

EXECUTIVE SUMMARY

1. The **Alfred Medical Research and Education Precinct (AMREP)** vision is to be Australia's leading centre for **clinical research** underpinned by excellence in basic research and public health.
2. The **foundations** for excellence in clinical research require a combination of:
 - pre-eminent leadership in clinical practice
 - outstanding capacity in biomedical sciences and clinical measurement
 - high level support in clinical research methodology.
3. The AMREP partners recognise that a culture that encourages research excellence and leadership, associated with a commitment to excellence in research training, creates an environment that will attract and retain outstanding staff and research students.
4. AMREP has the **potential** to influence and inform global research directions and government policy in relation to innovative health care development and delivery.
5. In seeking to grow the research profile of AMREP, the **AMREP Council** has a major governance role in providing the infrastructure and environment in which clinical research can flourish. This will be achieved through planning and overseeing research on The Alfred campus and further developing the **AMREP collaborative model of excellence in clinical research**, taking account of the relevant **drivers for research excellence** and using **key performance indicators** to monitor research outputs.
6. The **drivers for research excellence** within AMREP include generation of new knowledge aimed at improving human health, and noting
 - National Health Priority Areas (1995)
 - National Research Priority of 'Promoting and Maintaining Good Health' (2002)
 - National Chronic Disease Strategy (2005)
 - Victorian Government Biotechnology Strategic Development Plan (2004)
 - National Biotechnology Strategy (2000)
 - The aspirations of each of the AMREP partners
7. There are **many areas of research strength** on The Alfred campus that should be further fostered and developed in the Baker Institute (cardiovascular disease and diabetes), the Burnet Institute (infectious diseases) and in the Monash University and Alfred hospital departments on the campus.

8. The more successful and higher profile current research effort within AMREP is strongly collaborative and can be characterised as comprising a number of **existing consortia** that should be further fostered and developed. These are:
 - Cardiovascular Research Consortium
 - Infectious Diseases Research Consortium
 - Trauma and Critical Care Research Consortium
 - Allergy / Asthma / Respiratory Medicine Research Consortium
 - Anaesthesia Research Consortium
 - Blood Diseases Research Consortium
 - Mental Health Research Consortium
 - Neurosciences Research Consortium
 - Public Health and Preventive Medicine Research Consortium.

9. In seeking to further promote key partnerships and relationships as a major basis for growing the research profile of AMREP and attracting and retaining staff and students of the highest quality, a number of **new consortia** should be actively developed as major collaborative AMREP initiatives. These are:
 - Diabetes and Obesity Research Consortium
 - Cancer Research Consortium
 - Health Services Innovation Research Consortium
 - Global Health Research Consortium
 - Diagnostics Research Consortium.

10. In addition, as opportunities arise, research should also be fostered in **other clinical areas** of significant importance to Bayside Health (such as Gastroenterology, Renal Medicine, Rheumatology, Surgery, Pathology, Pre-hospital Care, Ageing, Rehabilitation and Palliative Care) and in major professional **disciplines** (including Nursing and Allied Health).

11. A critical strategic planning issue is the necessary **research infrastructure (including equipment) and future space expansion requirements** for AMREP and the need for further detailed consideration of the following:
 - Alfred Centre Stage Two
 - Third AMREP Tower.

12. The AMREP Council should undertake the major leadership role in overseeing the **proposed recommendations and actions** (including the establishment of Working Groups) to implement the **AMREP Research Strategic Plan**, in particular regarding:
 - further progress of the **existing AMREP research consortia**
 - the development of the **proposed new AMREP research consortia**
 - research developments in **other clinical areas**
 - consideration of the use of **Alfred Research Trusts funds** to strategically support existing and new research developments
 - further detailed consideration of the necessary **research infrastructure (including equipment) and future space expansion requirements for AMREP.**



THE AMREP VISION

The **AMREP Council** has endorsed the following vision for the **Alfred Medical Research and Education Precinct (AMREP)**:

- *The AMREP vision is to be Australia's leading centre for **CLINICAL RESEARCH** underpinned by excellence in basic research and public health.*

To achieve this vision requires particularly strong, mutually supportive partnerships between each of the Founding Parties of AMREP (**Bayside Health, Monash University, Baker Institute** and **Burnet Institute**) and each of the New Parties (**Deakin University** and **La Trobe University**) which joined AMREP in 2005.

