the delivery of urgent MRFF Coronavirus Research Response grant opportunities as needed.</td>
</tr>
<tr>
<td></td>
<td>• Encourage NHMRC-funded researchers to contribute to the international research response to COVID-19, including through the Global Research Collaboration for Infectious Disease Preparedness (GloPID-R).</td>
</tr>
<tr>
<td></td>
<td>• Continue to support the National COVID-19 Health and Research Advisory Committee (NCHRAC) to provide advice to the Chief Medical Officer on the health response to the COVID-19 pandemic.</td>
</tr>
<tr>
<td></td>
<td>• Open the call for applications for NHMRC’s $10 million Special Initiative in Human Health and Environmental Change, which aims to boost research capacity and capability to improve Australia’s preparedness and responsiveness to human health threats from changing environmental conditions and extreme weather events.</td>
</tr>
<tr>
<td></td>
<td>• Seek and consider advice from NHMRC’s Research Committee and Australian Health Ethics Committee on this priority area.</td>
</tr>
</tbody>
</table>
### STRATEGIC PRIORITY

#### Improving the health of Aboriginal and Torres Strait Islander peoples including through research that builds capacity in Aboriginal and Torres Strait Islander researchers and addresses health disparities

- Implement *Road Map 3: A strategic framework for improving Aboriginal and Torres Strait Islander health through research*.
- Award funding from late 2020 to develop the National Network for Aboriginal and Torres Strait Islander Health Researchers. This will bring together Indigenous health research groups and their support networks to build the capacity and capability of Aboriginal and Torres Strait Islander health researchers.
- Promote the *Aboriginal and Torres Strait Islander Roadmap for Dementia Research*, including allocating funding to support dementia research in the 2021 Centres of Research Excellence grant round.
- Seek and consider advice from NHMRC’s Principal Committee Indigenous Caucus on this priority area.

#### Issues related to the end of life and the delivery of palliative and supportive care

- Open the Targeted Call for Research into End of Life Care in late 2020 to support best practice approaches to end of life and palliative care that are respectful and meaningful for patients, carers and families.
- Promote and support the *Aboriginal and Torres Strait Islander Roadmap for Dementia Research*, which includes end of life care as one of its priority areas for research.
- Seek and consider advice from NHMRC’s Research Committee and Health Translation Advisory Committee on this priority area.

#### Integrated and coordinated approaches to chronic conditions

- Undertake peer review and announce NHMRC’s $10 million Special Initiative in Mental Health, which aims to establish a multidisciplinary, collaborative network across Australia to improve health outcomes and outlooks for people living with mental illness.
- Continue to work collaboratively to achieve the targets set out in the *Fifth National Mental Health and Suicide Prevention Plan*, including contributing to the development of the National Mental Health Commission’s research strategy for mental health.
- Participate in the Global Alliance for Chronic Diseases (GACD) 2020 Joint Cancer Call and contribute to GACD planning for future joint calls for research on non-communicable chronic diseases.
- Promote and support the *Strategic Roadmap for Dementia Research and Translation*, including allocating funding to support dementia research in the 2021 Centres of Research Excellence grant round.
- Seek and consider advice from NHMRC’s Health Translation Advisory Committee, especially on the impact of loneliness and social isolation on chronic conditions.

#### Harnessing the power of data and analytical technologies

- Continue to foster the development and uptake of innovative technologies and practices to improve human health.
- Continue to deploy and enhance Sapphire to reduce the burden on the health and medical research sector and enhance outcome reporting for NHMRC’s grant program.
- Develop data capabilities and explore data linkages to enhance NHMRC’s evaluation capacity and illustrate the impact of NHMRC-funded research.
- Seek and consider advice from NHMRC’s Research Committee and Health Innovation Advisory Committee on this priority area.

