



NCCRED Clinical Research Funding Program Report 2018 - 2023

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**The National Centre for Clinical Research
on Emerging Drugs**

**NCCRED Clinical Research Funding Program
Report**

2018 - 2023



National Centre for Clinical
Research on Emerging Drugs

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Executive Summary

The National Centre for Clinical Research on Emerging Drugs (NCCRED) conducted a peer-reviewed competitive Clinical Research Funding Program to develop interventions for methamphetamine and emerging drugs of concern, funded by the Australian Government Department of Health and Aged Care. From 2018 to 2021 **\$2,745,861** was awarded to 24 research projects and 6 clinical research scholars. Guided by the aims of NCCRED and its Research Priority Setting Study¹; the centre supported durable clinical and academic partnerships across the Australian alcohol and other drug (AOD) sector and beyond, provided consumer-focused innovation, and prioritised clinical research that was translatable.

The projects have generated innovative clinical research, networks, practices and policy changes resulting in transformations the following areas:

1. The creation of local and national networks and alert systems connecting hospitals, emergency departments, NGOs, regional and rural centres, consumer organisations, universities, toxicology units and public health departments to respond to harms associated with the use of emerging drugs.
2. Integrated models of care and referral for people who use methamphetamine and/or emerging drugs.
3. Pharmacotherapies for the treatment of methamphetamine use disorder.
4. Risk reduction measures for people who use illicit substances at music festivals.
5. Critical data-sharing networks to improve clinical responses to harms associated with the use of emerging drugs.
6. Online early interventions to minimise the harms for consumers and their families.

By encouraging ongoing collaboration, the Program will foster improved clinical responses and clinician preparedness, create further pathways for innovation, streamline policy responses, and improve harm reduction strategies. The Clinical Research Funding program, together with NCCRED's own clinical research outputs, has resulted in sizeable developments to the breadth, depth, and progression of knowledge and clinical research studies relating to methamphetamine and emerging drugs within the AOD sector in Australia.

¹ Siefried KJ, Ezard N, Christmass M, Haber P, Ali R; NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group. A clinical research priority setting study for issues related to the use of methamphetamine and emerging drugs of concern in Australia. *Drug Alcohol Rev.* 2022 Feb;41(2):309-319. doi: 10.1111/dar.13350. Epub 2021 Jul 8. PMID: 34237176; PMCID: PMC9290984.

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1. NCCRED Clinical Research Funding Program

The National Centre for Clinical Research on Emerging Drugs (NCCRED) was funded by the Australian Department of Health and Aged Care in 2017 to further the aims of the National Ice Action Strategy by forging collaborations between researchers and clinicians to address health harms from the use of methamphetamines and emerging drugs of concern.

NCCRED's Clinical Research Funding Program had three streams:

1. Capacity Building Grants (2018)
2. Seed Funding Grants (2018-2021)
3. Clinical Research Scholarships (2019-2021)

1.1. Capacity Building Grants

Capacity Building Grants provided research support to clinician researchers to develop research capacity for already established clinical trials with a focus on scalable and cost-effective treatment options.

1.2. Seed Funding Grants

Seed funding grants provided financial support to pilot investigator-initiated clinical research which could be leveraged into larger trials.

Applications for both the seed and capacity building grants were open to clinicians or clinical researchers (or teams of clinicians and researchers) from any discipline/background working in the alcohol and other drug (AOD) and other healthcare sectors. Applicants were encouraged to apply for funding to answer clinical questions, build research capacity, and produce translational research results. The grants aimed to produce a fundable project that could eventually attract research / evaluation funding from other sources.

From 2018 to 2021, four rounds of competitive seed funding were undertaken.

Funded projects explored innovative interventions, promoted cross-disciplinary collaboration, and enabled research collaborations with early career researchers or research-inexperienced sites.

1.3. Clinical Research Scholarships

The Clinical Research Scholarship program (initially called Clinical Research Fellowship program) aimed to enhance research capacity in the AOD clinical workforce. Scholarships were open to practising clinicians in the AOD sector of any professional background (e.g., allied health, medical nursing). There were two rounds, 2019 and 2020, The second-round targeted nursing, allied health and Aboriginal and/or Torres Strait Islander candidates and associated a seed funding grant to the research project of the Scholar.

Successful applicants were awarded a funded scholarship by an independent peer-review panel against the following selection criteria:

1. Registered clinician with Australian Health Practitioner Regulation Agency
2. Providing AOD treatment
3. Not currently completing a fellowship or scholarship
4. Employed in a clinical setting.

NCCRED contributed to the Research Scholar's salary to the equivalent of 0.5 full-time to a maximum of \$50,000.00. The candidate was partnered with a senior clinician-researcher (the "supervisor"). The partnering clinical site received additional funding for the Research Scholar's placement (\$5,000). The candidate was paired with a suitable external clinical research mentor (the "mentor"). Scholars, their project titles, mentors, and biographies are outlined in **Appendix 1**.

1.4. Application process

Application forms and relevant documentation was available on the NCCRED website and advertised through NCCRED communications including newsletters, social media and by NCCRED partners and consortium organisations. Each stream of the funding program had a dedicated application form.

- The application form for the seed funding grants is in **Appendix 2**.
- The application form for the capacity building grants is in **Appendix 3**.
- The application form for the clinical research fellowships is in **Appendix 4**.
- The application form for the clinical research scholarships is in **Appendix 5**.

Throughout the application process, NCCRED provided specialised research support in the form of mentorships in two forms: linkage of an external academic mentor to a potential clinical applicant, or internal NCCRED staff to review draft documents and provide suggestions for enhancement.

1.5. NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group

NCCRED engaged with an independent panel, the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group (WG). WG members are outlined in **Appendix 6**. The WG consisted of a multidisciplinary group of clinicians, researchers, a consumer and an Aboriginal academic, they were asked to review survey responses, a brief literature review and consider their professional experience, to conduct a ranking process to determine the key themes and priorities.

The Funding Program was also overseen by the WG. The WG advised on the direction of the programs, application forms, and assessment criteria prior to the opening of each round. Successful candidates were awarded by an independent selection process overseen by the WG, according to the established research priorities of the Centre. There was a strict and transparent process in place for managing conflicts of interest among the WG and the process was fully minuted by NCCRED staff, no NCCRED staff were involved in the decision to award grants or selection of recipients. The WG made recommendations to the NCCRED Advisory Board who subsequently awarded the clinical research funding.

From Round 2 onwards all funding applications were assessed according to the Priority Setting Study which identified NCCREDs future clinical research priorities. These priorities are listed in **Table 1**.

Table 1 - Clinical Research Priorities

Methamphetamine Clinical Research Priorities	Emerging Drug Clinical Research Priorities
Overcoming barriers to intervention uptake (e.g. at time of crisis in emergency departments or primary health care).	Fixed-site community located drug checking / pill testing (connected to an early warning system).
Pilot pharmacotherapy trials for adults seeking treatment.	Feasibility of social media and other creative opportunities to alert consumers and reduce harm.
Effective communication strategies to consumers on available treatments and the evidence-based options.	GHB overdose and withdrawal management (ranked equally for third highest scoring priority).
	Early warning system/shared information system – pooling and sharing of information – and its impact on reducing harm (ranked equally for third highest scoring priority).

2. Grants Awarded

Between 2018 and 2020 and across all funding rounds, the Clinical Research Funding Program had 93 applications from across Australia, and a total of \$6,751,129.08 was requested. Of those 93 applications 30 grants were awarded. Across the funding rounds, \$2,800,000.00 was made available, and a total of \$2,745,861.31 was awarded. An overview of all Clinical Research Funding allocated between 2018 and 2022 is outlined in **Table 2**.

A breakdown of NCCRED Clinical Research Funding grant applications and awarded projects received by round can be viewed at **Appendix 7**.

Table 2 - Grants Awarded, NCCRED Clinical Research Funding Program 2018-2022

Program	Round/ Year	Investigators	State	Research project and affiliated organisations	Amount/ Grant ID
Capacity Building	Sept. 2018	Prof N. Lintzeris, R. Deacon, A. Shakeshaft, M. Cretikos, J. Holmes, K. Mammen, N. Ezard, L. Mills, M. Farrell, A. Dunlop, K. Siefried	NSW	Developing a clinical data laboratory for methamphetamine use in NSW: The MAData project (South Eastern Sydney Local Health District, Division Addiction Medicine University Sydney, NDARC, Centre Population Health NSW Health, AoD Branch, NSW MoH, D&A Services, SESLHD, StVHN Sydney and NCCRED, UNSW, D&A Services, HNELHD)	\$104,000 NCR01
		Prof P. Haber, K. Morley, C. Tremonti, E. Doherty, A. He, Z. Mills, J. Hillman	NSW	The LiMA@RPAH study: a randomised double-blind placebo-controlled study of lisdexamfetamine for the treatment of methamphetamine dependence (Royal Prince Alfred Hospital, University of Sydney, Sydney Local Health District (RPAH-DHS))	\$100,000 NCR04
		Dr P. Stockham, S. Alfred, D. Haustead, E. Partridge, C. Kostakis, J. White, A Camilleri,	SA	South Australian drug early warning system – Emergency Department admission blood psychoactive testing (Forensic Science SA, Royal Adelaide Hospital, Queen Elizabeth Hospital, University of SA)	\$100,000 NCR06
Total Capacity Building Funding \$304,000					
Seed Funding	1. Oct 2018	Dr J. Soderstrom*, D. McCutcheon, J. George, M. Raghavan, J. Burcham, D. Fatovich, F. Oosthuizen, S. Greene, A. Dawson, K. McArdle, J. Brown, K. Isoardi, S. Alfred, E. Archer, P. Dessauer,	WA	Emerging Drug Network of Australia (EDNA). (Royal Perth Hospital, WA Poisons Information Centre, NSW Poisons Information Centre, Centre for Clinical Research in Emergency Medicine, Harry Perkins Institute of Medical Research; Centre for Clinical Research in Emergency Medicine, Victorian Poisons Information Centre, Austin Hospital Victoria, National Poisons Register & Clinical Toxicology, Royal Prince Alfred Hospital NSW, Royal Adelaide Hospital South Australia, Royal Darwin Hospital Northern Territory, Harm Reduction WA)	\$100,000 NCSF02
		Dr B. Larance*, P. Kelly, L. Lago, J. Lappin, L. Robinson, S. Adams, D. Reid	NSW	Increasing the capacity of a local health district to respond to methamphetamine-related harm: developing an integrated model of care informed by linked data and consumer and clinician views. (University of Wollongong (UOW)).	\$66,190 NCSF05
		Dr C. Rodgers*, A. Peacock, K. Siefried, N. Ezard, G. Kelly, J. Dyer,	NSW	Sentinel surveillance for emerging illicitly manufactured fentanyl use in an inner-city opioid agonist treatment service. (St. Vincent's Hospital, Sydney, Illawara Drug and Alcohol Services).	\$29,947 NCSF08
		Dr G. Bedi*, C. Davey, E. Mullen, E. Cementon, A. Rateesh, A. Chanen, S. Arunogiri, O. Schwartz,	Vic	An open-label pilot study of sub-anaesthetic ketamine for methamphetamine abuse in young people. (Orygen National, Monash University, Turning Point).	\$99,703 NCR2F04

Program	Round/ Year	Investigators	State	Research project and affiliated organisations	Amount/ Grant ID
		A/Prof P Kelly*, A. Beck, B. Larance, A Baker, F. Deane, L. Hides, V. Manning, A. Shakeshaft, A. Argent	NSW	Methamphetamine and mutual support: a mixed methods exploration of SMART recovery participants' characteristics and opportunities for enhanced referral pathways. (UOW, University of Newcastle, University of QLD, UNSW, SMART Recovery Aust).	\$77,489 NCR2SF09
		A/Prof V. Manning*, J.B.B Garfield, S. Arunogiri, D. Lubman, J. Gavin, E. Kotler, S. George, G. Okedara, M Hopwood	NSW	A pilot randomised controlled trial (RCT) of personalised approach bias modification for methamphetamine use disorder. (Monash University, Turning Point, Eastern Health, Malvern Private Hospital, Self Help Addiction Resource Centre, Albert Road Clinic, University of Melbourne).	\$97,595 NCR2SF10
		Dr R. Sutherland*, A. Peacock, M. Barratt, R. Bruno, C. Rodgers, R. Cherry, M. Steele, P. Read, R. Page	NSW	Feasibility, consumer acceptability and behavioural outcomes associated with take-home fentanyl test strips. (UNSW, NDARC, Utas, St Vincent's Hospital Sydney, Kirketon Road Clinic, Rankin Court).	\$38,795 NCR2SF16
		A/Prof J. Ward*, R. Reilly, R. McKetin, N. Ezard, C. Treloar, A Dunlop, H. Wand, Y. Roe, J. Butt, B. Quinn	SA	An acceptability and feasibility study of the <i>We Can Do This</i> online therapeutic program in primary care and residential rehabilitation settings. (Flinders University, South Australian Health and Medical Research Institute, NDARC, St Vincent's Hospital Sydney, Hunter New England Health, UNSW, Charles Darwin University, National Drug Research Institute, Australian Institute of Family Studies).	\$68,400 NCR2SF17
	3. Apr 2019	Dr M. Barratt*, A. Eade, J. Gerstner-Stevens, T. Lyons, N. Lee, S. Crawford, S. Tzanetis, V. McKinnon, R. Brien, I Volpe, J Grigg, C Hughes	Vic	Rapid translation of forensic data from police drug seizures into clinical alerts to improve public health. (Social and Global Studies Centre RMIT University, Monash University, C. Quinn, Vic Police, Vic Dept of Health and Human Services, 360Edge, National Drug Research Institute, Harm Reduction Victoria, Uniting ReGen, Turning Point, Centre for Crime Policy and Research, Flinders University).	\$95,481 NCR3SF03
		Prof A. Verdejo-Garcia*, E. Allan, D. Lubman	Vic	Determining the feasibility and efficacy of Goal Management Training for improving treatment retention and outcomes during residential treatment for methamphetamine dependence. (Monash University, Odyssey House Vic, Turning Point, Eastern Health Vic).	\$94,369 NCR3SF10
		Prof. A. Dawson*, B. C. Riordan, P. Haber, J. Brett, J. Raubenheimer, N. Jamshidi, S. Anderson, M. O'Donnell, E. Franklin,	NSW	Detection of fever via wearable thermometers: An early intervention strategy to reduce the risk of drug-related toxicity at music festivals, a feasibility and acceptability study. (University of Sydney, NSW Poisons Information Centre, Royal Prince Alfred Hospital Clinical Toxicology Service, Sydney Local Health District, St. Vincent's Hospital, Sydney)	\$95,000 NCR3SF11
		A/Prof P. Kelly*, B. Larance, A. Baker, V. Manning, A. Argent, A. Beck, B. Hitsman, F. Deane, A. Shakeshaft, R. Velleman, G. Velleman	NSW	BeSMART: feasibility and preliminary efficacy of an intervention for family members impacted by methamphetamine. (University of Wollongong, University of Newcastle, Monash University, Turning Point, Smart Recovery Australia, University of Wollongong, Northwestern University Feinberg School of Medicine Chicago, NDARC)	\$61,342 NCR3SF14

Program	Round/ Year	Investigators	State	Research project and affiliated organisations	Amount/ Grant ID
		A/Prof S. Nielson*, S. Hiley, J. Latimer, N. Clark, M. Jauncey, M. Barratt, E. Tay, D. Gerostamoulos, L. Glowacki, Claude Roux, M. Morelato, E. Lefrançois, T. Lam, M. Gilbert	Vic	Understanding emerging opioid-related harms through improved surveillance, drug checking and information sharing systems. (Monash University, Burnet Institute, Turning Point, North Richmond Community Health, Uniting Medically Supervised Injecting Centre, Uniting Medically Supervised Injecting Centre, Social and Global Studies Centre RMIT University, Western Sydney Local Health District, Victorian Institute of Forensic Medicine (VIFM), UTS Centre for Forensic Science University of Lausanne Switzerland, National Drug Research Institute Curtin University)	\$98,774 NCR3SF16
		Dr S. Arunogiri*, V. Manning, G. Bedi, A Rubenis, R. McKetin, F. Buisman-Pijlman, I. S. McGregor, D. Lubman	Vic	An open label pilot study of intranasal oxytocin for methamphetamine withdrawal in women. (Turning Point, Eastern Health, Monash University, University of Melbourne, NDARC, University of Melbourne, University of Sydney, Eastern Health Clinical School)	\$97,844 NCR3SF18
		Dr A. Peacock*, R. Sutherland, R. Bruno, M. Barratt, M. Ellen, T. Capell-Hattam, H. Sumnall, M. Cretikos, R. Page	NSW	Risk communication for people who use MDMA/ 'ecstasy' and related drugs: establishing guidance on consumer preferences and behavioural responses to drug alerts. (University of NSW, NDARC, Utas, Social and Global Studies Centre RMIT University, NSW Users and AIDS Association (NUAA) Public Health Institute, Liverpool John Moores University, Centre for Population Health, NSW Ministry of Health, Kirketon Road Centre / St Vincent's Hospital)	\$96,120 NCR3SF24
	4. Feb 2021	Dr R. McKetin*, S. Arunogiri, A. Marshall, Dr S. Clay, S. College, M. Ginley, J. Nagle, M. Christmass, P. MacCartney, D. Membrey, M. Farrell, L. Degenhardt, J. Grebely	NSW	Integrating contingency management for methamphetamine use into routine clinical care in Australia. (NDARC UNSW, Monash University, Turning Point, Kirby Institute UNSW, Eastern Tennessee State University, Connections Based Living, Next Step Drug and Alcohol Service, Co-Health, Western Health)	\$86,109 NCR4SF07
		Dr P. Kelly* J. Berry, S. Adams, V. Bliokas, S. Qian, J. Lunn	NSW	Feasibility and preliminary efficacy of Cognitive Remediation Groups in a community outpatient setting for people who use methamphetamines. (UOW, Macquarie University, ISLHD, Illawarra Health and Medical Research Institute)	\$74,738 NCR4SF08
		Dr B. Lokuge*, Dr. T. Yadav*, M. Sequeira, M. Nean, A. Brown, L. Mills, B. Paton, A. Dunlop	NSW	Theta burst Transcranial Magnetic Stimulation (TMS) for Methamphetamine use disorder– A feasibility study to inform the design of a multisite randomized control trial. (HNELHD, SESLHD, University of Newcastle, University of Sydney)	\$100,000 NCR4SF15
		Dr G. Bedi*, A. Arthur Guerin, E. Mullen, E. Cementon, P. Amminger, A. Chanen, S. Arunogiri	Vic	Cannabidiol – A novel pharmacotherapy for Lowering Methamphetamine use (The CALM Study). (Orygen National, University of Melbourne, Monash University, Eastern Health).	\$99,408 NCR4SF17
		Dr L. Mills*, N. Lintzeris, A. Dunlop, M. Farrell, R. Deacon, A. Shakeshaft, K. Mammen, J. Holmes, M. Cretikos, E. Black, S. Childs, D. Reid, M. Montebello, S. Maiolo	NSW	Examining the effects of Amphetamine-Type-Substance use on clinical outcomes among clients receiving opioid agonist treatment. (SESLHD, University Sydney, NDARC, Centre Population Health NSW MoH, HNELHD, NSLHD, ISLHD, CCLHD, DACRIN, HARP Services)	\$42,536.78 NCR4SF18

