SAMRC ANNUAL PERFORMANCE PLAN: 2021 - 2022





RESPONSE TO COVID-19 IN SOUTH AFRICA

- Part A: SAMRC Mandate 2020 2025
- Part B: SAMRC Strategic Focus
- Part C: Key Achievements & Highlights
- Part D: Measuring SAMRC Performance 2020/21



RESPONSE TO COVID-19 IN SOUTH AFRICA



SAMRC-DSI RESPONSE TO COVID

Influx of unsolicited COVID-19 proposals for funding

Discussion groups convened on diagnostics, regulatory, vaccines, treatment

Rapid approval of 3 strategic projects on surveillance, epidemiology and community funded from 2019/20 baseline and DSI SHIP funds

Funds awarded from TIA for product development

SAMRC repurposed R41.8M and SHIP additional project & interest funds

COVID-19 Prioritization of **Grants Selection** Committee established to consider proposals

COVID-19 Research and Innovation Advisory Committee established to advise on

RFA run to identify COVID-19 Diagnostics projects for localization

priorities

7 awards made to COVID diagnostics projects

R88M award from Solidarity Fund for surge testing

R15M award from Elma for NHLS equipment & reagents and R15M award from MSDF for COVID

Additional DSI funds made available to the SAMRC governed by a new contract

Proposal received from SARS-CoV2 variant consortium for R72M

Awards made on variant consortium proposals

Additional funds committed by DSI specifically for NGS-SA and next SHIP contract

New projects added to the portfolio

March 2020

April 2020

May 2020

June/July 2020

September 2020

January 2021

March 2021

R8.1M 2019/20 SHIP funds & R400k interest

R4.3M from TIA

R34M SHIP R600k DSI interest

R31.1M DSI funds for COVID

R21.7M DSI funds for NGS-SA

R8.7M DSI funds for 2021/22



SUMMARY OF COVID-19 FUNDS IN THE SUMMARY OF COVID-19 FUNDS

| Funding Source | Amount | Number of projects supported* |
|---|---------------------------------------|---|
| Total SAMRC baseline funds 2019/20 | R9M | 2 |
| Total SAMRC baseline funds 2020/21 | R51.4M | Around 20 projects |
| Total SHIP funds repurposed 2019/20 | R8.5M | 2 |
| Total SHIP funds repurposed 2020/21 | R34.6M | Around 20 projects |
| Additional DSI funds provided 2020/21 | R31.1M | 9 projects |
| TIA funds 2019/20 | R4.3M | 7 projects co-funded with SHIP |
| Additional DSI funds committed for NGS-SA | R21.7M | 1 |
| Additional DSI funds to be committed for 2021/22 | R8.7M | Not yet allocated |
| Additional funds from other sources (Solidarity Fund, Elma, MSDF) | R128M | 5 |
| Total Funds for COVID to March 2021 Total SAMRC Contribution Total DSI/SHIP Contribution (to March 2021) Total Additional DSI Funds (2021/22) | R262.6M R60.4M R74.2M R30.4M | Total projects funded: 50 Of which around 30 are DSI funded |

^{*}Some projects are double-counted as they are funded from >1 source

Total funds available for new projects once committed by DSI: R15.58M 4-5 projects under consideration
New 2021/22 baseline funds to be motivated



^{**}Excludes Sisonke funding raised - R240M

UPDATE ON SURGE TESTING (SOLIDARITY FUND)

- Award of R88M to conduct 158,678 tests
- 38,638 tests conducted from June 2020 in 7 labs
- 96.7% of tests were conducted in TAT of 48 hours or less
- Surge testing largely ceased in September 2020, except for 1 week of testing by 2 labs in Jan 2021 due to:
 - Reduced overall demand for testing
 - Lack of demand from NHLS (increased own capacity)
 - Regulation 178: NDoH revised minimum guidelines for COVID-19 testing all labs had to undergo the registration and auditing process facilitated between NHLS and NDoH – 7 labs received approval but no HDIs as yet
- SAMRC built infrastructure capacity at 3 HDIs (UniVEN; SMU; WSU) but they never conducted testing as a result of not receiving R178 approval
- HDI funds also used to fund additional research grants at Univen and WSU for COVID-related projects that will utilize
 the new infrastructure, including support for wastewater surveillance
- March 2021 SF reallocated the remaining funds at the SAMRC (R21.2M) + additional R28.8M from remaining allocation to Sisonke study – total R50M



RESPONSE TO COVID-19 IN SOUTH AFRICA

Projects

- Investigating the link and impact of COVID-19 to GBV, mental health, and livelihoods amongst selected population groups
- Sexual and Reproductive Health and Rights of Young Women in eThekweni
- Proposed study on Femicide and child homicide and COVID-19 in SA
- Community stakeholder knowledge, perceptions, beliefs, behavior and responses to COVID-19 in South Africa
- Prevalence, clinical characteristics, immunologic responses and outcomes of children with suspected or confirmed COVID-19
- The impact of the COVID-19 lockdown on access to SRH services, interventions and commodities
- SAMRC and DSI-funded epidemiological study on COVID-19 transmission and natural history in KZN



RESPONSE TO COVID-19 IN SOUTH AFRICA

Diagnostics

- Supporting the development of local capacity to supply reagents for existing gold standard COVID-19 testing
- Offer rapid alternatives for the direct detection of the virus
- Request for Applications published and developers from universities, science councils and local companies invited to apply
- Streamline laboratory testing, validation and registration of local diagnostics & serology tests



IMPACT TO DATE

- Multiple SARS-CoV-2 epidemiological outbreak investigations undertaken, e.g. St Augustine's Hospital that laid the foundation for enhanced infection control practices in health care settings
- Trained Community Health Care workers to undertake door-to-door SARS-CoV-2 education and screening and referral to hospitals or isolation facilities that was the basis for the National active case finding household survey
- The Network for Genomics Surveillance in South Africa (Prof Tulio de Oliveira, KRISP) led the discovery and identification of the SARS-CoV-2 501Y.V2 variant, which has had far reaching policy and research implications for the globe, especially relating to vaccine design.
- The South African component of the ChAdOx1 SARS-CoV-2 vaccine trial (Astra Zeneca vaccine), led by Prof Shabir Madhi, showed the reduced efficacy of the vaccine on the local variants. This changed the country's immediate vaccine strategy, resulting in a move to the Johnson and Johnson vaccine and the design and implementation of the Sisonke study by the SAMRC.
- A project at the University of the Witwatersrand, led by Prof Bavesh Kana, has been instrumental in developing controls for the COVID testing platforms which allows for standardization of the assays. It has now been deployed in the SA healthcare system, as well as several African countries, through the NHLS.



