

# SAHMRI Annual Report 2020



# Acknowledgement of Country

The South Australian Health and Medical Research Institute (SAHMRI) acknowledges the Kurna people as the Traditional Custodians of the Adelaide plains, where our buildings are located.

We recognise the Kurna people's cultural, spiritual, physical and emotional connection with the land. We honour and pay our respects to Kurna elders both past and present and all generations of Kurna people, now and into the future.

We acknowledge other Traditional Owners who live across South Australia and Australia, where SAHMRI research is conducted.

**Pictured:** A segment from SAHMRI's Inaugural Reconciliation Action Plan (RAP) 2018-2020  
Artwork *Karrawirra Pari* by Allan Sumner



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# Letter from the Executive Director

The year 2020 will forever be defined by COVID-19 – the global pandemic that changed, perhaps forever, how we live, work and even speak. Sitting here now, still in the midst of this pandemic, it is not the impositions that stand out in my reflections, it is the strength of our collective response that first comes to mind.

The difficulties COVID is wreaking on our everyday existence are many and well-known. The silver linings of this very dark cloud however might not be apparent for some time. Our sense of community, our appreciation of the value of human interactions and our greater flexibility in the workplace stand out as benefits of this period we are navigating. It will be interesting to see how lasting these and other benefits are.

For the world of health and medical research, the pandemic has turned the public spotlight on the breadth of our role; from basic science to public health and every step in between. We at SAHMRI, and our partner institutions, have felt this glare as our community looks to us for understanding and solutions. I can say without equivocation that we have relished that responsibility and are rising to each challenge when confronted.

The efforts required and sacrifices made just to maintain SAHMRI's vital research programs deserve considerable admiration. Beyond these, we have shouldered additional responsibilities that directly contribute to the global scientific response to COVID. These projects are too many to list in detail but include Professor David Lynn's team's role in the international BRACE Trial investigating

the non-specific immune-boosting potential of the common BCG vaccine; Professor Geraint Rogers' group's PETRA Study validating UV light as a means of killing airborne viruses; and Professor Caroline Miller's collaboration spearheading the COVID-19 Evidence Synthesis that is arming our state's decision makers with the best evidence on which to base their pandemic response measures.

SAHMRI's ability to continue our existing work while simultaneously joining the fight against COVID-19 owes wholly and solely to the resilience, selflessness and ingenuity of each and every member of our community. Guided by our Quality, Risk and Safety Manager Dorota Garncarz as Chair of our COVID-19 Response Committee, we have all done what we need to, when we need to do it, with a collegiality that brings us closer together during times when we could understandably have fallen into the trap of self-interest. The logistical challenges involved in rapidly but safely relocating our workforce to be based in their homes, then transitioning everyone back to the workplace cannot be overstated.

While COVID coloured almost every aspect of life in 2020, we at SAHMRI got on with business, realising achievements that would be significant regardless of circumstances, let alone in the middle of a pandemic.

Our researchers continued to win more than our fair share of grants, in particular from the highly competitive Medical Research Future Fund.

Our Registry of Senior Australians played a major role in delivering evidence to, and shaping the

outcomes of, the Royal Commission into Aged Care Quality and Safety.

SAHMRI has been central to the establishment of the South Australian Genomics Centre – supercharging statewide access to genomic technologies and bioinformatics – and the Adelaide Health Innovation Partnership – integrating the knowledge and resources of partner organisations to deliver tangible impacts for research and patient care.

The South Australian Productivity Commission's inquiry into health and medical research demanded SAHMRI justify our value to the sector in this state, with the findings overwhelmingly endorsing our success as a research institute while highlighting the impact we have had and the potential for even greater contributions into the future.

Perhaps most significantly, after years of painstaking preparations, June of 2020 saw construction begin on The Australian Bragg Centre for Proton Therapy and Research. Located across the bottom three levels of the building that will stand next to SAHMRI's existing headquarters, this centre will bring the life-saving potential of proton therapy to Australia for the first time.

Proton therapy is a highly precise form of radiotherapy that can pin-point tumours while preserving healthy surrounding tissues. This precision can significantly reduce side-effects when treating cancers in vulnerable areas around the brain, eyes and spinal column, and is revolutionary for treating many children's cancers.

Delivering Australia's first proton therapy unit, and the first of its kind in the Southern Hemisphere, will also put Adelaide at the centre of research into this still relatively novel form of cancer treatment.

While the construction site is little more than a hole in the ground currently, we will soon begin to see this seminal building emerge. Construction of the building itself will be completed in 2023 with proton therapy to be administered from some time in 2025 once the unit is installed, calibrated and tested.

I said at the opening of this letter that 2020 has been defined by COVID-19 and I believe that is difficult to argue against. I am just as certain however that COVID has not defined SAHMRI's 2020. It has been an ever-present obstacle, yes, but you can clearly see from my brief summaries above that despite the pandemic we have so much to be proud of this year, and so much more to look forward to in the years to come.

I would like to sincerely congratulate and thank all of our staff, partners, students and supporters for their part in seeing SAHMRI stand tall amidst the uncertainty of this year. The pandemic will be with us for some time but I have no reason to believe our community won't continue to navigate it with strength and unity.



**Professor Steve Wesseling**  
SAHMRI Executive Director



**Mr Raymond Spencer**  
SAHMRI Chair of the Board

# Letter from the Chair of the Board

The 2020 year began much like any other but, as we know, soon became a year unlike any of us have ever experienced before. What began as rumours of a highly infectious and potentially dangerous new respiratory disease, by March had become a global pandemic that reconfigured almost everything we, until then, had considered normal.

As our vocabularies became filled with terms like self-isolation, social distancing, close contact and, of course, unprecedented, SAHMRI joined the rest of the world in trying to maintain some sense of normality despite having to connect 'virtually' with almost everything we did. Our meetings, research collaborations, staff get-togethers including Flagship Focus, community engagement and supporter events all had to move online.

From necessity though comes invention, which gave rise to SAHMRI's first ever cooking show! The Cook and the Chief - featuring SA's most-loved 'cook' Maggie Beer and our Chief Scientist Professor Caroline McMillen was an wonderful production that not only shared some handy hints in the kitchen but shared the research behind the value of healthy eating.

As much as we found ways to work around the pandemic, it inevitably brought disruptions.

COVID-19 impacted our ability to deliver on the commitments outlined in our first Innovate Reconciliation Action Plan (RAP). Our outgoing RAP Project Officer Renee Andrew did a magnificent job throughout her time with SAHMRI and much of the success of our RAP

journey so far is owed to her. Renee has left our new RAP Project Officer, Sarah Smith, in a strong position to close out our Innovate responsibilities and transition SAHMRI to the Stretch part of our Reconciliation path.

Another SAHMRI initiative that felt the impact of the pandemic was our first ever large-scale peer-to-peer fundraising event. BRIGHT was designed as a mass participation walking challenge but had to become a virtual event due to gathering restrictions. This evolution was one of a litany of hurdles our fundraising team had to overcome right up until the launch day. The fact they still managed to stage an event that raised vital money for our research, and awareness of what we do and why we do it, exemplifies the spirit our entire community has demonstrated this year. BRIGHT has, through no fault of our organisers, had humble beginnings, but is something we are committed to growing over time.

As an organisation more generally, the pandemic has enabled us to see our work and role in society through a new prism, crystallising our priorities amid a variety of opportunities. Internal assessments, coupled with independent ones such as the SA Productivity Commission's Health and Medical Research Inquiry, have brought even greater focus on where SAHMRI can have the most impact. This has also strengthened our collaborative relationships with partners including our state's universities and public health system.

Internally, we continued to grow and develop. We welcomed new members Eddie Fry and Ben Kile to our Board. Eddie brings with him significant business experience, particularly in the field of financial and human resource management, and is our first Board member who identifies as an Aboriginal or Torres Strait Islander person. Ben has experience across universities and medical research institutes with a strong history of fostering the commercialisation of research.

SAHMRI continues to invest in the wellbeing and development of our people. This year has seen the launch of our Mentorship program, the acceleration of our Leadership Development and the roll-out of our Wellbeing and Resilience Centre's renowned training program for all staff, partners and students.

Externally, SAHMRI's strength has never been more apparent. In the face of adversity, SAHMRI has been a trusted institution that South Australia turned to for leadership and advice. Publicly, we saw this with our senior researchers, from Executive Director Steve Wesselingh down, frequently in the media explaining the disease, its impact, its modes of transmission and how to effectively protect ourselves. Less visible, but just as importantly, SAHMRI's research community has been instrumental in a range of projects at the forefront of the global response to the pandemic.

This has unquestionably been a year of unique and dynamic challenges. I can comfortably say that across my 10-plus years serving as the Chair of SAHMRI, I have never before been so proud of our institute and its people.

The manner in which we've continued our research program while simultaneously turning our resources to this novel health challenge is one thing, but what truly gives me pride is the perseverance we have all demonstrated and the care we have shown for each other.

As 2020 comes to a close, we are still very much in the midst of this pandemic, but with viable vaccines nearing the end stages of development, the end is certainly in sight.

We are privileged to live in a place that has endured far less of the hardships that have befallen others across Australia and the world. My thoughts, and I'm sure those of all of you, are very much with our friends, family and everyone who is doing it so much tougher than we are.

Thank you and take care.



# Board of Directors



**Mr Raymond Spencer**  
Non-executive Chair

Raymond Spencer was born in Adelaide, studied at the University of Adelaide and has lived and worked in the US, India and Europe. He brings to the role more than 35 years' experience across international business, management planning, technology, finance, organisational culture expertise and mergers and acquisitions.

Mr Spencer was appointed to the Board as Chair on 21 December 2009.



**Mr Alan Young, AM**  
Non-executive Deputy Chair

Alan Young co-authored the Shine Young Report with Professor John Shine. The Report came out of the Review of Health and Medical Research in South Australia, commissioned by the South Australian Government in 2007, and led to the establishment of SAHMRI.

Mr Young was appointed to the SAHMRI Board on 21 December, 2009.



**Professor Steve Wesseling**  
Executive Director

Professor Steve Wesseling is the Executive Director of SAHMRI. He is an infectious diseases physician with research interests in neurovirology, HIV, microbiome research and vaccine development.