The **foundations** for excellence in clinical research require a combination of:

- pre-eminent leadership role in clinical practice
- outstanding capacity in biomedical sciences and clinical measurement (including imaging)
- high level support in clinical research methodology eg. epidemiology, biostatistics and data-management

The AMREP partners recognise that a culture that encourages research excellence and leadership, associated with a commitment to excellence in research training, creates an environment that will attract and retain outstanding staff and research students.

AMREP has the **potential** to influence and inform global research directions and government policy in relation to innovative health care development and delivery.

BACKGROUND

Over the past five years, The Alfred has developed a new dimension in national clinical research leadership with the establishment of the **AMREP collaborative model of excellence in clinical research** on The Alfred campus as a research and educational partnership between Bayside Health, Monash University, the Baker Institute and the Burnet Institute, as well as Deakin University and La Trobe University.

The current new research and education buildings of AMREP were opened in 2002, providing a major stimulus to research activity on the site. Competitive external research funding coming to the campus has grown from about \$16 million in calendar 2000 to \$64 million in 2006. This expansion in research has substantially promoted the local, national and international profiles of AMREP and the AMREP partners, thus attracting new research teams and research students, but thereby placing increasing pressure on the available space. The existing AMREP buildings are now either fully occupied or fully committed.

Future continuing expansion of research within AMREP is critically dependent on the development of additional space (see below). A lack of research space could lead to

vital activities moving away from the campus and is one of the major threats to the achievement of the AMREP vision.

In seeking to grow the research profile of AMREP, the **AMREP Council**, comprising representation from each of the AMREP Parties, has a major governance role in providing the infrastructure and environment in which clinical research can flourish. This will be achieved through planning and overseeing research on The Alfred campus and further developing the **AMREP collaborative model of excellence in clinical research**. The Council fulfils this role by acting as a forum for the AMREP partners and receiving and acting upon reports and advice from the AMREP Scientific Advisory Committee (SAC), The Alfred Human Research Ethics Committee, the AMREP Animal Ethics Committee, Monash Biosafety Committee, and AMREP Operational Working Groups such as those reporting on the Ian Potter Library, Education Centre, Precinct Animal Centre and other operational/management matters. The Council also provides advice annually to the Bayside CEO regarding the most appropriate allocation of the Alfred Research Trusts Funds available to support research on The Alfred campus.

As documented in the annual AMREP Research Report, the AMREP Council uses a number of **Key Performance Indicators** to monitor overall annual research outputs of AMREP; these include external research funding, publications and higher degree completions (particularly PhD completions).

DRIVERS FOR RESEARCH EXCELLENCE WITHIN AMREP

The relevant drivers for research excellence within AMREP include the following:

1. To generate new knowledge aimed primarily at improving human health, taking special note of:
 - **National Health Priority Areas (1995)**
 - Cardiovascular health
 - Cancer control
 - Injury prevention and control
 - Mental health
 - Diabetes mellitus (added in 1996)
 - Asthma (added in 1999)
 - Arthritis and musculoskeletal conditions (added in 2002)
 - **National Research Priority of 'Promoting and Maintaining Good Health' (2002)**
 - *A healthy start to life (counteracting the impact of genetic, social and environmental factors which predispose infants and children to ill health and reduce their well being and life potential)*
 - *Ageing well, ageing productively (developing better social, medical and population health strategies to improve the mental and physical capacities of ageing people)*
 - *Preventive healthcare (new ethical, evidence-based strategies to promote health and prevent disease through the adoption of*

healthier lifestyles and diet, and the development of health-promoting products)