IMPACT TO DATE

- South Africa participated in the global Solidarity Trial, with co-funding from SHIP, which demonstrated that the Remdesivir, Hydroxychloroquine, Lopinavir and Interferon regimens tested on a total of 11,266 adults had little or no effect on hospitalized COVID-19, as indicated by overall mortality, initiation of ventilation and duration of hospital stay
- The SAMRC, in partnership with the DSI and TIA, is funding several product development projects aimed at developing local reagents and/or kits for the gold standard COVID-19 diagnostics as well as novel, rapid, point-of-care tests for the presence of the virus. Several of these are applying for regulatory approval with SAHPRA.
- Hyrax is supporting the South African COVID-19 response through the deployment and utilisation of a SARS-CoV-2 sequence data solution within the Exatype platform, previously developed with SHIP funding. The platform was fully operational and launched within 3 months (https://sars-cov-2.exatype.com) and can support all versions of the ARTIC protocol. It is offered for free to any researcher and laboratory technician to remove the complexity and hands-on burden of analyzing NGS data.





SISONKE

GIPD has been instrumental in raising, contracting and managing funding for Sisonke – R240M currently being managed - MSDF and Elma funds only for vaccination component

- Fortnightly reporting to Solidarity Fund
- Monthly calls with MSDF
- Refining proposal with BMGF will focus on sub-study

Sub-grants:

- 43 sites funding agreements, disbursements, reporting
- NICD
- CAPRISA
- HCRISA

Procurement managed by GIPD

- Biocair vaccine courier
- Vodacom EVDS/Sisonke enrollment platform

Other

- SAHPRA payments
- Training costs
- Data management agreements



PART A: SAMRC MANDATE 2020-2025



ABOUT SAMRC

- Vision: Building a healthy nation through research, innovation and transformation
- Mission: To advance the nation's health and quality of life and address inequity by conducting and funding relevant and responsive health research, capacity development, innovation and research translation
- Values: Pioneering, Partnering, Excellence, Respect, Integrity and Citizenship



CONSTITUTIONAL AND POLICY MANDATES



RSA CONSTITUTION

Chapter 2: Bill Rights

 Equality, human dignity, freedom and security of persons, privacy, freedom of expression, labour relations, environment, and healthcare, food and social security, children, access to information, just and administrative actions, limitation of rights

Chapter 10: Public Administration

• Ethics, efficiency, effectiveness, impartiality, fairness, transparency, timely accessibility to accurate information, accountability, public engagement, good HR management/practices and career development

Chapter 13: Finance

- Procurement that is fair, equitable, transparent, competitive and cost-effective
- Providing preference to certain categories of persons



LEGISLATIVE MANDATE

- National Health Act (Act 61 of 2003)
- The Medical Research Council Act (Act 58 of 1991)
- Intellectual Property, Rights from Publicly Financed Research and Development Act, 2008
- Employment Equity Act 55 of 1998
- Basic Conditions of Employment Act, 75 of 1997
- Public Finance Management Act, No 29 of 1999
- Relevant Treasury Guidelines
- The Patents Act no. 57 of 1978
- Copyright Act no. 98 of 1978 Trademarks Act no. 194 of 1993
- POPI Act (implementation 1 July 2021)
- Others



POLICY MANDATES

- National Development Plan 2030
- NHI Policy of 2017 and National Health Insurance Bill of 2019
- Sustainable Development Goals
- Medium-Term Strategic Framework 2020-2025
- Government to Government Collaborations
- South Africa SADC and the Rest of Africa
- South Africa and Global Collaboration
- Communities of Funders
- Other interventions as they arise from time-to-time



PLANNED POLICY INITIATIVES: POLICY AND GOVERNANCE

- Research Misconduct Policy
- Knowledge, Information and Data Management Policy
- Guidelines on Gene Editing
- SA-GCP
- Open Access Policy
- Regulatory Compliance Management Policy
- Business Continuity Plan



PART B: SAMRC STRATEGIC FOCUS



SITUATIONAL ANALYSIS (1)

- Facilitate and support NDOH
- Policies and programs
- Research on top 10 causes of mortality
- Reduce morbidity and improve health outcomes
- Fund innovation
- Capacity development in health research
- Surveys (SADHS, TB Prevalence, NIMS)
- Support NHI/UHC
- Strategic use of Government collaborations
- Align research with the SDGs



SITUATIONAL ANALYSIS (2)

- Adapt business activities with the 4IR
- Research Translation
- Open Science/Source
- Data sharing/security
- Transformation
- Diversity Management
- Academic and Social Impact
- Increase PhDs in the SAMRC
- Increase NRF—rated scientist



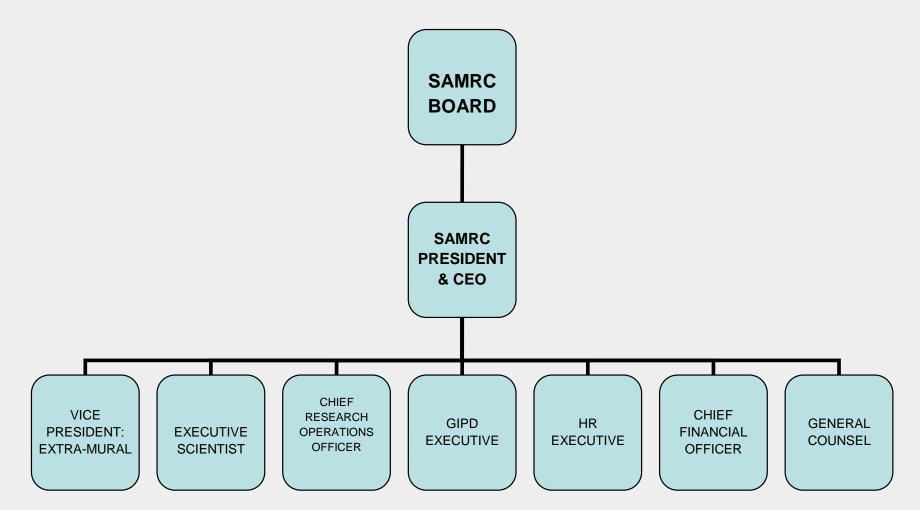
SAMRC 2020 - 2025 PRIORITY AREAS

- Knowledge Management
- Research Translation
- Innovation
- Transformation,
- Diversity Management
- Capacity Development
- Open Science/Source
- Data security and sharing
- Balance academic and social impact of research
- Environmental health,
- Maternal and child health
- Mental health

- NHI and UHC: Focus on key areas to support roll out of NHI
- Continue a search for efficacious HIV and TB vaccines
- Ensure strategic investments in NCDs research
- Responding to emerging national health needs and global trends
- Foster ethical research conduct and integrity
- Explore the possibility of establishing a SAMRC Foundation
- Continue to invest in infrastructure development