Professor Wesseling was appointed to the Board on 1 February 2011.





**Professor Justin Beilby**  
Non-executive Director

Professor Justin Beilby is an inaugural member of the SAHMRI Board and is an academic general practitioner with expertise in primary care and aged care research, health service evaluation, intervention studies and the translation of research findings into policy and clinical practice.



**Professor Mike Brooks**  
Non-executive Director

Professor Mike Brooks has held the position of Deputy Vice-Chancellor and Vice-President (Research) at the University of Adelaide since 2008. He took on the additional role of Provost in 2018, responsible for oversight of the University's five faculties. Professor Brooks is a Fellow of the Australian Computer Society and a Fellow of the Australian Academy of Technological Sciences and Engineering.

Professor Brooks was appointed to the Board on 25 February 2019 and departed on 18 June 2020.



**Mr Eddie Fry**  
Non-executive Director

Eddie Fry is an experienced businessman who's worked extensively in the resources sector and specialises in financial and human resource management as well as Indigenous and Native Title issues.

Mr Fry is a Dagoman man who is the first SAHMRI Board member who identifies as Aboriginal or Torres Strait Islander.



**Mr Ross Haslam**  
Non-executive Director

Ross Haslam is a chartered accountant with extensive expertise in corporate responsibility, audit procedures, investment due diligence and company restructures. He has widespread experience across the health sector and is also a Director of the Women's and Children's Health Network (WCHN) Governing Board. Mr Haslam is Chair of the Board's Audit, Finance and Risk Committee.

Mr Haslam was appointed to the Board on 31 July 2018.



**Emeritus Professor John Hopwood, AM**  
Non-executive Director

John Hopwood is an Emeritus Professor at The University of Adelaide and affiliate Professor in the Department of Pharmacy at the University of South Australia.

Professor Hopwood was appointed to the Board on 21 December 2009.



**Professor Benjamin Kile**  
Non-executive Director

Professor Ben Kile commenced as Executive Dean of the Faculty of Health and Medical Sciences with the University of Adelaide in October, 2019.

Professor Kile was appointed from the University of Adelaide in June 2020 to replace the departing SAHMRI Board member Professor Brooks.



**Professor Caroline McMillen**  
Non-executive Director

Professor Caroline McMillen commenced in the role as Chief Scientist for South Australia in October 2018 after serving as Vice-Chancellor of the University of Newcastle for seven years from 2011.

Professor McMillen was previously a member of the Board between 2009 and 2011 and was reappointed to the Board on 1 February 2019.



**Jenny Richter, AM**  
Non-executive Director

Jenny Richter was previously the Chief Executive Officer (CEO) of Central Adelaide Local Health Network (CALHN) and the Deputy Chief Executive of SA Health. She holds non-executive directorships with the Southern Adelaide Local Health Network, Cancer Council SA, Cancer Council Australia and the Independent Hospital Pricing Authority.

Ms Richter was appointed to the Board on 16 February 2018.



**Professor Robert Saint, AM**  
Non-executive Director

Professor Saint is Deputy Vice-Chancellor (Research) at Flinders University. He was previously a member of the Australian Research Council College of Experts and was a standing member of the Prime Minister's Science, Engineering and Innovation Council.

Professor Saint was previously a member of the Board between 2014 and 2015 and was reappointed on 1 August 2017.

# Growth at a Glance

**1,100**  
SAHMRI  
community

**418**  
staff

**248**  
students

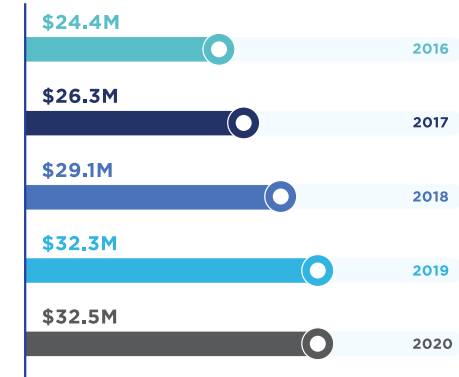
**414**  
partners

**20**  
volunteers

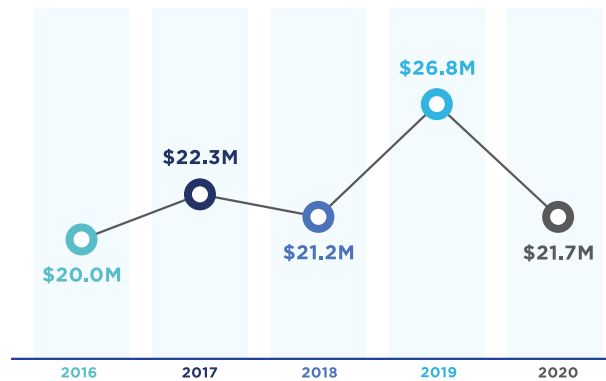
SAHMRI remains committed to recruitment and retention of the best health and medical researchers. To date, more than 74 SAHMRI staff from across the globe have been recruited to South Australia.

SAHMRI is home to 418 staff, 248 students, 414 partners and 20 volunteers, increasing our community by approximately 200 in the past calendar year.