#### Improving research quality to maximise the rigour, transparency, and reproducibility of NHMRC-funded research

- Continue to implement NHMRC’s *Research Quality Strategy*, which aims to promote the highest quality of research by providing guidance and supporting good research practices.
- Develop guidance on the registration of preclinical research.
- Develop a *Good Institutional Practice Guide* that sets out best practice for creating and maintaining an institutional culture that supports the conduct of high quality research.
- Develop an NHMRC award to publically recognise initiatives that promote and ensure high quality research.
- Seek and consider advice from NHMRC’s Research Committee and the Research Quality Steering Committee.
Operating context

Environment

The global COVID-19 pandemic has had a profound impact on the public health system and the research environment. It remains an uncertain time for the health and medical research sector, and for the office of NHMRC, with the global pandemic and risks of local outbreaks continuing to affect researchers, clinicians, our staff and the wider community.

Factors in our environment, including but not limited to factors resulting from the pandemic, that are likely to affect NHMRC’s activities and performance in 2020–21 and over the four-year period of this plan include:

• the lived health care experience of consumers and the community
• trends in the burden of disease and health service delivery
• advances in technology and associated emerging ethical issues
• disparities in the health and medical research workforce and in the community
• disruption to everyday work practices and caring responsibilities for researchers and for our staff
• changes in research and training environments in a physically distanced community
• other changes in research and work practices, including innovations as a result of the pandemic
• the involvement of researchers in the clinical and public health response to COVID-19
• international action in health and medical research, health care and prevention
• ongoing scrutiny of research integrity and quality issues
• strong demand for NHMRC funding, especially for research on complex and emerging health issues
• the impact of the Medical Research Future Fund on Australia’s health and medical research sector
• the role of the states and territories in delivering health services, and
• the broader Australian and global social and economic context.

Each of these factors has been taken into consideration in planning NHMRC’s major activities, risks and performance measures, as set out in this plan, noting that the uncertainty of the global pandemic dictates regular review and readjustment.

Cooperation

Our environment includes multiple domestic and international partners and stakeholders. NHMRC works closely with universities, medical research institutes, hospitals, professional colleges, other national and international funding agencies, peak bodies and consumer groups and the wider public and private sectors. Table 2 details some of NHMRC’s major collaborative partnerships that contribute to achieving our mission and purposes. NHMRC does not have any subsidiaries.
Table 2: Cooperative relationships that contribute to NHMRC’s purposes

<table>
<thead>
<tr>
<th>ORGANISATION</th>
<th>NATURE OF COOPERATION</th>
<th>PURPOSE/S</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commonwealth Department of Health</td>
<td>• We work as a grants hub with the Department of Health to support the delivery of the MRFF, using NHMRC’s expertise in peer review and grants management.</td>
<td>Investment, Translation, Integrity</td>
</tr>
<tr>
<td></td>
<td>• Together, we simplify access for researchers, make efficient use of government resources and achieve our shared objectives to support Australian health and medical research and improve the health of Australians.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• We work with the Department of Health to undertake evidence-based reviews and develop guidelines that support public and environmental health and clinical advice.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• We work with the Department of Health on social and ethical issues in health and related regulatory frameworks.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• We work with the Department of Health and other Commonwealth portfolios to contribute to government policy affecting research, researchers and the research sector.</td>
<td></td>
</tr>
<tr>
<td>State and territory governments</td>
<td>• We work with state and territory governments to identify gaps and priorities for health and medical research investment.</td>
<td>Investment, Translation, Integrity</td>
</tr>
<tr>
<td></td>
<td>• We work with states and territories to support the translation of research into policy and practice, work towards national consistency in health standards, and develop evidence-based public health, environmental health, clinical practice and ethical guidelines.</td>
<td></td>
</tr>
<tr>
<td>Other health agencies</td>
<td>• We work with a range of other government health agencies to invest in the highest quality health and medical research and to develop health advice and ethical guidelines.</td>
<td>Investment, Translation, Integrity</td>
</tr>
<tr>
<td>Peak bodies in the health and medical research sector</td>
<td>• We consult with universities, medical research institutes, academies and other peak bodies in the health and medical research sector to seek advice and evaluate our activities.</td>
<td>Investment, Translation, Integrity</td>
</tr>
<tr>
<td></td>
<td>• 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.</td>
<td></td>
</tr>
<tr>
<td>Australian Research Council (and others)</td>
<td>• We collaborate with the Australian Research Council (ARC) 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 (also co-authored with CSIRO).</td>
<td>Integrity</td>
</tr>
<tr>
<td></td>
<td>• Through the Australian Research Integrity Committee (ARIC), 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 public confidence in the integrity of Australia’s research effort.</td>
<td></td>
</tr>
<tr>
<td>International funding partners</td>
<td>• We collaborate with international funding agencies to support high quality collaborative international research, including through bilateral and multilateral joint funding schemes.</td>
<td>Investment</td>
</tr>
<tr>
<td>Philanthropic organisations</td>
<td>• We collaborate 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.</td>
<td>Investment</td>
</tr>
</tbody>
</table>
### Risk oversight and management