SAMRC STRUCTURE





SAMRC BOARD



Prof Johnny Mahlangu Chairperson



Prof Linda Skaal Vice-Chairperson





Prof Sithembiso Velaphi Prof Brandon Shaw



Prof Tholene Sodi



Prof Lindiwe Zungu



Prof William Rae



Prof Collet Dandara



Dr Mziwandile Madikizela



Prof Emmanuel Mukwevho



Prof Ronelle Carolissen



Prof Thandisizwe Mavundla



Dr Timothy Tucker



Prof Eunice Seekoe



Adv Dorothy Khosa



Ms June Williams



Prof Glenda E. Gray SAMRC President



CORPORATE GOVERNANCE

SAMRC Board:

- 17 Board members: 16 non-executive + 1 executive (President & CEO)
- The NDoH has a seat in an observer capacity

Risk management:

- Risk workshops conducted at a strategic and operational level initiated risk mitigation plans
- Improvement in the SAMRC's National Treasury Rating (NTR) for risk management
- Audit, Risk & IT Committee reviews legal and regulatory compliance on a quarterly basis



SAMRC BOARD

| Board Chairman – Prof Johnny Mahlangu | 1 |
|---------------------------------------|----|
| Distinguished Scientists | 13 |
| Legal expert | 1 |
| Finance/PFMA expert | 1 |
| The President – Prof. Glenda Gray | 1 |
| | |
| | |



17

TOTAL:

SAMRC BOARD SUB-COMMITTEES

- Audit, Risk and IT Committee (ARIC)
- HR and Remuneration Committee (HR & RemCo)
- Research and Development Committee (R & D)



HUMAN RESOURCES

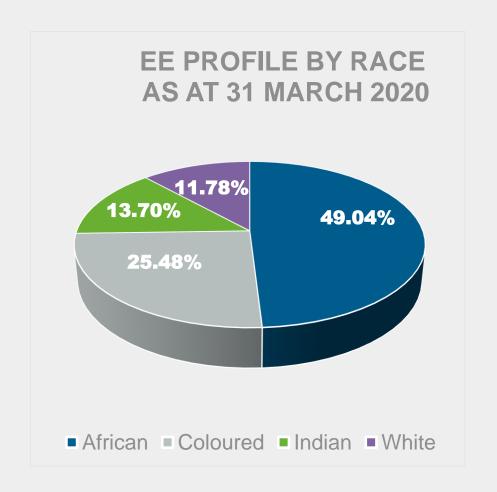


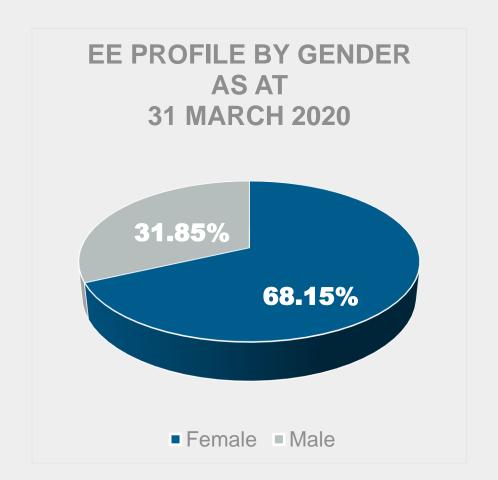
HR PROFILE AS AT 31 MARCH 2020 (1)

| RACE | GENDER | TOP MANAGEME NT | SENIOR MANAGEME NT | PROFESSIO NALLY QUALIFIED & SPECIALIST S | SKILLED TECHNICAL & ACADEMICA LLY QUALIFIED | SEMI- SKILLED & DISCRETION DECISION MAKING | UNSKILLED AND DEFINED DECISION MAKING | TOTAL BY RACE & GENDER | TOTAL BY RACE |
|----------------|--------|-----------------------|--------------------------|---|--|--|---|------------------------------|------------------|
| African | Male | 3 | 4 | 20 | 30 | 41 | 8 | 106 | 308 |
| Afficali | Female | 0 | 2 | 51 | 94 | 39 | 16 | 202 | |
| | Male | 0 | 4 | 6 | 12 | 1 | 0 | 23 | 86 |
| Indian | Female | 0 | 4 | 25 | 32 | 2 | 0 | 63 | |
| Coloured | Male | 1 | 4 | 11 | 27 | 5 | 3 | 51 | 160 |
| | Female | 0 | 7 | 29 | 49 | 14 | 10 | 109 | |
| White | Male | 2 | 11 | 3 | 3 | 1 | 0 | 20 | 74 |
| | Female | 2 | 13 | 31 | 6 | 2 | 0 | 54 | 74 |
| TOTAL BY LEVEL | | 8 | 49 | 176 | 253 | 105 | 37 | 628 | 628 |



HR PROFILE AS AT 31 MARCH 2020 (2)

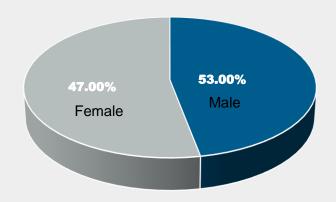


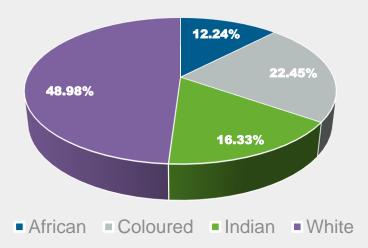




SENIOR MANAGEMENT DEMOGRAPHICS (EXCL. TOP MANAGEMENT) AS AT 31 MARCH 2020

| African | | Inc | dian | Coloured | | White | |
|---------|--------|-------|--------|----------|--------|--------|--------|
| | 6 | | 8 | | 11 | | 24 |
| | 12.24% | | 16.33% | | 22.45% | | 48.98% |
| Male | Female | Male | Female | Male | Female | Male | Female |
| 4 | 2 | 4 | 4 | 4 | 7 | 11 | 13 |
| 8.16% | 4.08% | 8.16% | 8.16% | 8.16% | 14.38% | 22.45% | 26.53% |







HUMAN RESOURCES

- Transformation through EE targets
- Skills development
- Diversity management
- Career progression (halted by the moratorium)



