IN THE FAIR WORK COMMISSION
4 YEARLY REVIEW OF MODERN AWARDS
AWARD STAGE – GROUPS 3 AND 4

Matter Nos: AM2014/281 (*Professional Employees Award 2010*)
AM2015/6 (Education Group)

Applicants: The Association of Australian Medical Research Institutes (**AAMRI**) and the Association for Professional Engineers, Scientists and Managers, Australia (**APESMA**)

FURTHER SUBMISSIONS
THE ASSOCIATION OF AUSTRALIAN MEDICAL RESEARCH INSTITUTES
AND
THE ASSOCIATION FOR PROFESSIONAL ENGINEERS, SCIENTISTS AND MANAGERS AUSTRALIA

INTRODUCTION

1. AAMRI and APESMA make the following submissions in accordance with the Directions of Commissioner Johns made on 5 March 2018.

2. AAMRI and APESMA make these submissions in support of:

   (a) the provisional decision (**Decision**) to amend the *Professional Employees Award 2010* (**PEA**) to include the medical research industry stream;[1] and

   (b) such amendments in the terms of the proposed draft Determination accompanying these submissions (**Proposed Determination**).

3. In a conference convened before Commissioner Johns on 1 March 2018 following the Decision, it was confirmed that the Commission was giving AAMRI and APESMA the opportunity to:

[1] *4 yearly review of modern awards—Education Group* [2018] FWCFB 797 at [232].

(a) provide evidence directed at the work value of the entire medical researcher stream, including both:

(i) demonstrating the equivalence between Levels 1 to 4 of the existing PEA and Levels 1 to 4 of the proposed medical researcher stream; and

(ii) justifying the establishment of a new Level 5; and

(b) provide a further draft of their proposed draft Determination, taking into account various points raised by the NTEU, and in particular the points raised at paragraphs [97]-[99], [101]-[102] and [106] of the Decision.

SUMMARY

4. AAMRI and APESMA submit that the nature, responsibility, and circumstances of each of Levels 1-4 of the proposed Schedule C is consistent with and equivalent to the nature, responsibility and circumstances of each of Levels 1-4 of Schedule B of the PEA.

5. The evidence of Professor Hilton identifies the positions in an independent MRI that meet the classification descriptors (and in particular responsibility levels) in Schedule B. It then goes on to articulate the duties of such positions and demonstrate how they are described in greater detail in Schedule C.

6. AAMRI and APESMA further submit that the duties and responsibilities of Principal Research Fellows and Senior Principal Research Fellows, as described by Professor Hilton, are of a greater work value than those of a Level 4 employee.

7. Finally, AAMRI and APESMA have filed and served with these submissions the Proposed Determination, varied to take into account some of the comments made by the NTEU and referred to in the Decision. AAMRI and APESMA submit that the variations made meet the modern awards objective, and that any further variations go further than is necessary to meet that objective.

WORK VALUE

8. In the Decision at [228], the Full Bench determined that the application sought a determination "varying modern award minimum wages".

9. Pursuant to the s. 156(3) of the *Fair Work Act 2009* (**FW Act**), in a 4 yearly review of modern awards, the Commission may make a determination varying modern award

minimum wages only if it is satisfied that the variation is justified by work value reasons.

10. Section 156(4) provides that such work value reasons are those:

> *justifying the amount that employees should be paid for doing a particular kind of work, being reasons related to any of the following:*
>
> *(a) the nature of the work;*
>
> *(b) the level of skill or responsibility involved in doing the work;*
>
> *(c) the conditions under which the work is done*.

11. Further, s. 284(2) of the FW Act provides that in exercising its powers under the 4 yearly review of modern awards, so far as they relate to varying modern award minimum wages, the Commission must take into account the "minimum wages objective". This objective is set out at s. 284(1) and relevantly includes at (d) "*the principle of equal remuneration for work of equal or comparable value*".

Levels 1-4 of Schedule C of the Proposed Determination

12. AAMRI and APESMA submit that the Proposed Determination is consistent with the principle of equal remuneration for work of equal or comparable value, in that employees who are currently classified as a Level 1 - Graduate professional scientist perform work of the same value as employees who are proposed to be classified as Level 1 – Medical researchers. The same equivalency of work value exists between Levels 2, 3 and 4 of the existing Schedule B of the PEA and Schedule C of the Proposed Determination.

13. The nature of the work performed by medical research employees as described will of course differ from professional engineers and IT specialists, as well as those professional scientists who do not work in medical research. These professions clearly differ between themselves as well. What is consistent about the descriptors set out in Schedule B to the PEA is the description of the level of ***responsibility*** held by employees at that level.

14. As set out in the Further Statement of Professor Hilton, Schedule C has been drafted based on the key attributes and responsibilities of Schedule B.[2] It simply provides

[2] Further Hilton Statement (27 April 2018) at [20]-[21].

context to those attributes by providing a more detailed description of the work performed by employees at that level of responsibility in an independent MRI.

15. At **Attachment 1** to these submissions, we have set out a side-by-side comparison of Schedule B and Schedule C, which demonstrates that these classifications have equivalent responsibilities. As the levels increase, the wording used to describe these responsibilities diverges, however the responsibilities are comparable, simply applied in the more specific circumstances of an MRI.

16. For example (and as is set out in Attachment 1), "*outlines and assigns work, reviews it for technical accuracy and adequacy*" (Schedule B, B.1.9(e)) is equivalent to "*Guide the research efforts of more junior Professional medical research employees and Honours or Research Degree students*" (Proposed Schedule C, C.1.8(b)(v)).

17. Professor Hilton's Further Statement dated 27 April 2018 then goes on to:

    (a) identify the classes of medical researchers in an independent MRI who are described by the classification descriptors in Schedule B, including by reference to the descriptions acknowledged by the National Health and Medical Research Council (**NHMRC**);[3]

    (b) describe the nature and responsibilities of the work of those medical researchers;[4]

    (c) confirm that the work of each level is appropriately described by the more detailed descriptions in Schedule C of the Proposed Determination; [5] and

    (d) compares this to the work performed by medical researchers in commercial research organisations such as CSL, who are and will continue to be classified under Schedule B of the PEA.[6]

18. A comparison table setting out NHMRC classifications, independent MRI descriptions and the Levels in Schedule C are set out at **Attachment 2**.

[3] Further Hilton Statement (27 April 2018) at [16], [25]. [30], [41] and [48].

[4] Further Hilton Statement (27 April 2018) at [25]-[26], [28], [34]-[35], [38]-[39], [44], [49] and [51].

[5] Further Hilton Statement (27 April 2018) at [29], [32], [45] and [50].

[6] Further Hilton Statement (27 April 2018) at [27], [40], [47] and [52].

19. Further, we note that evidence regarding the conditions under which the work is done has been set out in previous witness statements as follows:

    (a) the similarities between independent MRIs and commercial research organisations are set out at Professor Hilton Statement (11 March 2016) at paragraphs [39] to [40], Professor Crabb Statement (3 June 2016) at [20] to [22];

    (b) the regulation of the sector is set out at Professor Hilton Statement (3 June 2016) at paragraphs [32] to [34];

    (c) the funding arrangements for independent MRIs are set out at Professor Hilton Statement (3 June 2016) at paragraphs [35] to [39], Ms O'Connor Statement (3 June 2016) at [41] to [43], and Professor Crabb Statement (3 June 2016) at [41] to [42];

    relevant excerpts of which are at **Attachment 3**.

20. We note that an employee will be an Experienced medical research employee if their role requires either 4 or 5 years' experience, ***or*** a PhD, Research Doctorate or Master's degree majoring in a medical research discipline. This is in contrast to the current PEA, in which professional scientists must have either 4 or 5 years' experience prior to becoming an Experienced scientist. The proposed definitions have the effect of allowing an alternative entry path to this level. As set out in Professor Hilton's evidence, an employee who obtains a PhD (or similar research degree) will typically have gained the necessary skills and knowledge that would otherwise have been obtained from 4-5 years of experience as a Graduate medical research employee.[7]

21. On the basis of the above, AAMRI and APESMA submit that:

    (a) the level of skill and responsibility described in the proposed Schedule C is equivalent to the existing classifications in Schedule B;

    (b) the nature of the work described in Schedule C is reflective of and consistent with the general responsibilities and work described in Schedule B; and

[7] Further Hilton Statement (27 April 2018) at [34].

(c) the nature of the work described in Schedule C is performed by medical research employees at both independent MRIs and commercial research organisations who are also covered by the PEA;

(d) the conditions under which the work is done are the same for the existing "professional scientists" (many of whom already work in independent MRIs) and the new classifications of "professional medical research employees"

22. These factors justify Levels 1-4 in Schedule C of the Proposed Determination being paid the same rates as Levels 1-4 respectively in Schedule B of the PEA.

Level 5 Professional medical researcher

23. AAMRI and APESMA acknowledge that the proposed Level 5 Professional medical researcher captures some employees who are currently described by Level 4 of Schedule B of the PEA (and who would otherwise be described by Level 4 of Schedule C of the Proposed Determination).

24. Accordingly, this will amount to a variation to the rate of employees who are currently classified at Level 4 but would, under the Proposed Determination, be classified at the new Level 5.

25. As set out by Professor Hilton, the key differences between Level 4 and the proposed Level 5 include that Level 5 employees are expected to:

(a) have an international reputation in their research area and play a leading role in their organisation;

(b) undertake significant administrative functions such as leading the development of large research funding proposals, and hold responsibility for the maintenance and renewal of significant research funding;

(c) provide leadership in community affairs in professional, commercial, industrial and community sectors; and

(d) form partnerships with leading international companies to assist in the commercialisation of medical research.[8]

[8] Further Hilton Statement (27 April 2018) at [54(b)].