NHMRC applies an integrated risk management framework, where all staff are aware of the risks inherent in the activities we undertake and proactive in their management. Our positive risk culture requires us to have a sound understanding of appropriate risk acceptance and to apply this to daily decision-making processes. We actively use risk information to improve business processes and achieve our purposes.

NHMRC’s *Risk Management Policy and Framework* has been developed in accordance with the International Standard on Risk Management and the PGPA Act and Rule. It provides the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout NHMRC for the period covered by this plan.

Key enterprise risks relevant to the four-year period covered by this plan, broadly matched against our three purposes or capability, are outlined in Table 3. Strategic risks, if realised, may have a significant impact on NHMRC’s reputation, as well as outcomes. Operational risks are largely internal, but may still have a significant impact on the ability of NHMRC to operate and achieve its outcomes.

Table 3 also outlines NHMRC’s risk appetite, which recognises that it is not practical or possible to eliminate all risk, and outlines the level of risk tolerance that is considered acceptable in most circumstances. A high risk appetite 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 appetite indicates NHMRC makes additional effort to minimise exposure to the risk and/or takes immediate corrective action where required.

NHMRC’s strategic risk register sets out key risks in further detail, the controls in place to prevent the risk occurring, the likelihood and consequences of each risk occurring given the controls in place and, where necessary, the planned strategies to be implemented to further mitigate each risk. Over the coming four years, risks will be regularly reviewed at all levels of the organisation as we seek to identify, manage and mitigate our actual, potential and emerging risks.

### Managing enterprise risks during the pandemic

For the foreseeable future, NHMRC will continue to conduct regular risk assessments to test and adjust our response to the changing operational environment as a result of the pandemic, including considering the impact on our workforce and operations and on the health and medical research sector, reviewing the strategic risks to achieving NHMRC’s purposes and application of appropriate controls.

At the commencement of the 2020-21 planning cycle, NHMRC continues to implement its Business Continuity Plan, which was first activated in March 2020 in response to the government restrictions in place to contain SARS-CoV-2 infection in Australia. NHMRC maintains office locations in Canberra and in Melbourne and complies with local state and territory restrictions on business operations, with a focus on protecting the health and well-being of our staff working in each location.
In April 2020, the NHMRC leadership team introduced a strategic COVID-19 risk register that assesses the strategic risks to the delivery of our core outcomes across our three purposes: investment, translation and integrity. The register supports robust enterprise risk identification and application of controls and is subject to regular review, noting that our risk tolerance, current risk status and required controls will vary over the course of the pandemic as circumstances change. The register extends and temporarily modifies our key enterprise risks and risk appetite identified in Table 3.