PART C: KEY ACHIEVEMENTS & HIGHLIGHTS



CUTTING EDGE GENOME SEQUENCING

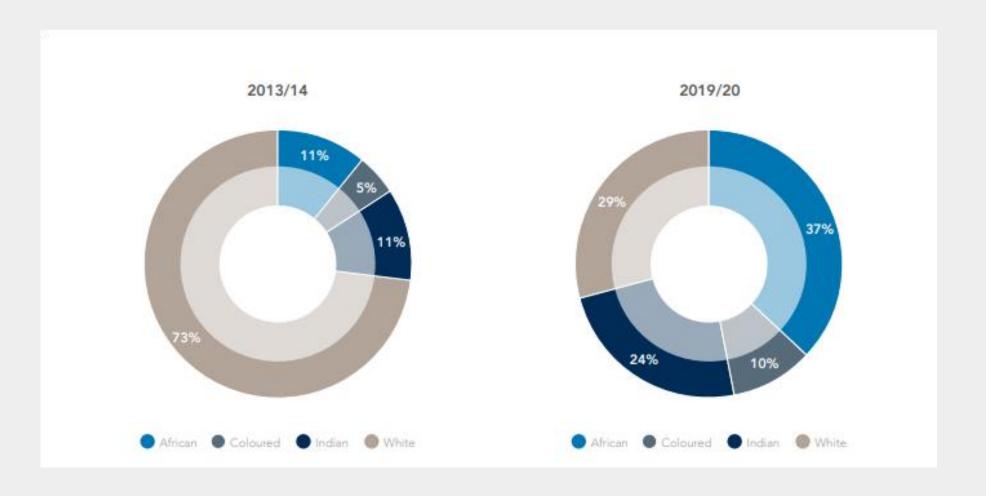
Centre in Africa to decode genes

- SAMRC established the SAMRC-BGI WHOLE GENOME SEQUENCING Platform.
- There is an exponential increase in genomic projects and approximately R100M of SAMRC funded projects involve genomic sequencing at some stage.
- Genomic Centre and other Specialised Facilities launched.
- SAMRC perfectly placed to be custodian of South Africanrelated data health/disease and to integrate data towards improving health care.
- Build towards a future where the 4IR is a major component in African Healthcare.
- More than 50 whole genome experiments conducted.





TRANSFORMATION IN SELF-INITIATED RESEARCH GRANTS





THE ROLE OF THE 4IR AND WHAT THE SAMRC IS DOING

- Genome Mapping and Research
- Technological advances for Diagnostics
- Precision Medicine and Drug Safety
- Drug Formulation and Discovery
- Big Data and Bioinformatics
- Al/machine learning
- Regulatory, legal and ethical framework for gene editing



ROLE OF THE 4IR AND WHAT THE SAMRC IS DOING CONT...

- New Genomics and Bioinformatics Centre at UKZN
- KRISP:KZN Research Innovation & Sequencing Platform Laboratory facilities with 4IR robotic equipment
- KRISP is hosted in a ZAR 100 million building together with CAPRISA & AHRI at UKZN
- Genomic Data generated in South Africa published in top scientific journals (Nature) to solve HIV and TB outbreaks







HIGHLIGHTS

Vaccine nationalism, hesitancy and fair allocation

- Virtual conference on framework for fair, equitable and timely allocation of COVID-19 vaccines in Africa held
- Received funding from Open Society Foundation for South Africa to look at equitable access to COVID-19 vaccines in the African Region
- Established Bio-Ethics Advisory Panel
- Working with the AU and Africa CDC

DSI/SAMRC South African Population Research Infrastructure Network

SAPRIN hosted by SAMRC and provides individualised and household micro-data: encompassing whole communities, information is updated on a regular basis, and it provides a platform for intervention testing and policy evaluation.



HUMAN CAPITAL DEVELOPMENT FOR HEALTH

Bongani Mayosi NHSP

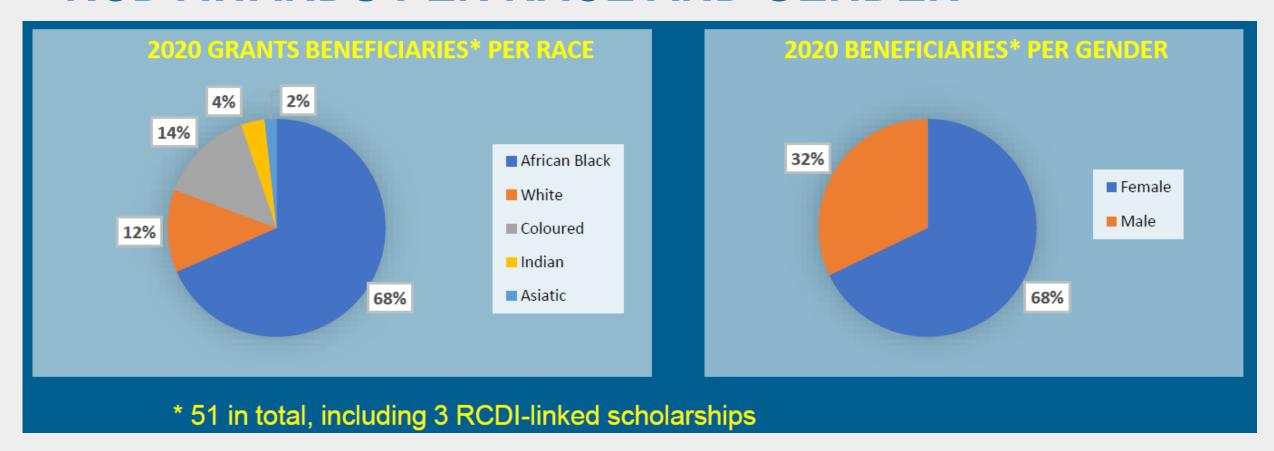
- Next generation of African Health and Clinical Scientists
- Produced 47 graduates (87% of which are PhDs) in various health professions
- Fund the training of 1000 PhDs in health and clinical research over the next 10 years
- Strengthen and accelerate progress towards equity in research capacity development within the NDoH Human Capital across South Africa
- Improve the delivery of healthcare, address debilitating diseases and improve accessibility to medical schools for disadvantaged communities
- R10 million boost to assist young South African scientists who are studying towards their PhDs from PHEF







RCD AWARDS PER RACE AND GENDER



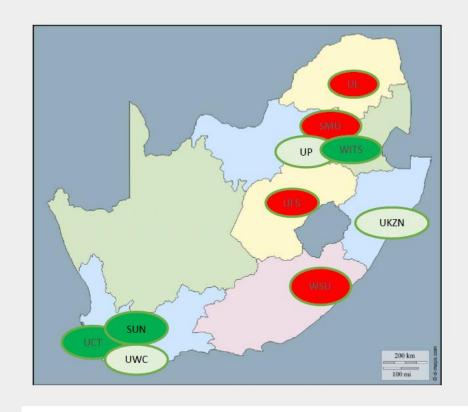


HDI'S: STRENGTHENING CAPACITY DEVELOPMENT

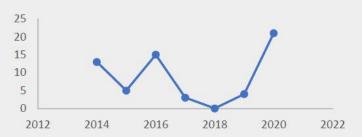




CLINICIAN-SCIENTISTS FUNDING IN 2020/21



Clinicians Funding Over Seven Years



- Geographical footprint has improved
- Working on bringing in SMU, WSU and UFS
- Increase of +/- 50 % in total number of scholars funded in one year - 2020-21 compared to numbers using previous funding model.
- · Dentistry (UWC) now visible



BUILDING & TRANSFORMING CLINICAL & HEALTH RESEARCH

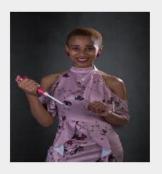




WHERE ARE THEY NOW?