26. The level of responsibility that such medical researchers hold is greater than those who are described by Level 4 of Schedule B/Proposed Schedule C.

27. AAMRI and APESMA accordingly submit that it is appropriate for such employees to be paid at a higher rate than Level 4 medical researchers and other Level 4 professionals in the PEA.

DRAFT DETERMINATION

28. As set out above at 3, at conference we were requested to address the following points raised by the NTEU in its submissions and referred to in the Decision:

    (a) the allegation that the proposal would capture a significant number of "non-research staff" (at [97]).

    (b) the lack of definition for "health related discipline" (at [98] and [101]);

    (c) the lack of a body governing employment as a researcher (at [99]);

    (d) the alleged narrowness of the qualification for the medical research stream (at [102]).

29. We have addressed each of these submissions of the NTEU below.

30. In addition to the amendments described below, AAMRI and APEMSA have made minor amendments to the title of the stream – the "Medical Researcher stream".

Capturing "non-research" staff

31. In its Outline of Submissions in Reply, the NTEU submitted that it was "*unclear where the 'bottom end' of the term 'research' would be drawn for the purposes of the PEA.*"[9] The Decision noted this concern at paragraph [97].

32. AAMRI and APESMA maintain that the definition of research duties is unambiguous. The use of the term without definition is consistent with its usage, also without definition, in the classification descriptors for the *Higher Education Industry (Academic Staff) Award 2010*.[10]

[9] NTEU Outline of Submissions in Reply (3 March 2017) at 4.4.

[10] Ibid.

33. Regardless, the Proposed Determination amends the proposed definition of "professional medical research duties" by stressing that such duties are "directly relevant to" basic, applied, translational or clinical research, and exclude duties which indirectly support research, like the examples given by the NTEU in its submission.

34. AAMRI and APESMA submit that any potential ambiguity is avoided by these additions to the Proposed Determination.

Health related discipline

35. The NTEU also submitted that there was a lack of clarity around the meaning of a "health related discipline".[11] This submission was referred to in the Decision at paragraph [98] and [101].

36. In order to address this, the Proposed Determination introduces the new phrase "medical research discipline", and defines it to include "medicine, science, and health related disciplines" following which are several areas of health to which such disciplines need relate.

37. AAMRI and APESMA refer to the *National Health and Medical Research Council Act 1992*, s.7, which sets out the functions of the CEO of the NHMRC. These functions include to inquire into, issue guidelines on, and advise the community on, matters relating to:

> *(a) the improvement of health; and*
>
> *(b) the prevention, diagnosis and treatment of disease; and*
>
> *(c) the provision of health care; and*
>
> *(d) public health research and medical research…*

38. AAMRI and APESMA submit that the above categories give a sufficient basis for the easy comprehension of the proposed coverage of the PEA.

Lack of body governing employment as a researcher and alleged narrowness of the qualification for the medical research stream

39. AAMRI and APESMA accept the NTEU's submission that there is no body governing employment as a researcher (which is noted by the Decision at paragraph [99]). We

[11] Ibid at 4.5.

understand the NTEU to be referring to the organisations listed in the scientist, engineer and IT professional streams, which bodies are able to certify the appropriateness of particular degrees.

40. However, it is not clear from the NTEU's submissions how this is said to lead to ambiguity or lack of clarity. AAMRI and APESMA reject that contention.

41. AAMRI and APESMA understand the NTEU's criticism that the lack of such a governing body leads to a more narrow range of qualifications being accepted (referred to by the Decision at paragraph [102]). In order to address the alleged deficiency, the Proposed Determination has amended the definition of "Academic qualifications" to include paragraph (a)(ii).

42. We have been instructed that this amendment has the support of the Ai Group and has been drafted to ensure that there is some check in the award on the value of international qualifications while not unfairly limiting the scope of the proposed variation.

27 April 2018

Association of Australian Medical Research Institutes

Association for Professional Engineers, Scientists and Managers, Australia

Attachment 1 – Comparison of Schedule B and Schedule C

AAMRI and APESMA have highlighted in yellow those descriptors which have been replicated in Schedule C, save that medical research has been substituted for engineering, science or information technology.

PEA Schedule B	PEA Proposed Schedule C
LEVEL 1	
(a) An employee at this level undertakes initial professional tasks of limited scope and complexity, such as minor phases of broader assignments, in office, plant, field or laboratory work. (b) Under supervision from higher level Professional engineers, Professional scientists or Professional information technology employees as to method of approach and requirements, the employee performs normal professional work and exercises individual judgment and initiative in the application of principles, techniques and methods. (c) In assisting more senior Professional engineers, Professional scientists or Professional information technology employees by carrying out tasks requiring accuracy and adherence to prescribed methods of professional engineering or professional scientific/information technology analysis, design or computation, the employee draws upon advanced techniques and methods learned during and after the undergraduate course. (d) Training, development and experience using a variety of standard procedures, enable the employee to develop increasing professional judgment and apply it progressively to more difficult tasks at Level 2. (e) Decisions are related to tasks performed, relying upon precedent or defined procedures for guidance. Recommendations are related to solution of problems in connection to the tasks performed. (f) Work is reviewed by higher level Professional engineers, Professional scientists or Professional information technology employees for validity, adequacy, methods and procedures. With professional development and	(a) The employee undertakes initial professional medical research duties of limited scope and complexity that support and contribute to the research efforts of the research unit. (b) Under supervision from higher level Professional medical research employees as to method of approach and requirements, the employee performs normal professional medical research duties and exercises individual judgment and initiative in the application of principles, techniques and methods. (c) In assisting more senior Professional medical research employees by carrying out tasks requiring accuracy and adherence to established research methods, the employee draws upon advanced techniques and methods learned during and after the undergraduate course. (d) Training, development and experience using a variety of standard procedures, enable the employee to develop increasing professional judgment and apply it progressively to more difficult tasks at Level 2. (e) Decisions are related to tasks performed, relying upon precedent or defined procedures for guidance. (f) Work is reviewed by higher level Professional medical research employees for validity, adequacy, methods and procedures. With professional development and experience, work receives less review, and the employee progressively exercises more individual judgment until the level of competence at Level 2 is achieved.

PEA Schedule B	PEA Proposed Schedule C
experience, work receives less review, and the employee progressively exercises more individual judgment until the level of competence at Level 2 is achieved. (g) The employee may assign and check work of technical staff assigned to work on a common project.	(g) The employee may assign and check work of technical staff assigned to work on a common project.
LEVEL 2	
Following development, the Experienced professional plans and conducts professional work without detailed supervision but with guidance on unusual features and is usually engaged on more responsible assignments requiring substantial professional experience.	(a) The Experienced professional plans and conducts professional medical research duties without detailed supervision but with guidance and is usually engaged in more responsible assignments requiring substantial professional experience. (b) An employee at this level: (i) contributes to the research outputs of a research group and/or their impact on health and community outcomes; (ii) normally has a greater degree of autonomy and responsibility, including the conduct of components of independent research projects within an overall program, development of more advanced technical skills, and the guidance and support of students or more junior staff with respect of methodology and procedure; (iii) may present at conferences and seminars, and provide input into the preparation of submissions to external funding bodies and other agencies; and normally undertakes administrative functions in relation to their area of research.
LEVEL 3	
(a) An employee at this level performs duties requiring the application of mature professional knowledge. With scope for individual accomplishment	**(a)** An employee at this level performs duties requiring the application of

PEA Schedule B	PEA Proposed Schedule C
and coordination of more difficult assignments, the employee deals with problems for which it is necessary to modify established guides and devise new approaches. (b) The employee may make some original contribution or apply new professional approaches and techniques to the design or development of equipment or products. (c) Recommendations may be reviewed for soundness of judgement but are usually regarded as technically accurate and feasible. The employee makes responsible decisions on matters assigned, including the establishment of professional standards and procedures. The employee consults, recommends and advises in specialty areas. (d) Work is carried out within broad guidelines requiring conformity with overall objectives, relative priorities and necessary cooperation with other units. Informed professional guidance may be available. (e) The employee outlines and assigns work, reviews it for technical accuracy and adequacy, and may plan, direct, coordinate and supervise the work of other professional and technical staff.	mature professional knowledge, with scope for individual accomplishment and the oversight of research projects. They should either be receiving or working towards obtaining independent research funding. **(b)** An employee at this level is expected to: ***(i)*** contribute to the research direction of a research team, including, where appropriate, overseeing a research team within a research group and within broad guidelines requiring conformity with overall objectives and relative priorities; ***(ii)*** make independent, original contributions to their area of research and/or its impact on health and community outcomes; ***(iii)*** produce research that results in publications or influences health guidelines, health policy or other health advancements, either independently or through collaborations with other researchers, health professionals, policy officers or other relevant professionals; ***(iv)*** present at conferences and seminars, and prepare submissions to external funding bodies and other agencies; and supervise support staff and other technical staff and guide the research efforts of more junior Professional medical research employees and Honours or Research Higher Degree students.
LEVEL 4	
(a) An employee at this level performs professional work involving considerable independence in approach, demanding a considerable degree of originality, ingenuity and judgement, and knowledge of more than one field of, or expertise (for example, acts as their organisation's technical reference authority) in a particular field of professional engineering, professional scientific/information technology field or professional	**(a)** An employee at this level is expected to have made a considerable original contribution to their area of research and be acknowledged nationally in their area of expertise. They will generally receive independent research funding. **(b)** An employee at this level is expected to:

PEA Schedule B	PEA Proposed Schedule C
information technology field. (b) An employee at this level: (i) initiates or participates in short or long range planning and makes independent decisions on professional engineering or professional scientific/information technology policies and procedures within an overall program; (ii) gives technical advice to management and operating departments; (iii) may take detailed technical responsibility for product development and provision of specialised professional engineering or professional scientific/information technology systems, facilities and functions; (iv) coordinates work programs; and (v) directs or advises on the use of equipment and materials. (c) An employee at this level makes responsible decisions not usually subject to technical review, decides courses of action necessary to expedite the successful accomplishment of assigned projects, and may make recommendations involving large sums or long range objectives. (d) Duties are assigned only in terms of broad objectives, and are reviewed for policy, soundness of approach, accomplishment and general effectiveness. (e) The employee supervises a group or groups including professionals and other staff, or exercises authority and technical control over a group of professional staff. In both instances, the employee is engaged in complex professional engineering or professional scientific/information technology applications.	***(i)*** play a major role in the research direction of a research group, including, where appropriate, leading a research group or managing research projects; ***(ii)*** hold a considerable record of independent, original contributions to an area of research and/or its impact on health and community outcomes; ***(iii)*** produce research that results in publications or influences health guidelines, health policy or other health advancements, either independently or through collaborations with other researchers, health professionals, policy officers or other relevant professionals at a national or international level; ***(iv)*** present at national and international conferences and seminars; ***(v)*** prepare submissions to external funding bodies and other agencies, and play a role in the financial management of funding; and ***(vi)*** supervise and advise other research staff, guide the research efforts of more junior Professional medical research employees, and supervise Honours or Research Higher Degree projects and students.

Attachment 2 – Comparison of various titles and classification levels

PEA Schedule B/ Schedule C	Independent MRI title	NHMRC Title/ Descriptor	NHMRC description of research personnel
Level 1	Research Assistant	PSP2	Junior graduate research assistant
Level 2	Senior Research Assistant Research Officer	PSP3	Experienced graduate research assistant Junior post-doctoral research officer
Level 3	Senior Research Officer	PSP4	Experienced postdoctoral research officer (i.e. a researcher…approaching the NHMRC Career Development Fellowship scheme or equivalent)
	Research Fellow	PSP5	Senior experienced postdoctoral researcher (i.e. a researcher… expected to have applied for or held the NHMRC Career Development Fellowship scheme or equivalent)
Level 4	Senior Research Fellow	Senior Research Fellow	See Attachment DH-2 to Professor Hilton Statement (27 April 2018)
Level 5	Principal Research Fellow	Principal Research Fellow	See Attachment DH-2 to Professor Hilton Statement (27 April 2018)
	Senior Principal Research Fellow	Senior Principal Research Fellow	See Attachment DH-2 to Professor Hilton Statement (27 April 2018)

Attachment 3 – Relevant excerpts

Professor Hilton (11 March 2016)

39. Based on my experience working concurrently at both WEHI and the CRC, as well as subsequent involvement in the several biotechnology companies that have been established by WEHI, I consider that these companies operate similarly to independent MRIs. Their primary focus is on research and its translation, and a key indicator of success in that regard is the impact of research discoveries on health outcomes. Independent MRIs have obligations to their donors and directors to impact health advances.

40. There is a common focus on outcomes, including protecting and patenting discoveries. This results in shared practices across some independent MRIs and biotechnology companies, including:

(a) requiring staff to sign laboratory books daily in order to protect the organisation's right to patent as first to invent;

(b) financial incentives to patent, which might take the form of bonuses at biotechnology companies, and at WEHI takes the form of a rewards scheme where profits from patents are distributed to staff and inventors.

Professor Hilton (3 June 2016)

32. MRIs are not subject to the above regulation or reporting requirements, and are not regulated as a 'sector' or 'industry', save for their reporting requirements to the Australian Charities and Not-for-profits Commission as charities.

33. At the Commonwealth Government level, MRIs fall under the 'responsibility' of the Department of Health, and receive funding for operational costs through the NHMRC, which is a statutory body of this department. This is different from universities, which are regulated by and receive funding for operational costs from the Department of Education and Training. As grant recipients, MRIs are of course, like all recipients of grant funding, required to report outcomes to the relevant funding body, including the NHMRC in the case of NHMRC grants.

34. MRIs are required to comply with the Australian Code for the Responsible Conduct of Research. All organisations that undertake research are required to comply with this Code, including MRIs, hospitals and health services, not for profits and universities.

35. MRIs obtain their funding from a wide array of sources. To the extent that universities are able to access the same sources, such sources are also available to hospitals, not-for-profits and other organisations conducting medical research. Universities are also eligible to receive significant funding sources that are inaccessible to MRIs.

NHMRC grants

36. *MRI staff are eligible to apply for NHMRC grants and fellowships, and MRIs are able to administer any NHMRC grants as long as they have met the NHMRC requirements to be an eligible administering institution. Such grants are also able to be administered by hospitals, not for profits (for example, the Cancer Council), as well as universities who have registered as eligible administering institutions. Such grants are capable of being transferred between any of these eligible administering institutions should a researcher to whom a grant has been awarded change employers.*

37. *MRIs are also eligible for funding for operational overheads associated with NHMRC grants through the Independent Research Institute Infrastructure Support Scheme (**IRIISS**). This funding is **only** available to independent MRIs pursuant to the IRIISS Funding Policy, attached to this Statement as Annexure **DH-3**. These grants provide up to 20 cents per dollar of NHMRC funds awarded to researchers at the institute in that year. These may be shared between MRIs who are undertaking collaborative projects; however, sharing this funding with universities is prohibited.*

State funding

38. *MRIs are also eligible for state government schemes in order to meet overheads. For instance, the Victorian Government provided independent MRIs, including WEHI, with a total of $26 million in the 2015-2016 financial year through the Operational Infrastructure Scheme.*

39. *In contrast, universities are not eligible for this scheme, and the Victorian Government makes clear that the primary responsibility for university funding rests with the Commonwealth government.*

Professor Crabb (3 June 2016)

20. *The work of research employees at Burnet is focused on improvements to health outcomes. It is in a sense more akin to the work of a research chemist in a pharmaceutical company, in that researchers are more concerned with developing a new drug or treatment or prevention of a disease than the publication of their research in a scholarly journal.*

21. *However, while research papers are not the only measure of a researcher's performance (as at universities), MRI researchers of course publish in academic journals, as would a researcher at a hospital, pharmaceutical company or university.*

22. *Medical researchers are similar to scientific researchers, some of whom are employed at universities as research only scientists. However, it is different from the work of other university academics.*

…

41. *In the financial year ending 31 December 2015, Burnet received approximately:*

(a) 33% of its operating revenue comes from Government (91% from commonwealth, 5% from state and 4% from other);

(b) 29% of its operating revenue comes from contract research and development consultancies for organisations such as DFAT;

(c) 7% of its operating revenue from donations;

(d) 11% of its operating revenue from Victorian Government operational infrastructure support);

(e) 11% from property leasing arrangements;

(f) 2% of its operating revenue from other contract services, eg. 360 Biolabs, a contract service provider using cutting edge technology to support the development of therapeutics, vaccines and diagnostics;

(g) 7% from miscellaneous;

42. *Further details of Burnet's funding are set out in Burnet's 2015 Financial Report, annexed to this Statement as Annexure **BC-2**.*

Ms O'Connor (3 June 2016)

41. In the financial year ending 30 June 2015, NARI received approximately:

(a) 50% of its revenue from state government grants and contracts (through DHHS), for which universities are ineligible;

(b) 30% of its revenue from federal government grants and contracts;

(c) 9% of its revenue from philanthropic grants and contracts;

(d) 6% of its revenue from other contract research;

(e) 2% of its revenue from donations and miscellaneous

(f) 2% of its revenue from interest; and

(g) 2% of its revenue from professional education and training.

42. Of the funding NARI receives from the Victorian Government, approximately two thirds is competitive grants, non-guaranteed and limited tenders and non-recurrent funding for directed research.

*43. Further details of NARI funding are set out in an extract of NARI's 2014-2015 Annual Report, attached to this Statement as Annexure **DO-2**.*

MA000076

DRAFT DETERMINATION

Fair Work Act 2009
s. 156 – 4 yearly review of modern awards

4 yearly review of modern awards – Education Group

(AM2015/6)

PROFESSIONAL EMPLOYEES AWARD 2010

[MA000065]

Educational services

VICE PRESIDENT CATANZARITI XXXX
DEPUTY PRESIDENT KOVACIC
COMMISSIONER JOHNS

Further to the Full Bench decision issued on XXXX in AM2015/6 (XXXX), it is determined pursuant to section 156(2)(b)(i) of the *Fair Work Act 2009* that the *Professional Employees Award 2010* be varied as follows:

1. By inserting the following clause 3.7:

3.7 Medical researcher stream

Academic qualifications *means:*

(a) *a university degree majoring in a medical~~, science or health related~~ research discipline as defined (three, four or five year course) from:*

(i) *an Australian, New Zealand, United Kingdom or United States of America university or from an Australian tertiary educational institution; or*

~~(a)~~**(ii)** *such other university recognised as providing an equivalent standard; or*

(b) *a PhD, Research Doctorate or Master's degree majoring in a medical~~, science or health related~~ research discipline as defined.*

Experienced medical research employee *means a Professional medical research employee with the undermentioned qualifications and employed by a medical research institute in employment the adequate discharge of any portion of the duties of which employment requires that:*

(a) *they have graduated with a PhD, Research Doctorate or Master's degree majoring in a medical~~, science or health related~~ research discipline as defined; or*

(b) *they, not having so graduated, will have had further experience in professional medical research duties, after obtaining their university degree, as follows:*