Program	Round/ Year	Investigators	State	Research project and affiliated organisations	Amount/ Grant ID
Clinical Research Scholars	Feb. 2019	Dr R. Page*, M. Jauncey, A. Ritter, M. Barratt, R. Kevin, S. Nielsen, S. Neville, U. Cullinan, J. Fry, M. Dibbayawan, I. McGregor, C. Francis, C. Puljevic, S. Hiley, F. Measham	NSW	Co-designing a fixed-site drug checking service at Sydney's Medically Supervised Injecting Centre (MSIC). (The Loop Australia, NDARC UNSW, Uniting MSIC, UNSW, RMIT University, Monash University, Forensic and Analytical Science Services, The Lambert Initiative, University of Sydney, University of Liverpool).	\$57,159 NCR4SF19
		Dr Andrew Kozman Supervisor: Dr Jessamine Soderstrom, Royal Perth Hospital Mentor: Dr Simon Lenton, National Drug Research Institute	WA	The Early Detection Network of Australia (EDNA) Project (Royal Perth Hospital)	\$135,000
		Dr Edward Mullen Supervisor: Dr Gillinder Bedi, Orygen Youth Health Mentor: Dr Bronwyn Milne, Sydney Children's Hospital Network	Vic	The Methamphetamine use in young people: Sub-anaesthetic Ketamine Open-label Trial (MASKOT) protocol (Orygen Youth Health)	\$135,000
	Dr Adam Rubenis Supervisor: Dr Shalini Arunogiri, Turning Point, Eastern Health Mentor: Prof Katherine Mills, University of Sydney & Prof Amanda Baker, University of Newcastle	Vic	A randomised controlled trial exploring the efficacy of a structured telehealth program for methamphetamine using individuals (Turning Point, Monash University)	\$85,000	
	Dec. 2020	Dr Elizabeth Knock Supervisor: Dr Jonathan Brett, St Vincents Hospital Sydney Mentor: Dr Gillinder Bedi, Orygen Youth Health	NSW	Psilocybin-facilitated treatment for methamphetamine dependence: A pilot study (Psi-MA). (St Vincents Hospital Sydney)	\$160,389.70
	Dr James Gooden Supervisor: Dr Shalini Arunogiri, Turning Point, Eastern Health Mentor: A/Prof Raimondo Bruno, University of Tasmania	Vic	Investigating the outcomes of providing neuropsychological assessment to individuals with alcohol or polysubstance use histories attending Alcohol and Other Drug treatment services. (Turning Point, Monash University)	\$140,500	
Total Seed Funding \$1,667,571.61					

Program	Round/ Year	Investigators	State	Research project and affiliated organisations	Amount/ Grant ID
		Mr Jason Ramp Supervisor & Mentor: Dr Rachel Reilly, South Australian Health and Medical Research Institute	SA	Using participatory filmmaking to describe the implementation of an innovative web-app for Aboriginal and Torres Strait Islander People who use methamphetamine on Bargarla and Nauo Country	\$118,400 Total Scholarship Funding \$774,289.70

2.1. Grant Outputs

As outlined in the application process, all awarded grantees were required to present their projects at the NCCRED annual research symposium and keep NCCRED up to date on all of their research outputs. Each grant has a project page on the NCCRED website which will continue to be updated as publications, further funding and presentations are published. All grantees were required to submit a final report and financial acquittal at the end of their project. This report was sent to the NCCRED team and shared with the WG chair, author Robert Ali. A full list of the NCCRED Clinical Research Funding Program outputs is outlined in **Appendix 8**.

2.2. Program Issues and Delays

Many of the awarded grants experienced significant interruptions due to physical distancing restrictions and other scale-back of research services to free-up clinical capacity, implemented in response to the SARS-CoV-2 pandemic. These restrictions meant that a large portion of projects could not recruit or meet their research milestones. These projects were granted delays of up to 6-12 months by NCCRED.

Four projects (NCSF08, NCR2SF16, NCR3SF11, NCR4SF19) were unable to complete their projects due to feasibility and/or governance issues and had to return all or a portion of their funds to NCCRED. These funds were reallocated to complete other NCCRED deliverables as contracted by the Department of Health and Aged Care.

Despite the issues and delays experienced, the NCCRED Clinical Research Funding Program has, and will continue to have considerable clinical, therapeutic and policy impacts.

3. Impact of the NCCRED Clinical Research Funding Program

The NCCRED Clinical Research Program continues to realise impacts as results are translated into clinical practice, manuscripts are still either under development or awaiting publication and further research projects are being established on the basis of the grants. To date, projects funded through the Clinical Research Funding program have produced 36 published manuscripts, and 74 presentations at both national and international conferences and significantly, research teams have leveraged small amount of funding provided by

NCCRED to seed larger projects over. These research outputs have and will contribute to the building research capacity as well as by presenting new findings, methodologies, and insights while simultaneously providing a foundation for further research and exploration into these areas.

A key example of this is the seed funding grant 'The Emerging Drug Network of Australia (EDNA)', which, under the lead of Dr Jessamine Soderstrom, was able to leverage their seed funding grant monies to secure:

- National Health and Medical Research Foundation Ideas Grant (\$3,722,730.80) - the largest NHMRC funding in Australia
- East Metropolitan Health Service Mental Health Research Fund (\$198,382)
- Mental Health Commission and Department of Health WA (\$292,010)

The awarded projects have similarly impacted both clinical practice and policy development. They have not only informed clinical practice by providing evidence-based guidelines, interventions, and treatments but also policymakers have used research to inform the development and implementation of new policies. The 'South Australian Drug Early Warning System - Emergency Department Admission Blood Psychoactive Testing' project, a capacity building grant awarded to Dr Peter Stockham, was one of the largest and most comprehensive studies of its kind conducted in Australia and lead to significant changes in policy and clinical practice:

- The high prevalence of GHB observed in the study has enabled clinicians to, more confidently, delay intubation of CNS depressed patients.
- The marked increase in GHB intoxications forewarned clinical toxicologists of an impending increase in dependency and potentially life-threatening GHB withdrawal cases. This enabled strategies to be put in place to deal with this difficult condition.
- The high prevalence of GHB led to alteration of standard screening processes to include GHB analysis in more Coronial cases and all driving and police criminal cases.
- Benzodiazepine results provided analytically confirmed data to support seizure data and anecdotal data regarding the increasing use and abuse of these substances in the community.
- Provided data to paramedic staff at SA Ambulance regarding drugs being detected and rates of administration of treatment medication in study subjects.
- This study resulted in an application to German authorities to request restriction on export of a GHB precursor chemical to Australia.
- Information dissemination to other Forensic Toxicology laboratories has led to changes in practices in several interstate Forensic laboratories in protocols for GHB

and expansion of screening to cover specific NPS.

The funding program has also contributed to public awareness and education by funding projects that disseminate information about the risks associated with methamphetamine and emerging drug use, as well as effective prevention and intervention strategies. Dr Rob Page's seed funding grant 'Co-designing a fixed-site drug checking service at Sydney's Medically Supervised Injecting Centre (MSIC),' funded in 2021, led to the first drug checking pilot program which opened 8th April 2024. The program will analyse the interest, feasibility and efficacy of testing, and whether drug checking is able to positively influence people's behaviour around drug use. Furthermore, the aim of the program is to increase opportunities for the public to increase their education and encouraged meaningful engagement around harm reduction.

The funding program has demonstrated its effectiveness in reaching rural and remote communities, who often have limited access to services. One example of how the funding program has positively impacted those communities is through Mr Jason Ramps scholarship project 'Using participatory filmmaking to describe the implementation of an innovative web-app for Aboriginal and Torres Strait Islander People who use methamphetamine on Barngarla and Nauo Country'. Mr Ramp, a West Coast Youth and community support worker, interviewed both lived experience workers and clients talking about their experiences with methamphetamines and using the web-app. It was found that the web-app was a useful tool for a clinician to gauge where the client is at with their treatment, what further support they required and proved useful to clients in rural or remote locations where there is limited access to support networks or clinical delivery services. Therefore, by supporting this particular program, which was a value-add to a previously awarded seed funding grant, 'An acceptability and feasibility study of the We Can Do This online therapeutic program in primary care and residential rehabilitation settings' awarded to James Ward, by showing that web-apps can be useful for this particular group of clients, this could have significant impact on delivery of clinical services to rural and remote areas both within and outside of the AOD sector.

Researchers, clinicians, educators, and other professionals in the drug and alcohol sector rely on new research outputs to stay updated on emerging issues and trends in the field. Access to current research is essential for professional development, continuing education, and maintaining high standards of practice. The Clinical Research Funding Program was able to improve clinical responses and support professional development is with the seed funding project lead by Dr Antonio Verdejo-Carcia, 'Goal Management Training for People with Methamphetamine Use Disorder in Residential Treatment.' This project had three clinical sites enrolled in this project and after the completion of the trial, the research team

conducted a one-day at each of the sites where they trained clinical providers to administer Goal Management Training+ as manualized and applied in the research project.

Overall, the NCCRED Clinical Research Funding Program has made a significant impact on the drug and alcohol sector by building research capacity, informing evidence-based practice and policy, raising public awareness, and fostering collaboration among stakeholders.

Appendix: NCCRED Clinical Research Funding Program Report

Appendix 1: NCCRED Clinical Research Scholars, Project Titles, Mentors, and Biographies

Dr Andrew Kozman - Awarded 2019

Emergency Consultant, Fiona Stanley Hospital

Project: The Early Detection Network of Australia (EDNA) Project

Supervisor: Dr Jessamine Soderstrom, Royal Perth Hospital

Mentor: Dr Simon Lenton, Director, National Drug Research Institute

Dr Andrew Kozman is an emergency consultant based in Perth, WA. His main interest in emergency care lies in the recognition and management of toxicological presentations. His fellowship with NCCRED was part of the EDNA project and was a step toward building a national network to unify the emergency response and knowledge base when it comes to responding to emerging drugs of concern.

Dr Edward Mullen - Awarded 2019

Consultant Psychiatrist, Orygen Youth Health

Project: The Methamphetamine use in young people: Sub-anaesthetic Ketamine Open-label Trial (MASKOT) protocol

Supervisor: Dr Gillinder Bedi, Senior Research Fellow, Orygen Youth Health

Mentor: Dr Bronwyn Milne, Staff Specialist, CICADA Adolescent Drug and Alcohol Service, Department of Adolescent Medicine, Sydney Children's Hospital Network

Dr Eddie Mullen is a consultant psychiatrist working with young people aged 15-25 at Orygen Specialist Services, an Early Intervention program. He is interested in researching the link between substance use and mental health disorders, new treatments for young people and improving knowledge of harms associated with substance use.

Dr Adam Rubenis - Awarded 2019

Clinical Psychologist, Turning Point, Eastern Health

Project: A randomised controlled trial exploring the efficacy of a structured telehealth program for methamphetamine using individuals.

Supervisor: Dr Shalini Arunogiri, Turning Point, Eastern Health

Mentors: Prof Katherine Mills, The Matilda Centre for Research in Mental Health and

Substance Use & Prof Amanda Baker, University of Newcastle

Adam completed a Doctorate in Clinical Psychology and his research focused on links between cognitive functioning and treatment outcomes in methamphetamine-dependent individuals. Since graduating, he's worked at Turning Point in Melbourne, completing my clinical psychology registrar program and working across telehealth and face-to-face programs, supporting people with substance use/gambling concerns and mental health needs.

Dr Elizabeth Knock - Awarded 2020

Clinical Psychologist, St Vincent's Hospital Sydney

Project: Psilocybin-facilitated treatment for methamphetamine dependence: A pilot study (Psi-MA)

Supervisor: Dr Jonathan Brett, St Vincent's Hospital Sydney

Mentor: Dr Gillinder Bedi, Senior Research Fellow, Orygen Youth Health

Dr Elizabeth Knock is a clinical psychologist leading an allied health team of counsellors at St Vincent's Hospital Sydney, Alcohol and Drug Service Outpatients and Stimulant Treatment Program. She provides assessment and psychological interventions for individuals with problematic methamphetamine use and is responsible for ongoing service development to ensure that treatment is delivered to a high standard.

Dr James Gooden - Awarded 2020

Senior neuropsychologist, Turning Point

Project: Investigating the outcomes of providing neuropsychological assessment to individuals with alcohol or polysubstance use histories attending Alcohol and Other Drug treatment services.

Supervisor: Dr Shalini Arunogiri, Turning Point, Eastern Health

Mentor: A/Prof Raimondo Bruno, University of Tasmania

Dr James Gooden is a senior clinical neuropsychologist, at the Turning Point Addiction Neuropsychology Service in Richmond, Victoria. He has extensive experience working with individuals experiencing a high degree of clinical complexity including comorbid traumatic or acquired brain injury, alcohol and polysubstance use, mental health difficulty, complex trauma, forensic and psychosocial issues. He has a strong interest in the AOD, brain injury and adult neuropsychology fields.

Mr Jason Ramp - Awarded 2021

Shelter worker, West Coast Youth and Community Support

Project: Using participatory filmmaking to describe the implementation of an innovative web-app for Aboriginal and Torres Strait Islander People who use methamphetamine on Barngarla and Nauo Country

Supervisor & Mentor: Dr Rachel Reilly, South Australian Health and Medical Research Institute

Mr Jason Ramp works in the Community Connections- Social and Emotional Well-being team, Homelessness Service and Youth Crisis Accommodation facility with West Coast Youth and Community Support dealing with clients who experience mental health and drug and alcohol issues as well as family and community members impacted by this misuse, through his role he provides:

- AOD support for clients who wish to reduce or quit, including relapse prevention, reduction, harm minimisation.
- Support with referral to therapeutic AOD services.
- AOD information and education and cultural connection programs to community, schools and staff.

Appendix 2: Seed Funding Grants Application Form



**National Centre for Clinical Research on
Emerging Drugs**

Seed funding grants

Round 4: February 2021

Closing date: April 2021

NCCRED

National Centre for Clinical Research on Emerging Drugs

Seed Funding Grant Application – Information and Guidelines

Background

The National Centre for Clinical Research on Emerging Drugs is a national entity that supports clinical treatment for methamphetamine and emerging drugs of concern across a range of priority populations and disorders of differing severity. The Centre is a consortium between St Vincent's Health Australia; The National Centre for Education and Training on Addiction (NCETA, Flinders University); The National Drug Research Institute (NDRI, Curtin University); and The National Drug and Alcohol Research Centre (NDARC, The University of New South Wales).

The broad aims of the Centre are to:

- Develop, implement and disseminate innovative and effective evidence-based treatment interventions that can be applied to:
 - the use of methamphetamines
 - new and emerging substances
- Develop and implement a system that allows for a rapid flexible and collaborative response to emerging substances that are having prevalent, persistent and harmful health and community impacts
- Leverage evidence-based intervention methodologies to develop and equip the health and medical research workforce

Focus of the funding round

The current funding round aims is to provide financial support in the form of:

1. Seed-funding grants to establish investigator-initiated clinical research; or
2. A value-add to research projects that are currently underway.

The current funding round will specifically target proposals that:

- Enable clinical research to be embedded within ongoing clinical practice across multiple settings
- Develop evidence-based treatments and treatment models in response to prevalent, persistent and harmful emerging substances
- Monitor and evaluate innovative new treatment interventions

Research priorities for this funding round were established through the NCCRED research priority setting study (<https://nccred.org.au/generate/clinical-research-projects/>). The established priorities are:

For methamphetamine clinical research:

1. Overcoming barriers to intervention uptake (e.g. at time of crisis in emergency departments or primary health care)
2. Pilot pharmacotherapy trials for adults seeking treatment
3. Effective communication strategies to consumers on available treatments and the evidence-based options.

For emerging drugs of concern clinical research:

1. Fixed-site community located drug checking / pill testing (connected to an early warning system)
2. Feasibility of social media and other creative opportunities to alert consumers and reduce harm
3. GHB dependence and withdrawal management (*ranked equally for third highest scoring priority*)
4. Early warning system/shared information system – pooling and sharing of information impact on reducing harm (*ranked equally for third highest scoring priority*)

Importantly, applicants are encouraged to apply for funding that will enable a study to answer relevant clinical questions, build research capacity, and produce translational research results (see criteria below for more details). The grant should produce a fundable project that has the capacity to attract further funding (as required).

Applications are open to clinicians or clinical researchers (or teams of clinicians and researchers) from any background who are working in the Alcohol and Other Drugs and other healthcare sectors. Applications will ideally create networks or build partnerships (e.g. academic, clinical, consumer) to maximize reach and opportunities.

Research project

There are two available options for research proposals in this funding round:

Funding Available

\$5,000-\$100,000 per project

Seed Funding

Funding will provide financial support in the form of seed-funding grants to establish investigator-initiated clinical research related to the research priorities as outlined above

Value-add

Funding will provide financial support as a value-add to a current clinical research project and/or clinical trial related to the research priorities as outlined above

Funding requirements

In the current funding round (February 2021), non-renewable grants of \$5,000-\$100,000 will be awarded, with \$200,000 of total available funding. Grant funds must be used for achieving the objectives outlined by the applicants in the funding application.

Funding for the grants is sourced from the Commonwealth Department of Health, as an initiative of the National Ice Action Strategy (2015). Funds will be administered by UNSW.

Partnerships are encouraged and supported, and therefore the lead applicant is not required to be a clinician (i.e. the lead applicant may be an academic). However, at least one co-applicant must be a clinician (in a substantive role and in meaningful partnership). Eligible clinicians are from any background who are working in the AOD or other healthcare sectors.

If the application is related to a clinical trial, the trial must be listed as active (recruiting or not-yet recruiting); an investigator-initiated, non-commercial trial, which has relevant Human Research Ethics Committee (HREC) approvals, and is up-to-date on either the Australia New Zealand Clinical Trials Registry (ANZCTR) or clinicaltrials.gov trial registry (or willing to register on either or both of these sites).

Research projects that have previously funded by NCCRED can apply as value-add grants. Information about the previous support must be included in the application, as well as how the new funding will impact the outcomes of the study.