- Strengthening Australia's social and economic fabric
(understanding and strengthening key elements of Australia's social and economic fabric to help families and individuals live healthy, productive and fulfilling lives)
 - **National Chronic Disease Strategy** (2005) which provides a framework of national direction for improving chronic disease prevention and care.
 - **Victorian Government Biotechnology Strategic Development Plan** (2004)
 - **National Biotechnology Strategy** (2000) which provides a framework for the development of Australian biotechnology.
 - **Aspirations of each of the AMREP partners**, for instance:
 - **Bayside Health** has the following **Vision**: "Excellence in health care and service". Included in its **Strategic Priorities** is "Be the leader in health science and practice" with the following three related **Strategic Goals**: "Foster research for clinical advances and innovation"; "Partner with universities and other research and education institutions to achieve academic and clinical excellence"; and "Educate current and future practitioners to meet emerging clinical care needs";
 - **Monash University at AMREP** has the following **Research Mission**: "In collaboration with The Alfred Hospital, to undertake basic, applied and translational research, addressing a variety of diseases seen within The Alfred and to train medical and biomedical research scientists";
 - **Baker Institute** has the following **Mission Statement**: "To reduce death and disability from heart disease and to achieve this through activities ranging from research at the laboratory bench to patient trials and patient care";
 - **Burnet Institute** has the following **Mission**: "To create a healthier world by utilising our unique skills in infectious diseases, immunology and public health to produce health outcomes such as vaccines for infectious diseases and cancer, better strategies for the treatment and prevention of infection, and innovative public health programs both in Australia and in our region".
 - The **AMREP Vision** (see above): "To be Australia's leading centre for **clinical research** underpinned by excellence in basic research".
2. To improve the quality of patient care and to take a high public profile in matters of disease prevention and control in the Australian community.
 3. To develop and maintain outstanding medical / clinical research infrastructure and a national and international leadership role in a variety of

specialty areas, leading in turn to the attraction and retention of the best clinical and research staff and students.

4. To enhance the profile and reputation of The Alfred and the other AMREP partners – and the **AMREP collaborative model of excellence in clinical research** – locally, nationally and internationally.
5. To generate public, government and philanthropic sector recognition, respect and ongoing support for AMREP, The Alfred and its AMREP partners

OVERVIEW OF CURRENT AMREP RESEARCH

In response to a request for information regarding current and planned research activities during 2006, input to the Strategic Planning Process has been received from Heads of Departments of The Alfred, Monash University Departments on The Alfred campus and Directors of the Baker and Burnet Institutes. The responses are substantially reflected in the latest **AMREP Research Report 2005**.

An evaluation of the current research on The Alfred campus reinforces the view that there are many areas of research strength and achievement that should be further fostered and developed. It is suggested that a hierarchy of relative research strength and achievement could be developed, based on an assessment of international and/or national recognition and competitiveness (particularly as reflected in competitive external grant income) as follows:

Outstanding research, internationally recognised, internationally competitive:

- Cardiovascular Disease and Diabetes – Baker Institute (and Alfred/Monash)
- Infectious Diseases – Burnet Institute (and Alfred/Monash)

Very strong research, internationally recognised, nationally competitive:

- Allergy, Immunology and Respiratory Disease – AIRmed (Alfred/Monash)
- Mental Health – Alfred Psychiatry Research Centre (APRC) (Alfred/Monash)
- Trauma – National Trauma Research Institute (NTRI) (Alfred/Monash)
- Blood Diseases – Australian Centre for Blood Diseases (ACBD) (Monash)
- Epidemiology and Preventive Medicine (DEPM) (Monash)
- Anaesthesia (Alfred/Monash)
- Intensive Care (Alfred/Monash)

Strong research, nationally competitive:

- Immunology (Monash)
- Neurosciences (Monash / Alfred)

Promising basis for research, worthy of further development:

- Medicine (Monash) – but noting links with AIRmed, Neurosciences etc

- Surgery (Monash) – but noting links with CORE, Neurosurgery, NTRI etc
- Centre for Health Innovation (CHI) (Alfred / Monash / La Trobe / Baker)
- Gastroenterology (Alfred/Monash)
- Renal Medicine (Alfred/Monash)
- Rheumatology (Alfred/Monash)
- General Surgery (Alfred/Monash)
- Pathology (Alfred/Monash)
- Pharmacy (Alfred/Monash)
- Radiology (Alfred/Monash)

Important gap in research, requiring significant development (eg. recruitment strategies), taking into account strong clinical profile:

- Cancer (taking into account strong clinical profile and patient loads in medical oncology, radiation oncology, surgical oncology and haematological oncology, potential interest of Monash DEPM and ACBD, and noting the merger between the Burnet Institute and the former Austin Research Institute which brings to AMREP substantial cancer research programs, including cancer vaccine, antibody and therapy groups)

Other significant gaps in research, requiring further consolidation:

- Nursing
- Allied Health
- Aged Care and Rehabilitation*
- Palliative Care

* A Bayside Health Research Strategy for Rehabilitation, Aged and Community Care is currently being developed.

THE AMREP CONSORTIUM CONCEPT

In seeking to grow the research profile of AMREP, consistent with the drivers for research excellence within AMREP, it is noted that there are many areas of existing research strength on The Alfred campus that should be further fostered and developed. Much of the more successful and high profile current research effort within AMREP is strongly collaborative and can be characterised as comprising a number of **existing AMREP consortia**.

In seeking to further promote key partnerships and relationships as a major basis for growing the research profile of AMREP and attracting and retaining staff and students of the highest quality, a number of **new AMREP consortia** should be actively developed as major collaborative AMREP initiatives.

Existing AMREP Consortia

The **existing AMREP consortia** that should be further fostered and developed are as follows:

1. Cardiovascular Research Consortium (Leader: Garry Jennings) involving:

- Baker Institute
- Alfred Cardiovascular Medicine
- Alfred Cardiothoracic Surgery
- Alfred Vascular Surgery
- Alfred Clinical Pharmacology
- Australian Centre for Blood Diseases (ACBD)
- Alfred Pharmacy
- Alfred Physiotherapy
- Monash Immunology
- Monash Surgery
- Monash DEPM
- Nucleus Network (Clinical Trials)
- Monash Pharmacology

2. Infectious Diseases Research Consortium (Leader: Steve Wesselingh) involving:

- Burnet Institute
- Alfred Infectious Diseases
- Monash Medicine
- Monash Immunology
- Monash DEPM
- Alfred Pharmacy
- Alfred Psychiatry Research Centre
- Alfred Physiotherapy
- Monash Infection and Immunity Group
- Melbourne University Microbiology
- Melbourne University Nossal Institute
- DHS Communicable Diseases Control, Public Health

3. Trauma and Critical Care Research Consortium (Leader: Thomas Kossmann) involving:

- National Trauma Research Institute (NTRI)
- Alfred Emergency Medicine
- Alfred Trauma Surgery
- Alfred Intensive Care
- Alfred Neurosurgery
- Alfred Anaesthesia
- Monash Surgery
- Alfred Orthopaedics
- Alfred Plastic and Reconstructive Surgery
- Alfred Burns
- Alfred Physiotherapy
- Alfred Occupational Therapy
- Alfred Speech Pathology
- Alfred and CGMC Rehabilitation
- Epworth Rehabilitation

- Monash DEPM
- Monash Accident Research Centre
- Australian Centre for Posttraumatic Mental Health (University of Melbourne)
- Metropolitan Ambulance Service