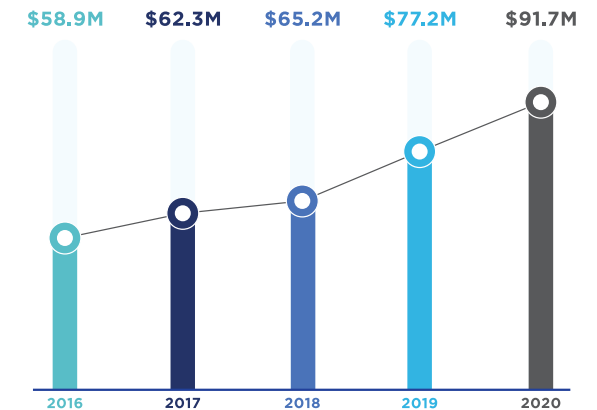
## RESEARCH FUNDING



## COMMERCIAL INCOME



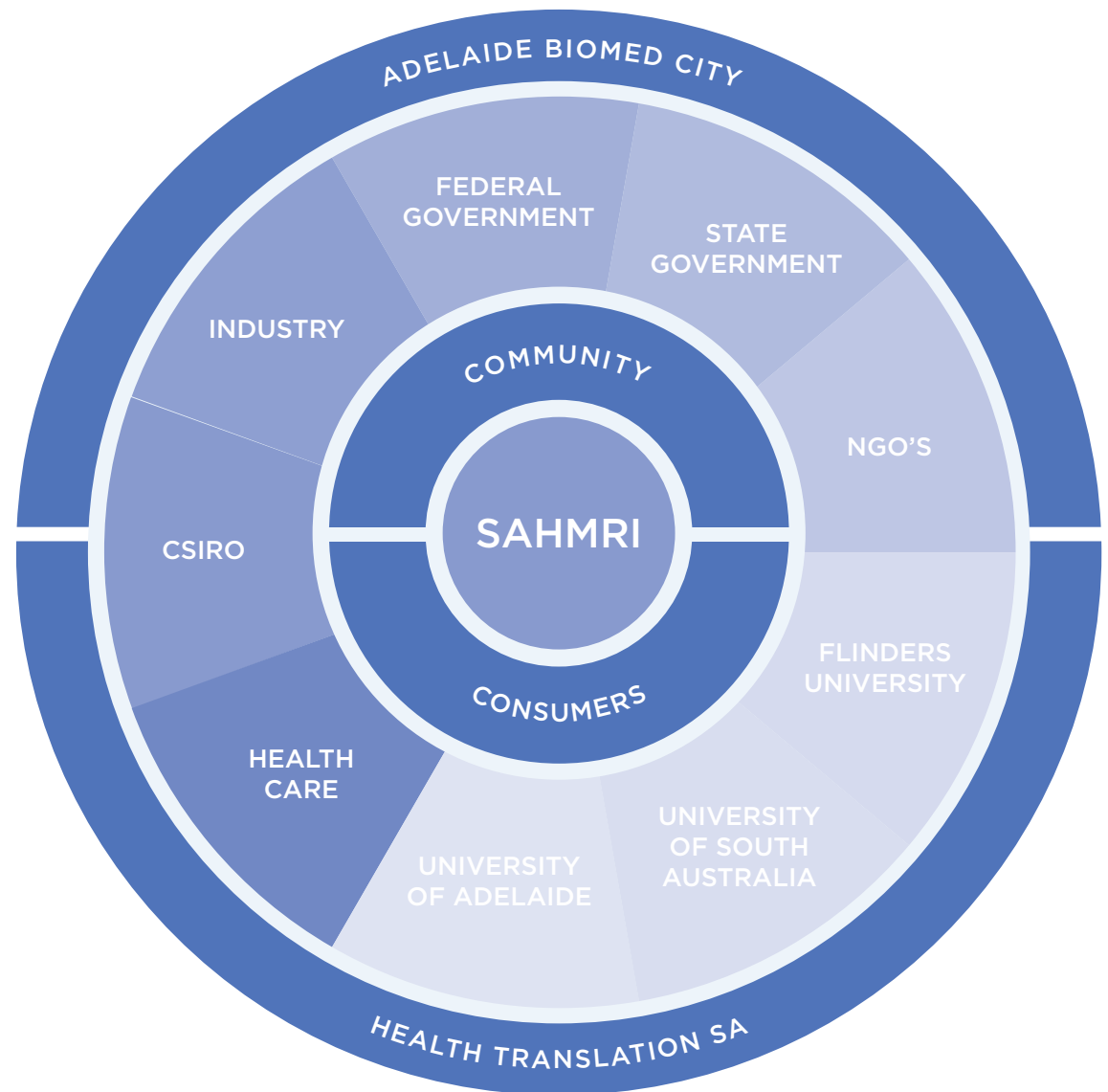
## SAHMRI TURNOVER



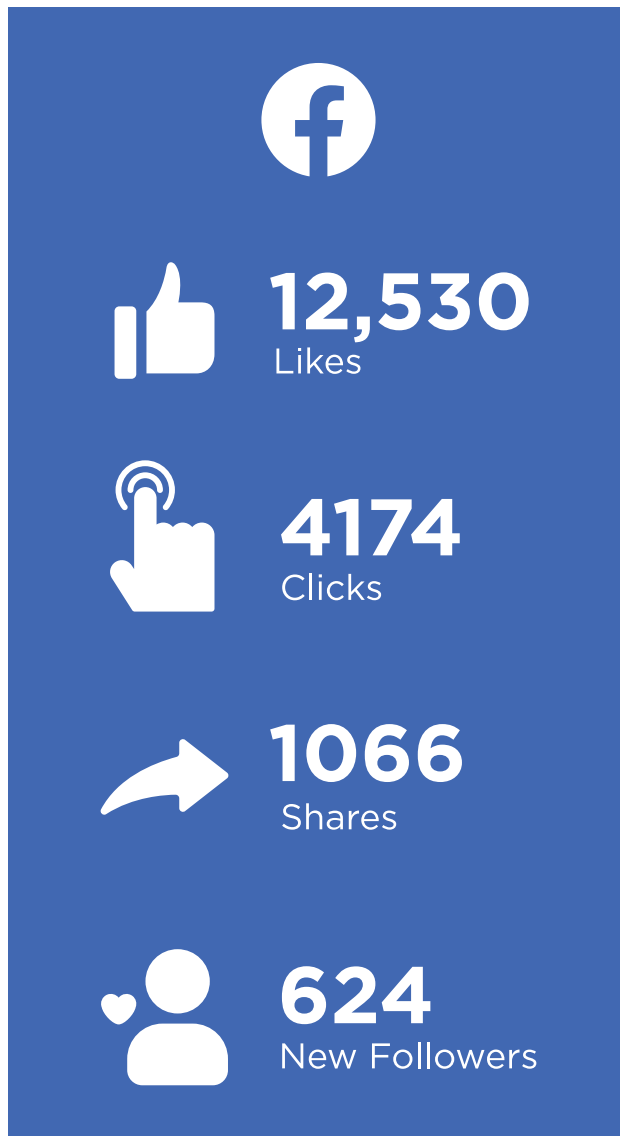
# Partnerships

Collaboration and innovation are in the DNA of SAHMRI.

We would like to highlight the integration of SAHMRI's partnerships and how these synergies create a strong foundation for translational research.



# Social Media Highlights



# Reconciliation Action Plan Update

Like almost every aspect of life in 2020, SAHMRI's Reconciliation Action Plan progress was impacted by COVID-19. Some of our commitments were necessarily deferred while our community turned its attention to dealing with the pandemic. Because of this, SAHMRI was granted an extension to our current Innovate RAP.

Despite the disruptions, the SAHMRI community continued to take significant steps towards Reconciliation throughout 2020 and is progressing towards endorsement of our Stretch RAP in the future.





## What SAHMRI has achieved in Reconciliation

Some of SAHMRI's major RAP achievements during 2020 include:

- Staging in-person and virtual events during National Reconciliation Week and NAIDOC Week.
- Continuing to recognise and promote other Aboriginal and Torres Strait Islander dates of significance.
- Conducting 'RAP Roadshows' for smaller groups within the SAHMRI community to provide education around the importance of our RAP actions and to encourage involvement in Reconciliation events and activities.

- Launching Phase 1 of our Cultural Awareness Training program. To date almost three-quarters of the SAHMRI community has completed this online training. It has now become a compulsory component of SAHMRI's staff induction procedure.
- In addition to the online learning, SAHMRI's Leadership undertook a two-day face-to-face cultural safety course.
- The creation of an Online Talent Register for anyone who identifies as Aboriginal and/or Torres Strait Islander and is interested in pursuing a career at SAHMRI.
- The appointment of Eddie Fry to SAHMRI's Board. Eddie is a Dagoman man and the first SAHMRI Board member who identifies as Aboriginal and/or Torres Strait Islander.

The achievements listed were in no small part owed to the strength, skills and resourcefulness of our RAP Project Officer Renee Andrew. Sadly for SAHMRI, Renee left us late in 2020 to pursue an exciting and thoroughly well-deserved opportunity with another organisation.

Renee was replaced in the RAP Project Officer role by Sarah Smith. Sarah is a Narungga and Kaurna woman who holds a Bachelor of Environmental Science and joins SAHMRI after a distinguished career with SA Water. She brings invaluable professional experience to this role, having helped guide SA Water from the Innovate to the Stretch phase of its Reconciliation journey.



# Reconciliation Achievements at SAHMRI

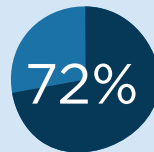
Artwork: *Karrawirra Pari* by Allan Sumner

## WORKFORCE

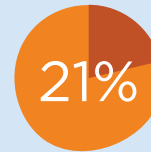


Percentage of *total Aboriginal/Torres Strait Islander workforce* at SAHMRI

## STAFF CULTURAL TRAINING



Percentage of staff who have undertaken an *e-learning* cultural program



Percentage of staff who have undertaken a *face-to-face* cultural program

## ENGAGEMENT



**\$859,606**

Spent on *goods and services* through Aboriginal business



**42**

Aboriginal businesses we *engaged into contracts* with in the past year



**\$15,000**

Contributed to Aboriginal and Torres Strait Islander *education scholarships*



**692 hours**

*Pro-bono services* provided

## LEADERSHIP



Aboriginal/Torres Strait Islander staff with degrees *PhD or higher* or in management positions

## EVENTS



*Internal cultural event* organised by SAHMRI in the past year

\*due to COVID-19 restrictions



*External cultural events* SAHMRI and partners participated in this year



Aboriginal and/or Torres Strait Islander in a *Board position*



Aboriginal and/or Torres Strait Islander in an *Executive role*

# Gender Equity, Diversity & Inclusion

**SAHMRI received our Athena SWAN Bronze Award in a dinner celebration in February 2020.**

In 2020 we were working towards fulfilling our Bronze Award Action Plan (2019-2022) which aims to address the three main priorities that were identified through engagement and consultation with the SAHMRI Community, including:

1. Enhancing visibility and representation of women by celebrating their contributions.
2. Promoting career progression for women.
3. Embedding flexible work arrangements into our culture.

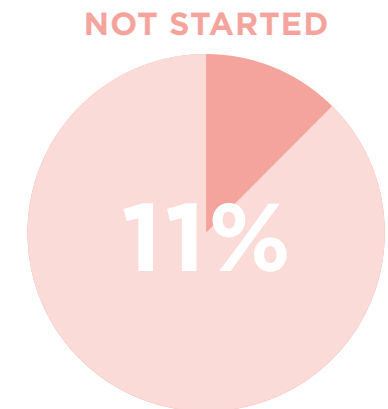
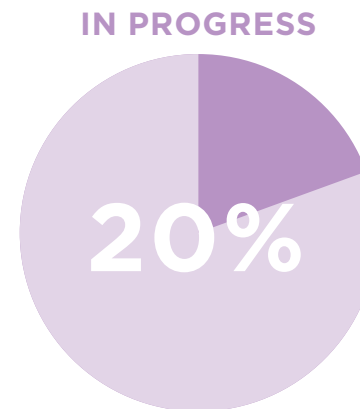
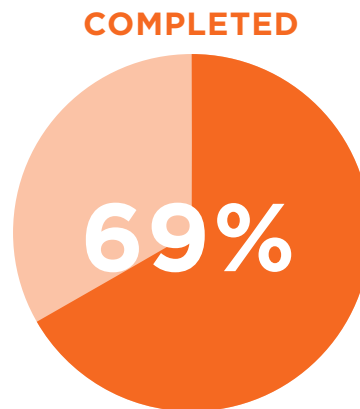
While the COVID-19 pandemic hit our shores not long after we were presented with our Bronze Award, these circumstances actually quickened our ability to achieve one of our key priorities – ‘Embedding flexible work arrangements into our culture’. Like many other organisations and businesses throughout Australia, SAHMRI encouraged staff to work from home and/or modify their work patterns as to mitigate risks associated with COVID-19, ensuring that our research could continue with minimal interruptions. Prior to this time, few staff utilised flexible working arrangements (FWA), but during the pandemic the majority of staff were impacted or utilising FWA in some way.

An audit towards the end of 2020 revealed SAHMRI has completed 69% of our Action Plan items, with 20% in progress and 11% yet to begin.

In 2020, AAMRI established its own Gender Equity, Diversity & Inclusion Committee on which SAHMRI has representation.



**S A G E**  
SCIENCE IN AUSTRALIA  
GENDER EQUITY



# Research Integrity and Compliance

**SAHMRI recognises the importance of good governance and encourages ethical research conduct based on mutual respect, trust and honesty for all staff, students, partners and visiting researchers.**

As such, SAHMRI complies with the Principles, Responsibilities and Definitions of the Australian Code for the Responsible Conduct of Research, and other national guidelines in relation to values and community engagement. In addition, SAHMRI has strong university associations and as such supports the principles of the Voluntary Code of Best Practice for the Governance of Australian Public Universities.

SAHMRI is proud to publicly report that the Institute has had no instances of non-compliance with responsible research conduct in 2020.



# Consumer Engagement

**SAHMRI continues to demonstrate commitment to Consumer and Community Engagement (CCE) in health and medical research. In partnership with Health Translation SA (HTSA), SAHMRI implements a range of strategies and tools to support and promote effective CCE across themes, platforms and projects.**

The SAHMRI Community Advisory Group (CAG), established in 2016, functions to provide strategic oversight of the implementation of the SAHMRI CCE Framework. In 2020, the CAG initiated a review of the operational procedures of the group and identified that a broad, consultative approach was preferable to routine committee meetings. This change of format has brought focus to the ongoing development of the Community Interest Register as well as SAHMRI researcher partnerships, leading to the development of both the SAHMRI Consumer Advisory Group Strategy and the SAHMRI CCE Position Statement. The Strategy and Position Statement are supported by current literature on contemporary CCE in health and medical research, and align to both the current NHMRC statement on CCE and the SAHMRI Strategic Plan.

Implementation of the CAG Strategy will commence in 2021 and the Position Statement, endorsed by the Board, is available on the SAHMRI website.

## 2020 HIGHLIGHTS

- An increasing number of consumers joined the Community Interest Register, with 72 community members registered by the end of 2020. The Register enables researchers to readily access a database of community members who want to inform health and medical research within South Australia.
- A telephone survey of Community Interest Register members was conducted in April 2020 to provide insights into their experiences on the Register.
- The inaugural Community Interest Register induction was held in July 2020, providing community members with knowledge about SAHMRI, the research cycle, and their potential roles partnering in research.