### Table 3: Key enterprise risks and risk appetite

<table>
<thead>
<tr>
<th>PURPOSE</th>
<th>RISK DESCRIPTION</th>
<th>RISK TYPE</th>
<th>RISK APPETITE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Investment</strong></td>
<td>Funding opportunities are not available to talented researchers to contribute to the improvement of human health.</td>
<td>Strategic</td>
<td>Very Low</td>
</tr>
<tr>
<td></td>
<td>Grant application and review processes are a burden on researchers and peer reviewers such that the pool of available reviewers is reduced.</td>
<td>Strategic</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>Poor fiscal control or financial management adversely impacts NHMRC's ability to operate.</td>
<td>Operational</td>
<td>Low</td>
</tr>
<tr>
<td><strong>Translation</strong></td>
<td>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.</td>
<td>Strategic</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>Needs and feedback of stakeholders, including researchers and consumers, are not adequately taken into account, which adversely impacts achieving the end goals for the community.</td>
<td>Strategic</td>
<td>Moderate</td>
</tr>
<tr>
<td><strong>Integrity</strong></td>
<td>Research misconduct is not adequately investigated and addressed and/or inadequate controls are placed on NHMRC-funded researchers.</td>
<td>Strategic</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>There is unethical, fraudulent, corrupt conduct or systematic non-compliance by staff, service providers or contractors.</td>
<td>Operational</td>
<td>Very Low</td>
</tr>
<tr>
<td><strong>Capability</strong></td>
<td>Embracing innovation and building ICT and business capability exceed time, resource or cost constraints.</td>
<td>Strategic</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td>Core ICT platforms are ineffective or not stable.</td>
<td>Operational</td>
<td>Very low</td>
</tr>
<tr>
<td></td>
<td>Sustainability of operations and/or security of information held by NHMRC is threatened by malicious cyber activity.</td>
<td>Operational</td>
<td>Very low</td>
</tr>
<tr>
<td></td>
<td>ICT solutions operate sub-optimally or increase the burden on stakeholders.</td>
<td>Strategic</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>A suitable, appropriately skilled workforce that enables the achievement of NHMRC’s objectives is not maintained.</td>
<td>Operational</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>Inadequate workplace safety leads to an adverse incident.</td>
<td>Operational</td>
<td>Very low</td>
</tr>
<tr>
<td></td>
<td>Staff activity is inconsistent with the core values of the Australian Public Service—ICARE (Impartial, Committed to Service, Accountable, Respectful, Ethical).</td>
<td>Operational</td>
<td>Very low</td>
</tr>
</tbody>
</table>
Capability

NHMRC aims to operate effectively within a strong governance framework that supports performance, integrity, efficiency and compliance. Key capabilities for NHMRC’s effective operation include governance, workforce, business services, safety and security, and information and communications technology (ICT). Our core capabilities that ensure our effective operation are outlined in Table 4. Many of NHMRC’s key capabilities support our ability to be flexible and agile, adapting to new circumstances and addressing emerging issues. In addition to the core capabilities, we will focus on the following operational priorities in 2020–21 to ensure we have the capability we need over the period of the plan and beyond:

- Create operational resilience and adapt to changing work practices, including responding to COVID-19 disruptions.
- Continue to develop and deploy Sapphire to support NHMRC and MRFF grant programs and reduce the application and peer review burden on health and medical researchers.¹
- Continue to refine NHMRC’s grants hub service offering, which allows the Department of Health to leverage NHMRC’s capability to deliver MRFF programs.
- Plan for NHMRC’s 2021–2024 Triennium, including developing the health and medical research strategy and priority setting for the future.
- Strengthen engagement with the community and consumers across all areas of activity.
- Cultivate a resilient and high performing workforce, underpinned by a respectful and supportive work culture and professional development opportunities.
- Deploy ICT infrastructure to support the efficient and effective delivery of NHMRC operations, including optimising business processes and recordkeeping.