(i) *when a graduate (four or five year course) – four years' experience;*

(ii) *when a graduate (three year course) – five years' experience.*

Graduate medical research employee *means a Professional medical research employee employed by a medical research institute, other than an Experienced medical research employee, that is, a person possessing a university degree majoring in a medical~~, science or health related~~ research discipline (three, four or five year course) from an Australian, New Zealand, United Kingdom or United States of America university or from an Australian tertiary educational institution.*

health services *means activities that are intended or claimed by the entity performing them to:*

(a) *assess, maintain or improve an individual's health;*

(b) *diagnose an individual's illness, injury or disability; or*

(c) *treat an individual's illness, injury or disability or suspected illness, injury or disability.*

higher education organisation *means an educational institution providing undergraduate and post-graduate teaching leading to the conferring of degrees.*

medical research discipline *means medicine, science, and health related disciplines relating to the improvement of health, the prevention, diagnosis and treatment of health, the provision of health care, public health and medical research.*

medical research institute *means a not-for-profit organisation:*

(a) *principally engaged in basic, applied, translational or clinical research; and*

(b) *operating for the primary purpose of the cure, diagnosis, prevention and treatment of disease,*

but does not include:

(c) *organisations operating for the primary purpose of the provision of health services;*

(d) *higher education organisations as defined;*

(e) *Commonwealth, State or Territory government agencies.*

Professional medical research employee *means a person employed by a medical research institute and qualified to carry out professional medical research duties as defined. The term Professional medical research employee will embrace and include Graduate medical research employee and Experienced medical research employee as defined in this clause.*

professional medical research duties *means duties*

(a) *carried out by a person in a medical research institute;*

(b) ~~*undertaking*~~ *directly relevant to basic, applied, translational or clinical research; and*

(c) *the adequate discharge of any portion of which duties requires a person to hold the Academic qualifications as defined,*

but excludes duties which indirectly support such research duties, such as clerical, administrative and computing support.

2. By inserting the following clause 4.3 (and renumbering subsequent clauses as required):

4.3 *This award covers employers throughout Australia principally engaged as a medical research institutes with respect to their employees performing professional medical research duties who are covered by the classifications in Schedule C—Medical Research* ~~*Institutes*~~ *Employees and those employees.*

3. By inserting the following clause 4.4(d) (and renumbering subsequent clauses as required):

(d) *Nurses Award 2010*;

4. By deleting clause 11.6 and substituting the following:

11.6 Notification of responsibility level

An employee must on appointment and/or upon request be informed by their employer of the responsibility level as described in Schedule B—Classification Structure and Definitions or Schedule C—Medical Research ~~*Institutes*~~ *Employees which the employer considers relevant to the employee's employment having regard to the duties performed by the employee concerned.*

5. By deleting clause 11.7 and substituting the following:

11.7 Evidence of qualifications

(a) *An employee who is employed under this award or who is an applicant for employment covered by this award, must if and when required to do so by the employer, produce to the employer written evidence that they possess or have acquired the qualifications of a Qualified engineer, Experienced engineer, Qualified scientist, Experienced scientist, Graduate information technology employee or, Experienced information technology employee, Graduate medical research employee or Experienced medical research employee.*

(b) *Where an employee has failed to produce to the employer written evidence that they possess or have acquired the relevant qualifications and the employee subsequently claims to be entitled to payment at a rate prescribed by this award, it will be a defence to the employer if the employer establishes that during the said period the employer did not know and had no reason to believe that the employee had acquired the qualifications of a Qualified engineer, Experienced engineer, Qualified scientist, Experienced scientist, Graduate information technology employee or, Experienced information technology employee, Graduate medical research employee or Experienced medical research employee.*

6. By deleting clause 14 and substituting the following:

14 Classifications

The classification definitions in Schedule B—Classification Structure and Definitions and Schedule C—Medical Research ~~Institutes~~ Employees will apply.

7. By deleting clause 15 and substituting the following:

The minimum annual wages payable to full-time employees in the classifications defined in Schedule B—Classification Structure and Definitions and Schedule C—Medical Research ~~Institutes~~ Employees are:

Classification	***Annual wages***
	$
Level 1 Graduate professional	
Pay point 1.1 (3 year degree)	*~~46,764~~48,307*
Pay point 1.1 (4 or 5 year degree)	*~~47,962~~49,545*
Pay point 1.2	*~~48,768~~50,377*
Pay point 1.3	*~~50,798~~52,474*
Pay point 1.4	*~~53,370~~55,131*
Level 2 Experienced professional/quality	*~~55,168~~56,989*

Classification	*Annual wages*
	$
auditor/experienced medical research employee	
Level 3 Professional/senior (lead) quality auditor/experienced medical research employee	~~*60,292*~~*62,282*
Level 4 Professional/experienced medical research employee	~~*68,001*~~*70,245*
Level 5 Experienced medical research employee	~~*81,920*~~*84,623*

8. By deleting the first paragraph of Schedule B and substituting the following:

Schedule B—Classification Structure and Definitions

For employment involving the performance of professional duties except professional medical research duties, the following classification definitions apply:

9. By inserting the following Schedule C:

Schedule C—Medical Research ~~Institutes~~ Employees

For employment involving the performance of professional medical research duties, the following classification definitions apply:

C.1 Professional responsibility levels

C.1.1 Level 1—Graduate professional medical research employee

(a) *The employee undertakes initial professional medical research duties of limited scope and complexity that support and contribute to the research efforts of the research unit.*

(b) *Under supervision from higher level Professional medical research employees as to method of approach and requirements, the employee performs normal professional medical research duties and exercises individual judgment and initiative in the application of principles, techniques and methods.*

(c) *In assisting more senior Professional medical research employees by carrying out tasks requiring accuracy and adherence to established research methods, the employee draws upon advanced techniques and methods learned during and after the undergraduate course.*

(d) *Training, development and experience using a variety of standard procedures, enable the employee to develop increasing professional judgment and apply it progressively to more difficult tasks at Level 2.*

(e) *Decisions are related to tasks performed, relying upon precedent or defined procedures for guidance.*

(f) *Work is reviewed by higher level Professional medical research employees for validity, adequacy, methods and procedures. With professional development*

and experience, work receives less review, and the employee progressively exercises more individual judgment until the level of competence at Level 2 is achieved.

(g) *The employee may assign and check work of technical staff assigned to work on a common project.*

C.1.2 Graduate professional—appointment and progression

(a) Pay Point 1.1

Means the pay point to which a graduate will be appointed where they possess and may be required to utilise a level of professional skill and knowledge based on either the completion of an accredited three, four or five year tertiary qualification in Australia or equivalent.

(b) Pay Point 1.2

Means the pay point to which a graduate will be appointed or will progress from Pay Point 1.1 having been assessed as being competent at Pay Point 1.1, where the graduate possesses and may be required to utilise a level of professional skill and knowledge based on, in addition to the experience, skill and knowledge requirements for Pay Point 1.1, not more than one further year of practical professional experience, with supervision as appropriate.

(c) Pay Point 1.3

Means the pay point to which a graduate will be appointed or will progress from Pay Point 1.2 having been assessed as being competent at this Pay Point, where the graduate possesses and may be required to utilise a level of professional skill and knowledge based on, in addition to the experience, skill and knowledge requirements for Pay Point 1.2, not more than one further year of practical professional experience, with supervision as appropriate.

(d) Pay Point 1.4

Means the pay point to which a graduate will be appointed or will progress from Pay Point 1.3 having been assessed as being competent at this Pay Point, where the graduate possesses and may be required to utilise a level of professional skill and knowledge based on, in addition to the experience, skill and knowledge requirements for Pay Point 1.3, not more than one further year of practical professional experience, with supervision as appropriate.

C.1.3 Annual review

Subject to the requirements of each Pay Point, each graduate will progress on their annual anniversary date from one Pay Point to the next, having regard to the acquisition and utilisation of core competencies through experience in their practice setting/s over such period. Confirmation of the employee's progression to the next Pay Point will be provided by the employer in writing.

C.1.4 Deferral

Progression from one Pay Point to the next may be deferred or refused by the employer. Such deferral or refusal of progression will not be unreasonably or arbitrarily imposed by the employer. Any decision to defer or refuse progression to the next pay point will be confirmed in writing.

C.1.5 Appeal and review

An employee may appeal a deferral, provided that where any such appeal results in a revocation of the employer's decision, Pay Point progression will be deemed to operate and be payable from the employee's anniversary date for such progression. An appeal or review, for the purpose of this clause, will be undertaken and resolved in accordance with clause 10—Dispute resolution of this award.

C.1.6 Accelerated advancement

Progression from one Pay Point to the next may be advanced by the employer to occur prior to the annual anniversary date provided that any such advancement is referable to the requirements for each Pay Point.