Successful applicants will be required to sign a funding agreement and must agree to regular reporting on the funded project. The named primary / chief investigator on the application will receive written notification of the application's success in the funding round. The Terms and Conditions of the Funding Agreement are annexed to these Guidelines. Successful applicants, by virtue of having submitted an application, acknowledge and agree that their application will not be deemed to have been accepted and no agreement will arise between UNSW (as contracting entity for the Centre) and the Applicant in respect of the application until a formal written Agreement (in accordance with the annexed Terms and Conditions) is executed by the successful applicant and UNSW.

Evaluation criteria of Applications

Research proposals should be substantive, and where possible, cross-disciplinary initiatives that enable research collaborations with early career researchers or research-inexperienced sites.

Applications for round 4 seed funding grants will be reviewed by the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group. The review process is independent of NCCRED staff and the NCCRED Board. Following the Working Group's recommendations, funding will be awarded by the NCCRED Board. Specific assessment criteria for applications are (1 through 4):

- 1) The proposed project:
 - the project is novel and innovative – seeks to answer a contemporary and clinically relevant question
 - has the potential to attract research funding from other sources at the conclusion of the seed funding period (as required)
 - the project is related to methamphetamine or emerging drug of concern, preference will be given to projects that address priorities outlined on page 3

- For a value-add applications, the below criteria will also apply:
 - the project development is underway and on-track / meeting anticipated targets
 - current recruitment status is outlined in the application
 - the project has appropriate HREC and (if necessary) institutional governance approvals in place
 - if the project is a clinical trial is registered (or willingness to register) on the ANZCTR and/or clinicaltrials.gov trial registries
 - if the project is a clinical trial, it is an investigator-initiated non-commercial clinical trial
- 2) Clear research proposal with logical aims
- research question is clearly stated
 - if there is an intervention, this is explicitly stated
 - participant eligibility (and controls if applicable) defined
 - methods to measure outcomes or test hypothesis are appropriate
 - has merit, value and impact
 - defined use of funding to build capacity and what the anticipated achievements are – for value-add applications
- 3) Project budget
- a study budget is included
 - realistic funding has been requested (including for dissemination of results)
 - budget and deadlines are achievable
 - measurable milestones
- 4) Research team
- builds research capacity, for example: establishes a project in a research-inexperienced site; and/or involves a junior/inexperienced researcher, early or mid-career researcher and/or multi-disciplinary researcher in substantial roles; enables clinician researchers; develops meaningful partnerships
 - develops research foundations in an organisation or site
 - involves consumer input (e.g. in study design, partnership, etc.)
 - creates networks and builds partnerships (e.g. academic, clinical, consumer)

Dissemination Plan

Applications should include a results dissemination plan. It is anticipated that all successful applicants will present their research findings (interim or final) at the NCCRED annual research symposium, which will be held as a one-day symposium following the annual APSAD conference. The budget should include funding for attendance at the NCCRED symposium (e.g. travel and accommodation), as well as peer-review publication costs. The total funding requested for data dissemination should not exceed \$5,000.

Submission of Application

Applicants must complete all sections of the submission template following these guidelines. Applications must provide all requested information relating to their funding option and adhere to the word / page limits indicated.

If you would like mentoring or support in developing your proposal, or suggestions for partnerships, please contact the [NCCRED staff](#).

To ensure a clear and efficient review process, applicants are encouraged to use Arial / Calibri font, 11-point or above. Please note: the application form has been developed in Microsoft Office 2013 (for Windows), and fidelity of the formatting cannot be guaranteed in other versions – please contact the NCCRED team if you have any concerns. Only information in the following application will be used in selecting projects for funding. When saving the application form please use the naming convention:

NCR4SF_Full Name

Grant program timelines / deadlines:

Applications open	18 Feb 21
Applications close	14 Apr 21
Applications reviewed by the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group	11 May 21
NCCRED Board awards funding	17 May 21
Applicants are notified of results	18 May 21
Final study report due to NCCRED	10 Jun 22

Submit completed applications by email to jemma.hallen@unsw.edu.au by no later than 2359hrs (11:59 pm) on 14 Apr 21.

To discuss the application, or for further information, please contact:

Krista Siefried

Clinical Research Lead

National Centre for Clinical Research on Emerging Drugs

Krista.siefried@svha.org.au

**National Centre for Clinical Research
on Emerging Drugs
Seed Funding Grant Program Application Form**

1. Overview

Project Overview	
Seed Funding <input type="checkbox"/>	Value-add <input type="checkbox"/>
Project Title	
Project Summary / Brief Description <i>(max 350 words)</i> <i>Summarise research questions and proposed methods and outline the potential benefits, including how this project will be translated into practice</i>	
Project Lead – Chief Investigator	
Name and Title	
Employing Organisation (i.e. to be named sponsor on funding agreement)	
Employing Organisation ABN	
Other affiliations	
Phone	
Email	
Postal address	

2. Project and Proposal

Project Description	
<p>Background (max 600 words)</p> <p><i>Describe the background and the research question, the problem addressed by the project and this proposal, and why this research is a priority.</i></p> <p><i>Describe any preliminary findings.</i></p>	

<p>Project HREC approval details or plans</p> <p><i>List all HRECs to which the project will be submitted</i></p>	
<p>Target recruitment, recruitment plan</p>	
<p>Research project aims and objectives (max 300 words)</p> <p><i>Describe the aims of this research, including a clearly stated research question</i></p> <p><i>For value-add this should be the aims of the current project</i></p>	
<p>Value add project goals (max 300 words)</p> <p><i>How will the funding add value to your project and how will the funding allow you to reach those goals</i></p>	

Study Design and
Research Plan
(max 1,000 words)

Provide a detailed description of the research design, including (where appropriate) the setting, the participant selection criteria / eligibility, comparison / reference / control group(s), the primary and secondary outcome(s), outcome measures, study intervention and follow-up periods as appropriate, data sources or qualitative tools/instruments

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<p>Study sites</p> <p><i>(Full name, location including State, of all sites where the project will be conducted)</i></p>	
<p>Project Duration</p>	
<p>Statistical Analysis <i>(max 350 words)</i></p> <p><i>Include power / sample size calculation(s), statistical analysis plan, including data linkage plan if required</i></p>	

<p>Outcomes and Significance (max 350 words)</p> <p><i>Outline what new evidence the research is anticipated to generate, describe how this is likely to impact patient care or health policy. Indicate how the research will be translational.</i></p>	
<p>Originality / value-add (max 350 words)</p>	

3. Project Budget

Budget Details	
Total funding requested (\$AUD) (excluding GST)	
Current funding source(s) for this project	
Detailed Budget (applicants may use the field below, or may insert new text / table as preferred)	

4. Research Capacity Building

Research personnel	
<p>How does this proposal build research capacity?</p> <p><i>(For example, indicate how early or mid-career researchers will be engaged in the research project; how multi-disciplinary researchers will be engaged in the research project; how the proposed research project will establish clinical research capacity in new or less-experienced research sites; how this proposal will develop or build on meaningful partnerships [e.g. with NGOs, consumers, academics, clinicians, etc.]</i></p>	

5. Research Personnel (add additional boxes as necessary)

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
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Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

6. Signatures and Verification

Applicant: I confirm that the information included in this application is true and correct, and that if the application is successful the funding will be used for the stated purposes.	
Full name of Principal / Chief Investigator	
Signature	
Date	
Department Head: I confirm that the department is aware of the proposal and the applicants intended project, and supports the applicant in their application for funding.	
Full name of Departmental Head	
Signature	
Date	
Is the Principal / Chief Investigator a student? <i>If yes please complete below</i>	
Supervisor: <i>Only required if the applicant is a higher degree by research (HDR) candidate/student.</i> I confirm that I am in support of this application and that the applicant has capacity to undertake the proposed research in addition to their HDR research requirements.	
Full name of HDR Supervisor(s)	
Signature	
Date	

Appendix 3: Capacity Building Grants Application Form



**National Centre for Clinical Research on
Emerging Drugs**

Research capacity building grants

Round 1: September 2018

**Current non-commercial methamphetamine treatment
clinical trials**

Closing date: 31 October 2018

NCCRED

National Centre for Clinical Research on Emerging Drugs (NCCRED)

Capacity Building Funding Application – Information and Guidelines

Background

The Centre is a national entity that supports clinical treatment for methamphetamine and emerging drugs of concern across a range of priority populations and severity of disorder. The Centre was formed as a consortium between St Vincent's Health Australia; The National Centre for Education and Training on Addiction (NCETA, Flinders University); The National Drug Research Institute (NDRI, Curtin University); and The National Drug and Alcohol Research Centre (NDARC, The University of New South Wales).

The broad aims of the Centre are:

- Develop, implement and disseminate innovative and effective evidence-based treatment interventions that can be applied to the use of methamphetamines in the first instance and then to new and emerging substances
- Develop and implement a system that allows for a rapid flexible and collaborative response to emerging substances that are having prevalent, persistent and harmful health and community impacts
- Leverage evidence-based intervention methodologies to develop and equip the health and medical research workforce

Focus of the funding round

The Centre will support investigator-initiated clinical trials with a focus on scalable and cost-effective treatment options. Key to the aims of the Centre is facilitating collaborative research, and building research capacity in the AOD sector.

The capacity building funding round is to provide financial support as a value-add to currently established investigator-initiated clinical trials. Applicants are encouraged to apply for funding that will enable the study to answer additional study questions, build research capacity, and produce translational research results.

Funding

Clinical trials that address methamphetamine dependence / use disorder, are listed as active (recruiting or not-yet recruiting), are investigator-initiated non-commercial trials, have relevant Human Research Ethics Committee (HREC) approvals, and are up-to-date on either the Australia New Zealand Clinical Trials Registry (ANZCTR) or clinicaltrials.gov trial registry (or willing to register on either or both of these sites) will be eligible to submit an application for research capacity building funding.

NCCRED

In the funding round (September 2018), non-renewable grants of \$5,000 up to \$100,000 are available (totaling \$400,000 of funding). Funding for the grants is sourced from the Commonwealth Department of Health, as an initiative of the National ICE taskforce. Funds will be administered by UNSW. Grant funds must be used for the purpose of achieving the objectives outlined by the applicants in the funding application.

Successful applicants will be required to sign a funding agreement, and must agree to regular reporting on the funded capacity building project. The named primary / chief investigator on the application will receive written notification of the application's success in the funding round. The Terms and Conditions of the Funding Agreement are annexed to these Guidelines. Successful applicants, by virtue of having submitted an application, acknowledge and agree that their application will not be deemed to have been accepted and no agreement will arise between UNSW (as contracting entity for the Centre) and the Applicant in respect of the application until a formal written Agreement (in accordance with the annexed Terms and Conditions) is executed by the successful applicant and UNSW.

Evaluation of Applications

Research proposals should be substantive, and where possible cross-disciplinary initiatives that enable research collaborations with early career researchers or research-inexperienced sites. Applications for the 2018 capacity building funding round will be reviewed by The Clinical Research Network Methamphetamine and Emerging Drugs Working Group (WG).

Specific assessment criteria for applications are (1 through 4):

1. The current project
 - the current project is novel and innovative – seeks to answer a contemporary and clinically relevant question
 - the current project development is underway and on-track / meeting anticipated targets
 - current recruitment status is outlined in the application
 - the current project has appropriate HREC and (if necessary) institutional governance approvals in place
 - is registered (or willingness to register) on the ANZCTR and/or clinicaltrials.gov trial registries
 - is an investigator-initiated non-commercial clinical trial

2. Clear capacity building proposal with logical aims
 - research question is clearly stated
 - if there is an intervention, this is explicitly stated
 - participant eligibility (and controls if applicable) defined
 - methods to measure outcomes or test hypothesis are appropriate
 - has merit, value and impact
 - defined use of funding to build capacity and what the anticipated achievements are

NCCRED

3. Project budget

- a study budget is included
- realistic funding has been requested
- budget and deadlines are achievable
- measurable milestones

4. Research team

- builds research capacity
- partners with a research-inexperienced site
- broad research engagement: involves a junior/inexperienced researcher(s) / early or mid-career researcher; multi-disciplinary researcher(s) (in substantial roles)
- develops research foundations in an organisation or site
- Involves consumer input (e.g. in study design, partnership, etc.)

Submission of Application

Applicants must complete all sections of the submission template following these guidelines. Applications must provide all requested information, and adhere to the word / page limits indicated.

To ensure a clear and efficient review process, applicants are encouraged to use Arial font, 11-point or above. Please note: the application form has been developed in Microsoft Office 2013 (for Windows), and fidelity of the formatting cannot be guaranteed in other versions – please contact the NCCRED team if you have any concerns. Only information in the following application will be used in selecting projects for funding. When saving the application form please use the naming convention:

NCCRED_research_capacity_project name

Capacity building funding timelines / deadlines:

Funding round announced and advertised	13 Sep 18
Completed applications submitted to the Centre	25 Oct 18
Applications sent to the NCRN WG for review	28 Oct 18
NCCRED board meeting to ratify NCRN WG decision	05 Dec 18
Applicants are notified of results	15 Dec 18

Completed applications should be submitted by email to: j.hallen@unsw.edu.au by no later than 2359 (11:59 pm) on **28 Oct 2018**.

To discuss the application, or for further information, please contact:

Krista Siefried,

Clinical Research Lead

National Centre for Clinical Research on Emerging Drugs

Krista.siefried@svha.org.au or +61 410 360 102

Mentorship for application development / completion is available. Please contact NCCRED.

NCCRED

National Centre for Clinical Research on Emerging Drugs (The Centre) Capacity Building Funding Application Form

1. Overview

Project Overview	
Project Title	
Project Summary / Brief Description <i>(max 350 words)</i> <i>Summarise research questions and proposed methods. Outline the potential benefits, including how this project will be translated into practice</i>	
Capacity building project: Brief Description <i>(max 350 words)</i>	
Project Lead – Chief Investigator	
Name and Title	
Employing Organisation (i.e. to be named sponsor on funding agreement)	
Employing Organisation ABN	
Other affiliations	
Phone	
Email	
Postal address	

2. Project and Proposal

Project Description	
<p>Background (max 600 words)</p> <p><i>Describe the background and the research question, the problem addressed by the project and this proposal, and why this research is a priority. Describe any preliminary findings.</i></p>	
<p>Current Project HREC approval details</p> <p><i>List all HREC names, approved sites, approval numbers, and expiry dates</i></p>	

<p>Current Project Aims (max 300 words)</p> <p><i>Describe the aims of this research, including a clearly stated research question</i></p>	
<p>Target recruitment, current recruitment status, recruitment plan</p>	
<p>Capacity building project goals (max 300 words)</p>	

Study Design and
Research Plan
(max 1,000 words)

Provide a detailed description of the research design, including the setting, the participant selection criteria / eligibility, comparison / reference / control group(s), the primary and secondary outcome(s), outcome measures, study intervention and follow-up periods as appropriate, data sources or qualitative tools/instruments

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<p>Study sites <i>(Full name, location including State, of all sites where the project will be conducted)</i></p>	
<p>Project Duration</p>	
<p>Statistical Analysis <i>(max 350 words)</i></p> <p><i>Include power / sample size calculation(s), statistical analysis plan, including data linkage plan if required</i></p>	

<p>Outcomes and Significance <i>(max 350 words)</i></p> <p><i>Outline what new evidence the research is anticipated to generate, describe how this is likely to impact patient care or health policy. Indicate how the research will be translational.</i></p>	
<p>Novelty / value-add <i>(max 350 words)</i></p>	

3. Project Budget

Budget Details	
Total funding requested (\$AUD) (excluding GST)	
Current funding source(s) for this project	
Detailed Budget (applicants may use the field below, or may insert new text / table as preferred)	

4. Research Capacity Building

Research personnel	
<p>Please indicate how early or mid-career researchers will be engaged in the capacity building project</p>	
<p>Please indicate how multi-disciplinary researchers will be engaged in the capacity building project</p>	

<p>Please indicate if and how the proposed capacity building project will establish clinical trial capacity in new or less-experienced research sites</p>	
---	--

5. Research Personnel (add additional boxes as necessary)

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
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Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

6. Signature and Verification

I confirm that the information included in this application is true and correct, and that if the application is successful the funding will be used for the stated purposes.

Full name of Principal / Chief Investigator	
Signature	
Date	

Appendix 4: Clinical Research Fellowship Application Form

The National Centre for Clinical Research
on Emerging Drugs

NCCRED Fellowship Program

Information and application process

May 2019



National Centre for Clinical
Research on Emerging Drugs

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In partnership with



ST VINCENT'S
HEALTH AUSTRALIA



NCETA



NDARC

National Drug &
Alcohol Research Centre



Australian Government
Department of Health

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1. Purpose of the Fellowship Program

NCCRED is establishing a multidisciplinary mentoring and training program, the NCCRED Clinical Research Fellowship. In the inaugural year, one to three Research Fellows will be selected from a competitive application process. Applications, and selection for interviews, will be overseen by the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group (WG). The program is aimed to engage clinicians in research and will fund clinicians for a defined period of time to undertake a research project.

The NCCRED Fellowship will be advertised on the NCCRED website, and a newsletter will be forwarded to all registered stakeholders, who will also be invited to forward information to any interested colleagues.

2. Introduction and Background of NCCRED

The National Centre for Clinical Research on Emerging Drugs (NCCRED) has been established as a national entity to support clinical treatment and build clinical research capacity within the Australian alcohol and other drugs services sector with an emphasis on responses to users of methamphetamine and emerging drugs of concern.

The Centre was formed as a consortium between St Vincent's Health Australia (SVHA); The National Centre for Education and Training on Addiction (NCETA, Flinders University); The National Drug Research Institute (NDRI, Curtin University); and The National Drug and Alcohol Research Centre (NDARC, The University of New South Wales).

NCCRED has a Board of Management that includes an independent chair, and nominees from the four consortium members: NDARC; NCETA; NDRI; SVHA; an alcohol and other drug non-governmental organisation peak body; the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network (see section 6.5.1); a consumer organisation; a State/Territory government local health service; and an indigenous organisation. A representative of the Australian Government Department of Health is also invited to attend meetings of The Board. The Board meets at least four times annually. An executive committee of The Board consists of the independent chair and the Consortium Partner Organisations.

NCCRED is funded by the Australian Commonwealth Department of Health as part of the Government's National Ice Action Strategy.

3. The Fellowship Program

The NCCRED Fellowship program has been developed in partnership with NCCRED staff, the WG and NCCRED's Board of Director with the aim to build capacity across the drug and alcohol sector.

3.1. Partnerships

The candidate will be partnered with a senior clinician-researcher at a participating clinical site (the "Mentor"). The partnering clinical site will receive \$5,000 of funding for the Research Fellow's placement. These partnerships will be sought out and established based on the candidate's location/preference i.e. if the candidate has an already established partnership and research site and/or may already have a defined project. The candidate may choose to undertake research at their place of employment, however locations and projects must be agreed to by The NCCRED Director and The NCCRED Chair. If the candidate does not have a defined research project or site, this may be conceptualised with the NCCRED team. Where possible the Research Fellow's experience will fold in with other NCCRED activities (e.g. NCCRED funded research).