DR DARSHINI GOVINDASAMY
Degree: PhD (Bongani
Mayosi National Health
Scholars Programme)
Current Position: Promoted
to Specialist Scientist
(Health Systems Research
Unit, South African Medical
Research Council)



DR LERATO HLAKA

Degree: PhD (SAMRC Internship
Scholarship Programme)
Current Position: Postdoctoral
Researcher; The Jackson
Laboratory for Genomic Medicine
(USA)

DR LYNNSAY DICKSON



DR NOKULUNGA HLENGWA
Degree: PhD (SAMRC Internship
Scholarship Programme)
Current Position: Lecturer University
of Zululand youngest PI – RCD/2021)



Degree: PhD (SAMRC Clinician Researcher Programme) Current Position: Participant Wits Health Consortium Great leap forward program (form a research syndicate), Honorary appointment at Wits University



BUILDING PHD SUPERVISORY CAPACITY IN IMU'S



Dr Jillian Hill Unit: NCDRU Main SAMRC supervisor: Prof. Mieke Faber



Ms Samukelisiwe Madlala



Dr Zandisiwe Magwebu Unit: PUDAC Main SAMRC supervisor: Chesa G. Chauke



Ms Sanele Khoza

Objective: Attract young scientists of highest caliber, to complement SAMRC senior researchers and influence sustainable long-term collaboration

Skills:

- Supervision experience
- Ability to recruit and support students
 - Collaboration





PLANNED PERFORMANCE OVER THE FIVE-YEAR PLANNING PERIOD

- Implementation plan for Biostatistics Capacity Development in collaboration with Hasselt University
- Doctoral scholarships
- Extramural research units
- Collaborating Centres for Cancer
- TB/HIV Collaborating Centres
- Request for Application (RFAs) for research priorities identified through the strategic planning process and National Priorities
- Driving Transformation and Capacity Development
- Funding and budget related issues in key areas of savings and reprioritization



SAMRC SUPPORT FOR WSU

Research Capacity Development Program (since 2016)

Total RDP grant of R9.5M over 5 years

- + R2M for NeMaCRU site
- + R3.2M for AED project

Additional R2,592,000 awarded for 2021/22

Total SAAVI grant to WSU: R17.3M (6 years)

Build Research Management Capacity

Build Research Capacity Support Research – Focus on HIV

- Fund 2-3 research support staff
- Training of research support staff
- Training in grants management by WHC

- Training researchers

 proposal writing,
 project management
- Training of clinicians to do research
- Facilitate collaborations

- Funded A&E HIV prevalence & COVID study
- Funding 8 pilot research grants
- Bridging funding to NeMACRU



SAMRC SUPPORT FOR WSU - OUTCOMES & IMPACT

Research Development Program

8 Faculty researchers received pilot grants (R3M total)

- Benefited data capturers, research assistants & data analysists
- 14 international, national, and local conference presentations
- 7 journal publications, with a further 6 submitted and awaiting review
- 9 postgraduate students trained
- Invitations to investigators to participate as keynote speakers in conferences
- Involvement of investigators as facilitators in capacity building workshops for the faculty

3 assistant research coordinators supported

- Assist researchers in drafting grant proposals
- Training of and conference attendance by research support staff
- Research strategy developed
- Ethics committee trained
- 5 training sessions by WHC on their procurement and payment systems for grant administration

Organization of faculty research days – around 30 oral and poster presentations were delivered by faculty members and postgraduate students

Population based surveys for HIV in E **Cape Accident and Emergency Depts**

- Undertaken in 4 hospitals in Mthatha, East London & PE
- Data on HIV prevalence in E. Cape

skills transfer in data

University & NIH

- Two study coordinators have been trained
- 32 data collectors/HIV counsellors trained on GCP. Data management, Datafax, Protocol adherence, HIPPA
- 4 publications and 4 conference presentations to date
- Faculty researchers who participated are now leading more research in their respective areas

Mentorship and technical management, biostatistics, genomics and bio information services and laboratory support from John Hopkins

NeMACRU

Re-capacitation of the HIV CRU in Mthatha to participate in HVTN 702 and other studies



SAMRC-WSU RESEARCH DEVELOPMENT PROGRAM INNOVATION SUPPORT

2021: expanded RDP to include innovation support – R1M allocated to support innovation projects through the WSU TTO

- RFA to be released shortly
- Focus on health innovations
- Focus will be on direct (non-WSU) costs to take innovations to the next development stage
- Applications to be submitted to TTO
- Applications will be reviewed by WSU, SAMRC and independent experts
- Funds must be used by March 2022





PART D: MEASURING SAMRC PERFORMANCE 2020/21



GOAL 1: ADMINISTER HEALTH RESEARCH EFFECTIVELY AND EFFICIENTLY IN SOUTH AFRICA

| Outcome | Outcome Indicator | Baseline SP (2015-2019) | Five-year target |
|---|--|----------------------------|---------------------|
| 1.1. To ensure good governance, effective administration and compliance with government regulations | 1.1.1. A clean audit opinion on the SAMRC from the Auditor- General | Clean audit | Clean Audit |
| 1.2. To promote the organisation's administrative efficiency to maximise the funds available for research | 1.2.1. Percentage of the government allocated SAMRC budget spent on administration | 20% | 20% |



GOAL 1: ADMINISTER HEALTH RESEARCH EFFECTIVELY AND EFFICIENTLY IN SOUTH AFRICA

| Outcome | Outputs | Output Indicator | | l/Actual mance | Current Year | Estimated performance | MIFFPA | | od |
|--|---|---|----------------|-------------------|-----------------|-----------------------|----------------|----------------|----------------|
| | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 1.1. To ensure good governance, effective administration and compliance with government regulations | Clean audit opinion | 1.1.1 A clean audit opinion on the SAMRC from the Auditor-General | Clean Audit | Clean Audit | Clean Audit | Clean Audit | Clean Audit | Clean Audit | Clean Audit |
| 1.2 To promote the organisation's administrative efficiency to maximise the funds available for research | Efficient expenditure of government allocated budget | 1.2.1 Percentage of the government allocated SAMRC budget spent on administration | 20% | 20% | 20% | 20% | 20% | 20% | 20% |