C.1.7 Level 2—Experienced professional medical research employee

(a) *The Experienced professional plans and conducts professional medical research duties without detailed supervision but with guidance and is usually engaged in more responsible assignments requiring substantial professional experience.*

(b) *An employee at this level:*

- ***(i)*** *contributes to the research outputs of a research group and/or their impact on health and community outcomes;*
- ***(ii)*** *normally has a greater degree of autonomy and responsibility, including the conduct of components of independent research projects within an overall program, development of more advanced technical skills, and the guidance and support of students or more junior staff with respect of methodology and procedure;*
- ***(iii)*** *may present at conferences and seminars, and provide input into the preparation of submissions to external funding bodies and other agencies; and*
- ***(iv)*** *normally undertakes administrative functions in relation to their area of research.*

C.1.8 Level 3—Experienced medical research employee

(a) *An employee at this level performs duties requiring the application of mature professional knowledge, with scope for individual accomplishment and the oversight of research projects. They should either be receiving or working towards obtaining independent research funding.*

(b) *An employee at this level is expected to:*

(i) *contribute to the research direction of a research team, including, where appropriate, overseeing a research team within a research group and within broad guidelines requiring conformity with overall objectives and relative priorities;*

(ii) *make independent, original contributions to their area of research and/or its impact on health and community outcomes;*

(iii) *produce research that results in publications or influences health guidelines, health policy or other health advancements, either independently or through collaborations with other researchers, health professionals, policy officers or other relevant professionals;*

(iv) *present at conferences and seminars, and prepare submissions to external funding bodies and other agencies; and*

(v) *supervise support staff and other technical staff and guide the research efforts of more junior Professional medical research employees and Honours or Research Higher Degree students.*

C.1.9 Level 4—Experienced medical research employee

(a) *An employee at this level is expected to have made a considerable original contribution to their area of research and be acknowledged nationally in their area of expertise. They will generally receive independent research funding.*

(b) *An employee at this level is expected to:*

(i) *play a major role in the research direction of a research group, including, where appropriate, leading a research group or managing research projects;*

(ii) *hold a considerable record of independent, original contributions to an area of research and/or its impact on health and community outcomes;*

(iii) *produce research that results in publications or influences health guidelines, health policy or other health advancements, either independently or through collaborations with other researchers, health professionals, policy officers or other relevant professionals at a national or international level;*

(iv) *present at national and international conferences and seminars;*

(v) *prepare submissions to external funding bodies and other agencies, and play a role in the financial management of funding; and*

(vi) *supervise and advise other research staff, guide the research efforts of more junior Professional medical research employees, and supervise Honours or Research Higher Degree projects and students.*

C.1.10 Level 5—Experienced medical research employee

(a) *An employee at this level is expected to have achieved recognition as an authority nationally or internationally in their area of research expertise, and play a leading role within the research community. They will oversee a program of research and receive independent research funding.*

(b) *An employee at this level is expected to:*

(i) *lead a research team/unit within their organisation, including conceiving programs and problems to be investigated and determining research strategy and direction;*

(ii) *make responsible decisions on all matters, including ways of attaining research program objectives and financial management of research funding, subject only to overall policy and financial controls;*

(iii) *hold a substantial/major record of independent, original contributions to an area of research and/or its impact on health and community outcomes;*

(iv) *oversee research that results in publications or influences health guidelines, health policy or other health advancements, either independently or through collaborations with other researchers, health professionals, policy officers or other relevant professionals at a national or international level;*

(v) *present at national and international conferences and seminars;*

(vi) *support and guide the research efforts of Professional medical research employees in the research team/unit, direct staff, and supervise Research Higher Degree projects and students.*

IN THE FAIR WORK COMMISSION
4 YEARLY REVIEW OF MODERN AWARDS
AWARD STAGE – GROUPS 3 AND 4

Matter Nos: AM2014/281 (*Professional Employees Award 2010*)
AM2015/6 (Education Group)

Respondents: The Association of Australian Medical Research Institutes (**AAMRI**) and the Association for Professional Engineers, Scientists and Managers, Australia (**APESMA**)

FURTHER WITNESS STATEMENT OF PROFESSOR DOUGLAS HILTON

I, **PROFESSOR DOUGLAS HILTON AO** of 1G Royal Parade, Parkville, Victoria 3052, **STATE** as follows:

1. I make this statement on my own behalf and, where relevant, in my capacity as Director of the Walter and Eliza Hall Institute (**WEHI**).

2. I am authorised to make this statement on behalf of the Association of Australian Medical Research Institutes (**AAMRI**).

3. I make this statement from my own knowledge unless I indicate otherwise. Where I have received information from a third party, I believe that information to be true unless I state otherwise.

Background

4. My background is set out in my initial Witness Statement in this matter dated 11 March 2016 and my Further Witness Statement dated 3 June 2016.

5. Most relevantly, I have:

   (a) held the position of Director of the Walter and Eliza Hall Institute (**WEHI**) from 2009 to present;

   (b) participated in or overseen the establishment of multiple commercial biotechnology companies in my time at WEHI, and in particular, co-founded a commercial biotechnology company MuriGen Therapeutics Pty Ltd in 1999;

   (c) worked as Laboratory Head at AMRAD Corporation Limited from 1994 to 1996; and

(d) collaborated extensively with CSL Ltd.

Medical research in independent MRIs

6. It is difficult to comprehensively define "research", as acknowledged by the National Health and Medical Research Council (**NHMRC**) and the Australian Research Council (**ARC**) in their joint *Australian Code for the Responsible Conduct of Research* (2007) at p 1. It is a "*broad concept, and there is no simple, single way to define research for all disciplines*".

7. The medical research undertaken at independent medical research institutes (**independent MRIs**) includes:

   (a) basic research, which is scientific research aimed at shedding light on the underlying and fundamental processes involved in health and disease;

   (b) applied research, which uses scientific theories to develop technology or techniques for a specific purpose;

   (c) translational research, which involves the translation of findings from basic research into medical practice and meaningful health outcomes; and

   (d) clinical research, which concerns investigation involving human material to shed light on the treatment, prevention and diagnosis of disease.

8. The NHMRC has compiled a range of "Fields of Research" which it funds, using the Australian and New Zealand Standard Research Classification 2008 Edition (published by the Australian Bureau of Statistics and Statistics New Zealand). The document is a comprehensive collection of fields of research that are engaged in by independent MRIs. This document is attached as **Attachment DH-1**.

9. I am able to speak to the work performed by a range of researchers at a cross-section of independent MRIs, as I have been on the scientific board of a number of these institutes, and the descriptors I set out below align with the many hundreds of researchers I have met in my career particularly as a former AAMRI President.

Scientific research in commercial organisations

10. The research performed at independent MRIs is very similar to that performed at commercial organisations. As set out in my previous witness statements in this matter, independent MRIs often collaborate with commercial organisations such as CSL, and even establish such commercial organisations. I have personally worked across WEHI and Murigen Therapeutics Pty Ltd, one such commercial organisation spun off from WEHI. In

that capacity, I oversaw a substantial amount of research conducted in collaboration with CSL, and am able to speak to the similarities between the work conducted at independent MRIs and that at commercial organisations.

11. Research scientists at CSL conduct the same types of basic, applied, translational and clinical research. Like independent MRIs, commercial research organisations understand that research into basic health mechanisms has value outcomes. Like independent MRI researchers, CSL researchers would also take impeccable notes of their research and interact with business development officers to ensure that their IP is protected and that value can be delivered to shareholders. Similar work is performed across a range of commercial research organisations.

12. Overall, the work performed by researchers at an organisation like CSL is interchangeable with that performed at an independent MRI such as WEHI.

13. In my experience, scientific research organisations are more likely to have a greater proportion of employees at the higher levels of responsibility and expertise than a scientific services organisation. As organisations primarily involved in research, there is of course a greater need for employees who make original contributions as well as those involved in more routine scientific applications.

Career levels for medical researchers

14. Various terminologies are used for researchers at different levels of their career. However, the following terms are generally applied and understood, from most junior to senior:

(a)	Junior Research Assistant	(e)	Research Fellow
(b)	Senior Research Assistant	(f)	Senior Research Fellow
(c)	Research Officer	(g)	Principal Research Fellow
(d)	Senior Research Officer	(h)	Senior Principal Research Fellow

15. These terms are used by the majority of independent MRIs, as well as the NHMRC.

16. The NHMRC provides for "Personnel Support Packages" for junior research personnel on a research grant. Such packages are for budgeting purposes, include on-costs and are not reflective of the salary provided to such personnel. However, the NHMRC divide these packages into the following levels which broadly reflect divisions of research employee. I have indicated beside these levels the relevant titles from the above list:

Level	NHMRC description of research personnel	Title(s)
PSP1	Non-graduate personnel	
PSP2	Junior graduate research assistant	Research Assistant
PSP3	Experienced graduate research assistant Junior post-doctoral research officer	Senior Research Assistant Research Officer
PSP4	Experienced postdoctoral research officer (i.e. a researcher…approaching the NHMRC Career Development Fellowship scheme or equivalent)	Senior Research Officer Research Fellow
PSP5	Senior experienced postdoctoral researcher (i.e. a researcher…expected to have applied for or held the NHMRC Career Development Fellowship scheme or equivalent)	Research Fellow

17. Research employees at a higher level will generally (but not necessarily) receive independent funding from the NHMRC or some other funding organisation through a research fellowship. These fellowships are indicative, but not determinative, of a researcher's level of expertise.

18. Not considering those fellowships it awards in particular areas of research, the NHMRC awards grants for Early Career Fellowships, Career Development Fellows, Senior Research Fellows, Principal Research Fellows, and Senior Principal Research Fellows.

19. The NHMRC's descriptors for its expectations of such fellows are set out in **Attachments DH-2 and DH3**. In my experience, these are accurate descriptors for the type of work performed by medical researchers with such titles at independent MRIs – while an NHMRC fellowship is not always a prerequisite for the positions of "Research Fellow" and above, many independent MRIs will ordinarily make appointments to those positions in accordance with the NHMRC fellowship descriptors.

Descriptors in Schedule C

20. The descriptors of Medical Researchers set out in Schedule C were drafted by the NHMRC based on the descriptors for professionals set out in Schedule B of the existing *Professional Employees Award 2010*.

21. These descriptors provide the particular context in which work of that skill level is performed in an independent MRI. In particular, we note that employees who work in independent MRIs and commercial research organisations may be expected to hold higher qualifications,

and have achieved greater national or international recognition than some scientists in other scientific fields, in order to perform work of the same value and level of responsibility.