4. Allergy / Asthma / Respiratory Medicine Research Consortium (Leader: Robyn O’Hehir) involving:

- Alfred Allergy, Immunology & Respiratory Medicine (AIRmed)
- Monash Immunology
- Monash DEPM
- Monash Medicine
- Alfred Cardiothoracic Surgery
- Alfred Pharmacy
- Alfred Physiotherapy
- Baker Institute
- Monash Physiology
- Monash Institute of Medical Research
- University of Melbourne Medicine
- University of Melbourne Pharmacology
- Alfred and CGMC Rehabilitation, Aged and Community Care
- CRC for Asthma and Airways

5. Anaesthesia Research Consortium (Leader: Paul Myles) involving:

- Alfred Anaesthesia
- Monash DEPM
- Alfred Intensive Care
- Alfred Cardiothoracic Surgery
- Monash Surgery
- ANZCA Trials Group

6. Blood Diseases Research Consortium (Leader: Hatem Salem) involving:

- Australian Centre for Blood Diseases (ACBD)
- Monash Immunology
- Monash DEPM (via links with NBA & Red Cross)
- Baker Institute
- Alfred Haematology
- Alfred Bone Marrow Transplantation Unit
- Ronald Sawers Haemophilia Centre
- Alfred Myeloma Research Group
- Alfred Pharmacy
- Monash Medical Centre Haematology
- Monash Primary Health Care

7. Mental Health Research Consortium (Leader: Jayashri Kulkarni) involving:

- Alfred Psychiatry Research Centre (APRC)
- Bayside Psychiatry
- Monash DEPM

- Monash Women's Health
- Alfred Radiology
- Alfred Neurosurgery
- Alfred Occupational Therapy
- Monash Neuroscience
- National Trauma Research Institute (NTRI)
- Alfred Emergency
- Burnet Institute
- Mental Health Research Institute
- Headspace (Youth Mental Health Program)
- Orygen (Youth Mental Health Research Centre)
- Monash Child and Adolescent Mental Health Research Centre
- National Register for Antipsychotic Medication in Pregnancy

8. Neurosciences Research Consortium (Leader: Elsdon Storey) involving:

- Monash Neuroscience and Van Cleef Roet Centre for Nervous Diseases
- Alfred Neurology and Clinical Neurophysiology
- Alfred Stroke Service
- Alfred Neurosurgery
- Alfred Anatomical Pathology
- Alfred Psychiatry Research Centre (APRC)
- Monash Medicine
- CGMC Cognitive Assessment, Dementia and Memory Service
- La Trobe Neuropsychology
- Monash Psychology
- Mental Health Research Institute
- Murdoch Institute

9. Public Health and Preventive Medicine Research Consortium (Leader: John McNeil) involving:

- Monash DEPM
- Baker Institute
- Burnet Institute
- Centre for Health Innovation (CHI)
- National Trauma Research Institute (NTRI)
- Alfred Rheumatology
- Alfred Intensive Care
- Alfred Anaesthesia
- Alfred Psychiatry Research Centre
- Alfred Pharmacy
- Alfred and CGMC Rehabilitation, Aged and Community Care
- State and National Registries / Databases
- CRC for Water Quality and Treatment
- Australian and NZ Intensive Care Society Clinical Trials Unit
- National Centre for Research in Patient Safety
- Monash Centre for Occupational and Environmental Health Research
- Australian Centre for Human Health Risk Assessment

- Monash Centre for Health Economics
- Monash Primary Health Care

Proposed New AMREP Consortia

Building on this **consortium model**, it is proposed that a number of **new consortia** be actively developed as major collaborative AMREP initiatives. The **rationale** for identifying these research areas is based on the **drivers for research excellence within AMREP** (see above) and the **aspirations and developmental needs** of each of the AMREP partners, for instance noting the relative lack of substantial cancer research strength compared with the very large cancer clinical load at The Alfred. These **proposed new consortia** are as follows:

- 1. Diabetes and Obesity Research Consortium** (Leader: Garry Jennings) involving:
 - Baker Institute
 - International Diabetes Institute (IDI)
 - Monash Immunology
 - Alfred Endocrinology and Diabetes
 - Alfred Nutrition and Dietetics
 - Alfred Pathology (Biochemistry)
 - Alfred Renal Medicine
 - Alfred Pharmacy
 - Centre for Obesity Research and Education (CORE)
 - Monash Medicine
 - Monash DEPM
 - Nucleus Network (Clinical Trials)
 - Monash Physiology
- 2. Cancer Research Consortium** (Leader: Hatem Salem) (noting The Alfred's very large throughput of cancer patients; the availability of all major treatment modalities at The Alfred - medical oncology, radiation oncology, surgical oncology, haematological oncology, bone marrow transplantation; and the need to develop new therapies based on new technologies) involving:
 - Australian Centre for Blood Diseases (ACBD)
 - Southern Metropolitan Integrated Cancer Service (SMICS)
 - Burnet Institute
 - Monash Institute of Medical Research
 - Alfred Medical Oncology
 - Alfred Radiation Oncology
 - Alfred Radiology
 - Alfred Nuclear Medicine
 - Alfred General Surgery
 - Alfred Gastroenterology
 - Alfred Colorectal Surgery
 - Alfred Melanoma Service
 - Alfred Haematology
 - Alfred Bone Marrow Transplantation Unit

- Alfred Myeloma Research Group
- Alfred Pathology
- Alfred Anatomical Pathology
- Alfred Pharmacy
- Monash DEPM
- Monash Immunology
- Nucleus Network (Clinical Trials)
- CRC for Biomarker Translation

3. Health Services Innovation Research Consortium (Leaders: John McNeil / Cathie Steele) involving:

- Centre for Health Innovation (CHI)
- Monash DEPM (including Centre for Research Excellence in Patient Safety)
- Monash Institute of Health Services Research (Monash Medical Centre)
- Baker Institute
- Alfred Pharmacy
- Alfred Radiology
- Alfred Pathology
- Alfred Physiotherapy
- Alfred and CGMC Nursing and Allied Health
- Alfred and CGMC Rehabilitation, Aged and Community Care
- Alfred Biomedical Engineering
- Bayside IT
- La Trobe Faculty of Health Sciences
- Monash Centre for Health Economics
- Monash IT
- Industry Partners (eg Intel, IBM)

4. Global Health Research Consortium (Leaders: Steve Wesselingh / Brian Oldenburg) (with a major focus on infectious disease but also with substantial emphasis on chronic diseases and lifestyle health issues, and possibly leading to the development of a “**Global Health Institute**”) involving:

- Monash DEPM
- Burnet Institute
- Baker Institute
- International Diabetes Institute (IDI)
- Alfred Infectious Diseases
- Alfred Endocrinology and Diabetes
- Alfred Nutrition
- Centre for Obesity Research and Education (CORE)
- Alfred Rheumatology
- Alfred Pharmacy
- Alfred and CGMC Rehabilitation, Aged and Community Care
- Alfred Disease Management Unit
- Centre for Health Innovation (CHI)
- Monash Centre for Health Economics

- Monash Malaysia
- Monash South Africa
- Nossal Institute for Global Health

5. Diagnostics Research Consortium (Leader: John McNeil) (taking advantage of the unique resources within the Alfred of high level diagnostic technologies, strong laboratory support and capacity in the design and analysis of diagnostic evaluations, including their cost-effectiveness) involving:

- Alfred Haematology
- Alfred Biochemistry
- Alfred Anatomical Pathology
- Alfred Radiology
- Alfred Nuclear Medicine
- Alfred MRI Unit
- Monash DEPM
- Baker Institute
- Burnet Institute
- Monash Immunology
- Centre for Health Innovation (CHI)
- Monash Centre for Health Economics.