SAHMRI's range of CCE initiatives ensure meaningful engagement through active partnerships and aims to produce more relevant, impactful and transparent research.



# Research Events

## 2020 AWARDS NIGHT

Despite COVID-19 complications, the SAHMRI Awards presentation event was still able to go ahead this year. Award recipients are detailed below:

CATEGORY	WINNER(S)	THEME
<b>PhD</b>	Hiroki Kobayashi	Precision Medicine
<b>ECR</b>	Kootsy Canuto	Aboriginal Health Equity
<b>MCR</b>	Caroline Miller	Health Policy Centre
<b>High Impact Publication</b>	<b>Joint winners:</b> Lucy Simmonds Janet Sluggett	SAHMRI Women and Kids ROSA
<b>Research Translation</b>	<b>Joint winners:</b> Gillian Caughey Health Policy Centre	ROSA Health Policy Centre
<b>Research Enabler</b>	Dorota Garcarz	Quality, Risk and Safety Team
<b>Research Facilitator</b>	Anna Seamark	SAHMRI Women and Kids
<b>Executive Director's Award</b>	Jordan Piovesana	ICT
<b>Community Engagement Award</b>	ANZDATA Consumer Engagement Team	ANZDATA
<b>Diané Ranck Leadership Award Researcher</b>	Sophia Degner	Research and Facility Services
<b>Diané Ranck Leadership Award Non-Researcher</b>	Natasha Howard	Aboriginal Health Equity

## SCIENTIFIC SEMINAR SERIES

Each Tuesday morning SAHMRI holds a regular scientific seminar. This year, due to the lockdowns and COVID restrictions the seminars were moved to Zoom. These are designed to bring researchers from across the Themes together to hear about research in a variety of areas. Seminars have focused on the work of Themes and Research Groups and have also explored cross-cutting issues of interest to many researchers. South Australian, national and international researchers have presented at the seminars.

# Adelaide BioMed City

**SAHMRI is located within Adelaide BioMed City (ABMC) - the \$3.8 billion health and biomedical innovation and translation hub in the heart of Adelaide. ABMC brings together five partners; SAHMRI, Central Adelaide Local Health Network (CALHN), the University of Adelaide, the University of South Australia and Flinders University. In turn, it brings together capabilities in research, education, clinical care and industry to drive innovation and translation.**

**ABMC, located in the northwest corner of Adelaide's CBD, has the infrastructure, knowledge and people to move basic research and ideas to new treatments, diagnostics and products.**

ABMC's goal is to build impact, leverage investment and inform evidence-based healthcare and innovation in ways that could not be achieved separately. Currently, over 2,000 highly skilled medical researchers and more than 10,000 staff are working in the precinct. These numbers will increase with construction of the new \$1.5B Women's and Children's Hospital and The Australian Bragg Centre, formerly known as SAHMRI II, which will house Australia's first proton therapy unit.

ABMC is part of a broader ecosystem of interdisciplinary innovation hubs such as the entrepreneurial ecosystem in smart sensors, robotics, big data, AI at Lot14 and Tonsley Innovation District, with its focus on medical devices and assistive technologies. The future of healthcare is interdisciplinary. The remarkable health and medical researchers, clinicians, students and businesses in this innovation hub work closely with experts in nano-photonics, chemistry, biological science, engineering, artificial intelligence/machine learning and collectively solve our health challenges.

## GOVERNANCE

ABMC partners contribute to strategic and operational oversight of ABMC, with each partner contributing two board members. ABMC has a diverse range of external stakeholders including SA government departments and authorities (Department of Health and Wellbeing, Department of Premier and Cabinet, Department of Planning, Transport and Infrastructure, Department of State Development, Renewal SA, Health Industries SA), local government (Adelaide City Council) and other groups including the Adelaide Convention Centre, and the Riverbank Precinct. Each of the five founding partners are financially supporting the project and have committed to a five-year initial agreement.

## SAHMRI'S INVOLVEMENT

SAHMRI is currently represented on the ABMC Board by its Executive Director, Professor Steve Wesselingh and Chief Operating Officer, Ms Amanda McIlroy. Professor Wesselingh spent almost three years as chair of the ABMC Board, until February 2020. In addition, SAHMRI staff sit on the Research Advisory Group and all ABMC working groups and have been instrumental in the initial planning of the pilot activities of the precinct. SAHMRI accommodates the ABMC Office in its headquarters and provides support in finance, legal, human resources and communications.

# Adelaide BioMed City







# Australian Bragg Centre for Proton Therapy and Research

**The Australian Bragg Centre is a \$500+ million addition to the largest health and biomedical precinct in the Southern Hemisphere, Adelaide BioMed City. Construction on the 15-storey premises began in June 2020 and practical completion is anticipated by late 2023. It will generate an estimated \$1 billion in economic activity and support approximately 1,000 jobs throughout the construction period, with many long-term jobs following completion.**

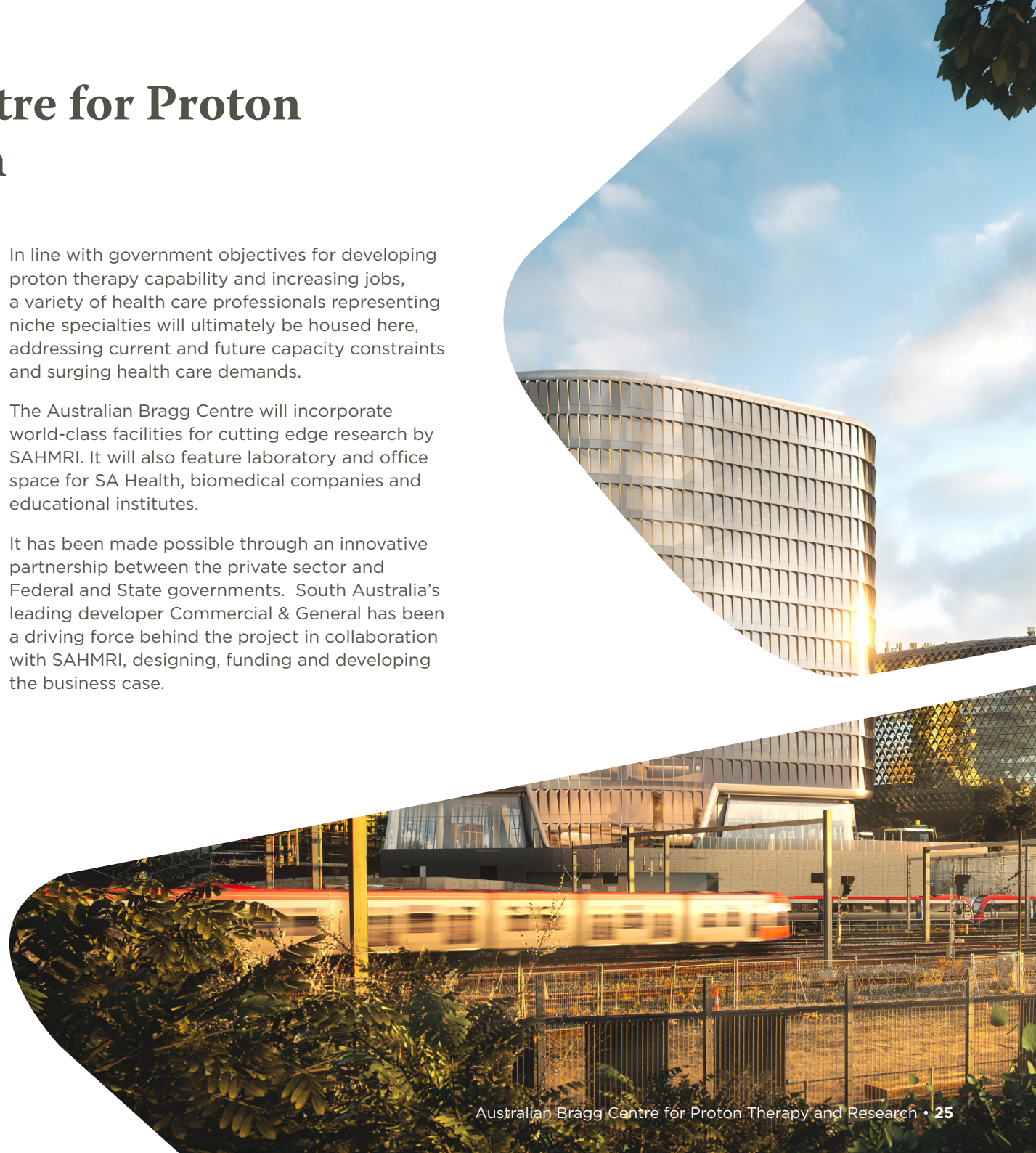
The major feature of the building will sit in its bunker – a three-level research and treatment facility specialising in next generation cancer treatment. The Australian Bragg Centre for Proton Therapy and Research will be the first proton therapy centre in Australia and will be overseen by the clinical and research expertise of SAHMRI.

The proton therapy centre will deliver the most technologically advanced, precision radiation therapy available in Australia. It is anticipated the centre will provide treatment to approximately 600-700 patients per annum, with around half of these expected to be children and young adults. The first patients are expected to be treated approximately 18 months after the building is completed.

In line with government objectives for developing proton therapy capability and increasing jobs, a variety of health care professionals representing niche specialties will ultimately be housed here, addressing current and future capacity constraints and surging health care demands.

The Australian Bragg Centre will incorporate world-class facilities for cutting edge research by SAHMRI. It will also feature laboratory and office space for SA Health, biomedical companies and educational institutes.

It has been made possible through an innovative partnership between the private sector and Federal and State governments. South Australia's leading developer Commercial & General has been a driving force behind the project in collaboration with SAHMRI, designing, funding and developing the business case.



# Aboriginal Health Equity (Wardliparingga)

The Aboriginal Health Equity theme is building the nation's leading research unit focused on understanding, monitoring, responding to and reducing inequity in health and wellbeing among Aboriginal and Torres Strait Islander communities. We seek to invest in and develop the next generation of Indigenous research leaders.