GOAL 2: LEAD THE GENERATION OF NEW KNOWLEDGE

| Outcome | Outcome Indicator | Baseline SP (2015-2019) | Five-year target |
|--|--|-------------------------------|------------------|
| 2.1. To produce and promote scientific excellence and the reputation of South African health | 2.1.1. Number of accepted and published journal articles, book chapters and books by SAMRC affiliated and funded authors | 3150 | 3550 |
| research | 2.1.2. Number of accepted and published journal articles by SAMRC grant- holders with acknowledgement of the SAMRC | 825 | 930 |
| 2.2. To provide leadership in the generation of new knowledge in health | 2.2.1. Number of accepted and published journal articles where the first and/or last author is affiliated to the SAMRC | 1830 | 1925 |
| 2.3. To provide funding for the conduct of health research | 2.3.1. Number of research grants awarded by the SAMRC | 750 | 750 |



GOAL 2: LEAD THE GENERATION OF NEW KNOWLEDGE

| Outcome | Outputs | Output Indicator | Audited Perforr | | Current Performance | Estimated Performance | MTEF Period | | d |
|--|---|---|--------------------|---------|------------------------|--------------------------|-------------|---------|---------|
| | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 2.1. To produce and promote scientific excellence and the reputation of South African health | Published journal articles, book chapters and books | 2.1.1 Number of accepted and published journal articles, book chapters and books by SAMRC affiliated and funded authors | 936 | 800 | 800 | 750 | 700 | 700 | 600 |
| research | Published journal articles by SAMRC grant-holders | 2.1.2 Number of accepted and published journal articles by SAMRC grantholders with acknowledgement of the SAMRC | 196 | 214 | 200 | 200 | 180 | 180 | 170 |



GOAL 2: LEAD THE GENERATION OF NEW KNOWLEDGE

| Out | come | Outputs | Output Indicator | Audited Perfori | | Current Performance | Estimated Performance | IV | ITEF Perio | d |
|-----|--|--|--|--------------------|---------|------------------------|--------------------------|---------|------------|---------|
| | | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 2.2 | To provide leadership in the generation of new knowledge in health | Published journal articles with the first or last author | 2.2.1. Number of accepted and published journal articles where the first and/or last author is affiliated to the SAMRC | 538 | 550 | 500 | 450 | 420 | 300 | 255 |
| 2.3 | To provide funding for the conduct of health research | Research grants awarded | 2.3.1 Number of research grants awarded by the SAMRC | 176 | 186 | 130 | 140 | 150 | 160 | 170 |



GOAL 3: SUPPORT, THROUGH FUNDING AND OTHER MECHANISMS, TECHNOLOGY DEVELOPMENT AND IMPLEMENTATION, TRANSLATION OF RESEARCH INTO POLICY AND PRACTICE, AND INNOVATIONS IN HEALTH AND TECHNOLOGY DELIVERY TO IMPROVE HEALTH

| Outcome | Outcome Indicator | Baseline SP (2015-2019) | Five-year target |
|---|--|-------------------------------|---------------------|
| 3.1 To support the development of new or improved innovations aimed at improving health and targeting priority health research areas of focus | 3.1.1 Number of new innovation and technology projects funded by the SAMRC aimed at developing, testing and/or implementing new or improved health solutions | NEW | 20 |
| | 3.1.2 Number of ongoing innovation and technology projects funded by the SAMRC aimed at developing, testing and/or implementing new or improved health solutions | NEW | 150 |
| 3.2 To develop new or improved innovations aimed at improving health priority research areas of focus | 3.2.1 Number of innovation disclosures made by the SAMRC intramural research and innovation | NEW | 5 |



GOAL 3: SUPPORT, THROUGH FUNDING AND OTHER MECHANISMS, TECHNOLOGY DEVELOPMENT AND IMPLEMENTATION, TRANSLATION OF RESEARCH INTO POLICY AND PRACTICE, AND INNOVATIONS IN HEALTH AND TECHNOLOGY DELIVERY TO IMPROVE HEALTH

| Out | come | Outputs | | Output Indicator | Audited Perfori | | Current Performance | Estimated Performance | IV | ITEF Perio | d |
|-----|--|--|-------|--|--------------------|---------|------------------------|--------------------------|---------|------------|---------|
| | | | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 3.1 | To support the development of new or improved innovations aimed at improving health and targeting priority | Innovation projects and platforms funded by the SAMRC | 3.1.1 | Number of new innovation and technology projects funded by the SAMRC aimed at developing, testing and/or implementing new or improved health solutions | NEW | NEW | 4 | 4 | 4 | 4 | 4 |
| | health areas | | 3.1.2 | Number of ongoing innovation and technology projects funded by the SAMRC aimed at developing, testing and/or implementing new or improved health solutions | NEW | NEW | 30 | 30 | 30 | 30 | 30 |



GOAL 3: SUPPORT, THROUGH FUNDING AND OTHER MECHANISMS, TECHNOLOGY DEVELOPMENT AND IMPLEMENTATION, TRANSLATION OF RESEARCH INTO POLICY AND PRACTICE, AND INNOVATIONS IN HEALTH AND TECHNOLOGY DELIVERY TO IMPROVE HEALTH

| Out | come | Outputs | Output Indicator | Audited Perfor | | Current Performance | Estimated Performance | N | ITEF Perio | d |
|-----|-------------|---|---|-------------------|---------|------------------------|-----------------------|---------|------------|---------|
| | | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 3.2 | or improved | Innovation disclosures made by SAMRC researchers | 3.2.1 Number of innovation disclosures made by the SAMRC intramural research and innovation units and platforms | NEW | NEW | 1 | 1 | 1 | 1 | 1 |



GOAL 4: BUILD HUMAN CAPACITY FOR THE LONG-TERM SUSTAINABILITY OF THE SOUTH AFRICAN HEALTH RESEARCH

| Outcome | Outcome Indicator | Baseline SP (2015-2019) | Five-year target |
|--|---|-------------------------|------------------|
| 4.1 To enhance the long-term sustainability of health research in South Africa by providing funding and supervision for the next | 4.1.1 Number of awards (scholarships, fellowships and grants) by the SAMRC for MSc, PhD, Postdocs and Early Career Scientists | 435 | 660 |
| generation of health researchers | 4.1.2 Number awards by the SAMRC to female MSc, PhD, Postdocs and Early Career Scientists | NEW | 488 |
| | 4.1.3 Number awards by the SAMRC to Black South African citizens and permanent resident MSc, PhD, Postdocs and Early Career Scientists classified as African | NEW | 495 |
| | 4.1.4 Number of awards by the SAMRC to MSc, PhD, Postdocs and Early Career Scientists from historically disadvantaged institutions (HDIs) | NEW | 368 |