NCCRED will contribute to the Research Fellow's salary to the equivalent of 0.5 full-time (FTE), whereby they replace half of the candidate's salary for the 1-year fellowship term. That is, the Fellowship represents a 0.5 FTE commitment for 12 months. The candidate will be required to negotiate / make arrangements with their primary employment institution / organisation to release them for the 0.5 FTE that they will be undertaking the fellowship. The candidate and mentor will negotiate how this is structured. In addition, research fellows will be provided with \$10,000 in funding support towards their research project (i.e. research resources). This is in addition to the \$5,000 of funding for the Research Fellow's placement received by the partnering clinical site.

3.2. Project

A research project will be identified in collaboration between the Research Fellow, the Mentor, the NCCRED Director and the Chair of the NCCRED Board. This is an iterative process that will be informed by the Research Fellow's experience, interest, and career aspirations. The mentor may suggest a project / location, or the candidate may provide suggestions. That is, the candidate can begin the Fellowship with a research project in mind, or they can develop this in collaboration with the Mentor. However, locations and projects must be agreed to by The NCCRED Director and The NCCRED Chair. Other NCCRED programs (e.g. NCCRED-lead Clinical Trials or funded projects) that are

implemented nationally, may also be considered for hosting or incorporating fellows; particularly given geographic limitations or preferences. Where possible, folding fellowships into other NCCRED programs will be encouraged or facilitated.

The Mentor, and the NCCRED staff, will provide support and guidance to the Research Fellow throughout their 1-year fellowship. The NCCRED Clinical Research Lead will have regular meetings with the Research Fellow (by telephone or in person) to track progress and identify any issues pre-emptively.

4. Fellows

Fellows can be of any multidisciplinary background (e.g. Nursing, Allied Health, Medical), and fellowships will be open to practising clinicians in the Alcohol and Other Drugs sector. Candidates should meet the below selection criteria

4.1. Selection Criteria

- 1) Current AHPRA registration or qualified as a multi-disciplinary clinician.
- 2) Clinician providing services in the area of Alcohol and Other Drugs (can include inpatient, outpatient or non-governmental services, etc.)
- 3) Should not currently be completing a fellowship program with another organisation.

5. Outcomes

The outcomes of the fellowship for the Research Fellow after their 1-year fellowship term may include:

- Writing a literature review on the chosen topic / project focus
- Development of a research proposal
- Conducting clinical research (as defined in the chosen and agreed-upon project)
- Drafted a first-author manuscript based on the project's results
- Attendance at the APSAD or equivalent conference
- Participated in the active learning network / journal club activities at the clinical site
- Presented at the NCCRED National Symposium

It is anticipated that the NCCRED Fellowship program will provide Fellows with the practical skills required for undertaking clinical research (from concept to publication). This will translate into the Fellow returning to their home organisation as a more confident consumer of research and ready to operationally facilitate their own research or participate as a site for other clinical research studies.

6. Application

Interested candidates will submit an electronic application to a UNSW hosted email address.

6.1. Application Details

The application will consist of:

- The applicant's curriculum vitae (CV)
- Response to the selection criteria
- Brief Bio which should include
 - Your clinical role and experience (in brief)
 - What do you seek to gain from the NCCRED Clinical Research Fellowship?
This can include research and career objectives (max 400 words)
 - Do you have any areas of research or clinical interest that you would like to focus on in the NCCRED Fellowship? (max 400 words)
 - Preference for location of Fellowship (City and State)
 - Preference for buy-back period (i.e. 6 months FTE, PTE equivalent over xx months, preferred days of the week, etc.)
 - Do you have any history doing any research clinical or other? It is not mandatory for applicants to have an extensive research background.
- 2 letters of reference
 - One letter should provide a reference for the applicant's clinical experience and expertise
 - One letter should provide a character reference
- 1 letter of support
 - This should be from the applicant's direct reporting supervisor/manager, and should indicate that the unit, service and organisation are supportive of the applicant receiving a Fellowship, and an acknowledgement that this will require the applicant be released from clinical duties for the duration of the fellowship (negotiable for FTE or PTE 6-12 months).

6.2. Application Process

Following an interview process (a sub-committee of the WG) and selection, the successful candidate/s will meet with the Director of NCCRED and the Chair of the NCCRED Board to determine the scope of the fellowship, including the project and location.

The candidate/s will undergo a 1-week FTE induction program. The induction content will be delivered by NCCRED staff, and academic and clinical staff at the partnering consortium organisations. The induction curriculum will include:

- ICH-GCP
- The Australian Research setting
- HREC applications and oversight
- Public institution governance application and oversight
- Research Methodology
- Basic statistics to read and understand research
- EndNote referencing software
- Research databases and library tools

7. Application Timeline for the 2019-2020 NCCRED Clinical Research Fellowship

Key dates	Process / step
15 May 2019	Applications open
30 June 2019	Applications close
01 July 2019	NCCRED Director review of applications
02 July 2019	WG review of applications
03 July – 10 July 2019	Interview period (Methamphetamine and Emerging Drugs Clinical Research Network Working Group sub-committee)
11 July 2019	NCCRED Board of Directors meeting – to review Working Group sub-committee recommendations for appointment
15 July 2019	Acceptance notification
25 July 2019	Deadline for acceptance
01 Feb 2020 (rolling – not fixed)	Fellowship begins

8. Contact

Applicants who would like to discuss the NCCRED Fellowships further, or to submit an application, should contact:

Quoc Nguyen
 Project Officer
 NCCRED
 Email: info@nccred.org.au
 Phone: 02 9385 0151

Appendix 5: Clinical Research Scholarship Application Form

The National Centre for Clinical Research
on Emerging Drugs

**NCCRED Clinical Research Scholarship
Program**

Information and application process

August 2020

NCCRED

National Centre for Clinical
Research on Emerging Drugs

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In partnership with



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1. Executive Summary

To build on the success of the 2019 Fellowship program, NCCRED is establishing a multidisciplinary scholarship program. The NCCRED Clinical Research Scholarship program intends to provide a Scholar with mentoring to pursue a research project through salary buy-back and research project funds. NCCRED are offering two concurrent scholarship rounds, the first round is open to clinicians working within the AOD sector, preferred candidates for this competitive scholarship round will be practising alcohol and other drugs (AOD) nurses and allied health clinicians, though applications are open to all. The second is an Aboriginal and Torres Strait Islander' Scholarship, which is only open to Aboriginal or Torres Strait Islander peoples Applicants. Aboriginal and Torres Strait Islander peoples are encouraged to apply for both rounds. To apply, applicants will need to meet a selection criteria and submit National Centre for Clinical Research on Emerging Drugs Clinical Research Scholarship Form which will include a project outline and budget at the time of application. Scholars will be selected through a competitive application process which will be overseen by the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group (WG). In addition to the clinical research project funding, the scholarship program aims to engage clinicians in research through funding clinicians at 0.5FTE for 12-months (or equivalent) to undertake clinical research.

2. Introduction and Background of NCCRED

The National Centre for Clinical Research on Emerging Drugs (NCCRED) was established as a national entity to support clinical treatment and build clinical research capacity within the Australian AOD services sector with an emphasis on responses to users of methamphetamine and emerging drugs of concern.

The Centre is funded to a consortium: St Vincent's Health Australia (SVHA); The National Centre for Education and Training on Addiction (NCETA, Flinders University); The National Drug Research Institute (NDRI, Curtin University); and The National Drug and Alcohol Research Centre (NDARC, The University of New South Wales).

NCCRED has a Board led by an independent chair, and nominees from the four consortium members: NDARC; NCETA; NDRI; SVHA; and external members who have experience of:

- Australian alcohol and other drugs non-government organisation clinical service delivery
- Australian alcohol and other drugs clinical research network
- Australian alcohol and other drug consumer organisation and/or person with relevant lived experience
- Australian public sector alcohol and other drug clinical service delivery
- Aboriginal and/or Torres Strait Islander alcohol and other drug clinician and/or researcher

A representative of the Australian Government Department of Health is invited to attend meetings of the Board. The Board meets at least four times annually.

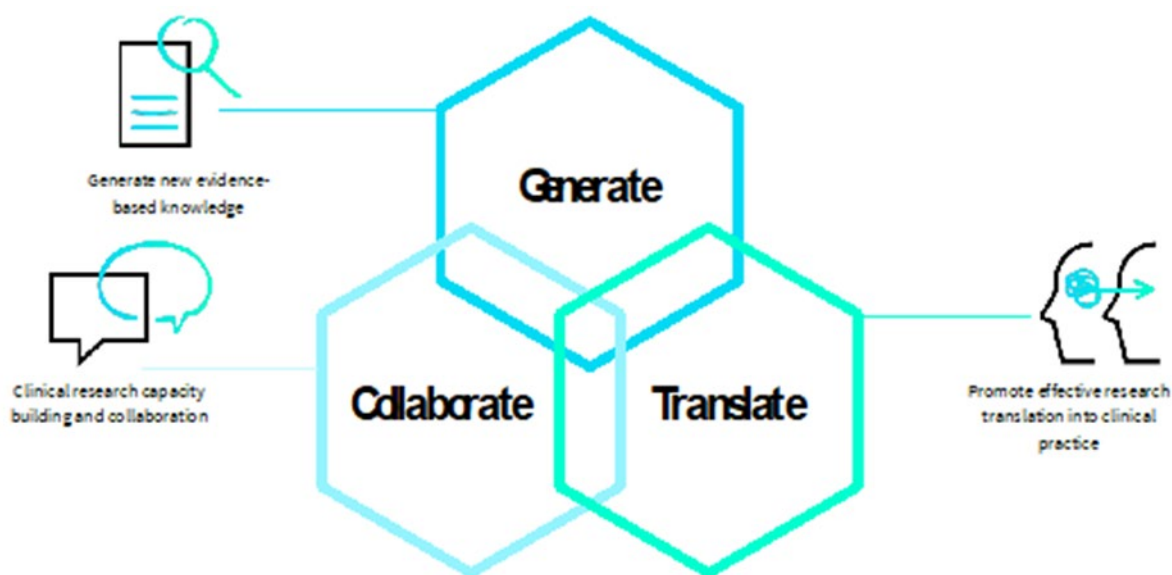
NCCRED is funded by the Australian Commonwealth Department of Health as part of the Government's National Ice Action Strategy.

NCCRED aims to collaborate to build the capacity and scope for new clinical research into emerging drugs, generate new evidence, and rapidly translate these findings into best clinical practice. NCCRED facilitates and enhances a national network of best clinical research and practice, responsive to the complex health challenges associated with changing patterns of substance use and harm.

To achieve this, NCCRED implements three strategic actions (**Figure 1**):

- **Collaborate**
 - Engage with key stakeholders to build adaptive clinical networks that allow for a rapid, flexible and collaborative response to emerging substances that have prevalent, persistent and harmful health and community impacts
- **Generate**
 - Through collaborative clinical research, seed funding, scholarships and mentorships, to develop effective interventions directed towards identified research priorities
- **Translate**
 - By means of strong clinical networks, implement and disseminate these evidence-based interventions / methodologies to develop and equip the health and medical research workforce to address prevalent, persistent and harmful health and community impacts of emerging drugs

Figure 1 – NCCRED Strategic actions



3. The NCCRED Clinical Research Scholarship Program

The NCCRED Clinical Research Scholarship program has been developed in partnership with NCCRED staff, the WG, the NCCRED Aboriginal and Torres Strait Islander Working Group and NCCRED's Board of Management with the aim to build capacity across the drug and alcohol sector.

The scholarship program has two main goals:

1. Enhance the research capacity and networks of clinicians in the AOD sector
2. Support translatable clinical research driven by clinicians

In order to achieve these goals, the scholarship has two distinct and complementary components: (1) Clinical Research Project (see 3.1); and (2) Salary buy-back (see 3.2). (Figure 2)

3.1. Clinical Research Project

Applicants will apply with a clinical research proposal, detailing their scholarship project - which will receive non-renewable funding of \$5,000–\$100,000. The NCCRED Scholarship program is seeking proposals for projects that:

- Enable clinical research to be embedded within ongoing clinical practice across multiple settings
- Develop evidence-based treatments and treatment models in response to prevalent, persistent and harmful emerging substances
- Monitor and evaluate innovative new treatment interventions

Projects must include engagement with people with lived experience and applications will ideally create networks or build partnerships (e.g. academic, clinical, consumer) to maximize reach and opportunities.

Research priorities for this funding round were developed following the NCCRED research priority setting study (nccred.org.au/generate/clinical-research-projects).

These are:

For methamphetamine clinical research:

1. Overcoming barriers to intervention uptake (e.g. at time of crisis in emergency departments or primary health care)
2. Pilot pharmacotherapy trials for adults seeking treatment
3. Effective communication strategies to consumers on available treatments and the evidence-based options.

For emerging drugs of concern clinical research:

1. Fixed-site community located drug checking / pill testing (connected to an early warning system)
2. Feasibility of social media and other creative opportunities to alert consumers and reduce harm
3. GHB withdrawal management (ranked equally for third highest scoring priority)
4. Early warning system/shared information system – pooling and sharing of information impact on reducing harm (ranked equally for third highest scoring priority)

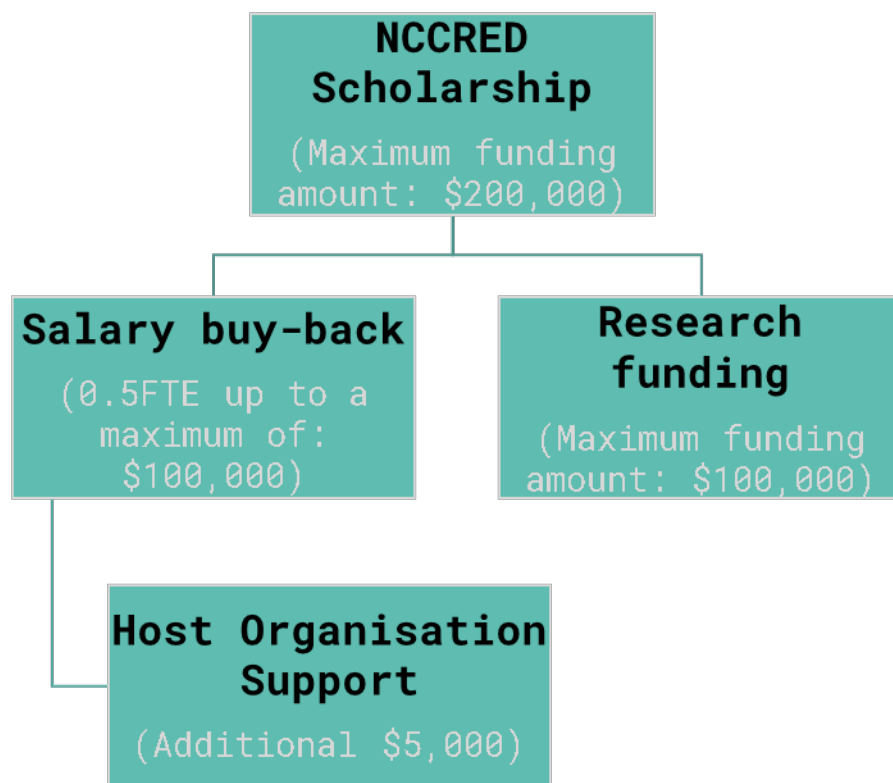
Projects should aim to answer clinical questions, build research capacity, and produce translational research results. The project should produce fundable research that has the capacity to attract further funding (as required).

3.2. Salary Buy-Back

To facilitate the conduct of the applicants clinical research, NCCRED will contribute to the Research Scholar's salary to the equivalent of 0.5 full-time (FTE) to a maximum of \$100,000.00, replacing half of the candidate's salary for the 1-year scholarship term. That is, the Scholarship represents a 0.5 FTE commitment for 12

months. This will be awarded to the candidate via their employing organisation as a “buy-back” of their time. The candidate will be required to negotiate / make arrangements with their primary employment institution / organisation to release them for the 0.5 FTE that they will be undertaking the scholarship. Evidence of this organisation-level support will need to be demonstrated in the application, in the form of a letter of support from the applicant’s supervisor. The candidate and host organisation will negotiate how this is structured. In addition, the host organisation will receive \$5,000 of funding for the Research Scholar’s placement to compensate the organisation for administrative costs associated with the Scholarship.

Figure 2 - NCCRED Clinical Research Scholarship program



3.3. Mentorships

The candidate will be partnered with a senior clinician-researcher at a participating clinical site (the “Mentor”). Mentors will be chosen in collaboration with the Scholar and NCCRED depending on the project topic and location. The candidate may choose to undertake research at their place of employment, however locations and projects must be agreed to by The NCCRED Director and The NCCRED Chair.

3.4. Outcomes

The outcomes for the NCCRED Clinical Research Scholar on completion of the 1-year term may include:

- Writing a literature review on the chosen topic / project focus
- Conducting clinical research (as defined in the chosen and agreed-upon project)
- Drafted a first-author manuscript based on the project's results
- Presented at the NCCRED National Symposium
- Attendance at the APSAD or equivalent conference
- Participated in the active learning network / journal club activities at the clinical site

It is anticipated that the NCCRED Scholarship program will provide Scholars with the practical skills required for undertaking clinical research (from concept to publication). This will translate into the Scholar becoming a more confident consumer of research and ready to operationally facilitate their own research or participate as a site for other clinical research studies.

4. Scholars

Scholars can be clinicians of any multidisciplinary background, and scholarships will be open to clinicians in the AOD sector. This funding round, preferred candidates will be nursing or allied health professionals, though any clinician within the sector is welcome to apply. Candidates should meet the below selection criteria:

4.1. Selection Criteria

Candidates should meet the below selection criteria:

1. Current AHPRA registration or qualified as a multi-disciplinary clinician.
2. Clinician providing services in the area of Alcohol and Other Drugs (can include inpatient, outpatient or non-governmental services, etc.)
3. Not currently completing a fellowship or scholarship program with another organisation.
4. Must be employed in a clinical setting

5. Funding

Funding for the NCCRED Clinical Research Scholarships program is sourced from the Commonwealth Department of Health, as an initiative of the National Ice Action Strategy (2015). Funds will be transferred from UNSW to the host institution and must be used for achieving the objectives outlined by the applicant in their application.

Applicants chosen for a Scholarship will not enter into any agreement between UNSW (as contracting entity for the Centre) until a formal written Agreement (in accordance with the Terms and Conditions sent at time of notification of award) is executed by the host organisation on behalf of the successful applicant and UNSW.

The maximum funding amount available for one application is \$200,000.00. This is inclusive of the Scholar's salary buy-back (to a maximum of \$100,00) and project budget (to a maximum of \$100,000). In addition, the host organisation will receive \$5,000 of funding for the Research Scholar's placement to compensate the organisation for administrative costs associated with the Scholarship. Applicants can not transfer from one funding stream to another in order to fund the other. Neither the project budget or salary buy-back can exceed \$100,000.00.

