Association of Australian Medical Research Institutes



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Ms Roberta Bausch Public Support for Science and Innovation Study Productivity Commission PO Box 80 BELCONNEN ACT 2616

Dear Ms Bausch,

Thank you for the opportunity to contribute to your draft research report "Public Support for Science and Innovation" and in the workshop you held on 28 November. The Commission has done an outstanding job in addressing the tangible and intangible consequences of public investment in research and innovation in a balanced way.

One area of significant importance to medical research institutes addressed in your report is **Research Infrastructure**. You note in section 5.19 that several submissions expressed concerns about the level of public support for research infrastructure. Our strong view is that, as in the US, funding for research infrastructure (viz the indirect costs of supporting research) should track and be directly related to the direct support provided as competitive research grants. The infrastructure funding should follow the grant to the institution where the research is performed and the arrangements and level of support should ideally be the same irrespective of whether research is done in a university, an institute or other public body. The NHMRC could, for example, both award grants to the individual investigator and provide the associated infrastructure costs to the administering institution.

While various infrastructure support schemes are available in the higher education sector, these are currently inadequately funded. Furthermore, they are not open to medical research institutes, although some institutes do receive some support via their association with a university. When infrastructure funding is paid through an intermediary; the organisations at the lower end of the feeding chain do not have their actual costs met. We strongly support Universities' need for proper and appropriate funding and we benefit greatly from their cooperation but meeting deficiencies in university support should not be at a cost to productive research bodies such as medical research institutes.

From a recent Association of Australian Medical Research Institutes (AAMRI) survey we calculated that in 2005 AAMRI institutes spent over \$42,000,000 on infrastructure that was not covered by funding from government or grant sources and came from donations and investment income that should otherwise be spent directly on research. Australia has a great track record in medical research and in order to remain competitive and deliver improvements to Australia's health care system and better health outcomes, we need to be spending every dollar we can on cutting edge research. We also need to keep faith with donors and philanthropic organisations by spending money for the purpose for which it has been given.

A second area we wish to highlight is the exclusion of the medical research institutes from a number of government funding schemes. We do not understand why researchers in medical research institutes are not eligible for pre-seed funds and all ARC grants whereas university researchers are eligible for NHMRC as well as ARC grants and for pre-seed funds.

A third area of concern relates to the sustainability of the research workforce is crucial. One of the major challenges we have is to encourage talented people to become researchers or combine research with clinical work when they could be earning a lot more in other places. Another challenge is to keep these people in research. We receive better health care and our health care related industries such as biotechnology are growing on the back of training and experience gained by the workforce in publicly funded research in institutes and in universities. As Australia faces a national skills shortage we are concerned about the lack of sustainability of our research effort without better pay and better career options both within and outside the publicly funded sector.

Lastly, I would like to emphasise that health gain directly increases productivity and that Australia needs to become better at capturing data on the impact that our medical research has on the health of the Australian population, the health system and the economy. We support the efforts of the NHMRC in this regard but encourage the development of national collection and analysis of data in health to inform the consequences of the introduction of new therapy and diagnostic techniques and to ensure that resources are directed in line with the present and future burden of disease.

Yours sincerely

Garry Jennings

President AAMRI

Director Baker Heart Research Institute