**Leader: Professor Alex Brown**

## PROGRAMS

### CARDIOMETABOLIC DISEASE

Led by Professor Alex Brown, the Cardiometabolic Disease research program investigates the burden, causes, consequences and mitigation of heart disease, diabetes, cancer and mental illness to help improve the health and wellbeing of Indigenous communities.

### CAPACITY DEVELOPMENT

Led by Dr Karla Canuto, the Capacity Development program runs a number of initiatives, such as training and networking events to help support researchers and develop the next

generation of Aboriginal and Torres Strait Islander research leaders. By strengthening the Aboriginal and Torres Strait Islander health workforce, the program seeks to develop innovative ways to contribute to the health and wellbeing of Aboriginal and Torres Strait Islander people.

### Highlight: Community Engagement

Established in September 2019, the Capacity Development program coordinates interns and cadets at Wardliparingga, through the Wirltu Yarlur Internship program at the University of Adelaide, and the Aurora Foundation program. The team also facilitates weekly scientific seminars and scholarships including the Beach Energy Scholarship and the Neville Fazulla Aboriginal Health Memorial Scholarship.

In February, the program facilitated and hosted the IRNet 2020 National Aboriginal and Torres Strait Islander Health Research Showcase at SAHMRI. The showcase attracted over 170 attendees from across the country with a two-day program including presentations from 15 invited speakers and 24 abstract presentations.

### IMPLEMENTATION SCIENCE

Led by Dr Natasha Howard, the Implementation Science program applies strategies and methods to further understanding how we can take action on the social determinants of health and other critical health issues of importance for Aboriginal and Torres Strait Islander health equity.

### Highlight: MRFF Aboriginal Eye Health Project

The Aboriginal Eye Health Project is an MRFF funded grant that contributes to Australia's Long Term National Health Plan of ending avoidable Indigenous blindness by 2025. The three-year project is a partnership between Flinders University (Professor Jamie Craig, Centre for Eye and Vision Research) and our program. The research team will engage with three Aboriginal communities in South Australia to co-design, implement and evaluate an eye health plan that addresses the social, cultural and clinical eye health needs of Aboriginal and/or Torres Strait Islander people.

To date, the research team has engaged with an urban primary healthcare service where an assessment of equipment, semi-structured interviews and a co-design workshop has been held with Aboriginal Reference Group members, Aboriginal and/or Torres Strait Islander community members, service providers and other key stakeholders. From these discussions, a locally informed and culturally appropriate eye health plan has been developed that will be implemented by the primary healthcare service in 2022.

### HEALTH SYSTEMS RESEARCH

Led by Ms Kim Morey, the Health Systems Research program works in partnership with key health stakeholders to improve the quality, accessibility and utilisation of a broad range of healthcare services for Aboriginal and Torres Strait Islander people.

### **Highlight: Aboriginal Diabetes-Related Foot Compilations Program**

In response to the high prevalence of diabetic foot complications and amputations in Aboriginal and Torres Strait Islander people, the Commonwealth Government is funding a project across South Australia, Northern Territory, Western Australia and Far North Queensland. The project aims to address risk factors and health outcomes by implementing evidence-based initiatives that improve the quality, accessibility and effectiveness of available care. In South Australia the Aboriginal Chronic Disease Consortium, guided by SAHMRI, led the planning phase and coordinates the implementation of six collaborative projects.

A stakeholder workshop informed the development of a five-year Aboriginal Diabetes-Related Foot Disease (DFD) Strategy. The strategy was developed by a small working group which had representation from across the health sector. The strategy provides a roadmap for South Australia and a shared vision for service improvements. Under the leadership of Professor Alex Brown, the Consortium Coordinating Centre facilitated an expression of interest process to determine the allocation of the Commonwealth funding. Initiatives needed to demonstrate how they addressed the SA DFD strategies along with Aboriginal engagement and collaboration across the continuum of care.

Program partners for the SA initiatives include the Aboriginal Health Council of SA, University of SA, University of Adelaide, Central Adelaide LHN, Southern Adelaide LHN, Northern Adelaide

LHN, Eyre Far North LHN and the SA Health Rural Support Service. The Consortium is providing coordination, cultural and project support including planning evaluation activities. Governance of the program is being achieved through the administration of an Advisory Group, which provides oversight and accountability, as well as an Operational Group, designed to provide an avenue for project staff to share resources and work together to ensure seamless and consistent service delivery.

### **POPULATION HEALTH**

Led by Dr Odette Pearson, the Population Health research program aims to understand the needs and priorities of groups that we know little about including Aboriginal and Torres Strait Islander young people, men and older people to inform health and social systems change. To support self-determination we make administrative data, that has been managed and curated in a culturally appropriate manner to measure and monitor health and social inequalities, accessible to Aboriginal communities in South Australia.

### **ADOLESCENT HEALTH AND WELLBEING**

Led by Associate Professor Peter Azzopardi and Seth Westhead, the Adolescent Health and Wellbeing program works in partnership with young people to understand their priorities and needs and the best ways to address these. This includes informing evidence-based policies and co-designing accessible and responsive health services.

### **Highlight: National Roadmap**

The Adolescent health and wellbeing group was awarded a four-year NHMRC Ideas grant to develop the very first National Roadmap for Aboriginal and Torres Strait Islander adolescent health. At a national and jurisdictional level, the Roadmap will describe the priority health and wellbeing needs of Aboriginal and Torres Strait Islander young people and the best related actions to address them.

To ensure this Roadmap carries the voices of young people, its development is governed by a national group of Aboriginal and Torres Strait Islander young people. Formed at the very beginning of the project, the governance group consists of Aboriginal and Torres Strait Islander young people representing every state and territory. As a significant shift in the way young people are engaged in health research, our governance model serves as an example for of how to move from simple 'engagement' and 'participation' to real governance and agency. Despite the challenges presented by COVID-19 the governance group has met regularly online and made significant contributions to the project.

By defining priority areas for action and evidence-based responses in Aboriginal and Torres Strait Islander adolescent health, the National Roadmap will enable more responsive service delivery and policy. Additionally, our approach to governance will support Aboriginal and Torres Strait Islander young people to build their capacity in health research, leadership and self-determination.

# Lifelong Health

The Lifelong Health theme works to deliver discovery-to-impact approaches for tackling the greatest health challenges in chronic disease and ageing across the lifespan.

**Leaders: Professor Chris Proud and Professor Derek Chew**

## PROGRAMS

### HEART AND VASCULAR HEALTH

Led by Professor Derek Chew, the Heart and Vascular Health research program aims to advance the ability to prevent, detect and treat cardiovascular disease with a committed focus on translating research findings into improved health outcomes for all Australians.

#### Highlight: Marshall and Warren Innovation Award

The Heart and Vascular Health Program's Associate Professor Peter Psaltis received the Marshall and Warren Innovation Award at this year's NHMRC Research Excellence Awards. The award recognises his and his team's discovery of a unique type of stem cell in artery walls. These cells, called adventitial haemangioblasts, are an 'outside-in' driver of atherosclerosis plaque growth and stability.

The team will study how these stem cells cause atherosclerotic plaques to form in arteries, so they can target them with new treatments for heart and vascular Disease.

The Marshall and Warren Award is named after Australian Nobel laureates Barry Marshall and Robin Warren and recognises the most innovative and transformational work funded by the NHMRC.

### NUTRITION, DIABETES & GUT HEALTH

Led by Professor Amanda Page, the Nutrition, Diabetes & Gut Health research program aims to understand the physiological mechanisms involved in the development of obesity, diabetes and metabolic syndromes as well as gastrointestinal disorders with the aim of developing innovative targets, therapies and nutritional strategies to prevent or manage these health issues.

### HOPWOOD CENTRE FOR NEUROBIOLOGY

Led by Professor Stuart Brierley, the Hopwood Centre for Neurobiology is committed to identifying the causes of major neurological disorders including Alzheimer's disease, Parkinson's disease, stroke, epilepsy, depression, spinal cord injury and chronic pain. The centre targets the use of neuroimaging techniques, lifestyle interventions, novel pharmaceuticals and stem-cell based regenerative medicine to derive therapies for these and other disorders.

### MENTAL HEALTH AND WELLBEING

Led by Mr Joseph Van Agteren, the Mental Health and Wellbeing research program conducts research across the whole mental health spectrum including depression, suicide, anxiety, resilience and wellbeing. It particularly focuses on the overlap between mental health and mental illness and uses its research to develop techniques for measuring and building mental health and wellbeing within individuals and communities.

#### Highlight: Be Well Co

Be Well Co was set up and launched in 2020, aimed at commercialising the wellbeing solutions created by the Mental Health and Wellbeing program at SAHMRI. It is a key step to help improve the research and impact of wellbeing research. Be Well Co will act as a service delivery arm and commercialisation vehicle for solutions such as the Be Well Plan, the Be Well Tracker and other future evidence-based mental health and wellbeing offerings. The entity will retain formal ties to the research program by supporting wellbeing research, while research outcomes will help Be Well Co to further innovate.

### NEIL SACHSE CENTRE

The Neil Sachse Centre (NSC) at SAHMRI leads benchtop to bedside research on spinal cord injuries. Collaboration is key to the centre's success, proudly undertaking research projects in partnership with global spinal cord injury research leaders, medical imaging specialists and neurosurgeons.

# Precision Medicine

The Precision Medicine theme is committed to understanding the factors that determine patient-specific responses to disease or therapeutic intervention, enabling better prediction of patient outcomes, stratification of patients to the best treatment options, and the development of more personalised, targeted interventions.

**Leader: Professor Tim Hughes**

## PROGRAMS

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### CANCER

Led by Professor Deb White, the overarching goal of the Cancer program is to foster excellence in the full spectrum of cancer-related research from fundamental discovery to the development of innovative clinical trials and the delivery of personalised treatments.

### COMPUTATIONAL AND SYSTEMS BIOLOGY

Led by Professor David Lynn, the Computational and Systems Biology research program is developing advanced computational and experimental approaches to generate, interrogate, and model complex data to enhance our

understanding of how systems such as the immune system and nervous system are dysregulated in diseases including infectious disease, cancer and neurodegenerative disease. The program also hosts the SAHMRI Bioinformatics Platform, which assists SAHMRI researchers to interpret and analyse the large amounts of data involved in their work.