5.1.1. Dissemination Plan

Applications should include a results dissemination plan that should be included in their overall budget. It is anticipated that all successful applicants will present their research findings (interim or final) at the NCCRED annual research symposium, which will be held as a one-day symposium following the annual APSAD conference. The budget should include funding for attendance at the NCCRED symposium (e.g. travel and accommodation), as well as peer-review publication costs. The total funding requested for data dissemination should not exceed \$5,000.

6. Application

Applicants must send in an application pack which includes the details listed below as well as a completed Clinical Research Scholarship Form beginning on page 15 of this document. Research proposals outlined in the NCCRED Clinical Research Scholarship Form should be substantive, and where possible, cross-disciplinary initiatives. They should enable research collaborations with early career researchers

or research-inexperienced sites. Applications must provide all requested information, and adhere to the guidelines and word / page limits indicated.

6.1. Application Details

The application will consist of:

- The applicant's curriculum vitae (CV)
- Brief Bio which should include:
 - The candidate's clinical role and experience The candidate should outline any research research experience, clinical or other. Please note: *It is not mandatory for applicants to have an extensive research background.*
 - What the candidate seeks to gain from the NCCRED Clinical Research Scholarship (max 400 words)
 - Scholarship preference for location of scholarship (i.e. organisation, city and State)
 - Preference for buy-back period (i.e. 6 months FTE, PTE equivalent over xx months, preferred days of the week, etc.) *please note: the scholarship program and associated research will need to be completed by 30 June 2022. Any part-time arrangements must consider this and adhere to this timeline.*
- 1 letter of support
 - This should be from the applicant's direct reporting supervisor/manager, and should indicate that the unit, service and organisation are supportive of the applicant receiving an NCCRED Clinical Research Scholarship, and an acknowledgement that this will require the applicant be released from clinical duties for the duration of the scholarship (negotiable for FTE or PTE 6-12 months)
- 2 Referees and their contact details
- The NCCRED Clinical Research Scholarship Form

To ensure a clear and efficient review process, applicants are encouraged to use Arial / Calibri font, 11-point or above. Please note: the application form has been developed in Microsoft Office 2013 (for Windows), and fidelity of the formatting cannot be guaranteed in other versions – please contact the NCCRED team if you have any concerns. Only information in the following application will be used in selecting projects for funding.

6.2. Evaluation of Applications

Applications for the 2020 scholarship round will be reviewed by the NCCRED Methamphetamine and Emerging Drugs Clinical Research Network Working Group. The review process is independent of NCCRED staff and the NCCRED Board. Following the Working Group's recommendations, funding will be awarded by the NCCRED Board.

Specific assessment criteria for applications are (1 through 4):

1. The proposed project
 - the project is novel and innovative – seeks to answer a contemporary and clinically relevant question
 - has the potential to attract research funding from other sources at the conclusion of the scholarship funding period (as required)
2. Clear research proposal with logical aims
 - research question is clearly stated
 - if there is an intervention, this is explicitly stated
 - participant eligibility (and controls if applicable) defined
 - methods to measure outcomes or test hypothesis are appropriate
 - has merit, value and impact
3. Project budget
 - a study budget is included
 - realistic funding has been requested (including for dissemination of results)
 - budget and deadlines are achievable
 - measurable milestones
4. Research team
 - builds research capacity, for example: establishes a project in a research-inexperienced site; and/or involves a junior/inexperienced researcher, early or mid-career researcher and/or multi-disciplinary researcher in substantial roles; enables clinician researchers; develops meaningful partnerships
 - develops research foundations in an organisation or site
 - involves consumer input (e.g. in study design, partnership, etc.)
 - creates networks and builds partnerships (e.g. academic, clinical, consumer)

6.3. Successful Applicant/s

The successful applicant/s will undergo a 1-week FTE induction program. The induction content will be delivered by NCCRED staff, and academic and clinical

staff at the partnering consortium organisations. The induction curriculum will include:

- ICH-GCP
- The Australian Research setting
- HREC applications and oversight
- Public institution governance application and oversight
- Research Methodology
- Basic statistics to read and understand research
- EndNote referencing software
- Research databases and library tools

7. Application Timeline Scholarship

Key dates	Process / step
2 nd October 2020	Applications open
16 th October 2020	NCCRED Scholarship webinar
6 th November 2020	Applications close
13 th November 2020	WG review of applications
23 rd November 2020	NCCRED Board of Directors meeting – to review Working Group sub-committee recommendations for appointment
27 th December 2020	Acceptance notification
4 th December	Deadline for acceptance
February 2021	Scholarship begins

8. Contact

Submit completed applications by email to jemma.hallen@unsw.edu.au by no later than 2359hrs (11:59 pm) on Friday 6th October.

To discuss the application, or for further information, please contact:

Krista Siefried

Clinical Research Lead

National Centre for Clinical Research on Emerging Drugs

Krista.siefried@svha.org.au

National Centre for Clinical Research on Emerging Drugs Clinical Research Scholarship Form

1. Selection Criteria

Scholarship Selection Criteria	
<p>Current AHPRA registration or qualified as a multi-disciplinary clinician</p>	<p>Yes: <input type="checkbox"/></p> <p>If yes please outline below</p> <hr/> <p>No: <input type="checkbox"/></p>
<p>Clinician providing services in the area of Alcohol and Other Drugs</p> <p><i>can include inpatient, outpatient or non-governmental services, etc.</i></p>	<p>Yes: <input type="checkbox"/></p> <p>If yes please outline below</p> <hr/> <p>No: <input type="checkbox"/></p>
<p>Currently completing a fellowship or scholarship program with another organisation</p>	<p>Yes: <input type="checkbox"/></p> <p>If yes please outline below</p> <hr/> <p>No: <input type="checkbox"/></p>
<p>Currently employed in a clinical setting</p>	<p>Yes: <input type="checkbox"/></p> <p>If yes please outline below</p> <hr/> <p>No: <input type="checkbox"/></p>

2. Overview

Project Overview	
Project Title	
Project Summary / Brief Description <i>(max 350 words)</i> <i>Summarise research questions and proposed methods.</i> <i>Outline the potential benefits, including how this project will be translated into practice</i>	
Project Lead – Chief Investigator (if not the Scholar)	
Name and Title	
Employing Organisation (i.e. to be named sponsor on funding agreement)	
Employing Organisation ABN	
Other affiliations	
Phone	
Email	
Postal address	

3. Project and Proposal

Project Description	
<p>Background (max 600 words)</p> <p><i>Describe the background and the research question, the problem addressed by the project and this proposal, and why this research is a priority. Describe any preliminary findings.</i></p>	

<p>Project HREC plans</p> <p><i>List all HRECs to which the project will be submitted</i></p>	
<p>Target recruitment, recruitment plan</p>	
<p>Research project aims and objectives <i>(max 300 words)</i></p>	
<p>Study Design and Research Plan <i>(max 1,000 words)</i></p>	

Provide a detailed description of the research design, including the setting, the participant selection criteria / eligibility, comparison / reference / control group(s), the primary and secondary outcome(s), outcome measures, study intervention and follow-up periods as appropriate, data sources or qualitative tools/instruments

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<p>Study sites</p> <p><i>(Full name, location including State, of all sites where the project will be conducted)</i></p>	
<p>Project Duration</p>	
<p>Statistical Analysis <i>(max 350 words)</i></p> <p><i>Include power / sample size calculation(s), statistical analysis plan, including data linkage plan if required</i></p>	

<p>Outcomes and Significance (max 350 words)</p> <p><i>Outline what new evidence the research is anticipated to generate, describe how this is likely to impact patient care or health policy. Indicate how the research will be translational.</i></p>	
<p>Originality / value-add (max 350 words)</p>	

4. If your project specifically relates to the health of Aboriginal and/or Torres Strait Islander peoples, or which includes distinct Aboriginal and Torres Strait Islander populations, biological samples or data please fill in the sections below

NHMRC Indigenous Research Excellence Criteria	
<p>Community engagement</p> <p><i>Describe how the proposed research processes will include Aboriginal and Torres Strait islander community engagement</i></p>	
<p>Benefit</p> <p><i>the potential health benefit of the project</i></p>	
<p>Sustainability and transferability –</p> <p><i>demonstrate how the results of the project have the potential to lead to achievable and effective contributions to health gain for Aboriginal and Torres Strait Islander people.</i></p>	
<p>Building capability</p> <p><i>demonstrate how Aboriginal and Torres Strait Islander people, communities and researchers will develop relevant capabilities through partnerships and participation in the project.</i></p>	

5. Project Budget

Budget Details	
Total funding requested (\$AUD) (excluding GST)	
Current funding source(s) for this project	
Detailed Budget (applicants may use the field below, or may insert new text / table as preferred)	

6. Research Capacity Building

Research personnel	
<p>How does this proposal build research capacity?</p> <p><i>(For example, indicate how early or mid-career researchers will be engaged in the research project; how multi-disciplinary researchers will be engaged in the research project; how the proposed research project will establish clinical research capacity in new or less-experienced research sites; how this proposal will develop or build on meaningful partnerships [e.g. with NGOs, consumers, academics, clinicians, etc.]</i></p>	

7. Research Personnel (add additional boxes as necessary)

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
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Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

Name	
Email	
Employer	
Affiliation(s)	
Role on project	
Qualifications and Experience	

8. Signatures and Verification

Applicant: I confirm that the information included in this application is true and correct, and that if the application is successful the funding will be used for the stated purposes.	
Full name of Principal / Chief Investigator	
Signature	
Date	
Department Head: I confirm that the department is aware of the proposal and the applicants intended project, and supports the applicant in their application for funding.	
Full name of Departmental Head	
Signature	
Date	
Is the Principal / Chief Investigator a student? <i>If yes please complete below</i>	
Supervisor: <i>Only required if the applicant is a higher degree by research (HDR) candidate/student:</i> I confirm that I am in support of this application and that the applicant has capacity to undertake the proposed research in addition to their HDR research requirements.	
Full name of HDR Supervisor(s)	
Signature	
Date	

Appendix 6: NCCRED Methamphetamine and Emerging Drugs Clinical Research Working Group Members

- Prof Robert Ali (Chair) – Adelaide University
- Dr Michael Christmass – Next Step Drug and Alcohol Services
- Dr Michael Doyle – University of Sydney
 - From July 2019
- Carrie Fowlie – Alcohol Tobacco and Other Drug Association ACT
 - Through to Oct 2020
- Dr Shaun Greene – Victorian Poisons Information Centre
- Prof Paul Haber – The University of Sydney
- Michelle Hall – D&A Services Newcastle
 - Through to Oct 2020
- Dr Jeremy Hayllar – Metro North
- Dr Will Liaw – Drug and Alcohol Services South Australia
 - Through to Oct 2020
- Prof Daniel Lubman – Turning Point
- Jo Lunn – We Help Ourselves
- Jack Nagle – Real Drug Talk
- Adam Searby – Drug and Alcohol Nurses of Australasia
 - From Oct 2020
- Anke van der Sterren - Alcohol Tobacco and Other Drug Association ACT
 - From Oct 2020

Appendix 7: Breakdown of NCCRED Clinical Research Funding

Seed Funding Round 1

- The first round of Seed Funding opened for competitive applications on 25 September 2018 and closed on 28 October 2018
- Eight applications were received and reviewed by the WG on 30 October 2018 (male 7, female 8)
- The WG recommended that three applications be funded, and this was ratified by the Board at their meeting on 05 December 2018 (see Table 1)
- Total grant funding awarded in Round 1 Seed Funding: \$196,137.50
- Total grant funding requested: \$638,622.20
- Total funding pool available: \$500,000
- The breakdown of applicants from each state for Round 2 Seed Funding Grants was as follows.
 - 1 (14%) QLD
 - 1 (14%) WA
 - 2 (29%) NSW
 - 3 (43%) VIC
- Of the awarded applications, 2 were from NSW and 1 from WA, however each of these had extensive national involvement.
- Only one application was submitted by a targeted Aboriginal and Torres Strait Islander researcher.
- 1 application was from a regional site.
- 2 applications were from NGOs.

Seed Funding Round 2

- The second round of Seed Funding opened for competitive applications on 18 January 2019 and closed on 15 April 2019
- 18 applications were received, they were reviewed by the WG on 04 June 2019 (11 (61%) female, 7 (39%) male)
- The WG recommended that five applications be funded, and this was ratified by the Board at their meeting on 11 July 2019

- Total grant funding awarded in Round 2 Seed Funding: \$381,982.83
- Total grant funding requested: \$1,329,093.91.
- Total funding pool available: \$500,000
- The breakdown of applicants from each state for Round 2 Seed Funding Grants was as follows.
 - 1 (6%) ACT
 - 8 (44%) NSW
 - 1 (6%) NSW & QLD
 - 2 (11%) SA
 - 6 (33%) VIC
- Of the 5 awarded applications, 2 were from NSW, 2 from Victoria and one from South Australia
- One application was submitted by targeted Aboriginal and Torres Strait Islanders
- 1 specifically targeted rural and regional areas
- 1 application was from an organisation that represents people who use illicit drugs.
- 2 applications were from NGOs.

Seed Funding Round 3

- The third round of Seed Funding opened for competitive applications on 15 May 2019 and closed on 15 August 2019
- 24 applications were received, they were reviewed by the WG on 4 September 2019 (13 (54%) female, 11 (46%) male)
- The WG recommended that seven applications be funded, and this was ratified by the Board at their meeting on 26th September 2019
- Total grant funding awarded in Round 3 Seed Funding: \$636,690.50
- Total funding requested: \$2,122,729.
- Total pool of funding available: \$700,000
- The breakdown of applicants from each state for Round 3 Seed Funding Grants was as follows.
 - 14 (59%) NSW
 - 6 (25%) VIC
 - 2 (8%) SA
 - 1 (4%) QLD
 - 1 (4%) ACT

- Of the 7 awarded applications, 4 were from NSW and 3 from Victoria
- 3 (12.5%) applications were from NGOs
- 1 was targeted toward sexually diverse communities.
- 2 were from NGOs or consumer groups that represent people who use illicit drugs.
- 4 were submitted from rural and regional areas.

Seed Funding Round 4

- The fourth round of Seed Funding opened for competitive applications on 4 February 2021 and closed on 14 April 2021.
- 23 applications were received, three were deemed ineligible by the Chair for being out of scope. 20 applications were viewed by the WG and the top 10 were reviewed by the WG on 11 May 2021 (6 female, 4 male)
- The WG recommended that 6 applications be funded, and this was ratified by the Board at their meeting on 17 May 2021.
- Total grant funding awarded in Round 4 Seed Funding: \$459,950.78
- Total funding requested: \$1,429,683.29.
- Total funding available for round 4: \$400,000
- The breakdown of applicants from each state for Round 4 Seed Funding Grants was as follows.
 - 12 (52%) NSW
 - 7 (30%) VIC
 - 3 (13%) QLD
 - 1 (4%) WA
- Of the 6 awarded applications, 5 were from NSW and 1 from Victoria
- 3 (12.5%) applications were from NGOs or consumer groups that represent people who use illicit drugs
- 6 were submitted from rural and regional areas.

Capacity Building

- NCCRED Capacity Building Grants opened for competitive applications on 25 September 2018 and closed on 28 October 2018
- 7 applications were received, including for the two investigator-initiated non-commercially sponsored clinical trials for methamphetamine dependence previously identified by NCCRED (5 male, 2 female)

- Applications were reviewed by the NCRN WG on 30 October 2018
- The WG made recommendations that were ratified by the Board at their meeting on 05 December 2018
- Breakdown of applicants from each state
 - 2 (28.5%) VIC
 - 2 (28.5%) NSW
 - 2 (28.5%) SA
 - 1 (14.5%) WA
- Total grant funding awarded in Capacity Building Grants: \$304,000
- Total amount of funding requested: \$611,769.
- Total amount of funding available: \$400,000

Clinical Research Fellowships

- NCCRED Clinical Research Fellowships opened for competitive application on 15 May 2019 and closed on 30 June 2019.
- 7 applications were received (4 male, 3 female)
- Applications were reviewed by a subcommittee of the WG on 10 July 2019
- The WG made recommendations that were ratified by the Board at their meeting on 11 July 2019
- Total amount of funding awarded: \$355,000.
- Total amount of funding requested: \$665,351.
- Total amount of funding available: \$350,000
- The breakdown of applications from each state was.
 - 3 from WA
 - 4 from VIC
- Of the three awarded applications 1 was from WA and 2 from VIC

Clinical Research Scholarships

- The Clinical Research Scholarship application round was split into two streams, a nursing and allied health stream, and an Aboriginal and Torres Strait Islander Scholarship stream.
- NCCRED Clinical Research Fellowships (nursing & allied health stream) opened for competitive application on 2 October 2020 and closed on 13 November 2020.
- 6 applications were received for the nurses and allied health stream (4 male, 2

female).

- The Aboriginal and Torres Strait Islander Scholarship program, as advised by the Aboriginal and Torres Strait Islander Working Group, was conducted in a two-stage process. Applicants submitted an expression of interest, who then, if successful, partnered with a mentor from the Aboriginal and Torres Strait Islander Scholarship WG to work up a full application.
- 1 application was received for the Aboriginal and Torres Strait Islander Scholarship clinician stream (male).
- Application was reviewed by the Aboriginal and Torres Strait Islander WG on 11 June 2021
- The WG made recommendations that were ratified by the Board at their meeting on 6 September 2021.
- Total amount of Scholarship funding awarded: \$419,289.70.
- Total amount of funding requested: \$786,407
- The breakdown of applications from each state was.
 - 3 from Vic
 - 2 from NSW
 - 1 from QLD
 - 1 from SA
- Of the three awarded applications 1 was from NSW, 1 from Vic and 1 from SA

Appendix 8: NCCRED Clinical Research Funding Program outputs

Seed Funding Round 1

Dr Jessamine Soderstrom

Emerging Drug Network of Australia (EDNA).

Publications

Weber C, Smith JL, Soderstrom J, Burrows S, McCutcheon D, Oosthuizen F, Fatovich DM; Emerging Drugs Network of Australia Investigators. Analytically confirmed illicit and novel psychoactive drug use in Western Australian emergency departments: initial results from the Emerging Drugs Network of Australia (EDNA). *Clin Toxicol (Phila)*. 2023 Jul;61(7):500-508. doi: 10.1080/15563650.2023.2229951. Epub 2023 Jul 14. PMID: 37449677.

Smith JL, Soderstrom J, Dawson A, Alfred S, Greene S, Isoardi K, McCutcheon D, Oosthuizen F, Ezard N, Burcham J, Fatovich DM; EDNA Investigators. The Emerging Drugs Network of Australia: A toxicosurveillance system of illicit and emerging drugs in the emergency department. *Emerg Med Australas*. 2022 Feb;34(1):58-64. doi: 10.1111/1742-6723.13839. Epub 2021 Aug 12. PMID: 34382338.