Level 1 employees –Junior Research Assistants

Requirement for undergraduate degrees

22. In an independent MRI, recent graduate employees (ie employees who hold an undergraduate degree in a relevant field of research) are typically engaged as a junior Research Assistant. Those without a graduate degree would not be considered "researchers" but would instead be considered technicians.

23. A Bachelor's degree is the minimum requirement to perform professional research duties, as opposed to technical duties that support research. Degree qualified research assistants may at times work alongside non-degree qualified employees performing similar tasks, but in those instances their work has a greater value due to their level of responsibility and their capacity to apply their scientific, medical or health-related education.

24. The NHMRC acknowledges a clear distinction between degree qualified and non-degree qualified personnel in its PSP descriptors. Non-degree qualified personnel would be budgeted for as a PSP1, whereas graduate research assistants are budgeted as PSP2s.

Tasks performed and level of responsibility

25. I have reviewed the descriptor of Level 1 in Schedule B of the PEA, including that a Level 1 employee undertakes initial tasks of limited scope and complexity, such as minor phases of broader assignments in laboratory work, under supervision from higher level professionals. In a medical research institute, this describes a junior research assistant.

26. In my experience, the work performed by a junior research assistant is work of limited scope and complexity, such as minor phrases of broader assignments, usually in laboratory work. These duties include:

    (a) Under direction carrying out, or participating in, and/or providing support for, experiments, surveys, investigations, analyses, tests, observations, field trials, literature searches

    (b) Undertaking professional activities including participation in meetings and seminars.

    (c) Undertaking administrative duties for the laboratory or work group, including experimental and consumable management.

    (d) Contributing as a co-author to publications resulting from research contribution.

27. I consider the tasks usually performed by a junior Research Assistant to be the same or similar to those of a Level 1 Professional Scientist at a commercial research organisation such as CSL. A research assistant at WEHI could easily commence in a research assistant position at CSL or a like research organisation and perform the same work at the same level of responsibility.

28. Junior research assistants usually have a limited level of responsibility, and perform the above tasks under direction and supervision of more senior research employees.

29. I have reviewed the description of the proposed Schedule C, Level 1, and believe that it is an accurate description of the duties, and level of responsibility, that such junior research assistants have.

Level 2 Employees – Research officers and Senior Research Assistants

30. I have reviewed the description of Level 2 in Schedule B of the PEA, and consider that in an independent MRI or commercial research organisation, an employee who met that definition of planning and conducting professional work without detailed supervision, but with guidance on unusual features, would be either:

    (a) Research Officers (ie researchers with a relevant post-doctoral qualification or equivalent); or

    (b) Senior Research Assistants (ie graduate researchers with equivalent experience to a 5 year research degree).

31. If part of a research grant were funded by the NHMRC, such researchers would be budgeted for at the level PSP3.

32. Having reviewed the description of the proposed Schedule C, Level 2, I believe it is an accurate description of the duties and level of responsibility undertaken by Research Officers and Senior Research Assistants.

    <u>Research Officers</u>

33. A Research Officer will ordinarily have attained a PhD, although in some independent MRIs Research Officers may hold a Master's degree majoring in a medical research discipline.

34. Ordinarily, a PhD is awarded after at least 3 years of independent study and research. Such an employee is expected to have equivalent technical expertise to an employee with 5 years' experience as a research assistant. The opportunities for advancement are naturally greater for those with a PhD.

35. Research Officers will typically be required to perform the following tasks:

(a) Under direction, carrying out or participating in, and/or providing support for, experiments, surveys, investigations, analyses, tests, observations, field trials, literature searches;

(b) Exercise a greater degree of autonomy and may take responsibility for a research project as skills and experience are acquired;

(c) Co-ordinating key administrative functions of the laboratory or work group, including experimental and consumable management;

(d) Occasionally providing training to other Research Officers and Research Assistants in equipment and techniques;

(e) Undertaking professional activities including attendance and presentation at meetings, conferences and seminars;

(f) Contributing as a co-author on publications resulting from research contribution.

36. Employees at this level may be eligible for an "Early Career Fellowship" from the NHMRC. Applicant must be within the first 2 years of holding their PhD. However, this is not typical of medical research employees at this level.

Senior Research Assistants

37. After approximately five years' experience, a Research Assistant will ordinarily have achieved a level of experience sufficient to perform work of an equivalent value to that of a Research Officer, even if they have not obtained a post-graduate degree.

38. It is at this level that a Research Assistant is trusted to conduct medical research duties without detailed supervision but with guidance on unusual features. They in turn provide guidance

39. Having obtained that level of experience, Senior Research Assistants may be required to:

(a) Plan, design and conduct research under limited supervision;

(b) Contribute significantly to the research effort of the work group;

(c) Contributing towards the development of research proposals for submission to external funding bodies;

(d) Take an active role in producing publications in refereed journals; and

(e) Undertakes professional activities and prepares conference and seminar papers in the field of expertise.

Scientists in commercial organisations

40. In my experience, a recently qualified post-doctoral scientist and a senior research assistant in commercial research organisations like CSL perform the same duties at the same level of responsibility. Post-doctoral researchers and senior research assistants from CSL attend meetings at WEHI and those from WEHI attend meetings at CSL, and it is as if they are one and the same skill type.

Level 3 – Senior Research Officers and Research Fellows

41. I have reviewed the description of a Level 3 Professional in Schedule B, and consider that in an independent MRI or commercial research organisation it will cover Senior Research Officers and Research Fellows.

42. After obtaining further experience as a Research Officer, a researcher who is making progress in their research career and producing significant postdoctoral output may be considered a Senior Research Officer.

43. They will either be working towards, or in receipt of, independent funding (ie a fellowship). They will accordingly be at the level of PSP4 or PSP5, which are described as experienced postdoctoral researchers who are working towards, or in receipt of, the NHMRC's Career Development Fellowship–.

44. Employees at this level will:

(a) make original contributions to their area of research;

(b) produce research resulting in publications or influences health policy or other health advancements;

(c) coordinating more difficult assignments, including a research team within a research group where appropriate;

(d) carry out their work within broad guidelines requiring conformity with overall objectives and relative priorities;

(e) supervise the work of other professional and technical/support staff, including the work of students

(f) conduct independent research with limited guidance;

(g) take a prominent role in the development of research funding proposals for submission to external funding bodies.

(h) manage research budgets.

(i) attain independent funding, or be actively working towards financial independence for their research.

(j) produce co-author published works as the leading first author in refereed journals and other outlets which have national recognition, and occasionally at internationally recognised levels.

(k) manage, lead and develop junior team members

(l) develop professional external linkages with relevant scientific bodies

(m) undertake professional activities including contributions to, and attendance at, leading conferences and seminars in the field of expertise

(n) contribute significantly towards the research effort of the work group

(o) contribute to relevant committees of the organisation.

45. These duties and levels of responsibility are appropriately described in proposed Schedule C, Level 3.

46. The NHMRC's descriptor of a Career Development Fellow (**Attachment DH-2**), who would be at the upper end of this level, are expected to carry out research with limited guidance or direction from more senior colleagues.

47. These duties, and the level of responsibility held by Senior Research Officers and Research Fellows, are similar to the types of work that a scientist at Level 3, Professional Scientist, would perform in a commercial research organisation. For example, in my experience:

(a) such employees apply new approaches and techniques to the design or development of equipment and products, which is of similar value to the production of research in an independent MRI which influences health policy or other advancements;

(b) in both independent MRIs and commercial research organisations, it is ordinarily around the level of a Senior Research Officer and Research Fellow that a researcher might commence supervising the work of other professional and technical staff. At WEHI and CSL, such employees might become junior laboratory heads.

(c) in both independent MRIs and commercial research organisations, employees at this level are required to carry out their research work in conformity with overall objectives and relative priorities. Unlike in the higher education sector where there is a high degree of "academic freedom", commercial organisations and independent MRIs require researchers to work within the organisation's overarching research themes.

Level 4 – Senior Research Fellows

48. I have reviewed the description of a Level 4 Professional in Schedule B, and consider that in an independent MRI or commercial research organisation, someone making a considerable original contribution, with knowledge of multiple fields or expertise in a particular field, would be a Senior Research Fellow.

49. Senior Research Fellows, as described by the NHMRC (**Attachment DH-3**), are researchers who have convincing evidence that they:

(a) "*have independently conceived and conducted sound and original research*"'

(b) "*regularly publish research findings*"

(c) are "*adept in leadership and mentoring*"

(d) "*have demonstrated an established national and developing international profile*"; and

(e) are continually developing "*relevant research expertise, research group leadership and contribution to their fields of research*".

50. These duties and levels of responsibility are appropriately described in proposed Schedule C, Level 4.

51. In practice, a Senior Research Fellow will :

(a) Head a research team, responsible for leadership and research direction of the group

(b) Produce significant independent research outputs.

(c) Attain independent funding which supports their position and often that of other staff.

(d) Produce senior author published works in nationally and internationally regarded journals, books, conference and seminar papers, reports and other research publications

(e) Work is acknowledged at national and international levels

(f) Lead the development of research proposal submissions to external funding bodies

(g) Manage, leads and develop junior team members

(h) Play a leading role in the commercialisation activities of the medical research institutes

(i) Identify opportunities to implement the findings of medical research findings, including within healthcare settings and/or through public health interventions

(j) Develop professional external linkages, including appointments to relevant scientific bodies

(k) Participate in the peer review of funding applications and publications of other researchers.

(l) Make leading contributions to conferences and seminars in the field of expertise, including as a keynote invited speaker.