In addition, as opportunities arise (such as through Professor/Director appointments and targeted funding opportunities), it is proposed to extend this consortium concept to promote research development of **other clinical areas** of significant importance to Bayside Health, taking into account substantial patient loads, such as:

- Gastroenterology
- Renal Medicine
- Rheumatology
- Surgery
- Pathology
- Pre-hospital Care
- Ageing
- Rehabilitation
- Palliative Care

and to promote enhanced research capacity in major professional **disciplines**, including:

- Nursing
- Allied Health.

FUTURE SPACE EXPANSION REQUIREMENTS FOR AMREP

These matters require further detailed consideration by AMREP Council:

- 1. Space in the existing AMREP buildings** (Baker Tower, Burnet Tower, and Monash / Library / Education Building) is either fully occupied or fully committed.

2. Alfred Centre Stage Two is critical to allow:

- expansion of Burnet Institute, in particular to provide accommodation for former Austin Research Institute staff;
- expanded accommodation for Monash requirements including DEPM and the Monash Clinical School (and space for the campus's main Lecture Theatre) allowing closure and eventual demolition of the existing Monash Clinical School building – in turn, allowing space for building of The Alfred's proposed "**West Wing**" (a major clinical development on the old Monash Clinical School site);
- accommodation for other AMREP partners, including La Trobe University, Metropolitan Ambulance Service, biotechnology companies and, possibly, others such as the International Diabetes Institute.

3. Longer term expansion needs will require further consideration of the "**Third AMREP Tower**", to be located immediately south of the existing AMREP Buildings and, ideally, linked to the existing Burnet Tower (noting that Psychiatry will, in due course, be relocated to the "West Wing" building). This "**Third AMREP Tower**" development will provide the following opportunities:

- the potential to develop a major "**Global Health**" initiative (possibly a "**Global Health Institute**") as a joint venture between Monash University (particularly involving DEPM), Burnet, Baker and Bayside;
- the potential to provide **additional research laboratory space** and **clinical research support space** for AMREP;
- the potential to decant some research staff from Alfred Centre Stage Two, providing flexibility to free up space for **Alfred Centre clinical expansion**.

PROPOSED RECOMMENDATIONS AND ACTIONS

1. It is **recommended** that the **existing AMREP consortia** should be further fostered and developed, and that advice be requested from each consortium's "Leader" regarding the provision to AMREP Council of a copy of the most recent Strategic Plan for each consortium (and advice regarding its stage of implementation and any updating).
2. It is **recommended** that the **proposed new consortia** should be developed as major AMREP initiatives, and that AMREP Council establish Working Groups to consider the feasibility of each proposal and to develop business cases, as appropriate, for the consideration of AMREP Council.
3. It is **recommended** that, as opportunities arise (such as through Professor/Director appointments and targeted funding opportunities), AMREP Council continues to consider strategies to promote research developments

in other important clinical areas such as Gastroenterology, Renal Medicine, Rheumatology, Surgery, Pathology, Pre-hospital Care, Ageing, Palliative Care and Rehabilitation, and to promote enhanced research capacity in Nursing and Allied Health.

4. With respect to the **Alfred Research Trusts funds**, it is noted that the current policy, supported by AMREP Council, is to provide targeted research infrastructure funding to support successful established and new research leaders while ensuring that seed funds remain available to promote research development in such areas as Nursing, Allied Health, and Aged Care, as well as the continuation of the Small Grants Scheme for new investigators and the Research Scholarships Program for PhD students. It is **recommended** that, although this general policy should be maintained, AMREP Council should consider how such funds may also contribute towards strategic support of the proposed new consortia and the promotion of research developments in other important clinical areas (see above).
5. It is **recommended** that AMREP Council establishes a Working Group to give further detailed consideration to the necessary **research infrastructure (including equipment) and future space expansion needs for AMREP**.

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