GOAL 4: BUILD HUMAN CAPACITY FOR THE LONG-TERM SUSTAINABILITY OF THE SOUTH AFRICAN HEALTH RESEARCH

| Out | come | Outputs | Output Indicator | | l/Actual mance | Current Performance | Estimated Performance | M | TEF Perio | d |
|-----|--|--|---|---------|-------------------|------------------------|--------------------------|---------|-----------|---------|
| | | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 4.1 | To enhance the long-term sustainability of health research in South Africa by providing funding for the next | SAMRC bursaries and/or scholarships and/or fellowships provided for MSc, PhD, Postdocs and Early Career Scientists | 4.1.1 Number of awards (scholarships, fellowships and grants) by the SAMRC for MSc, PhD, Postdocs and Early Career Scientists | 141 | 106 | 110 | 130 | 140 | 150 | 130 |
| | generation of health researchers | Female students and/or Early Career Scientists receiving SAMRC funding | 4.1.2 Number of awards by the SAMRC to female MSc, PhD, Postdocs and Early Career Scientists | New | New | 80 | 90 | 100 | 110 | 108 |
| | | African South African citizens and/or permanent residents students receiving SAMRC funding | 4.1.3 Number of awards by the SAMRC to Black South African citizens and permanent resident MSc, PhD, Postdocs and Early Career Scientists classified as African | New | New | 90 | 100 | 105 | 110 | 90 |



GOAL 4: BUILD HUMAN CAPACITY FOR THE LONG-TERM SUSTAINABILITY OF THE SOUTH AFRICAN HEALTH RESEARCH

| 6 | Outcome | Outputs | Output Indicator | Output Indicator Audited/Action Performance | | Current Performance | Estimated Performance | MTEF Period | | |
|---|---|---|---|---|---------|------------------------|--------------------------|-------------|---------|---------|
| | | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
| 4 | .1 To enhance the long-term sustainability of health research in South Africa by providing funding for the next generation of | SAMRC scholarships/ fellowships provided for MSc, PhD, Postdocs and Early Career Scientists at HDIs | 4.1.4 Number of awards by the SAMRC to MSc, PhD, Postdocs and Early Career Scientists from historically disadvantaged institutions (HDIs) | New | New | 60 | 70 | 75 | 80 | 83 |
| | health researchers | MSc and PhD students graduated or completed | 4.1.5 Number of MSc and PhD students graduated or completed | 47 | 65 | 70 | 75 | 80 | 85 | 50 |



GOAL 5: TRANSLATE NEW KNOWLEDGE INTO POLICIES AND PRACTICES TO IMPROVE HEALTH

| Outcome | Outcome Indicator | Baseline SP (2015-2019) | Five- year target |
|---|--|-------------------------------|-------------------------|
| 5.1. To facilitate the translation of health research | 5.1.1. Number of local or international policies, reports and guidelines that reference SAMRC research | 27 | 27 |
| | 5.1.2. Number of reports and guidelines (co)produced by the SAMRC intramural researchers | NEW | 25 |
| | 5.1.3. Number of national or international bodies/committees that SAMRC employees serve on national or international bodies/committees | NEW | 250 |
| | 5.1.4. Number of conferences, seminars and continuing development points workshops supported by the SAMRC | NEW | 50 |



GOAL 5: TRANSLATE NEW KNOWLEDGE INTO POLICIES AND PRACTICES TO IMPROVE HEALTH

| Outcome | Outputs | Output Indicator | | I/Actual mance | Current Performance | Estimated Performance | MTEF Period | | | |
|---|--|--|---------|-------------------|------------------------|--------------------------|-------------|---------|---------|--|
| | | | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | |
| 5.1 To facilitate the translation of SAMRC research findings into public understanding, policy and practice | Local or international policies, reports and guidelines that reference SAMRC research | 5.1.1 Number of local or international policies, reports and guidelines that reference SAMRC research | 6 | 7 | 5 | 5 | 5 | 6 | 6 | |
| | Reports and guidelines produced by SAMRC intramural authors | 5.1.2 Number of reports and guidelines (co)produced by the SAMRC intramural researchers | NEW | NEW | 5 | 5 | 5 | 7 | 9 | |
| | SAMRC researchers invited/serving on national and international bodies/committees | 5.1.3 Number of national or international bodies/committees SAMRC employees serve on | NEW | NEW | 50 | 50 | 50 | 50 | 50 | |
| | SAMRC supported conferences, seminars and CPD workshops | 5.1.4 Number of conferences, seminars and continuing development points workshops supported by the SAMRC | NEW | NEW | 10 | 10 | 10 | 10 | 10 | |



KEY RISKS WHICH MAY AFFECT ACHIEVEMENT OF THE OUTCOMES

Goal 1

- Potential non-compliance to legal and regulatory requirements as well as policies and procedures
- Sustainability of the Defined Benefit (DB) fund
- Lack of a broader SAMRC business continuity programme
- Inefficiencies within various corporate processes
- Insufficient facility management, including movable and immovable assets
- Loss/theft of data
- Relationship between SAMRC and organised labour



KEY RISKS WHICH MAY AFFECT ACHIEVEMENT OF THE OUTCOMES continued

Goal 2

- Poor research governance
- Inferior quality of research output of extramural research units
- Inefficiencies within various research processes
- Maintaining research integrity
- Transformation and diversity challenges
- Inability to sustainably grow funding



KEY RISKS WHICH MAY AFFECT ACHIEVEMENT OF THE OUTCOMES continued

Goal 3

- Ineffective support for, collaborative partnerships, platforms and technology development
- Lack of further development and commercialization of (a) SAMRC-owned and (b)
 SAMRC-funded innovations

Goal 4

- Limited research capacity

Goal 5

- Lack of research impact on strengthening policy and practice



FINANCE



BUDGET STRATEGY (1)

- Over the period 2017/18 to 2020/21, the SAMRC's income grew by 7,8% (R88m), with an average growth rate of 2,5% p.a.
- Over the MTEF period 2021/22 to 2023/24, the SAMRC's estimated funding will increase by 2,5% (R30m), with an average growth rate of 0,8% over the period
- Over the period 2017/18 to 2020/21, the expenditure of the SAMRC increased by 6,6% (R78m) with an average growth rate of 2,2%
- Over the MTEF period 2021/22 to 2023/24, the SAMRC's budgeted expenditure is estimated to increase at an average growth rate of 0,5%
- Figures in the Statement of Financial Performance do not include COVID-19 baseline allocations from NT,
 R150m in 2020/21 and R100m in 2021/22



BUDGET STRATEGY (2)

- Only critical new posts to be funded from the reduction in vacant posts
- Salaries will increase at an average rate of 5,5% and goods and services is estimated to decrease at an average rate of 2,7%
- Priority should be given to projects which leverage funding at a rate of at least
 1:1 when funding available
- Budgeted for deficit of R3,3m in 2021/22 to be funded from reserves to maintain current contracted funding commitments