52. That work, and level of responsibility, is similar to that of Level 4, Professional Scientists in commercial research organisations. These researchers might be referred to as "technical leads". While there are fewer of such employees at service science/delivery science organisations, such employees are those working in research and development so as to improve the output of the organisation.

Level 5 – Principal Research Fellows and Senior Principal Research Fellows

53. Independent MRIs, and the NHMRC, recognise the positions above a Senior Research Fellow of Principal Research Fellow and Senior Principal Research Fellow.

54. Such researchers are leading international authorities in their research area and play a leading role in their organisation and in the medical research community.

55. While such high level researchers meet the definition of Level 4, their work is of greater value to an employer. For example:

(a) the salary support packages provided by the NHMRC for a Principal Research Fellow are 21% higher than that provided for a Senior Research Fellow A;

(b) they undertake more complex and vital duties, such as:

(i) Head a large research division, with responsibility for significant research projects and the leadership and research direction of the unit

(ii) Develop significant original, innovative, high quality and internationally recognised research

(iii) Produce substantial published works in high impact internationally recognised journals

(iv) Contribute to the research policy, strategy and management of the Institute

(v) Make internationally recognised contributions to health and research policy

(vi) Provide leadership in community affairs, particularly those related to the discipline, in professional, commercial, industrial and community sectors, where appropriate.

(vii) Form partnerships with leading international companies to assist in the commercialisation of the medical research

(viii) Lead the implementation of medical research findings, including within healthcare settings and/or through public health interventions

(ix) Develop significant national and international professional linkages, including membership of eminent Societies, and enhance the profile of the Institute and the field of study within the scientific and general communities

(x) Undertake peer reviewed activities, including appointment to expert peer review committees.

(xi) Appointed to senior editorial positions for leading internationally recognised publications.

(xii) Lead the development of conference papers and present as a keynote speaker at international forums

(xiii) Undertakes a range of administrative functions including leading the development of large research funding proposals, manages budgets

(xiv) Responsible for the maintenance and renewal of significant research funding within the institute

(xv) Provides career mentorship to other researchers.

56. In an independent MRI such as WEHI, researchers who are Division Heads may have achieved this level. This classification describes those researchers who are exceptional, in that they drive interaction with the private sector, oversee major collaborations, interact with venture capital and spin out companies.

_____

PROFESSOR DOUG HILTON AO

27 April 2018

Australian Government
National Health and Medical Research Council
N H M R C

National Health and Medical Research Council Fields of Research (FOR)

(Source: Australian and New Zealand Standard Research Classification (ANZSRC) 2008 edition)

FOR Division/Group Code	Group	FOR Fields Code	2008 FOR Name
0104	STATISTICS	010401	Applied Statistics
		010402	Biostatistics
0299	OTHER PHYSICAL SCIENCES	029901	Biological Physics
		029903	Medical Physics
		029904	Synchrotrons; Accelerators; Instruments and Techniques
		029999	Physical Sciences not elsewhere classified
0304	MEDICINAL AND BIOMOLECULAR CHEMISTRY	030401	Biologically Active Molecules
		030402	Biomolecular Modelling and Design
		030403	Characterisation of Biological Macromolecules
		030404	Cheminformatics and Quantitative Structure-Activity Relationships
		030405	Molecular Medicine
		030406	Proteins and Peptides
		030499	Medicinal and Biomolecular Chemistry not elsewhere classified
0601	BIOCHEMISTRY AND CELL BIOLOGY	060101	Analytical Biochemistry
		060102	Bioinformatics
		060103	Cell Development, Proliferation and Death
		060104	Cell Metabolism
		060105	Cell Neurochemistry
		060106	Cellular Interactions (incl. Adhesion, Matrix, Cell Wall)
		060107	Enzymes
		060108	Protein Trafficking
		060110	Receptors and Membrane Biology
		060111	Signal Transduction
		060112	Structural Biology (incl. Macromolecular Modelling)

GPO Box 1421, Canberra ACT 2601
Level 5, 20 Allara Street, Canberra City ACT
T. 13 000 NHMRC (13 000 64672) or +61 2 6217 9000 F. +61 2 6217 9100 E. nhmrc@nhmrc.gov.au
ABN 88 601 010 284

		060113	Synthetic Biology
		060114	Systems Biology
		060199	Biochemistry and Cell Biology not elsewhere classified
0604	GENETICS	060402	Cell and Nuclear Division
		060403	Developmental Genetics (incl. Sex Determination)
		060404	Epigenetics (incl. Genome Methylation and Epigenomics)
		060405	Gene Expression (incl. Microarray and other genome-wide approaches)
		060406	Genetic Immunology
		060407	Genome Structure and Regulation
		060408	Genomics
		060409	Molecular Evolution
		060410	Neurogenetics
		060411	Population, Ecological and Evolutionary Genetics
		060412	Quantitative Genetics (incl. Disease and Trait Mapping Genetics)
		060499	Genetics not elsewhere classified
0903	BIOMEDICAL ENGINEERING	090301	Biomaterials
		090302	Biomechanical Engineering
		090303	Biomedical Instrumentation
		090304	Medical Devices
		090399	Biomedical Engineering nec
1001	AGRICULTURAL BIOTECHNOLOGY	100109	Transgenesis
1003	INDUSTRIAL BIOTECHNOLOGY	100301	Biocatalysis and Enzyme Technology
1004	MEDICAL BIOTECHNOLOGY	100401	Gene and Molecular Therapy
		100402	Medical Biotechnology Diagnostics (incl. Biosensors)
		100403	Medical Molecular Engineering of Nucleic Acids and Proteins
		100404	Regenerative Medicine (incl. Stem Cells and Tissue Engineering)
		100499	Medical Biotechnology not elsewhere classified
1007	NANOTECHNOLOGY	100703	Nanobiotechnology
		100709	Nanomedicine
		100713	Nanotoxicology, Health and Safety
		100799	Nanotechnology not elsewhere classified
1101	MEDICAL BIOCHEMISTRY AND METABOLOMICS	110101	Medical Biochemistry: Amino Acids and Metabolites
		110102	Medical Biochemistry: Carbohydrates
		110103	Medical Biochemistry: Inorganic Elements and Compounds
		110104	Medical Biochemistry: Lipids
		110105	Medical Biochemistry: Nucleic Acids
		110106	Medical Biochemistry: Proteins and Peptides (incl. Medical Proteomics)
		110107	Metabolic Medicine
		110199	Medical Biochemistry and Metabolomics not elsewhere classified
1102	CARDIOVASCULAR MEDICINE AN HAEMOTOLOGY	110201	Cardiology (incl. Cardiovascular Diseases)
		110202	Haemotology
		110203	Respiratory Diseases
		110204	Cardiovascular medicine and Haemotology nec

GPO Box 1421, Canberra ACT 2601
Level 5, 20 Allara Street, Canberra City ACT
T. 13 000 NHMRC (13 000 64672) or +61 2 6217 9000 F. +61 2 6217 9100 E. nhmrc@nhmrc.gov.au
ABN 88 601 010 284

1103	CLINICAL SCIENCES	110301	Anaesthesiology
		110302	Clinical Chemistry (diagnostics)
		110303	Clinical Microbiology
		110304	Dermatology
		110305	Emergency Medicine
		110306	Endocrinology
		110307	Gastroenterology and Hepatology
		110308	Geriatrics and Gerontology
		110309	Infectious Diseases
		110310	Intensive Care
		110311	Medical Genetics (excl. Cancer Genetics)
		110312	Nephrology and Urology
		110313	Nuclear Medicine
		110314	Orthopaedics
		110315	Otorhinolaryngology
		110316	Pathology
		110317	Physiotherapy
		110318	Podiatry
		110319	Psychiatry (incl. Psychotherapy)
		110320	Radiology and Organ Imaging
		110321	Rehabilitation and Therapy (excl. Physiotherapy)
		110322	Rheumatology and Arthritis
		110323	Surgery
		110324	Venereology
		110399	Clinical Sciences not elsewhere classified
1104	COMPLEMENTARY/ALTERNATIVE MEDICINE	110401	Chiropractic
		110402	Naturopathy
		110403	Traditional Aboriginal and Torres Strait Islander Medicine and Treatments
		110404	Traditional Chinese Medicine and Treatments
		110499	Complementary and Alternative Medicine not elsewhere classified
1105	DENTISTRY	110501	Dental Materials and Equipment
		110502	Dental Therapeutics, Pharmacology and Toxicology
		110503	Endodontics
		110504	Oral and Maxillofacial Surgery
		110505	Oral Medicine and Pathology
		110506	Orthodontics and Dentofacial Orthopaedics
		110507	Paedodontics
		110508	Periodontics
		110509	Special Needs Dentistry
		110599	Dentistry not elsewhere classified
1106	HUMAN MOVEMENT AND SPORTS SCIENCE	110601	Biomechanics
		110602	Exercise Physiology
		110603	Motor Control

GPO Box 1421, Canberra ACT 2601
Level 5, 20 Allara Street, Canberra City ACT
T. 13 000 NHMRC (13 000 64672) or +61 2 6217 9000 F. +61 2 6217 9100 E. nhmrc@nhmrc.gov.au
ABN 88 601 010 284