Table 4: Capabilities to support the effective operation of NHMRC

<table>
<thead>
<tr>
<th>CAPABILITY AREA</th>
<th>CORE CAPABILITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance</td>
<td>• Maintain a strong governance framework. \n                          • Maintain an effective financial and resource management framework. \n                          • Uphold a robust assurance framework (including legislative compliance, audit, risk management, fraud control and managing complaints).</td>
</tr>
<tr>
<td>Workforce</td>
<td>• Sustain workforce strategies that promote diversity, flexible work, learning and development, and performance management.</td>
</tr>
<tr>
<td>Business services</td>
<td>• Deliver critical internal business support services, including human resources, secretariat services, travel management and other business services. \n                          • Maintain NHMRC property and facilities.</td>
</tr>
<tr>
<td>Security and safety</td>
<td>• Maintain and strengthen NHMRC’s Business Continuity Plan. \n                          • Implement effective controls to meet the Australian Government’s Protective Security Policy Framework. \n                          • Uphold the Emergency Management Framework and comply with the Work Health and Safety Act 2011 and relevant Australian Standards.</td>
</tr>
<tr>
<td>ICT and communication</td>
<td>• Support critical grant management systems (Sapphire and RGMS). \n                          • Support and strengthen NHMRC’s ICT infrastructure and service delivery standards. \n                          • Protect NHMRC’s data and resources by continuing to implement and maintain the Cyber Security Strategy. \n                          • Strategically manage NHMRC’s digital communication channels, media relations and other external communications.</td>
</tr>
</tbody>
</table>

¹ Strategic Priority: Harnessing the power of data and analytical technologies.
Key activities

To implement the strategy for health and medical research and deliver against our strategic priorities, NHMRC has developed a set of key activities for the period covered by this plan. These activities are informed by NHMRC’s operating context, and incorporate a focus on the major national health issues. These high-level activities will be implemented through undertaking specific tasks and projects, which are set out in NHMRC’s internal business planning documents. As well as the activities under the three themes of investment, translation and integrity, an additional set of operational activities is outlined in the capability section (see Table 4), which provide critical support across all three themes.

Investment

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

Our priority activities for 2020–21 are to:

• Ensure that Australia maintains its capacity for high quality health and medical research across a range of health areas and challenges by ensuring funding opportunities are available and new grants are awarded through NHMRC’s grant program, including throughout the pandemic.

• Address the impact of the COVID-19 pandemic on health and medical research and researchers, including by: 2
  − Continuing to offer flexibility for NHMRC-funded researchers to pivot their research to COVID-19 where appropriate.
  − Facilitating grant variations for NHMRC-funded researchers whose research is delayed due to their involvement in the clinical or public health response or to social restrictions.
  − Modifying funding policies or processes, such as scheme closing dates, as needed to reduce the adverse impact on access to funding opportunities.

• Continue to optimise grant application, peer review and grant management processes, including through increased peer reviewer training. 1

• Build and make effective use of evaluation and data capabilities, including impact case studies, to monitor the performance of the NHMRC grant program.

• Develop and implement strategies to address gender inequality in NHMRC-funded research.

Over the period covered by this plan, we will:

• Deliver grant schemes that fund the best researchers and research from basic science through to clinical, public health and health services research and invest in innovative and collaborative research projects.

• Fund health research to improve health outcomes for Aboriginal and Torres Strait Islander peoples and to build and strengthen Aboriginal and Torres Strait Islander researcher capacity. 3

• Provide strategic funding in areas of need, such as Aboriginal and Torres Strait Islander health research and researchers, grants led by female researchers, and health services research. 3

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2 Strategic Priority: Resilience to environmental change, emerging health threats and emergencies.

3 Strategic Priority: Improving the health of Aboriginal and Torres Strait Islander peoples including through research that builds capacity in Aboriginal and Torres Strait Islander researchers and addresses health disparities.
• Deliver targeted calls for research that respond to unmet or emerging health needs and reflect national, state and territory, and consumer and community priorities.4

• Fund research that addresses major national health issues, including environmental change and human health, mental health and dementia.5,5

• Continue to deliver MRFF programs effectively and efficiently, leveraging NHMRC’s grant processes and capability, and working with the Department of Health to achieve program outcomes.

• Work with domestic and international partners, including non-government and philanthropic organisations and other government agencies, to support and encourage collaboration and innovation in health and medical research.

• Recognise excellence and celebrate leadership and outstanding contributions to the sector through NHMRC’s annual and biennial awards.