#### Highlight: BRACE Trial

SAHMRI partnered with SA Health and the Murdoch Children's Research Institute (MCRI) to become a remote site for the MCRI's BRACE Trial, aiming to protect health care workers from the worst effects of COVID-19 infection.

The trial included 500 South Australian health care workers involved with COVID patient care and investigated whether an established tuberculosis vaccine called Bacille Calmette-Guerin (BCG) can provide an immune system boost to lessen the prevalence or severity of COVID-19 symptoms.

### MICROBIOME AND HOST HEALTH

Led by Professor Geraint Rogers, the Microbiome and Host Health research program is focused on better understanding the influences of the microbiome on human health and disease, using this information to develop ways to reduce preventable diseases while improving outcomes for both for individuals and the population.

### GENE EDITING

Led by Professor Paul Thomas, the Gene Editing research program uses state-of-the-art molecular genetic technology (CRISPR) to understand the pathology of relatively common genetic diseases such as epilepsy. This program also holds the South Australian Genome Editing (SAGE) facility, which is a commercial service that can produce genetically modified mice for modelling disease-causing mutations in humans.

#### Highlight: Epilepsy Genetics

Professor Paul Thomas and his team published a landmark epilepsy genetics study in the highly regarded international journal *Neurobiology of Disease*. This research identified the pathological mechanism of a significant brain malformation termed Focal Cortical Dysplasia, which is often associated with inherited childhood epilepsy. The team also developed a novel screening assay to assess how DNA changes associated with FCD affect cell growth. This assay will also be used to determine whether novel DNA changes cause the disease in newly-identified patients. This study was supported by competitive grant funding from the National Health & Medical Research Council.



# SAHMRI Women and Kids

**SAHMRI Women and Kids is committed to improving the health and wellbeing of women, children and families, particularly those most at risk of poor health outcomes.**

**Leader: Professor Maria Makrides**

## PROGRAMS

### CHILD NUTRITION RESEARCH CENTRE (CNRC)

Led by Professor Tim Green, the Child Nutrition Research Centre is committed to improving the health outcomes of women and their children in Australia and worldwide through nutritional interventions, with particular interest in reducing prematurity and the associated health consequences, supporting optimal growth and development, and reducing allergic disease in early childhood.

### PREGNANCY AND PERINATAL CARE

Led by Associate Professor Philippa Middleton and Associate Professor Alice Rumbold, the Pregnancy and Perinatal Care Team is developing and implementing strategies to improve outcomes for pregnant women and young babies, with an emphasis on preventing preterm birth and stillbirth and by addressing disparity and inequity.

### Highlight: Omega-3 Screening Program

This year we received NHMRC endorsement of our evidence-based recommendation for omega-3 supplementation of pregnant women with low status to reduce risk of prematurity based on our Cochrane review (2018) and ORIP trial (NEJM 2019, BJOG 2020a)

This work has informed a world-first omega-3 screening program being trialled on women with singleton pregnancies in Adelaide. The program analyses omega-3 levels via a blood test, showing if omega-3 supplementation is required on an individual basis.

### CHILDHOOD DISABILITY PREVENTION

Led by Professor Jozef Gecz, the Childhood Disability Prevention research program is identifying the genetic causes of childhood disabilities including learning disabilities, cerebral palsy, epilepsy and autism spectrum disorders, which combined affect one in 10 children. This is helping enable earlier diagnosis, better management, treatment and prevention of these disabilities.

### Highlight: Cerebral Palsy Genomics

Professor Gecz and The Australian Collaborative Cerebral Palsy Research Team he co-leads, have completed a large, international study of 250 trio exomes (the affected child and both parents) of cerebral palsy. This is the first study in cerebral

palsy showing genome-wide statistically significant enrichment of damaging variants in cases versus controls. The overall outcome was that 14% of the cases with cerebral palsy can be attributed to damaging genetic/DNA or protein variants. The study was supported by NHMRC, Tenix, The Cerebral Palsy Alliance and Channel 7 Children's Research Foundations.

### ABORIGINAL COMMUNITIES HEALTH RESEARCH ALLIANCE

Led by Ms Karen Glover, the Aboriginal Communities and Families Health Research Alliance (ACRA) brings together researchers, Aboriginal community members, policymakers and service providers to facilitate community-driven, culturally respectful research to benefit Aboriginal families and communities. The Alliance also focuses on knowledge exchange and translation of this research into ongoing improvements in culturally appropriate health care services supporting Aboriginal maternal, perinatal, child and family health and wellbeing.





# SAHMRI Impact

## HEALTH POLICY CENTRE

SAHMRI's Health Policy Centre conducts behavioural research, policy research, population monitoring and evaluation to inform public policy and population health interventions. The centre conducts independent research and provides evidence syntheses and expert advisory consultancies. It actively engages with policy makers and non-government organisations for improved health outcomes.

The majority of research by the centre and its translation applies a public health approach with an aim to prevent chronic diseases including cancer, heart disease and diabetes.

The centre has major ongoing programs of research in tobacco control and NHMRC funded research dealing with sugary drinks and alcohol consumption.

The centre collaborates with the Central Coordination unit of the SA Clinical Cancer Registry and conducts research to inform the collection of patient-reported outcomes, predominantly through registries.

### Highlight: COVID-19 Policy

The SAHMRI Health Policy Centre (HPC) had significant impact in 2020 on local and national COVID-19 policy responses. Responding to a series of real-time policy questions generated by SA's Chief Public Health Officer and COVID-19 Transition Committee, the team re-oriented its existing skill set towards rapid review and synthesis of all available evidence.

Thirty COVID-19 Evidence Briefs were produced informing policy on a range of topics, such as schools opening, standing in bars, length of quarantine, effective contact tracing, temperature screening and fomite transmission. The majority were made publicly available. This work significantly influenced COVID-19 policy decision making in SA and beyond. The team provided briefs, on request, to the Australian Health Protection Principal Committee and Australia's Contact Tracing Review Taskforce. The briefs have also been cited by international governments' COVID-19 policy statements.

The briefs have attracted significant media interest. The resultant interviews and nationally syndicated articles have helped explain to the general public where the weight of evidence lies, and address myths and misconceptions.



## REGISTRIES

SAHMRI greatly values registries as a source of observational and translational research. The registries that are part of the SAHMRI Registry Centre enable the monitoring of various populations, conditions and treatments in order to support best practice and improve care in Australia and beyond.

The registries that are part of SAHMRI's centre have been developed to examine the effectiveness and appropriateness of care, facilitate practice benchmarking, conduct post-market surveillance and examine unwarranted variation in care practices in several areas. These important functions of registries are paramount to improve quality of care and outcomes for patients and individuals monitored by these registries.

The value of registries as a tool for continuous quality improvement in health care cannot be underestimated. Well-designed registries, particularly at the population level, form the 'third pillar' of scientific research in conjunction with clinical trials and laboratory work. SAHMRI considers registry population-based studies to represent the most reliable option for identifying the actual effects of treatments and outcomes in the general population.

### **Highlight: ANZDATA - The National Indigenous Kidney Transplantation Taskforce (NIKTT)**

The Commonwealth Department of Health provided \$2.3 million to establish NIKTT to improve access to kidney transplantation for Aboriginal and Torres Strait Islander people. It followed a report from an expert panel of the Transplantation Society

of Australia and New Zealand which made 36 recommendations to improve access to, and outcomes of, kidney transplantation among Aboriginal and Torres Strait Islander people.

### **Highlight: ROSA - Royal Commission into Aged Care Quality and Safety**

In 2020, the Registry of Senior Australians (ROSA) was significantly involved in the Royal Commission into Aged Care Quality and Safety, providing high quality evidence the Commission needed to inform its recommendations. The ROSA team provided four commissioned reports, data and key input into four additional reports led by other institutions and expert testimony in a variety of areas including quality use of medicines, data and innovation for the sector, research and development and quality and safety monitoring. This work and the Royal Commission environment have led to the incredibly rapid translation of evidence-based recommendations into policy, which has been a major achievement of ROSA to date and has positioned ROSA and SAHMRI at the forefront of ageing, aged care and related health service research areas.

In August 2020, the 'International and National Quality and Safety Indicators for Aged Care' report delivered by the ROSA team was endorsed and published by the Royal Commission. This report highlighted that Australia can and should establish an independent, transparent and routine monitoring system to publicly report on the quality and safety of aged care. The research examined practices in 11 countries and over 300 quality and safety indicators were analysed, with subsets of various indicators used to compare Australia's performance to leading countries like Denmark and the USA.

In response to the ROSA report, the Australian Senate passed a motion (Hansard p.46, 25 Aug 2020), calling on the government to enhance transparency and accountability in the aged care sector by establishing routine monitoring and public reporting.

### **Highlight: AOANJRR - Patient Reporter Outcome Measures**

The Australian Orthopaedic Association National Joint Replacement Registry (AOANJRR) continues to expand into exciting new areas including Registry Nested Clinical Trials and Data Linkage. A notable recent highlight for the AOANJRR is the commencement of the national rollout to collect Patient Reported Outcome Measures (PROMs) from more than 320 hospitals that contribute data to the AOANJRR.

The national rollout of PROMs commenced in July 2020 following a successful pilot project which tested the feasibility of the AOANJRR collecting PROMs and feeding the data back to all stakeholders. During the pilot the AOANJRR worked with SAHMRI to design and build a bespoke electronic system for PROMs collection which continues to be enhanced throughout the national rollout. The AOANJRR is now collecting PROMs from over 170 sites nationally and has included PROMs analysis for the first time as the new chapter in the 2021 AOANJRR Annual Report. Ongoing PROMs collection within the AOANJRR is fully funded by all State and Territory Governments as well as the Commonwealth Department of Health.

## MITRU

The Molecular Imaging and Therapy Research Unit (MITRU) is dedicated to the research, development and manufacture of radiopharmaceuticals.

Radiopharmaceuticals are radioactive chemicals which are administered to patients to determine the location (imaging) or to irradiate (therapy) particular cells in a patient's body.

MITRU is a commercial operation and is home to South Australia's only cyclotron. The cyclotron is a particle accelerator, designed for commercial applications. The cyclotron is used to produce several of the radioactive starting materials used to manufacture radiopharmaceuticals.