Presentations

Soderstrom J. Drugs of abuse. Presented at St John's Ambulance Service Meeting; 2019; Perth, Australia.

Soderstrom J. Health Department submission to Select Committee about the impact of illicit drug use on the ED. Presented at Parliamentary Select Committee into alternate approaches to reducing illicit drug use and its effects on the community; 2019; Perth, Australia.

[https://www.parliament.wa.gov.au/Parliament/commit.nsf/\(Report+Lookup+by+Com+ID\)/76DC63572B331E7F482584BE00219B5F/\\$file/id.alt.191111.rpf.final.xx%20web.pdf](https://www.parliament.wa.gov.au/Parliament/commit.nsf/(Report+Lookup+by+Com+ID)/76DC63572B331E7F482584BE00219B5F/$file/id.alt.191111.rpf.final.xx%20web.pdf)

Soderstrom J. Methamphetamines in the ED. Presented at Toxicology and Poisons Network Australasia (TAPNA) Scientific Meeting; 2019; Sydney, Australia.

Soderstrom J. Harm Minimisation, and the power of shared data to save lives. Presented at TEDx Perth; 2019; virtual. <https://www.tedxperth.org/harm-minimisation-and-power-shared-data-save-lives>.

Soderstrom J. Submission to the NSW Coroner in regard to EDNA and the WA Illicit Substances Evaluation. Presented at Coronial inquest into musical festivals deaths in NSW; 2019; Sydney, Australia.
https://coroners.nsw.gov.au/documents/findings/2019/Music_Festival_Redacted_findings_in_the_joint_inquest_into_deaths_arising_at_music_festivals_.pdf

Soderstrom J. Emerging Drugs Network of Australia. Presented at NCCRED Symposium: Collaborate, Generate, Translate - Research meets clinical practice in methamphetamine and emerging drugs; 2019; Hobart, Australia.
<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Soderstrom J. Emerging Drugs Network of Australia. Presented at Next Step Drug and Alcohol Services; 2019; Perth, Australia.

Lasscock B. Opioid use within the EDNA database – preliminary results. Presented at Toxicology and Poisons Network Australasia (TAPNA) Scientific Meeting; 2020; virtual.

Soderstrom J. Emerging Drugs Network of Australia. Presented at Centre for Clinical Research in Emergency Medicine (CCREM) Annual Symposium; 2020; Perth, Australia.

Smith J. When clinical evidence and public health strategies collide: the future of toxicosurveillance in Australia. Presented at Centre for Clinical Research in Emergency Medicine (CCREM) Annual Symposium; 2020; Perth, Australia.

Fatovich D, Soderstrom J, McCloskey J. Sex, Drugs and Rock 'n' Roll: coming of age in the COVID19 era. Presented at RPH Research Foundation Public Seminar; 2020; Perth, Australia.

Smith J. Brevity of data will take precedence: evolution of a national minimum dataset of illicit and emerging drugs in the emergency department. Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual.
<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Policy Change and implementation of results

Clinical guidelines: Management of ED patients presenting with recreational drug intoxication have been endorsed by five WA hospital sites (listed below). These Guidelines include standardised protocols for blood collection, storage and analysis to identify specific drugs causing harm:

- Fiona Stanley Hospital (2019)
- Royal Perth Hospital (2020)
- Rockingham General Hospital (2020)
- Armadale Hospital (2021)
- Bunbury Regional Hospital (2021)

Media

Perth physician to deliver TEDx talk. WA Department of Health News; 2019 Aug 23; virtual. <https://www.healthywa.wa.gov.au/sitecore/content/Corporate/News/2019/Perth-physician-to-deliver-TEDx-talk>

Thompson A. NSW Health backs plan for early warning system on drugs. Sydney Morning Herald; 2019 Sep 10; virtual. <https://www.smh.com.au/national/nsw/nsw-health-backs-plan-for-early-warning-system-on-drugs-20190910-p52pxm.html>

First steps in Australia drug warning system. Australian Patients Association; 2019 Sep 12; virtual. <https://www.patients.org.au/first-steps-in-aust-drug-warning-system/>

Early warning system for emerging and illicit drugs could save lives. ABC Radio Perth Breakfast; 2020 Dec 18; broadcast. <https://www.abc.net.au/radio/perth/programs/breakfast/edna-daniel-fatovich/12999042>

Big ideas pay off for West Australian researchers. Harry Perkins Institute of Medical Research News; 2020 Dec 18; virtual. <https://perkins.org.au/big-ideas-pay-off-for-west-australian-researchers/>

ChemCentre's forensic toxicology specialists contribute to Emergency Medicine research. ChemCentre WA News; 2021 Jan 27; virtual. <https://www.chemcentre.wa.gov.au/news-events/news/chemcentre%E2%80%99s-forensic-toxicology-specialists-contr>

Emerging Drugs Network of Australia. Wikipedia. 2021 Mar 20; virtual. https://en.wikipedia.org/wiki/Emerging_Drugs_Network_of_Australia

Barratt M. Drug checking and an early warning network in Victoria could save lives: new coroner's report. The Conversation; 2021 Apr 7; virtual. <https://theconversation.com/drug-checking-and-anearly-warning-network-in-victoria-could-save-lives-newcoroners-report-157684>

Dr Briony Larance

Increasing the capacity of a local health district to respond to methamphetamine-related harm: developing an integrated model of care informed by linked data and consumer and clinician views.

Presentations

Larance B, Kelly P, Lago L, Lappin J, Robinson L, Adams S, Reid D. "Drawing on regional data analytics and stakeholder consultation to improve responses to methamphetamine-related harm in the Illawarra: Identifying opportunities for intervention among young people. Presented at Creating Synergy Conference; 2019; Wollongong, Australia.

Larance B, Kelly P, Lago L, Lappin J, Robinson L, Adams S, Reid D. "Drawing on regional data analytics and stakeholder consultation to improve responses to methamphetamine-related harm in a New South Wales Local. Presented at NCCRED Symposium: Collaborate, Generate, Translate - Research meets clinical practice in methamphetamine and emerging drugs; 2019; Hobart, Australia. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Larance B, Lago L, Moules S, Adams S, Qian S, Robinson L, Lappin J, Reid D, Kelly P. Patterns of mental health and alcohol and other drug service use after attending emergency department with an amphetamine-related. Presented at Illawarra Shoalhaven Epidemiology and Biostats Group Meeting; 2021 Dec 13; Wollongong, Australia.

Larance B, Lago L, Moules S, Adams S, Qian S, Robinson L, Lappin J, Reid D, Kelly P. ISLHD presentation. Presented at ISLHD Drug and Alcohol Services Consultation Meeting; 2021 Dec 14; Wollongong, Australia.

Larance B, Lago L, Moules S, Adams S, Qian S, Robinson L, Lappin J, Reid D, Kelly P; Patterns of mental health and alcohol and other drug service use after attending emergency department with an amphetamine-related presentation. Presented at APSAD Scientific Conference; 2021; virtual. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Larance B, Hatton E, Haynes C, Rushton C, Garton A, Lago L, Lappin J, Robinson L, Adams S, Reid D, Kelly P. A systematic review of brief interventions for psychostimulant use in primary and acute care settings. Presented at APSAD Scientific Conference; 2022, Darwin, Australia. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13537>

Policy Change and implementation of results

Meeting/consultation: Meeting with UOW and ISLHD Executive, AOD Clinical Director and Clinical Director of Mental Health Services to discuss implementation strategies. 2020 Sep 11.

Meeting/consultation: Meeting with ISLHD iDAS staff along with MH and ED staff. 2022 Jul.

Media

Study puts methamphetamine treatment under the spotlight. ABC Illawarra Radio. 2019 Apr 12; broadcast. <https://www.facebook.com/abcillawarra/posts/study-puts-methamphetamine-treatment-under-the-spotlight-its-hoped-a-study-examin/2233072053405302/>.

Dr Craig Rodgers

Sentinel surveillance for emerging illicitly manufactured fentanyl use in an inner-city opioid agonist treatment service.

Presentations

Rodgers C. Sentinel surveillance for emerging illicitly manufactured fentanyl (IMF) use in an inner-city opioid agonist treatment service. Presented at NCCRED Symposium: Collaborate, Generate, Translate - Research meets clinical practice in methamphetamine and emerging drugs; 2019; Hobart, Australia. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Seed Funding Round 2

Dr Gillinder Bedi

An open-label pilot study of sub-anaesthetic ketamine for methamphetamine abuse in young people.

Presentations

Mullen E, Guerin AA, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanen A, Cementon E, Ratheesh A, Davey C, Bedi G. An Open-Label Pilot Study of Subanaesthetic Ketamine for Stimulant Use Disorder – Methamphetamine Type in Youth. Presented at

NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Mullen E, Guerin AA, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanen A, Cementon E, Amminger P, Bedi G. Testing new medications for stimulant use disorder methamphetamine type in young people. Presented at APSAD Scientific Conference; 2021; virtual. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Mullen E, Guerin AA, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanen A, Cementon E, Amminger P, Bedi G. The MASKOT Trial & The CALM Trial. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Guerin AA, Mullen E, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanen A, Cementon E, Amminger P, Bedi G. Testing new medications for methamphetamine use disorder (MAUD) in young people. Presented at Turning Point Webinar; 2022; Virtual <https://youtu.be/zykJ2pLo6Lc>

Guerin AA, Mullen E, Karanges E, Amelia L Quinn, Schwartz O, Arunogiri S, Loo C; Chanen A, Cementon E, Amminger P, Bedi, G. Novel pharmacotherapies for young people with methamphetamine use disorder: the MASKOT and CALM studies. Presented at College on Problems of Drug Dependence (CPDD) 84th Annual Scientific Meeting; 2022; Minneapolis, USA.

Guerin AA, Mullen E, Karanges E, Quinn AL, Schwartz O, Arunogiri S, Loo C, Chanen A, Cementon E, Amminger P, Bedi G. Novel pharmacotherapies for young people with methamphetamine use disorder: the MASKOT and CALM studies. Presented at Biological Psychiatry Australia (BPA) 12th Annual Scientific Meeting; 2022; Newcastle, Australia.

Guerin AA, Mullen E, Quinn AL, Schwartz O, Cementon E, Chanen A, Loo C, Arunogiri S, Cook J, Pawsey B, Amminger P, Bedi G. Candidate pharmacotherapies for methamphetamine use disorder in young people: ketamine and cannabidiol. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Guerin AA, Mullen E, Quinn AL, Schwartz O, Cementon E, Chanen A, Loo C, Arunogiri S, Cook J, Pawsey B, Amminger P, Bedi G. Novel pharmacotherapies for young people with methamphetamine use disorder: The MASKOT and CALM studies. Presented at Australian Appetitive Motivation Symposium; 2022; Newcastle, Australia.

A/Prof Peter Kelly

Methamphetamine and mutual support: a mixed methods exploration of SMART recovery participants' characteristics and opportunities for enhanced referral pathways

Publications

Beck AK, Larance B, Deane FP, Baker AL, Manning V, Hides L, Shakeshaft A, Argent A, Kelly PJ. The use of Australian SMART Recovery groups by people who use methamphetamine: Analysis of routinely-collected nationwide data. *Drug Alcohol Depend.* 2021 Aug 1;225:108814. doi: 10.1016/j.drugalcdep.2021.108814. Epub 2021 Jun 18. PMID: 34174775.

Beck AK, Larance B, Manning V, Hides L, Baker AL, Deane FP, Shakeshaft A, Raftery D, Kelly PJ. Online SMART Recovery mutual support groups: Characteristics and experience of adults seeking treatment for methamphetamine compared to those seeking treatment for other addictive behaviours. *Drug Alcohol Rev.* 2023 Jan;42(1):20-26. doi: 10.1111/dar.13544. Epub 2022 Sep 14. PMID: 36106354; PMCID: PMC10087117.

Presentations

Beck AK. et al. Methamphetamine and mutual support: A mixed methods exploration of SMART Recovery participants' characteristics and opportunities for enhanced referral pathways. Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Beck AK. et al. Methamphetamine and mutual support: An update on findings from a mixed methods exploration of SMART Recovery participants' characteristics and opportunities for enhanced referral pathways. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Beck AK. et al. The use of Australian SMART Recovery groups by people who use methamphetamine: Analysis of routinely-collected nationwide data. Presented at APSAD Scientific Conference; 2021; virtual. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Beck AK, Larance B, Manning V, Hides L, Baker AL, Deane FP, Shakeshaft A, Argent A, Kelly PJ. Help-seeking trajectory and factors that influence initiation and engagement in

SMART Recovery mutual-help groups for adults who use methamphetamine: Qualitative insights. Presented at APSAD Scientific Conference; 2023; Adelaide.

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13749>

Beck AK. et al. Snapshot of quantitative and qualitative findings - Methamphetamine and mutual support: A mixed methods exploration of SMART Recovery participants' characteristics and opportunities for enhanced referral pathways. Presented at Cracks in the Ice Webinar; 2023; virtual. <https://cracksintheice.org.au/community-toolkit/webinars/mutual-help-groups>.

A/Prof Victoria Manning

A pilot randomised controlled trial (RCT) of personalised approach bias modification for methamphetamine use disorder.

Publications

Garfield JBB, Piercy H, Arunogiri S, Lubman DI, Campbell SC, Sanfilippo PG, Gavin J, Hopwood M, Kotler E, George S, Okedara G, Piccoli LR, Manning V. Protocol for the methamphetamine approach-avoidance training (MAAT) trial, a randomised controlled trial of personalised approach bias modification for methamphetamine use disorder. *Trials*. 2021 Jan 6;22(1):21. doi: 10.1186/s13063-020-04927-6. PMID: 33407781; PMCID: PMC7788914.

Presentations

Manning V. Approach bias modification in addictions: The story down-under. Presented at Association of Cognitive Bias Modification International Summer Meeting; 2021; virtual.

Manning V. "Pushing away your poison": using cognitive training to improve client outcomes in addiction treatment. Presented at Talking Point; 2020; Melbourne, Australia.

Manning V, Garfield JBB, Arunogiri S, Piercy H, Lubman DI. The methamphetamine approach-avoidance training (MAAT) trial: A randomised controlled trial of personalised approach bias modification for methamphetamine use. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Manning V. Cognitive bias modification in addictions. Presented at Healthy Brain and Mind Research Centre Forum; 2021; Melbourne, Australia.

Dr Rachel Sutherland

Feasibility, consumer acceptability and behavioural outcomes associated with take-home fentanyl test strips.

Presentations

Sutherland R, Peacock A, Bruno R, Barratt M, Rodgers C, Steele M, Cherry R, Page R, Read P, Gilliver R, Silins E. Feasibility, consumer acceptability and behavioural outcomes associated with take-home fentanyl test strips. Presented at St Vincent's Hospital Research Week; 2020 Sep 16; Sydney, Australia.

Sutherland R, Steele M, Silins E, Gilliver R, Read P, Peacock A, Barratt M, Page R, Bruno R, Rodgers C. Feasibility, consumer acceptability and behavioural outcomes associated with take-home fentanyl test strips. Presented at Presented at APSAD Scientific Conference; 2021; virtual. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Sutherland R, Steele M, Silins E, Gilliver R, Read P, Peacock A, Barratt M, Page R, Bruno R, Rodgers C. Feasibility, consumer acceptability and behavioural outcomes associated with take-home fentanyl test strips. Presented at International Network on Health and Hepatitis in Substance Users (INSHU) Conference; 2021; virtual.

Sutherland R, Peacock A, Bruno R, Barratt M, Rodgers C, Steele M, Cherry R, Page R, Read P, Gilliver R, Silins E. Feasibility, consumer acceptability and behavioural outcomes associated with take-home fentanyl test strips. Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Sutherland R, Steele M, Silins E, Gilliver R, Read P, Peacock A, Barratt M, Page R, Bruno R, Rodgers C. Feasibility and consumer acceptability of take-home fentanyl test strips. Presented at NDARC Webinar; 2022; virtual.

A/Prof James Ward

An acceptability and feasibility study of the We Can Do This online therapeutic program in primary care and residential rehabilitation settings

Presentations

Reilly R, McKetin R, Butt J, Roe Y, Ezard N, Quinn B, Nagle J, Longbottom W, Treloar C, Warrior C, Hammersley D, Ward J, on behalf of the other NIMAC investigators and partner sites. An acceptability and feasibility study of the *We Can Do This* online therapeutic program in primary care and residential rehabilitation settings. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Ward J, Reilly R. Working with Aboriginal and Torres Strait Islander Communities to address methamphetamine use and eliminate sexually transmissible infections. Presented at Cracks in the Ice Webinar; 2022; virtual.

Ward J, Reilly R. Working with Aboriginal and Torres Strait Islander Communities to address methamphetamine use and eliminate sexually transmissible infections. Presented at Dabakarn Kadadjiny (Slow and Steady Learning) Research to Practice Seminar Series; 2022; Perth, Australia / virtual.

Reilly R, McKetin R, Butt J, Ezard N, Dunlop AJ, Conigrave K, Quinn B, Treloar C, Gray D, Sivak L, Lockton J, Whetham H, Ward J. Lessons from the evaluation of a novel web-app to assist Aboriginal and Torres Strait Islander people to reduce or stop using methamphetamine: We Can Do This. Presented at APSAD Scientific Conference; 2022, Darwin, Australia. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13537>

Media

Reilly R. We can do this – Innovation in aboriginal health to treat ice. Real Drug Talk; 2021 Oct 27; podcast.

<https://open.spotify.com/episode/07iwbj1D4R6j0Ba78h52Gf?si=8swYSdZ9T8m9UauRs461yQ>

Seed Funding Round 3

Dr Monica Barratt

Rapid translation of forensic data from police drug seizures into clinical alerts to improve public health.

Publications

Volpe I, Brien R, Grigg J, Tzanetis S, Crawford S, Lyons T, Lee N, McKinnon G, Hughes C, Eade A, Barratt MJ. 'We don't live in a harm reduction world, we live in a prohibition world': tensions arising in the design of drug alerts. *Harm Reduct J.* 2023 Jan 9;20(1):3. doi: 10.1186/s12954-022-00716-3. Erratum in: *Harm Reduct J.* 2023 Apr 25;20(1):55. doi: 10.1186/s12954-023-00784-z. PMID: 36624508; PMCID: PMC9829230.

Brien R, Volpe I, Grigg J, Lyons T, Hughes C, McKinnon G, Tzanetis S, Crawford S, Eade A, Lee N, Barratt MJ. Co-designing drug alerts for health and community workers for an emerging early warning system in Victoria, Australia. *Harm Reduct J.* 2023 Mar 9;20(1):30. doi: 10.1186/s12954-023-00761-6. Erratum in: *Harm Reduct J.* 2023 Apr 25;20(1):57. doi: 10.1186/s12954-023-00783-0. PMID: 36894933; PMCID: PMC9995746.