Translation

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

Our priority activities for 2020–21 are to:

• Drive a research-led, evidence-based health response to the COVID-19 pandemic2, including supporting the APPRISE Centre of Research Excellence, which is undertaking research to inform Australia’s emergency response to infectious diseases, and the National COVID-19 Health and Research Advisory Committee, which is advising the Chief Medical Officer.

• Maintain a leadership role in the development of public and environmental health and clinical advice, which is relied on by jurisdictions, including releasing the updated Australian guidelines to reduce the health risks from drinking alcohol and starting the revision of the Australian Dietary Guidelines.5

Over the period covered by this plan, we will:

• Drive translation of evidence into innovative and evidence-based health care, including by recognising Advanced Health Research and Translation Centres (AHRTCs) and Centres for Innovation in Regional Health (CIRHs) and finalising the research translation strategy.

• Engage with the Australian community and consumers on health care and medical research, including increasing community involvement in research and access to the results of research.

• Deliver grant schemes that focus on research translation, including encouraging industry engagement and the commercialisation of research outcomes.

• Develop and revise guidelines in public and environmental health and clinical advice to support consistent standards.

• Promote best practice evidence development and standards, including guidelines for guidelines and approval of third party clinical practice and public health guidelines.

• Maintain and update open access policies that encourage sharing of publications and data from NHMRC-funded research.

• Contribute to national and international research policy.

4 Strategic Priority: Issues related to the end of life and the delivery of palliative and supportive care.

5 Strategic Priority: Integrated and coordinated approaches to chronic conditions.
Integrity

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

Our priority activities for 2020–21 are to:

• Work with health consumers and the Australian Health Ethics Committee to develop an ethical framework to support decision-making in research and health care during the COVID-19 pandemic.\(^2\)

• Ensure the highest standards of ethical research are maintained during the COVID-19 pandemic, including contributing to national guidance on overseeing clinical trials in the context of the COVID-19 pandemic.\(^3\)

• Progress actions to ensure the rigour, transparency and reproducibility of health and medical research (under the NHMRC's Research Quality Strategy).\(^6\)

Over the period covered by this plan, we will:

• Promote the highest standards of research quality and integrity, including leading the development and revision of key statements, codes and guidelines.

• Identify, explore and consult on ethical issues relating to health, and develop ethical guidelines and advice as needed.

• Ensure the integrity of NHMRC-funded research and support ARIC.

• Continue to support streamlined research governance and ethics review processes.

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

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\(^6\) Strategic Priority: Improving research quality to maximise the rigour, transparency and reproducibility of NHMRC-funded research.
Performance

Performance criteria linked to each of NHMRC’s major purposes are in Table 5, including the reporting period/s in which each will be assessed over the four-year period of this plan. These measures are designed to capture NHMRC’s overall success in achieving its purposes. As with the key activities, while each criterion appears under one of NHMRC’s three purposes, some measure performance under more than one of the purposes.

NHMRC’s performance in achieving its purposes will be reported in the NHMRC Annual Report to Parliament at the end of the reporting period. The performance criteria in the table include those listed in NHMRC’s chapter of the Health Portfolio Budget Statements (PBS) (marked in the table with an asterisk) and additional measures that supplement the performance criteria in the PBS.

NHMRC continues to develop methods and build its capacity, including understanding the lived experience of consumers and the community, in defining and measuring the impact of the research we fund. As this capacity is built, additional performance measures using impact information will be developed.
### Table 5: Performance measures