MITRU is licensed by the Therapeutic Goods Administration (TGA) as a manufacturer of radiopharmaceuticals which are supplied on a regular basis to hospitals and imaging centres all over Australia. MITRU's TGA licence sets it apart from in-hospital services as the unit is required to maintain its licensed status to continue supplying radiopharmaceuticals to imaging centres. To maintain the TGA License, the MITRU team undergoes regular audits by the TGA and adheres to Good Manufacturing Practice (GMP) and all guidance provided by the TGA. MITRU also supplies radiopharmaceuticals for clinical trials.

MITRU produced the following materials in 2020:

- Fluorodeoxyglucose (FDG): Used for various cancer imaging, staging and treatment planning (TGA Licenced)
- Sodium Fluoride (NaF): Used for bone cancer imaging and clinical trials (TGA Licenced)
- Fluorinated (F18)-PSMA-1007: Prostate cancer imaging (TGA Licenced)
- Copper-64 (Cu64) radioactive metal for radiolabelling: Various research projects and being developed for phase I/II trials (TGA Licenced)
- Gallium-68 (Ga68) DOTATATE: Neuroendocrine Tumours Imaging (local supply)
- Gallium-68 (Ga68) PSMA: Prostate cancer imaging (local supply)
- Cu64 SARTATE: Phase I trials for children with brain tumours and lung cancer patients to be imaged and then moved to treatment using Copper-67 (Cu67) SARTATE
- Lu177-PSMA: Prostate cancer treatment (Phase II trials and private patient dose delivery)

## Highlight: Supplying Radiopharmaceuticals

As a TGA licensed manufacturer under cGMP, MITRU sustained its support for local clinics by supplying the necessary sterile injectable diagnostic and therapeutic radiopharmaceuticals. These products are manufactured daily for essential clinical services in public and private nuclear medicine departments, primarily for imaging and therapy of cancer. In total, 8300+ doses were delivered to patients mainly in South Australia but also interstate.

MITRU teams up with researchers from universities in research studies using 89Zr to label radiopharmaceuticals for the detections of chemotherapy-induced cell death as well as intestinal and kidney fibrosis. MITRU contributed to a nationwide clinical study on prostate cancer treatment using radioactive prostate specific membrane antigen (PSMA).





## PIRL

SAHMRI Preclinical, Imaging and Research Laboratories (PIRL), located at Gilles Plains, has existed to support animal research since 1971. It joined SAHMRI in September 2012. PIRL has an excellent track record for facilitating the translation of preclinical research into clinically applicable outcomes. PIRL staff have extensive experience in preclinical and veterinary research. They offer a range of expertise to a broad spectrum of local and international clients, including grant-funded university academics, biotechnology and pharmaceutical companies.

The facility offers:

- Contract research conducted to OECD Principles of Good Laboratory Practice (GLP)
- Imaging including Magnetic Resonance Imaging (MRI), CT, X-ray, 4DX-ray velocimetry, Cath Lab, PET-CT (coming soon), DEXA, Image Intensifier, Ultrasound

- Ability to source and order species from reputable suppliers (sheep, pigs, rabbits, guinea pigs, GM rodents, alpacas and other species upon request)
- Preclinical testing/R&D services/fee-for-service
- Surgeries (5) & Surgical Workshops
- Small animal rodent facility (SAF) - conventional
- In-house access to surgical expertise
- Animal Ethics Committee consultation and advice
- Gnotobiotic (Germ-free) facility
- Laboratory Animal Health Monitoring (ComPath)

Accreditations include:

- ISO 9001 (2015) accreditation
- OECD Good Laboratory Practice (GLP)
- OGTR Physical Containment Level 2 (PC2)
- Department of Agriculture, Water and the Environment (DAWE) - Approved Arrangement compliance, applications and premises

## CRIC

The Clinical and Research Imaging Centre (CRIC) at SAHMRI is South Australia's leading centre for advanced clinical and translational research imaging.

With state-of-the-art facilities and expertise in delivering innovative research solutions, our staff collaborate with researchers through all stages of project development, protocol optimisation and acquisition of pilot data through to implementation of large-scale multicentre studies.

Facilities available at competitive fees to all academic, clinical and industry researchers include:

- Wide bore 3T MRI with multinuclear, advanced spectroscopy and functional capabilities
- Dual source 384 slice CT with 66ms temporal and 0.24mm spatial resolution
- mCT Flow time-of-flight PET/CT
- Capacity for existing and novel radiotracers provided from MITRU's onsite cyclotron
- X-ray and ultrasound
- Imaging technologists, on-site clinical radiologists and on-site Siemens MRI scientist for sequence development, access to works-in-progress packages, Frontier environment and a global scientific network
- Striking light-filled research spaces designed to enhance patient and participant experience
- Consultation and patient preparation areas
- Meeting room

Quality assurance, GCP and governance processes are designed to meet the specific needs of the scientific community and industry.

## HEALTH TRANSLATION SA

Health Translation SA (HTSA) (formerly known as the SA Academic Health Science and Translation Centre) is one of the first four Advanced Health Research and Translation Centres to be formally recognised in Australia.

In a unique whole-of-state collaborative network, HTSA brings together academic, research and health care agencies with the community, to accelerate the translation of health and medical research findings into policy, education and clinical practice to improve health outcomes for South Australians.

The partnership unites nine academic, research and health care agencies within South Australia, encompassing the full breadth of health service delivery across the state and representing organisations that can contribute to, and directly influence, the activities of HTSA across each of the three health research translation elements: research, action and impact.

HTSA's partner agencies are:

- SA Health and its five Local Health Networks
- SA's two Primary Health Networks – Adelaide PHN and Country SA PHN
- SAHMRI
- The three South Australian universities – Flinders University, The University of Adelaide and University of South Australia

- The peak body representing the Aboriginal Community Controlled sector in SA – Aboriginal Health Council of SA
- SA's peak health consumer agency – Health Consumers Alliance of SA

By combining the expertise and strengths of its partners, HTSA is effectively placed to tackle the challenges in health to achieve a high-quality sustainable health system and deliver solutions to address the most pressing healthcare priorities for our community.

SAHMRI was instrumental in the establishment of HTSA, coordinating and preparing the original submission to the Health and Medical Research Council (NHMRC) in 2015.

The Medical Research Future Fund (MRFF) has significantly contributed to the growth of HTSA with many research groups in SA, including those represented by its partners, benefiting from Rapid Applied Research Translation (RART) Grant funding. Inaugural funding of \$2 million for multiple projects was awarded in MRFF RART Round 1 for 2018 and in 2019, HTSA was pleased to be awarded \$6 million funding for a range of projects across two MRFF RART rounds – Round 2 for 2019/2020 and Round 3 for 2019/2020/2021.

SAHMRI is the administering agency and the home of HTSA with SAHMRI's Executive Director, Professor Steve Wesselingh, serving as the HTSA Research Director.

Further information on the projects funded is available from HTSA's website and 2018 and 2019 Annual Reviews.

### **Highlight: Primary and Acute Care Interface Project**

The core mission of HTSA is to accelerate research translation, the process through which scientific evidence is developed into cutting edge, reliable and safe healthcare for our community.

HTSA builds and supports collaborative efforts to address health issues, as well as health service and system problems. We do this by being an independent broker and catalyst who brings together researchers, clinicians, educators, policy makers, consumers and the community to develop solutions. A standout example of this is our Primary and Acute Care (PAC) Interface Project, funded by the Medical Research Future Fund Rapid Applied Research Translation Program. HTSA has a range of translation projects and system-level initiatives on the go at any one time. The Primary and Acute Care Interface Project is one major highlight for 2020.

The PAC project team is in Phase V and will soon develop the technical requirements and options.

# Fundraising Update

**Thanks to the support of incredible people like you we are closer than ever before to solving some of the biggest health challenges in Australia today.**

**Philanthropists, trusts, foundations and donors have given more than \$2.5m towards SAHMRI's research during 2020.**

In-kind and corporate support is also tremendously valuable. As an example, Toyota donated a vehicle to help our Aboriginal Health Equity team travel to communities across the state.

This year we launched BRIGHT, our first community peer-to-peer fundraising event, thanks to major partner Boileau Business Technology. Almost 1,500 people signed up to walk in the virtual event. Participants walked alone and in groups, securing sponsorship from families and friends with every kilometre. BRIGHT generated more than 6,000 donations totalling nearly \$200,000. The event clearly has potential to grow once we have the opportunity to hold a mass event where we can walk side by side.

## LEADERS IN PHILANTHROPY

This valued group is made up of individuals and private foundations who have donated more than \$1m to SAHMRI.

This year both the Wyatt Trust and Raymond Spencer made generous donations as further demonstration of their passion to help us create a healthier, happier future for everyone.

Thank you for your generous contributions.

## CORPORATE SUPPORT

Our Corporate support has grown to \$388,000 this year. We send sincere thanks to all the following for their successful partnerships with SAHMRI

- » Beach Energy
- » Insurance Advisernet Australia Foundation
- » Cowell Clarke Lawyers
- » Intract Australia
- » Toyota Motor Corporation Australia
- » Peter Kittle Toyota
- » Intract Australia
- » Greaton Development
- » David Willson
- » Westpac Group
- » Boileau Business Technology
- » Hologic Australia
- » Sarah Mountain Journeys
- » Diane Ranck
- » Baker Young Stockbrokers
- » Phil Hoffmann Travel



## FOUNDING AMBASSADORS

Before SAHMRI was based in the iconic 'cheese grater' building, there was a group of people with a bold and united vision who believed in a healthier future for all.

This group of people are SAHMRI's Founding Ambassadors.

We owe a debt of gratitude to this original group of philanthropists for investing in medical research as a long-term proposition. Their names will forever be displayed at SAHMRI to acknowledge their vision.

We wish to offer special thanks those Founding Ambassadors who have continued to donate to research in 2020.