EXPENDITURE ESTIMATES (R'000)

| Statement of financial perfomance | Budget | Audited Outcome | Budget | Audited Outcome | Budget | Audited Outcome | Budget estimate | Approved budget | Revised budget | Outcome/ Budget Average % | Average growth rate (%) | Expen- diture/ total: Average (%) | Medi | um-term es | timate | Average growth rate (%) | Expen- diture/ total: Average (%) |
|--|-----------|--------------------|-----------|--------------------|-----------|--------------------|--------------------|--------------------|-------------------|------------------------------------|----------------------------------|---|-----------|------------|-----------------|----------------------------------|---|
| R thousand | 2017/18 | | 2018/19 | | 2019/20 | | 2020/21 | | | 201 | 17/18-2020/21 | | 2021/22 | 2022/23 | 3 2023/24 2020/ | 2020/21 | 1 - 2023/24 |
| Revenue | | | | | | | | | | | | | | | | | |
| Non-tax revenue | 372 762 | | 418 386 | 564 706 | 423 680 | 550 907 | 499 465 | 499 465 | 499 465 | 124,1% | | 44,6% | 530 961 | 551 466 | 532 685 | 2,2% | |
| Sale of goods and services other than capital assets | 342 414 | 467 078 | 387 436 | 517 258 | 395 812 | 500 598 | 476 057 | 476 057 | 476 057 | 122,4% | 0,6% | 41,1% | 483 073 | 505 466 | 486 684 | 0,7% | ==== |
| Other non-tax revenue | 30 348 | 45 125 | 30 950 | 47 448 | 27 868 | 50 309 | 23 408 | 23 408 | 23 408 | 147,7% | -19,7% | 3,5% | 47 888 | 46 000 | 46 001 | 25,3% | 3,3% |
| Interest, dividends and rent on land | 23 950 | 42 271 | 25 950 | 34 548 | 24 600 | 32 630 | 23 350 | 23 350 | 23 350 | 135,7% | -17,9% | 2,8% | 30 617 | 31 635 | 33 885 | 13,2% | 2,4% |
| Transfers received | 614 961 | 614 961 | 624 829 | 624 828 | 687 247 | 686 666 | 715 700 | 715 700 | 715 700 | 100,0% | 5,2% | 55,4% | 709 128 | 713 229 | 713 229 | -0,1% | 57,4% |
| Total revenue | 987 723 | 1 127 164 | 1 043 215 | 1 189 534 | 1 110 927 | 1 237 573 | 1 215 165 | 1 215 165 | 1 215 165 | 109,5% | 2,5% | 100,0% | 1 240 089 | 1 264 695 | 1 245 914 | 0,8% | 100,0% |
| Expenses | | | | | | | | | 2 | - | 1 to | 3 | | | | | |
| Current expenses | 976 185 | 1 098 082 | 1 070 580 | 1 111 219 | 1 042 330 | 1 104 966 | 1 158 248 | 1 158 248 | 1 158 248 | 105,3% | 1,8% | 92,9% | 1 150 901 | 1 171 665 | 1 175 562 | 0,5% | 92,6% |
| Compensation of employees | 337 545 | 359 068 | 361 957 | 372 725 | 396 022 | 405 771 | 418 851 | 418 851 | 418 851 | 102,8% | 5,3% | 32,3% | 443 975 | 469 728 | 492 276 | 5,5% | 36,3% |
| Goods and services | 617 640 | 716 924 | 687 123 | 723 590 | 623 577 | 682 142 | 716 106 | 716 106 | 716 106 | 107,3% | -0,0% | 59,0% | 683 258 | 677 487 | 658 836 | -2,7% | 54,4% |
| Depreciation | 21 000 | 21 340 | 21 500 | 14 591 | 22 731 | 16 855 | 23 291 | 23 291 | 23 291 | 85,9% | 3,0% | 1,6% | 23 668 | 24 450 | 24 450 | 1,6% | 1,9% |
| Interest, dividends and rent on land | | 750 | | 313 | | 198 | - | - | ······ | | -100,0% | 0,0% | | - | | | - |
| Tax payment | 75 439 | 75 562 | 76 733 | 81 501 | 90 426 | 89 565 | 93 268 | 93 268 | 93 268 | 101,2% | 7,3% | 7,1% | 92 495 | 93 030 | 93 030 | -0,1% | 7,4% |
| Total expenses | 1 051 624 | 1 173 644 | 1 147 313 | 1 192 720 | 1 132 756 | 1 194 531 | 1 251 516 | 1 251 516 | 1 251 516 | 105,0% | 2,2% | 100,0% | 1 243 396 | 1 264 695 | 1 268 592 | 0,5% | 100,09 |
| Surplus/(Deficit) | (63 901) | (46 480) | (104 098) | (3 186) | (21 829) | 43 042 | (36 351) | (36 351) | (36 351) | | -7,9% | | (3 307) | _ | (22 678) | -14,6% | |



BUDGET PER STRATEGIC GOAL (R'000)

| | Audited Outcome | Audited Outcome | Audited Outcome | Revised budget | Average growth rate (%) | Expen- diture/ total: Average (%) | Мес | lium-term estin | nate | Average growth rate (%) | Expen- diture/ total: Average (%) | |
|---------------------------|--------------------|--------------------|--------------------|-------------------|----------------------------------|---|-----------|-----------------|-----------|----------------------------------|---|--|
| R thousand | 2017/18 | 2018/19 | 2019/20 | 2020/21 | 2017/18-2020/21 | | 2021/22 | 2022/23 | 2023/24 | 2020/21 | - 2023/24 | |
| Administration | 211 056 | 195 485 | 228 464 | 208 535 | -0,4% | 17,5% | 210 373 | 224 028 | 238 203 | 4,5% | 17,5% | |
| Core research | 639 238 | 687 121 | 598 200 | 684 254 | 2,3% | 54,2% | 652 410 | 661 923 | 643 402 | -2,0% | 52,5% | |
| Innovation and technology | 255 667 | 248 344 | 290 296 | 274 697 | 2,4% | 22,2% | 289 496 | 287 498 | 295 371 | 2,4% | 22,8% | |
| Capacity development | 67 683 | 61 770 | 77 571 | 81 730 | 6,5% | 6,0% | 88 817 | 88 946 | 89 316 | 3,0% | 6,9% | |
| Research Translation | - | - | - | 2 300 | _ | 0,0% | 2 300 | 2 300 | 2 300 | - | 0,2% | |
| Total expense | 1 173 644 | 1 192 720 | 1 194 531 | 1 251 516 | 2,2% | 100,0% | 1 243 396 | 1 264 695 | 1 268 592 | 0,5% | 99,9% | |



THANK YOU

DELEGATION

South African Medical Research Council

Led by: President & CEO, Professor Glenda E. Gray