<table>
<thead>
<tr>
<th>Performance criteria</th>
<th>Context</th>
<th>Assessment methodology</th>
<th>Targets</th>
<th>Measurement year/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.*</td>
<td>NHMRC grants cover the full spectrum of health and medical research and NHMRC-funded research is focused on working towards better health outcomes for all Australians. The impact of NHMRC-funded research is wide-reaching, with numerous examples showcased on the NHMRC website. NHMRC funds both researcher-initiated and priority-driven research. Priority areas are identified in a range of ways, including through engagement with community members and state and territory governments and through consideration of proposals submitted through our online pathway.</td>
<td>Quantitative assessment and analysis of the distribution of grant expenditure and of new grants awarded in the financial year. The analysis will draw on the new evaluation framework for NHMRC’s grant program. The analysis may be supplemented by select qualitative cases studies and/or researcher profiles of top grants awarded.</td>
<td>Grants are awarded, based on expert peer review, across the full spectrum of health and medical research areas and focus on achieving better health outcomes.*</td>
<td>2020–21</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Qualitative assessment of how targeted and priority driven funding meets a research gap and how the unmet need was identified.</td>
<td>Targeted and priority driven research funding calls are initiated that address areas of unmet need.</td>
<td>2021–22 2022–23 2023–24</td>
</tr>
</tbody>
</table>

*These performance criteria are included in the Portfolio Budget Statements.
**INVESTMENT**

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

<table>
<thead>
<tr>
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<th>Assessment methodology</th>
<th>Targets</th>
<th>Measurement year/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support research that will provide better health outcomes for Aboriginal and Torres Strait Islander peoples.</td>
<td>NHMRC is committed to contributing to better health outcomes for Aboriginal and Torres Strait Islander peoples. A range of initiatives are planned to support this important priority, under the guidance of NHMRC’s Principal Committee Indigenous Caucus (PCIC). These include a longstanding commitment to expending at least five per cent of the Medical Research Endowment Account annually on Aboriginal and Torres Strait Islander health research.</td>
<td>Quantitative assessment of grant expenditure and of new grants awarded in the financial year. Funding is categorised as ‘Indigenous health research’ by reviewing each funded grant against a range of investigator-provided data classifications including fields of research, keywords, grant titles and media summaries.</td>
<td>Monitor the number of new NHMRC grants awarded on Indigenous health research.</td>
<td>✓ ✓ ✓ ✓</td>
</tr>
<tr>
<td>Support Aboriginal and Torres Strait Islander researchers through building and strengthening capacity.</td>
<td>NHMRC supports the diverse research career pathways of Aboriginal and Torres Strait Islander researchers and offers a number of individual and team grants that are highly competitive.</td>
<td>Quantitative assessment based on the number of chief investigators currently funded across all NHMRC schemes who identify as being of Aboriginal and/or Torres Strait Islander descent.</td>
<td>Monitor the number of NHMRC-funded Aboriginal and Torres Strait Islander researchers.</td>
<td>✓ ✓ ✓ ✓</td>
</tr>
<tr>
<td>Foster gender equality in research funding through NHMRC policies and processes.</td>
<td>NHMRC is committed to gender equality in its research funding. Success rates for women in many NHMRC schemes have historically been below those of men. NHMRC’s Gender Equality Strategy aims to achieve a gender-equal health and medical research workforce by supporting an increase in the retention and progression of women.</td>
<td>Quantitative assessment of the funded rates for men and women across all NHMRC grant schemes (collectively) and in key schemes (Investigator, Ideas and Synergy), including considering distribution across career stage.</td>
<td>Monitor the funded rates for women in NHMRC grant schemes where funded rates are statistically significantly lower than those for men.</td>
<td>✓ ✓ ✓ ✓</td>
</tr>
</tbody>
</table>

*These performance criteria are included in the Portfolio Budget Statements.*
**TRANSLATION**