- » Professor John Hopwood AM and Barbara Hopwood
- » Alister and Susan Haigh
- » Dr Lea Thin Seow
- » Ian Wall OAM and Pam Wall OAM
- » Leeann and David Willson
- » Peter Weeks
- » Sean Geoghegan and Elizabeth Hallam
- » Ahrens Group Pty Ltd
- » Alan Young AM and Susan Young
- » Bill Williams
- » Brandon and Amanda Petty
- » Colin and Libby Dunsford
- » David and Kathryn Simmons
- » David and Nicole Crawford
- » Deepankur Bhatia
- » Fay Gerard AM and The Adelaide Appeals Committee

- » Frank Agostino
- » Greg and Lynn Drew
- » Gus and Ruth Fraenkel
- » Hon Tom Gray
- » Hugh and Fiona MacLachlan
- » Jill Hammond, Amanda Buttery, Belinda Buttery
- » Josh and Cathy Simons
- » McMahon Services
- » Nick and Kathryn House
- » Nick and Nikki Heywood-Smith
- » Peter and Lisa Weeks
- » Professor Paul Zimmet AO
- » Rick Allert AO and Barbara Allert
- » Rob and Lisa Chapman
- » Robert and Marjory Ahrens
- » Ron and Janet Forster
- » Seeley International
- » Shaun Rolevink
- » Teresa Girke and Steve Wesselingh
- » The Burton Family
- » The Grosset Gaia Fund
- » The Late Robert Kennedy
- » Vivien Zimmet

## TRUSTS AND FOUNDATIONS

Philanthropy changes people's lives. Gifts from philanthropic trusts and foundations help to transform medical research and save the lives of people across the globe. These gifts support our vision of creating a world where everyone can live longer and happier lives.

- » James & Diana Ramsay Foundation
- » Ramaciotti Health Investment Grants
- » Perpetual
- » Thyne Reid Foundation
- » Mason Foundation
- » Ian Potter Foundation
- » Rebecca L Cooper Medical Research Foundation
- » Neurosurgical Research Foundation
- » CMV Foundation Inasmuch
- » The Hospital Research Foundation
- » Adelaide Appeals Committee
- » Robert Gerard Foundation

## THE WALKER SOCIETY

With respect and gratitude, we recognise those who have chosen to leave a legacy to SAHMRI. Through a gift in their Will, the members of The Walker Society are providing the ultimate gift to make an impact on the lives of future generations.

- » Alexander and Janet Rae
- » Anthony Schulz
- » Barbara Elliott
- » Bev Harvey
- » Bill Hickling
- » Bill Williams
- » Brenton Scott FCA
- » Chris Tsilomanis
- » Colin Oates
- » Rose Senesi
- » Dawn Forde
- » Helen Nankivell
- » Helen O'Flaherty
- » Jim French
- » John & Jill Mahoney
- » John & Rosemary Wright
- » Dr Lea Thin Seow
- » Lisa McNeil
- » Lorry Senesi
- » Margaret Rosemary Watt
- » Mary Lou Byrnes
- » Molly McCormack
- » Nigel Holmes
- » Roger Peake
- » Shirley Knight
- » Stephen Michael Baines
- » Theresa Alternetti
- » Chris and Jill Tsilomanis

## MAJOR DONORS (\$5,000+)

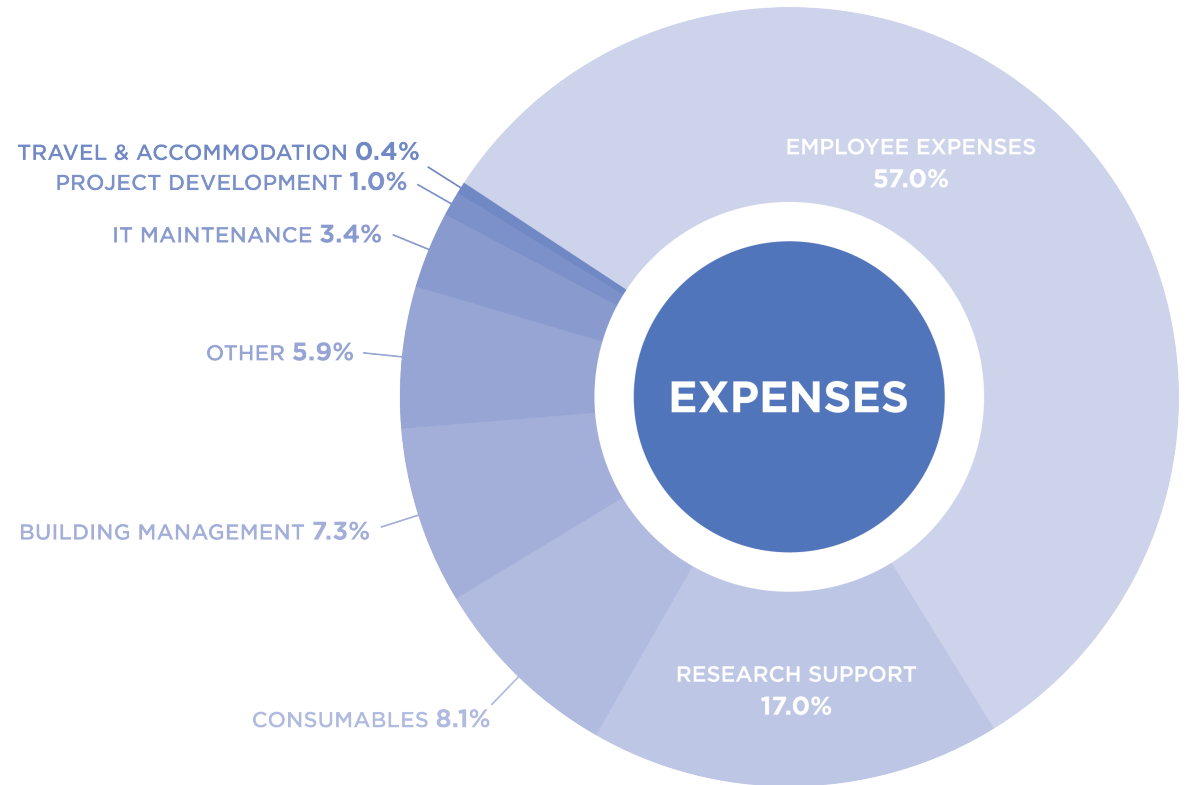
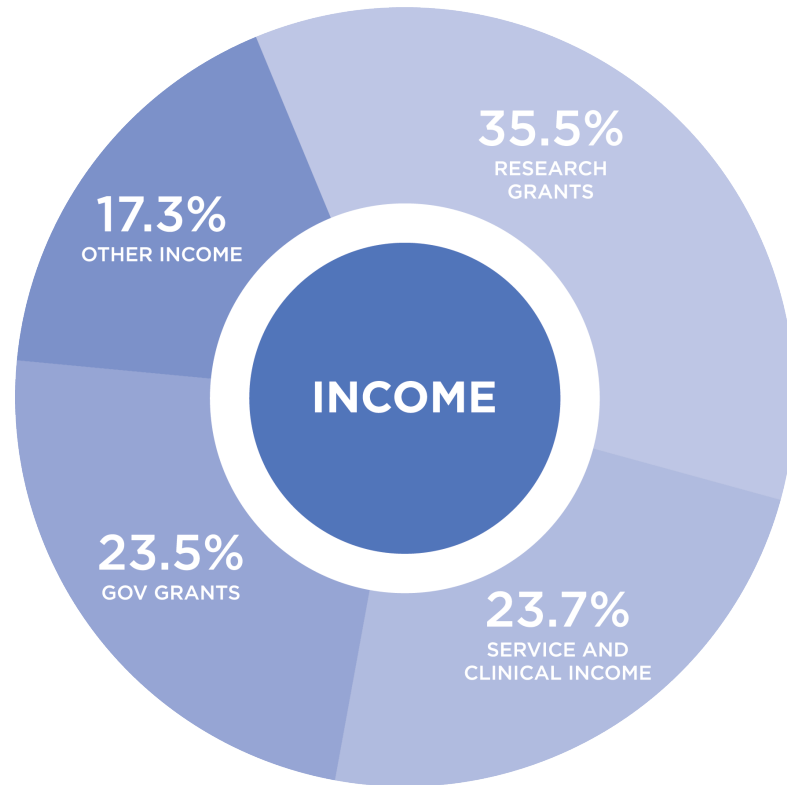
These generous individuals have different reasons for giving to SAHMRI. Each one is committed to creating better health outcomes for all Australians. We thank these individuals for their contributions to society.

- » Rodney Detmold
- » Susan Hoopmann
- » Ian Wall OAM and Pam Wall OAM





# Financial Highlights



	31 DEC 2020 \$'000	31 DEC 2019 \$'000
<b>Operating revenue and other income</b>		
Research grants	32,527	32,258
Service and clinical incomes	21,734	24,643
Other income	15,890	10,412
<b>Total operating income</b>	<b>70,151</b>	<b>67,313</b>
State Government operating grant	5,958	5,812
State Government development grant	7,600	-
<b>Total operating contributions</b>	<b>13,558</b>	<b>5,812</b>
State Government capital grant	604	226
Commonwealth Government capital grant	400	574
Commonwealth Government PTU grant	6,986	-
Other capital grants	-	3,300
<b>Total non-operating grants</b>	<b>7,900</b>	<b>4,100</b>
<b>Total revenue</b>	<b>91,699</b>	<b>77,225</b>

	31 DEC 2020 \$'000	31 DEC 2019 \$'000
<b>Operating expenses</b>		
Employee expenses	(39,596)	(40,183)
Research support	(11,847)	(14,815)
Building management costs	(5,040)	(6,195)
Consumables	(5,599)	(6,317)
Project development costs	(676)	(479)
Travel and accommodation	(305)	(1,931)
IT services & maintenance	(2,354)	(2,151)
Other expenses	(4,095)	(1,902)
<b>Total operating expenses</b>	<b>(69,512)</b>	<b>(73,973)</b>
Finance income	530	583
Finance cost	(791)	(928)
<b>Net finance income/(costs)</b>	<b>(261)</b>	<b>(345)</b>
<b>Results from operating activities before depreciation and amortisation</b>	<b>21,926</b>	<b>2,907</b>
Depreciation, amortisation and derecognition expense	(9,407)	(9,528)
Surplus/(deficit) for the period	12,519	(6,621)
Other comprehensive income/(loss) for the period	-	-
<b>Total comprehensive income/(loss) for the period</b>	<b>12,519</b>	<b>(6,621)</b>



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