Presentations

Volpe I, Brien R, Grigg J, Eade A, Lyons T, Lee N, Crawford S, Tzanetis S, McKinnon G, Hughes C, Barratt MJ. Tensions arising when designing high-risk drug alerts for health professionals. Presented at APSAD Scientific Conference; 2021; virtual.

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Brien R, Volpe I, Grigg J, Barratt MJ. Co-designing a drug alert prototype for Victorian AOD clinicians. Presented at Victorian Alcohol and Drug Association (VAADA) Service Providers Conference; 2021; Melbourne, Australia / virtual. https://www.vaada.org.au/wp-content/uploads/2021/06/PRE_Co-designing-drug-alert-prototype_24062021.pdf

Barratt MJ, Brien R. Co-design of clinical alerts as part of a drug early warning network in Victoria, Australia. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Barratt MJ. Rapid drug alerts for Victoria. Can we translate police seizure data into timely public health info?. Presented at Uniting ReGen International Women's Day; 2021; Melbourne, Australia / virtual.

Volpe I, Brien R. Co-designing high-risk drug alerts for health and community service practitioners. Presented at Victorian Substance Use Research Forum; 2022; Melbourne, Australia / virtual.

Policy Change and implementation of results

Government publication: Drug alerts archives. <https://www.health.vic.gov.au/alcohol-and-drugs/drug-alerts>

Media

Barratt M. Drug checking and an early warning network in Victoria could save lives: new coroner's report. The Conversation; 2021 Apr 7; virtual. <https://theconversation.com/drug-checking-and-anearly-warning-network-in-victoria-could-save-lives-newcoroners-report-157684>

Prof Antonio Verdejo-Garcia

Determining the feasibility and efficacy of Goal Management Training for improving treatment retention and outcomes during residential treatment for methamphetamine dependence.

Publications

Anderson AC, Robinson AH, Potter E, Kerley B, Flynn D, Lubman DI, Verdejo-García A. Development of Goal Management Training+ for Methamphetamine Use Disorder Through Collaborative Design. *Front Psychiatry*. 2022 Apr 25;13:876018. doi: 10.3389/fpsy.2022.876018. PMID: 35546943; PMCID: PMC9082590.

Anderson AC, Robinson AH, Lubman DI, Verdejo-Garcia A. Protocol for a cluster randomised crossover pilot trial of Goal Management Training+ (GMT+) for methamphetamine use disorder. *Contemp Clin Trials Commun*. 2022 Aug 11;29:100969. doi: 10.1016/j.conctc.2022.100969. PMID: 36033363; PMCID: PMC9399476.

Anderson AC, Robinson AH, Giddens E, Hartshorn B, Allan E, Rowe C, Lawrence T, Chong TT, Lubman DI, Verdejo-Garcia A. Proof-of-concept trial of Goal Management Training+ to improve executive functions and treatment outcomes in methamphetamine use disorder. *Drug Alcohol Depend*. 2023 May 1;246:109846. doi: 10.1016/j.drugalcdep.2023.109846. Epub 2023 Mar 20. PMID: 37004463.

Robinson AH, Mahlberg J, Chong TT, Verdejo-Garcia A. Model-based and model-free mechanisms in methamphetamine use disorder. *Addict Biol.* 2024 Jan;29(1):e13356. doi: 10.1111/adb.13356. PMID: 38221809; PMCID: PMC10898847.

Presentations

Verdejo-Garcia A. Goal Management Training for People with Methamphetamine Use Disorder in Residential Treatment. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Verdejo-Garcia A. Goal Management Training in Stimulant Addiction. Presented at International Society of Addiction Medicine, Neuroscience Interest group (ISAM-NIG) Webinar: Cognitive Training/Rehabilitation Interventions for Addiction Medicine; 2020; virtual.

<https://www.youtube.com/watch?v=noRLepmhD1U>

Policy Change and implementation of results

Training: Workshop on GMT+ for Odyssey House Clinicians. After completion of the trial, the research team conducted a one-day workshop in which they trained clinical providers in our clinical partner to administer Goal Management Training+ as manualized and applied in the research project.

Prof Andrew Dawson

Detection of fever via wearable thermometers: An early intervention strategy to reduce the risk of drug-related toxicity at music festivals, a feasibility and acceptability study.

Presentations

Geiger B, Riordan B, Winter D, Raubenheimer J, Haber P, Dawson A. Use of wearable thermometers to reduce the risk of drug-related toxicity at music festivals: the COVID pivot. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

A/Prof Peter Kelly

BeSMART: feasibility and preliminary efficacy of an intervention for family members impacted by methamphetamine.

Publications

Rushton CM, Kelly PJ, Thomas T, Beck AK, Townsend C, Baker AL, et al. SMART Family and Friends: Feasibility and outcomes of a video-conference delivered intervention for families impacted by another's methamphetamine use. *Journal of substance use and addiction treatment*. 2024 Jun 1;161:209355–5. [https://www.jsatjournal.com/article/S2949-8759\(24\)00067-5/fulltext](https://www.jsatjournal.com/article/S2949-8759(24)00067-5/fulltext)

Presentations

Kelly PJ. SMART Family & Friends: Feasibility of an intervention for family and friends impacted by methamphetamine. Presented at AFINet Webinar; 2022; virtual.

<https://youtu.be/cfJrTxVQfA8>

Kelly PJ. SMART Family & Friends: Feasibility of an intervention for family and friends impacted by methamphetamine. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Kelly PJ, Argent A. SMART Australia and its Family & Friends programme. Presented at AFINet Webinar; 2021; virtual.

Rushton CM. Supporting families affected by alcohol and other drugs. Presented at 3MT Competition (3 Minute Thesis Presentation); 2023; virtual. <https://vimeo.com/836819378>

Rushton CM. Psychosocial interventions for families affected by another's alcohol or other drug use. Presented at NCCRED DARIA Webinar; 2023; virtual.

<https://www.youtube.com/watch?v=zrGHvzMLtqU>

Rushton CM. The experience of families affected by another's substance use: An overview of treatments. Presented at Turning Point Webinar; 2023; virtual.

<https://www.turningpoint.org.au/education/webinars/connect-learn-overview-of-treatments>

A/Prof Suzanne Nielson

Understanding emerging opioid-related harms through improved surveillance, drug checking and information sharing systems.

Publications

Lam T, Barratt MJ, Bartlett M, Latimer J, Jauncey M, Hiley S, Clark N, Gerostamoulos D, Glowacki L, Roux C, Morelato M, Nielsen S. Infrequent detection of unintentional fentanyl use via urinalysis among people who regularly inject opioids in Sydney and Melbourne, Australia. *Addiction*. 2022 Aug;117(8):2331-2337. doi: 10.1111/add.15832. Epub 2022 Feb 21. PMID: 35129225; PMCID: PMC9544654.

Nielsen S, Barratt M, Hiley S, Bartlett M, Latimer J, Jauncey M, Roux C, Morelato M, Clark N, Kowalski M, Gilbert M, Francia L, Shipton A, Gerostamoulos D, Glowacki L, Lam T. Monitoring for fentanyl within Australian supervised injecting facilities: Findings from feasibility testing of novel methods and collaborative workshops. *Int J Drug Policy*. 2023 May;115:104015. doi: 10.1016/j.drugpo.2023.104015. Epub 2023 Apr 10. PMID: 37043848.

Presentations

Nielsen S, Lam T. Understanding emerging opioid related harms through improved surveillance, drug checking and information sharing systems. Presented at Consumer Advocacy Group Meeting at MSIC; 2019; Sydney, Australia.

Nielsen S. Responding to the threat of novel synthetic opioids in the heroin supply. Presented at International Scientific School: Novel Psychoactive Substance – Focus on Novel Synthetic Opioids; 2019; Sardinia, Italy.

Nielsen S, Lam T. Understanding emerging opioid related harms through improved surveillance, drug checking and information sharing systems. Presented at MSIC Staff briefing; 2020; Sydney, Australia.

Nielsen S, Lam T. Understanding emerging opioid related harms through improved surveillance, drug checking and information sharing systems. Presented at MSIR staff briefing; 2020; Melbourne, Australia.

Nielsen S, Barratt M, Kowalski M, Hiley S, Clarke N, Bartlett M, Latimer J, Roux C, Morelato M, Gilbert M, Gerostamoulos D, Glowacki L, Lam T. Early findings: monitoring for fentanyl & other NPS in Supervised Injecting Facilities. Presented at APSAD Scientific Conference; 2021; virtual. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Nielsen S, Barratt M, Kowalski M, Hiley S, Clarke N, Bartlett M, Latimer J, Roux C, Morelato M, Gilbert M, Gerostamoulos D, Glowacki L, Lam T. Early findings: monitoring for fentanyl & other NPS in Supervised Injecting Facilities. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Nielsen S, Barratt M, Hiley S, Clark N, Bartlett M, Latimer J, Roux C, Morelato M, Gilbert M, Kowalski M, Gerostamoulos D, Glowacki L, Francia L, Lam T. Findings from novel methods of surveillance for fentanyl and novel psychoactive substances within Supervised Injecting Facilities. Presented at Lisbon Addictions; 2022; Lisbon, Portugal.

Nielsen S, Barratt M, Hiley S, Clark N, Bartlett M, Latimer J, Roux C, Morelato M, Gilbert M, Kowalski M, Gerostamoulos D, Glowacki L, Francia L, Lam T. Monitoring for fentanyl and novel psychoactive substances within supervised injecting facilities: testing three different approaches in Australia. Presented at International Network on Health and Hepatitis in Substance Users (INSHU) Conference; 2022; Glasgow, Scotland.

Dr Shalini Arunogiri

An open label pilot study of intranasal oxytocin for methamphetamine withdrawal in women.

Presentations

Arunogiri S, Mu T, Phan V, Baeyertz N, Bedi G, Manning V, Mcketin R, Lubman D. mOXY: A pilot study of intranasal oxytocin for methamphetamine withdrawal in women. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Dr Amy Peacock

Risk communication for people who use MDMA/ 'ecstasy' and related drugs: establishing guidance on consumer preferences and behavioural responses to drug alerts.

Publications

Peacock A, Gibbs D, Price O, Barratt MJ, Ezard N, Sutherland R, Hill PL, Grigg J, Lenton S, Page R, Salom C, Hughes C, Bruno R. Profile and correlates of colorimetric reagent kit use

among people who use ecstasy/MDMA and other illegal stimulants in Australia. *Int J Drug Policy*. 2021 Nov;97:103334. doi: 10.1016/j.drugpo.2021.103334. Epub 2021 Jul 7. PMID: 34246017.

Presentations

Peacock A, Sutherland R, Bruno R, Barratt M, Keygan J, Ezard N, Hill P, King C, Brown J, Page R, Lenton S, Dietze P, Salom C, Sumnall H, Harrod M. Risk communication for people who use drugs: Awareness of, behavioural responses to, and preferences for, dissemination of drug alerts. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Seed Funding Round 4

Dr Rebecca McKetin

Integrating contingency management for methamphetamine use into routine clinical care in Australia.

Publications

Clay S, Wilkinson Z, Ginley M, Arunogiri S, Christmass M, Membrey D, MacCartney P, Sutherland R, Colledge-Frisby S, Marshall AD, Nagle J, Degenhardt L, Farrell M, McKetin R. Perspectives and sentiments on contingency management from people who use methamphetamine. *Drug Alcohol Rev*. 2023 Sep;42(6):1427-1437. doi: 10.1111/dar.13691. Epub 2023 May 29. PMID: 37248676.

Clay S, Wilkinson Z, Ginley M, Arunogiri S, Christmass M, Membrey D, MacCartney P, Sutherland R, Colledge-Frisby S, Marshall AD, Nagle J, Degenhardt L, Farrell M, McKetin R. The reflections of health service providers on implementing contingency management for methamphetamine use disorder in Australia. *Drug Alcohol Rev*. 2024 May 5. doi: 10.1111/dar.13853. Epub ahead of print. PMID: 38704742.

Presentations

McKetin R, Wilkinson Z, Jackson C, Loblack A, Arunogiri S, Degenhardt L, Colledge-Frisby S, Clay S, Farrell M, Christmass M, Membrey D, MacCartney P, Nagle J, Sutherland R, Marshall A, Ginley M. A systematic scoping review of contingency management for people who use methamphetamine. Presented at NCCRED Symposium: Transforming healthcare

responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Clay S, Arunogiri S, Ginley M, Degenhardt L, Membrey D, MacCartney P, Christmass M, Farrell M, Sutherland R, Marshall A, Colledge-Frisby S, Nagle J, McKetin R. Integrating contingency management for methamphetamine use into routine clinical care in Australia: Outcomes from In-depth Interviews. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

A/Prof Peter Kelly

Feasibility and preliminary efficacy of Cognitive Remediation Groups in a community outpatient setting for people who use methamphetamines.

Presentations

Lunn J. Feasibility and preliminary efficacy of cognitive remediation groups in a community outpatient setting for people who use methamphetamines. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Dr Buddhima Lokuge & Dr Tarun Yadav

Theta burst Transcranial Magnetic Stimulation (TMS) for Methamphetamine use disorder– A feasibility study to inform the design of a multisite randomized control trial.

Publications

Yadav T, Lokuge B, Jackson MA, Austin EK, Fitzgerald PB, Brown AL, Paton B, Sequeira M, Nean M, Mills L, Dunlop AJ. Pilot study with randomised control of dual site theta burst transcranial magnetic stimulation (TMS) for methamphetamine use disorder: a protocol for the TARTAN study. Pilot Feasibility Stud. 2024 May 9;10(1):74. doi: 10.1186/s40814-024-01498-0. PMID: 38725088; PMCID: PMC11080215.

Presentations

Lokuge B, Yadav T, Sequeira M, Nean M, Brown AL, Mills L, Paton B, Jackson MA, Austin EK, Fitzgerald PB, Dunlop AJ. Theta burst transcranial magnetic stimulation for methamphetamine use disorder – a feasibility study to inform the design of a multisite randomised control trial. Presented at APSAD Scientific Conference; 2021; virtual.

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Lokuge B, Yadav T et al. Theta burst Transcranial Magnetic Stimulation (TMS) for Methamphetamine use disorder (TARTAN) – A feasibility study. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Brown AL, Hinwood M, Campbell E, Chen C, Dayas CV, Dunlop AJ, Lokuge B, Yadav T, Ramadan S, Luchow S, Breakspear M, Paton B. Incorporating neuroimaging into addiction neuromodulation research. Presented at APSAD Scientific Conference; 2022, Darwin, Australia. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13537>

Lokuge B, Yadav T, Jackson MA, Brown ML, Paton B, Sequeira M, Nean M, Mills L, Austin EK, Fitzgerald PB, Dunlop AJ. Pilot feasibility study with randomised control of dual site theta burst transcranial magnetic stimulation for methamphetamine use disorder: Preliminary results of the TARTAN study. Presented at APSAD Scientific Conference; 2023; Adelaide.

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13749>

Policy Change and implementation of results

Development research capacity: This grant and development of the study assisted in DACS HNELHD developing the capacity to conduct TMS research on substance use disorders in a public outpatient setting in Australia. To our knowledge this is the only site at the time of writing this is the only public drug and alcohol service with the capacity to conduct this type of research in Australia.

Media

Prof Adrian Dunlop on TMS trial. ABC Radio Newcastle Breakfast. 2023 Mar 2; radio interview.

Dr Gillinder Bedi

Cannabidiol – A novel pharmacotherapy for Lowering Methamphetamine use (The CALM Study).

Publications

Guerin AA, Bridson T, Plapp HM, Bedi G. A systematic review and meta-analysis of health, functional, and cognitive outcomes in young people who use methamphetamine. *Neurosci Biobehav Rev.* 2023 Oct;153:105380. doi: 10.1016/j.neubiorev.2023.105380. Epub 2023 Sep 7. PMID: 37678571.

Presentations

Mullen E, Guerin AA, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanan A, Cementon E, Amminger P, Bedi G. Testing new medications for stimulant use disorder methamphetamine type in young people. Presented at APSAD Scientific Conference; 2021; virtual. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.13384>

Mullen E, Guerin AA, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanan A, Cementon E, Amminger P, Bedi G. The MASKOT Trial & The CALM Trial. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Guerin AA, Mullen E, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanan A, Cementon E, Amminger P, Bedi G. Testing new medications for methamphetamine use disorder (MAUD) in young people. Presented at Turning Point Webinar; 2022; virtual. <https://youtu.be/zykJ2pLo6Lc>

Guerin AA, Mullen E, Karanges E, Quinn AL, Schwartz O, Arunogiri S, Loo C, Chanan A, Cementon E, Amminger P, Bedi G. Novel pharmacotherapies for young people with methamphetamine use disorder: the MASKOT and CALM studies. Presented at College on Problems of Drug Dependence (CPDD) 84th Annual Scientific Meeting; 2022; Minneapolis, USA.

Guerin AA, Mullen E, Karanges E, Quinn AL, Schwartz O, Arunogiri S, Loo C, Chanan A, Cementon E, Amminger P, Bedi G. Novel pharmacotherapies for young people with methamphetamine use disorder: the MASKOT and CALM studies. Presented at Biological Psychiatry Australia (BPA) 12th Annual Scientific Meeting; 2022; Newcastle, Australia.

Guerin AA, Mullen E, Quinn AL, Schwartz O, Cementon E, Chanan A, Loo C, Arunogiri S, Cook J, Pawsey B, Amminger P, Bedi G. Candidate pharmacotherapies for

methamphetamine use disorder in young people: ketamine and cannabidiol. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Guerin AA, Mullen E, Quinn AL, Schwartz O, Cementon E, Chanen A, Loo C, Arunogiri S, Cook J, Pawsey B, Amminger P, Bedi G. Novel pharmacotherapies for young people with methamphetamine use disorder: The MASKOT and CALM studies. Presented at Australian Appetitive Motivation Symposium; 2022; Newcastle, Australia.

Dr Llewellyn Mills

Examining the effects of Amphetamine-Type-Substance use on clinical outcomes among clients receiving opioid agonist treatment.

Presentations

Mills L, Black E, Deacon R, Dunlop AJ, Ezard N, Bruno R, Shakeshaft A, Farrell M, Holmes J, Cretikos M, Montebello M, Reid D, Childs S, Siefried K, Mammen K and Lintzeris N. Impact of Amphetamine Type Stimulant Use on Clinical Outcomes in OTP Clients, Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Dr Robert Page

Co-designing a fixed-site drug checking service at Sydney's Medically Supervised Injecting Centre (MSIC).