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

<table>
<thead>
<tr>
<th>Performance criteria</th>
<th>Context</th>
<th>Assessment methodology</th>
<th>Targets</th>
<th>Measurement year/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support an Australian health system that is research-led, evidence-based, efficient and sustainable.*</td>
<td>NHMRC’s Advanced Health Research and Translation Centre (AHRTC) initiative, and the Centre for Innovation in Regional Health (CIRH) initiative, recognise leading centres of collaboration in health and medical research, research translation, research-infused education and training, and outstanding health care.</td>
<td>Qualitative assessment of the outcomes from NHMRC-accredited AHRTCs and CIRHs, with a focus on identifying select outcomes and achievements for highlighting on the website, and as evidence that the accreditation process is effective in supporting improvements in these areas.</td>
<td>Improvements in clinical care, health service delivery, and clinical training achieved by AHRTCs and CIRHs are identified and promoted.*</td>
<td>✓ ✓ ✓ ✓</td>
</tr>
<tr>
<td>NHMRC develops and supports high quality guidelines for clinical practice, public health, environmental health and ethics. NHMRC’s guidelines and advice support other Commonwealth entities and states and territories in detecting and preventing poor health or illness as well as consistent standards in public and environmental health and clinical practice.</td>
<td>Qualitative assessment of NHMRC’s role in revising, developing and approving new guidelines that are timely, based on a review of the available evidence, follow transparent development and decision-making processes, and will promote health, prevent harm, encourage best practice and reduce waste.</td>
<td>Development and/or approval of public health, clinical and environmental health guidelines.</td>
<td>✓ ✓ ✓ ✓</td>
<td></td>
</tr>
<tr>
<td>Report on the impact of the research funded by NHMRC.</td>
<td>Measuring and recognising the impact of NHMRC-funded research where it has benefited or made broader contributions to society are critically important, as reflected in the Australian Government’s National Innovation and Science Agenda and the Australian Medical Research and Innovation Strategy 2016–2021.</td>
<td>Qualitative and in-depth assessment of the impact of NHMRC-funded research using a case study approach.</td>
<td>Five case studies (per year) are presented that demonstrate the impact of health and medical research funding.</td>
<td>✓ ✓ ✓ ✓</td>
</tr>
</tbody>
</table>

*These performance criteria are included in the Portfolio Budget Statements.
<table>
<thead>
<tr>
<th>Performance criteria</th>
<th>Context</th>
<th>Measurement methods</th>
<th>Targets</th>
<th>Expected measurement years</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Promote and monitor the implementation of the revised Australian Code for the Responsible Conduct of Research, 2018 (the Code) and supporting guides.</strong>&lt;sup&gt;*&lt;/sup&gt;</td>
<td>The Code is co-authored by NHMRC, the Australian Research Council and Universities Australia. The 2018 Code is supported by a series of Guides on specific topics to facilitate its implementation, the last of which is scheduled for release in early 2020–21. All Administering Institutions (AIs) should report full implementation by the end of 2020.</td>
<td>Quantitative assessment using NHMRC's annual survey of AIs (Institutional Annual Compliance Report) to ensure that the Code and its supporting Guides have been implemented in institutional processes.</td>
<td>Implementation of the Code and available Guides is reported by 100% of AIs.&lt;sup&gt;*&lt;/sup&gt;</td>
<td>2020–21</td>
</tr>
<tr>
<td><strong>Provide guidance to the research sector to support research quality.</strong></td>
<td>The quality of NHMRC-funded research is critical to ensuring that public funds spent on research deliver the highest possible value. Rigour, transparency and reproducibility in research are key foundations for research integrity.</td>
<td>Qualitative assessment of the guidance developed confirms that it focuses on critical issues including rigour, transparency and reproducibility and addresses previous gaps.</td>
<td>Guidance on research quality published.</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Stakeholders demonstrate good understanding of the regulatory requirements under the RIHE Act and PHCR Act.</strong></td>
<td>The NHMRC Embryo Research Licensing Committee oversees the RIHE Act and PHCR Act, and regulates research activities that involve the use of human embryos. NHMRC conducts inspections of licence holders to ensure compliance with the legislation and licence conditions.</td>
<td>Qualitative assessment is undertaken through licence inspections, which include an assessment of the licence holder’s processes in relation to activity under each licence and whether these processes meet legislative and licence requirements.</td>
<td>Good understanding of regulatory requirements is demonstrated through outcomes from inspections and six-monthly reports.</td>
<td>✓</td>
</tr>
</tbody>
</table>

*These performance criteria are included in the Portfolio Budget Statements.*