		110604	Sports Medicine
		110699	Human Movement and Sports Science not elsewhere classified
1107	IMMUNOLOGY	110701	Allergy
		110702	Applied Immunology (incl. Antibody Engineering, Xenotransplantation and T-cell Therapies)
		110703	Autoimmunity
		110704	Cellular Immunology
		110705	Humoural Immunology and Immunochemistry
		110706	Immunogenetics (incl. Genetic Immunology)
		110707	Innate Immunity
		110708	Transplantation Immunology
		110709	Tumour Immunology
		110799	Immunology not elsewhere classified
1108	MEDICAL MICROBIOLOGY	110801	Medical Bacteriology
		110802	Medical Infection Agents (incl. Prions)
		110803	Medical Parasitology
		110804	Medical Virology
		110899	Medical Microbiology not elsewhere classified
1109	NEUROSCIENCES	110901	Autonomic Nervous System
		110902	Cellular Nervous System
		110903	Central Nervous System
		110904	Neurology and Neuromuscular Diseases
		110905	Peripheral Nervous System
		110906	Sensory Systems
		110999	Neurosciences not elsewhere classified
1110	NURSING	111001	Aged Care Nursing
		111002	Clinical Nursing: Primary (Preventative)
		111003	Clinical Nursing: Secondary (Acute Care)
		111004	Clinical Nursing: Tertiary (Rehabilitative)
		111005	Mental Health Nursing
		111006	Midwifery
		111099	Nursing not elsewhere classified
1111	NUTRITION AND DIETICS	111101	Clinical and Sports Nutrition
		111102	Dietetics and Nutrigenomics
		111103	Nutritional Physiology
		111104	Public Nutrition Intervention
		111199	Nutrition and Dietetics not elsewhere classified
1112	ONCOLOGY AND CARCINOGENESIS	111201	Cancer Cell Biology
		111202	Cancer Diagnosis
		111203	Cancer Genetics
		111204	Cancer Therapy (excl. Chemotherapy and Radiation Therapy)
		111205	Chemotherapy
		111206	Haematological Tumours
		111207	Molecular Targets
		111208	Radiation Therapy

GPO Box 1421, Canberra ACT 2601
Level 5, 20 Allara Street, Canberra City ACT
T. 13 000 NHMRC (13 000 64672) or +61 2 6217 9000 F. +61 2 6217 9100 E. nhmrc@nhmrc.gov.au
ABN 88 601 010 284

		111209	Solid Tumours
		111299	Oncology and Carcinogenesis not elsewhere classified
1113	OPHTHALMOLOGY AND OPTOMETRY	111301	Ophthalmology
		111302	Optical Technology
		111303	Vision Science
		111399	Optometry and Ophthalmology not elsewhere classified
1114	PAEDIATRICS AND REPRODUCTIVE MEDICINE	111401	Foetal Development and Medicine
		111402	Obstetrics and Gynaecology
		111403	Paediatrics
		111404	Reproduction
		111499	Paediatrics and Reproductive Medicine not elsewhere classified
1115	PHARMACOLOGY AND PHARMACEUTICAL SCIENCES	111501	Basic Pharmacology
		111502	Clinical Pharmacology and Therapeutics
		111503	Clinical Pharmacy and Pharmacy Practice
		111504	Pharmaceutical Sciences
		111505	Pharmacogenomics
		111506	Toxicology (incl. Clinical Toxicology)
		111599	Pharmacology and Pharmaceutical Sciences not elsewhere classified
1116	MEDICAL PHYSIOLOGY	111601	Cell Physiology
		111602	Human Biophysics
		111603	Systems Physiology
		111699	Medical Physiology not elsewhere classified
1117	PUBLIC HEALTH AND HEALTH SERVICES	111701	Aboriginal and Torres Strait Islander Health
		111702	Aged Health Care
		111703	Care for Disabled
		111704	Community Child Health
		111705	Environmental and Occupational Health and Safety
		111706	Epidemiology
		111707	Family Care
		111708	Health and Community Services
		111709	Health Care Administration
		111710	Health Counselling
		111711	Health Information Systems (incl. Surveillance)
		111712	Health Promotion
		111714	Mental Health
		111715	Pacific Peoples Health
		111716	Preventive Medicine
		111717	Primary Health Care
		111718	Residential Client Care
		111799	Public Health and Health Services not elsewhere classified
1199	OTHER MEDICAL AND HEALTH SCIENCES	119999	Medical and Health Sciences not elsewhere classified

GPO Box 1421, Canberra ACT 2601
Level 5, 20 Allara Street, Canberra City ACT
T. 13 000 NHMRC (13 000 64672) or +61 2 6217 9000 F. +61 2 6217 9100 E. nhmrc@nhmrc.gov.au
ABN 88 601 010 284

1402	APPLIED ECONOMICS	140208	Health Economics
1403	ECONOMETRICS	140302	Econometric and Statistical Methods
		140303	Economic Models and Forecasting
1701	PSYCHOLOGY	170101	Biological Psychology (Neuropsychology, Psychopharmacology, Physiological Psychology)
		170102	Developmental Psychology and Ageing
		170103	Educational Psychology
		170104	Forensic Psychology
		170105	Gender Psychology
		170106	Health, Clinical and Counselling Psychology
		170107	Industrial and Organisational Psychology
		170109	Personality, Abilities and Assessment
		170110	Psychological Methodology, Design and Analysis
		170112	Sensory Processes, Perception and Performance
		170113	Social and Community Psychology
		170114	Sport and Exercise Psychology
		170199	Psychology not elsewhere classified
1702	COGNITIVE SCIENCE	170201	Computer Perception, Memory and Attention
		170202	Decision Making
		170203	Knowledge Representation and Machine Learning
		170204	Linguistic Processes (incl. Speech Production and Comprehension)
		170205	Neurocognitive Patterns and Neural Networks
		170299	Cognitive Science not elsewhere classified
1799	OTHER PSYCHOLOGY AND COGNITIVE SCIENCES	179999	Psychology and Cognitive Sciences not elsewhere classified
2201	APPLIED ETHICS	220101	Bioethics (Human and Animal)
		220103	Ethical Use of New Technology (e.g. Nanotechnology, Biotechnology)
		220106	Medical Ethics

GPO Box 1421, Canberra ACT 2601
Level 5, 20 Allara Street, Canberra City ACT
T. 13 000 NHMRC (13 000 64672) or +61 2 6217 9000 F. +61 2 6217 9100 E. nhmrc@nhmrc.gov.au
ABN 88 601 010 284

ATTACHMENT B

Statement of Expectations

The Statement of Expectations sets out **broad descriptors** of baseline activity expected of applicants within the levels of the NHMRC Career Development Fellowship scheme. In coming to decisions about the relative merit of applicants for these positions, assessors will take into account research achievements relative to opportunity. Applicants should refer to the Category Descriptors (Attachment A), which identify the quality of research and associated outcomes. The list of Category Descriptors is meant to be indicative rather than exhaustive.

General Standards:

Career Development Fellow Level 1

An NHMRC Career Development Fellow Level 1 is expected to carry out research as part of a research team, and engage in activities that will develop their expertise in biomedical, clinical, public health and/or health service delivery research. They will work with support, guidance and/or direction from more senior colleagues in establishing their research careers.

Career Development Fellow Level 2

An NHMRC Career Development Fellow Level 2 is expected to carry out research independently, with limited guidance or direction from more senior colleagues in establishing their research careers. This level of appointment recognises marked distinction in the Career Development Fellow's research and scholarship compared to a Level 1 CDF.

Australian Government
National Health and Medical Research Council
Published on *National Health and Medical Research Council* (https://www.nhmrc.gov.au)

Generated on 26 April 2018 @ 4:10pm

C. Attachment B - Statement of Expectations

The Statement of Expectations sets out broad outline activities, attributes and achievements within the levels of the Research Fellowships scheme. In coming to decisions about relative merit of applicants for these positions, assessors will consider research output relative to opportunity. Applicants should note the attached Assessment Criteria (Attachment A) which identify quality of research and associated outcomes. The list of descriptors is meant to be indicative rather than exhaustive.

Applicants for a Research Fellowship at all levels will be expected to articulate a vision for their research for the next five years and to provide convincing evidence of their intellectual leadership in their field. The quality of their research outputs, including publications, patents and any evidence for translation into practice of their work, will be primary considerations in the assessment of their application for a fellowship. Similarly, the level of success in obtaining grant funding and their national and international research profile will be major determinants of the outcome of an application for fellowship. Supervision of research students, mentoring and peer review and research administrative activities will also be factors impacting on the competitiveness of an application.

Senior Research Fellow

SRF A

General Standard: To be competitive for award of a fellowship at SRF A level, an applicant will have provided convincing evidence that he/she has independently conceived and conducted original research and regularly published research findings in high quality peer review international journals, independently or as part of a research team. The Fellow is expected to continue to develop relevant research expertise and research group leadership.

SRF B

General Standard: To be competitive for award of a fellowship at SRF B level, an applicant will have provided convincing evidence that he/she has independently conceived and conducted original research and regularly published research findings in high quality peer review international journals. The Fellow is expected to be making independent and original contributions and to exercise leadership in influencing research direction and outcomes. In addition, the Fellow will be contributing significantly to their profession and to research training.

Principal Research Fellow

General Standard: A Principal Research Fellow is expected to be making substantial and major contributions to research through high quality publication and other communication of their original research findings. In addition, they will be making significant contributions to their profession and discipline and to research training. This level of award recognises marked distinction in the Fellow's research and scholarship.

Senior Principal Research Fellow

General Standard: A Senior Principal Research Fellow will be recognised as a leading authority in a research area and will have made substantial and highly original contributions to the area. The Fellow is expected to exercise special responsibility in providing leadership and in fostering excellence in research. They will play a leading role within their profession or discipline in research training in their organisation or institution and within the scholarly and general community.

Source URL (modified on 04/12/2013 - 12:01): https://www.nhmrc.gov.au/book/nhmrc-funding-rules/section-c-research-fellowships/c-attachment-b-statement-expectations