NHMRC timetable

- McKeon report recommends integration of research and healthcare 2012
- NHMRC call for applications for AHRTC’s early August 2014
- Submitted September 2014
- Interview Dec 2014
Western Australian Health Translation Network (WA HTN)

- Better research collaboration, team work, partnerships along the translation pipeline, engage all 4 research pillars, allied health disciplines
- Prevention, early intervention, treatments
- Better patient care and informed practice
- Enhanced health policies
- Better community health, end user engagement
- Commercialization and innovation opportunities
- International linkages and recognition
Western Australian Medical Research Collaboration 2005-2014

Curtin: Curtin University
DoHWA: Department of Health WA
ECU: Edith Cowan University
FH: Fremantle Hospital
KEMH: King Edward Memorial Hospital
LEI: Lions Eye Institute
LIWA: Lung Institute of WA
Murdoch: Murdoch University
NDA: University of Notre Dame Australia
PI: Harry Perkins Institute
PMH: Princess Margaret Hospital
QEII: QEII Medical Centre
RPH: Royal Perth Hospital
SCGH: Sir Charles Gairdner Hospital
TKI: Telethon Kids Institute
UWA: The University of Western Australia
WANI: WA Neuromuscular Institute
WAHTN Governance

- High level goal setting
- Financial oversight

- Detailed management
- Operationalise strategic plan

EXECUTIVE BOARD

Independent Chair
Universities (1)
MRI (1)
Hospital (1)
Dept of Health (1)

Representatives of each constituent organisation + consumer rep.

MANAGEMENT COMMITTEE

Executive Director

Streams of Excellence

Cross Cutting Initiatives

Unincorporated Joint Venture
Outcomes of review

• Advised Feb 2015
  • “showed potential to achieve the leadership characteristics at an internationally competitive level”
  • “partnering was relatively recent”

• Need to demonstrate an active Network/Centre
  • Demonstrate a functioning centre/network
  • Demonstrate real evidence of coalescence and collaboration and translational successes
  • Co-ordination of major hubs (QEIIIMC and FSH)
  • Confirm influx of appointments

• Calls for re-application late 2016 at earliest ??
WAHTN: The Changing Environment

- Opening of Fiona Stanley Hospital
- SM RAC (SIRO) firmly established
- UWA MD Students into research electives
- Curtin Medical School announced
- Emergence of the “Northern Campus”, Joondalup/ Midland
- WANRI building at QEII campus
WAHTN: Research Streams: issues

- Leadership; teams or individuals?
- Develop strategic plans; respectful of existing institutional plans
- Need to unify across existing partner linkages and DoH networks
- Need to respond to referees; recruitment, link SCG with FHS, show partnerships are real
- Need to cross the 4 research pillars; start from the physician or patient end point
WAHTN: Research Streams **issues**

- Examples of partnerships across and between institutions and research pillars. *“Team WA”*
- Examples of effective translational pipeline; practice, policy, commercialisation
- Examples of big question from the physician or consumer standpoint
- Public (population) health; prevention and impact
- What’s in the translation pipeline
- What and where are the international linkages
- Vision for health care in WA in 2025
- Value add of the WAHTN
## WAHTN

<table>
<thead>
<tr>
<th>Streams of excellence</th>
<th>Research Education Training and Translation Programs</th>
<th>Consumer and Community Network</th>
<th>Lifecourse; cohorts; biobanks; integrated data systems</th>
<th>Genomics; metabolomics; metagenomics</th>
<th>Research governance, ethics and clinical trials</th>
<th>Cutting edge imaging and pathology facilities</th>
<th>Primary care, Public health and disease prevention</th>
<th>Health services, economic evaluation and health care systems</th>
<th>Stem cells and regenerative medicine</th>
<th>National, International linkages and Global health</th>
<th>Innovation, commercialization</th>
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<td>Collaboration, training, funding, translation</td>
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WAHTN: Measuring Success

- Time-frame: Ready to resubmit in 12 months (but we are doing this anyway).
- Assume evaluation at NHMRC follows similar format as in 2014.
- Responses to Referees; recruitment, links QEII to FSH, low hanging fruit.
- WAHTN as the facilitating/unifying series of platforms.
- CRE’s, Programs grants, new collaborations, new research funding.
- Joint appointments, joint graduate training.
- Research Education Training program.
- New collaborative platforms.
- Commercialization and innovation.
WAHTN: Measuring Success

• Time-frame; 12-18 months?
• Responses to Referees; recruitment, links QEII to FSH, low hanging fruit, Unifying as “Team WA”
• CRE’s, Programs grants, new collaborations
• Joint appointments, joint graduate training
• Research Training program
• New collaborative platforms
• International profile and engagement
• Commercialization and innovation
WAHTN: A Visionary and Unifying Approach

- Vision of health research/translation in WA
- Value add of WAHTN
- Big data/EMBL platform; precision medicine; genomics, metabolomics; imaging; 3D printing (Science on the Swan 2016)
- Prevention, not just treatment
- Understanding risk factors for complex diseases
WAHTN: Challenges

- Culture change: Entitlement; WIFM
- Partnerships and collaboration that respects individual and institutional priorities
- Funding (FHWA, Commonwealth, Private Sector, Philanthropic (turf), international)
- Political priorities (see Academic Health Sciences Network; Health Impact Report; health and wealth)
WAHTN: Next steps

- Partner engagement, input
- Overarching Strategic Plan
- Streams of Excellence, leadership, strategic planning across the research pillars
- Processes for forming/defining new streams
- Identifying new cross cutting initiatives, needs
- Communication strategy; web site
WAHTN: Timelines

Assume NHMRC Deadline of March 2017

DoH Milestone timelines

June 30, 2015

December 31, 2015

June 30, 2016

March 31, 2017

john.challis@uwa.edu.au

christine.shervington@uwa.edu.au

peter.thompson@health.wa.gov.au

www.wahtn.org
WAHTN: Critical Evaluation of our submission

- Manuscript analogy; potentially acceptable, with revisions
- More partner examples and cv’s
- Selling ourselves better
- Private health care/platform providers
- New platforms (e.g. stem cells, health systems, consumer engagement)
- Better linkages to existing DoH networks
- Innovation/ commercialisation
- What’s in the pipeline
- What’s the vision for health care in WA in 2025/2030
- What’s the value add of the WAHTN
Submission to the NHMRC for recognition as an

Advanced Health Research and Translation Centre
Western Australia

September 2014
WAHTN: Cross Cutting Platforms/Programs

- Imaging, complete inventory; time-lines; sustainability
- Consumer-community network
- Private-Public partnership
- Ethics review, common/reciprocal
- Biobanks and bioinformatics
- Genomics and Metabolomics
- Commercialization and Innovation
WAHTN: Governance

• Currently Unincorporated Joint Venture with Partnership Agreement (UWA as agent)
• Examine advantages of Incorporation
WAHTN: New Streams

- Criteria for establishment of new streams
  ERA, NHMRC success, (inter)national profile, translation success(es)
- Redefining/refocus present streams
- Additional areas, such as psychology, primary care, health systems; matrix approach
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