Presentations

Page R, Stowe MJ, Puljevic C, Francis C, Kowalski M. Co-designing a fixed-site drug checking service at Sydney's Medically Supervised Injecting Centre. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Media

Drug checking service opens at Sydney injecting room but NSW still blocking festival pill testing. The Guardian; 2024 Apr 8; virtual. <https://www.theguardian.com/australia-news/2024/apr/08/drug-checking-service-opens-at-sydney-injecting-room-but-nsw-still-blocking-festival-pill-testing>

Capacity Building Grants

Prof Nicholas Lintzaeris

Developing a clinical data laboratory for methamphetamine use in NSW: The MAdata project.

Publications

Black E, Bruno R, Mammen K, Mills L, Siefried KJ, Deacon RM, Shakeshaft A, Dunlop AJ, Ezard N, Montebello M, Childs S, Reid D, Holmes J, Lintzeris N. Substance use, socio-demographic characteristics, and self-rated health of people seeking alcohol and other drug treatment in New South Wales: baseline findings from a cohort study. *Med J Aust.* 2023 Sep 4;219(5):218-226. doi: 10.5694/mja2.52039. Epub 2023 Jul 14. PMID: 37449648.

Black E, Mammen K, Deacon RM, Ezard N, Mills L, Dunlop AJ, Montebello M, Reid D, Childs S, Bruno R, Shakeshaft A, Siefried KJ, Farrell M, Holmes J, Lintzeris N. Health and social characteristics of clients reporting amphetamine type substance use at entry to public alcohol and other drug services in New South Wales, Australia, 2016-2019. *Drug Alcohol Rev.* 2023 Feb;42(2):389-400. doi: 10.1111/dar.13588. Epub 2022 Dec 16. Erratum in: *Drug Alcohol Rev.* 2023 Nov;42(7):1860-1861. doi: 10.1111/dar.13731. PMID: 36524444; PMCID: PMC10107800.

Heijstee N, Black E, Black E, Demirkol A, Mammen K, Mills L, Deacon R, Ezard N, Montebello M, Reid D, Bruno R, Shakeshaft A, Siefried KJ, Farrell M, Lintzeris N. Sociodemographic and Health Factors of the Alcohol Treatment-seeking Population in New South Wales, Australia. *J Addict Med.* 2024 Jun 3. doi: 10.1097/ADM.0000000000001311. Epub ahead of print. PMID: 38828937.

Presentations

Black E, Deacon R, Mills L, Dunlop AJ, Ezard N, Bruno R, Shakeshaft A, Farrell M, Holmes J, Cretikos MA, Montebello M, Reid D, Childs S, Siefried KJ, Mammen K, Lintzeris N. Characteristics and treatment outcomes of the drug treatment population in New South

Wales: focus on amphetamine-type stimulants. Presented at NCCRED Symposium: Collaborate, Generate, Translate - Research meets clinical practice in methamphetamine and emerging drugs; 2019; Hobart, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Black E, Deacon R, Mills L, Dunlop AJ, Ezard N, Bruno R, Shakeshaft A, Farrell M, Holmes J, Cretikos MA, Montebello M, Reid D, Childs S, Siefried KJ, Mammen K, Lintzeris N.

Characteristics and treatment outcomes of the drug treatment population in New South

Wales: focus on amphetamine type stimulants. Presented at APSAD Scientific Conference; 2019; Hobart, Australia. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/dar.12991>

Deacon R. LiMA ATOP ATS Validation: Preliminary results. Internal presentation to CIs; 2020; virtual.

Mills L. Impact of amphetamine type stimulant use on clinical outcomes in OTP clients. Internal presentation to CIs; 2020; virtual.

Mills L. A test of drug and alcohol services' capacity to collect and analyse clinical outcomes data at point of care. Internal presentation to CIs; 2020; virtual.

Black E. Characteristics of people entering AOD treatment: Focus on ATS use. Internal presentation to CIs; 2020; virtual.

Black E. Characteristics of people entering AOD treatment: Focus on ATS use. Presented at Drug and Alcohol Data Co-ordinators in NSW Health Meeting. 2020; virtual.

Media

The health & social characteristics of people who use methamphetamine in New South Wales. NCCRED; 2023 Jun 26; video abstract. <https://youtu.be/119VdOJA9ks>.

Dr Peter Stockham

South Australian drug early warning system – Emergency Department admission blood psychoactive testing.

Publications

Partridge E, Alfred S, Camilleri A, Green H, Haustead D, Kostakis C, Mallon J, Mason K, Rivers-Kennedy A, Stockham P. Establishing the protocols for the South Australian Emergency Department Admission Blood Psychoactive Testing (EDABPT) programme for

drug surveillance. *Emerg Med Australas*. 2021 Oct;33(5):883-887. doi: 10.1111/1742-6723.13752. Epub 2021 Mar 13. PMID: 33713558.

Alfred S, Stockham P, Partridge E, Ward A, Green H, Mallon J, Kostakis C, Camilleri A, Haustead D. The South Australian Emergency Department Admission Blood Psychoactive Testing (EDABPT) program: first results. *Med J Aust*. 2023 May 1;218(8):376-377. doi: 10.5694/mja2.51907. Epub 2023 Mar 28. PMID: 36977652.

Stockham P, Partridge E, Alfred S, Boyle L, Camilleri A, Green H, Haustead D, Humphries M, Kostakis C, Mallon J. Characteristics of analytically confirmed gamma-hydroxybutyrate (GHB) positive patients in the emergency department: presentation, poly-drug use, disposition and impact on intensive care resource utilisation. *Clin Toxicol (Phila)*. 2023 Apr;61(4):241-247. doi: 10.1080/15563650.2023.2178933. PMID: 37129222.

Presentations

Stockham P, Partridge E, Alfred S, et al. Characteristics of patients positive for methamphetamine in the emergency department, and the influence of the co-administration of GHB. Poster presented at 59th Annual Meeting of the International Association of Forensic Toxicologists; 2022; Versailles, France. [Link](#)

Partridge E, Stockham P. "Forensic Toxicology and the detection of trends in Novel Psychoactive Substances (NPS) and other illicit drug abuse in SA (SADEWS and the EDABPT project)". Presented at Australia and New Zealand Forensic Science Society, SA Branch Public Meeting; 2019; Adelaide, Australia.

Stockham P. Monitoring drugs causing serious intoxication in the community through Emergency Department Admission Blood Psychoactive Testing (EDABPT). Protocols & initial findings. Presented at the 57th Annual Meeting of the International Association of Forensic Toxicologists; 2019; Birmingham, United Kingdom.

Alfred S. Party Pills and Potions. An approach to Illicit drug surveillance. Presented at Royal Adelaide Hospital Medical Grand Round; 2020; Adelaide, Australia.

Partridge E. Results of the South Australian Drug Early Warning System Emergency Department Admission Blood Psychoactive Testing (EDABPT) Study. Presented at NCCRED Symposium: Collaborate, Generate, Translate - Research meets clinical practice in methamphetamine and emerging drugs; 2019; Hobart, Australia.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Stockham P. Analytical protocols to improve scope and efficiency for the analysis of SADEWS Emergency Department admission blood psychoactive testing (EDABPT) study

samples. Presented at Forensic and Clinical Toxicology Association Meeting; 2019; Adelaide, Australia.

Alfred S. The feasibility of illicit drug monitoring in an emergency department setting: data from a 12- month pilot study. Presented at Toxicology and Poisons Network Australasia (TAPNA) Scientific Meeting; 2019; Sydney, Australia.

Stockham P. Conclusion of the of the South Australian Drug Early Warning System Emergency Department Admission Blood Psychoactive Testing (EDABPT) Study . Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Policy Change and implementation of results

Policy Change: Forensic Science SA Toxicology internal analytical protocols. The revelation of the prevalence of GHB led to alteration of standard screening processes to include GHB analysis in more Coronial cases and all driving and police criminal cases.

Clinical Practice Change (Internal):

- The analytical confirmation that the vast majority of patients ingest multiple agents in conjunction with methamphetamine and other illicit drugs has meant that clinicians may be less inclined to relate the toxidrome to a single causative agent. In polypharmacy contexts such attribution to a single agent will often be unreliable.
- The high prevalence of GHB observed in the study has enabled clinicians to more confidently delay intubation of CNS depressed patients.
- The marked increase in GHB intoxications forewarned clinical toxicologists of an impending increase in dependency, and significantly, an increase in GHB withdrawal cases. This enabled strategies to be put in place to deal with this difficult condition.

Implementation of results:

SADEWS and clinical communications

- Methamphetamine was detected in 55% of subjects enrolled in the study at a wide range of concentrations. Methamphetamine concentrations in blood were not always correlated to the intoxication symptoms and behaviours observed. Psychosis does not appear to be strongly related to methamphetamine blood concentrations, but statistical analysis is continuing. It is expected that such observations will have an impact on the wider perception of MAUD related behaviour and symptoms.
- The co-administration of methamphetamine and GHB in subjects highlighted a previously unreported phenomenon that is occurring in the local community. This data has been

conveyed to relevant health agencies for their action if relevant. Interstate forensic laboratories are also observing this phenomenon.

- Results of the project were conveyed to the South Australian Early Warning System for action where appropriate. eg. Awareness of high incidence of GHB intoxications in the ICU, increasing detection of NPS benzodiazepine and detection of other emerging NPS.

Internal SAPol Investigations

- The EDABPT GHB and benzodiazepine results provided analytically-confirmed data to support seizure data and anecdotal data regarding the increasing use and abuse of these substances in the community.

SAAS Intra-departmental Education

- Lead Pharmacist at SA Ambulance Service provided data to paramedic staff regarding drugs being detected and rates of administration of treatment medication in study subjects

Inter-agency Communications

- GHB results provided to SAPOL via SADEWS application to German authorities to request restriction on export of a GHB precursor chemical to Australia

Toxicology Specialist Advisory Group Confidential Communications

- Information dissemination to other Forensic Toxicology laboratories via seminars and direct confidential communications. This led to changes in practices in several interstate Forensic laboratories in protocols for GHB and expansion of screening to cover specific NPS.

TGA Investigation into Alprazolam and Etizolam RIES34157 – Counterfeit Products

- Information was provided to an investigating officer from the TGA regarding cases of NPS benzodiazepines in 35 EDABPT cases.

Informing the UNODC early Warning Advisory

- Reports on NPS detected in the EDABPT project were reported regularly to UNODC EWA system.

Integration with EDNA

- The Emerging Drug Network of Australia seeks to combine output of individual state data. EDABPT data is currently being integrated. However, the SADEWS project will have ceased by the time EDNA is operational

Media

Thomas-Wilson S. SA Health warns of bad batch of drugs after spike in revellers taken to hospital. The Advertiser; 2019 Apr 21; virtual.

<https://www.adelaidenow.com.au/news/laworder/sa-health-warn-of-bad-batch-of-drugsafter-spike-in-revellers-taken-tohospital/newsstory/f5f48b20dd08c41ec14a52ae1f7e55df>

Prof Paul Haber

The LiMA@RPAH study: a randomised double-blind placebo-controlled study of lisdexamfetamine for the treatment of methamphetamine dependence.

Presentations

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Clinical Research Scholars

Dr Andrew Kozman

The Early Detection Network of Australia (EDNA) Project.

Publications

Kozman A, Soderstrom J, Oosthuizen F, Fatovich D. An MDMA cluster and the utility of illicit drug blood sampling. Clin Toxicol (Phila). 2022 Oct;60(10):1187-1188. doi: 10.1080/15563650.2022.2100787. Epub 2022 Sep 7. PMID: 36069775.

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Kozman A. Implementation of a Recreational Drug Intoxication Guideline. Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual.

<https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Kozman A. EDNA: the challenges of a vision. Presented at Toxicology and Poisons Network Australasia (TAPNA) Scientific Meeting; 2020; virtual.

Kozman A. Recreational Drug Intoxication Guideline. What have we found?. Presented at Toxicology and Poisons Network Australasia (TAPNA) Scientific Meeting; 2021; Newcastle, Australia.

Kozman A. Implementation of a Recreational Drug Intoxication Guideline. Presented at Emergency Department, Royal Perth Hospital; 2021; Perth, Australia.

Kozman A. Implementation of a Recreational Drug Intoxication Guideline. Presented at Emergency Department/Intensive Care Unit, Fiona Stanley Hospital; 2021; Murdoch, Australia.

Kozman A. Implementation of a Recreational Drug Intoxication Guideline. Presented at Emergency Department, Armadale Hospital; 2021; Mount Nasura, Australia.

Kozman A. Implementation of a Recreational Drug Intoxication Guideline. Presented at Emergency Department/Intensive Care Unit, Bunbury Regional Hospital; 2021; Bunbury, Australia.

Kozman A. Implementation of a Recreational Drug Intoxication Guideline. Presented at Emergency Department/Intensive Care Unit, Rockingham Hospital; 2021; Coolesongup, Australia.

Policy Change and implementation of results

Clinical Alerts:

- Nitrous Oxide. Submission to Mental Health commission change in scheduling.
- 2CB. Clinical Alert to local health services.

Media

Nitrous Oxide prevalence and harms. Channel 9 News. 2020 Dec. Not published.

Dr Edward Mullen

The Methamphetamine use in young people: Sub-anaesthetic Ketamine Open-label Trial (MASKOT) protocol.

Presentations

Mullen E, Guerin AA, Karanges E, Lopatecki A, Schwartz O, Arunogiri S, Loo C, Chanen A, Cementon E, Ratheesh A, Davey C, Bedi G. An Open-Label Pilot Study of Subanaesthetic Ketamine for Stimulant Use Disorder – Methamphetamine Type in Youth. Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual.

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Dr Adam Rubenis

A randomised controlled trial exploring the efficacy of a structured telehealth program for methamphetamine using individuals.

Publications

Rubenis AJ, Baker AL, Arunogiri S. Methamphetamine use and technology-mediated psychosocial interventions: A mini-review. *Addict Behav.* 2021 Oct;121:106881. doi: 10.1016/j.addbeh.2021.106881. Epub 2021 Feb 23. PMID: 33896672.

Rubenis AJ, Nation JA, Katz EC, Arunogiri S. Increasing Attendance in Addiction Treatment With Limited Resources: A Narrative Review. *J Addict Med.* 2023 Jan-Feb 01;17(1):13-20. doi: 10.1097/ADM.0000000000001033. Epub 2022 Jul 20. PMID: 35861341.

Rubenis, A. J., Barnett, A. I., & Arunogiri, S. (2023). Keeping clients connected: exploring Australian alcohol and other drug clinicians' perspectives on barriers and facilitators to treatment attendance. *Addiction Research & Theory*, 32(2), 120–128. <https://doi.org/10.1080/16066359.2023.2227092>

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Rubenis AJ, Baker A, Arunogiri S. Collaborative development of a clinician-administered checklist to facilitate retention and therapeutic engagement in substance use treatment. Presented at NCCRED Symposium: Innovations in therapeutic practice; 2020; virtual.

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Rubenis AJ. Low cost strategies for increasing attendance in addiction treatment. Presented at The Matilda Centre Webinar; 2020; virtual.

Rubenis AJ. Use of technology in psychosocial treatment for methamphetamine use. Presented at Cracks in the Ice webinar; 2021; virtual.

Media

The role of technology in therapy for methamphetamine use disorder. NCCRED; 2023 Apr 24; video abstract. <https://youtu.be/J1rJU5NpBko>

Dr James Gooden

Investigating the outcomes of providing neuropsychological assessment to individuals with alcohol or polysubstance use histories attending Alcohol and Other Drug treatment services.

Publications

Gooden JR, Cox CA, Petersen V, Curtis A, Sanfilippo PG, Manning V, Bolt GL, Lubman DI. Predictors of cognitive functioning in presentations to a community-based specialist addiction neuropsychology service. *Brain Impair.* 2023 Mar;24(1):54-68. doi: 10.1017/BrImp.2021.38. Epub 2022 Feb 14. PMID: 38167583.

Gooden JR, Petersen V, Bolt GL, Curtis A, Manning V, Cox CA, Lubman DI, Arunogiri S. Maybe It's Not the Meth: Considering Biopsychosocial Contributors to Cognitive Impairment in Methamphetamine Polydrug Use. *Front Psychiatry.* 2022 Feb 14;13:795400. doi: 10.3389/fpsy.2022.795400. PMID: 35237189; PMCID: PMC8882579.

Presentations

Gooden JR, Petersen V. Supporting AOD clients with cognitive impairment: What clinicians needs to know. Presented at Comorbidity Guidelines Webinar; 2022 Feb 17; virtual.

<https://comorbidityguidelines.org.au/resources/webinars/supporting-aod-clients-with-cognitive-impairment-what-clinicians-need-to-know>

Gooden JR, Cox CA, Petersen V, Curtis A, Sanfilippo P, Manning V, Bolt GL, Lubman DI. Predictors of cognitive functioning in presentations to a community based specialist addiction neuropsychology service. Presented at the 6th Pacific Rim Conference; 2021; virtual.

Gooden JR. Predictors of cognitive functioning in presentations to addiction neuropsychology: Are we paying enough attention to modifiable risk factors? Presented at Talking Point; 2021; virtual. <https://www.turningpoint.org.au/education/talking-point-predictors-cognitive-functioning-presentations-addiction-neuropsychology>

Gooden JR. Predictors of cognitive functioning in presentations to addiction neuropsychology: Are we paying enough attention to modifiable risk factors?. Presented at Addiction Doctors Education Program; 2021; virtual.

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Gooden JR. Beyond the ice: Differences in biopsychosocial risk factors and neuropsychological profiles among individuals with histories of alcohol or methamphetamine-polysubstance use. Presented at NCCRED Symposium: Improving Outcomes - Interventions, Networks & Pharmacotherapies; 2021; virtual. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Media

Cognitive Concerns? Maybe it's not the substance use!. Eastern Health Allied Health Research News; 2022 Mar. https://www.easternhealth.org.au/images/Issue_59_March_2022.pdf

Dr Elizabeth Knock

Psilocybin-facilitated treatment for methamphetamine dependence: A pilot study (Psi-MA).

Publications

Brett J, Knock E, Korthuis PT, Liknaitzky P, Murnane KS, Nicholas CR, Patterson JC 2nd, Stauffer CS. Exploring psilocybin-assisted psychotherapy in the treatment of methamphetamine use disorder. *Front Psychiatry*. 2023 Mar 14;14:1123424. doi: 10.3389/fpsy.2023.1123424. PMID: 36998623; PMCID: PMC10043240.

Mr Jason Ramp

Using participatory filmmaking to describe the implementation of an innovative web-app for Aboriginal and Torres Strait Islander People who use methamphetamine on Barngarla and Nauo Country.

Presentations

Ramp J, Morton C, Reilly R. Using participatory film-making to describe the implementation of an innovative web-app for Aboriginal and Torres Strait Islander People who use methamphetamine on Nauo and Barngarla Country. Presented at NCCRED Symposium: Transforming healthcare responses to methamphetamine and emerging drugs; 2022; Canberra, Australia. <https://nccred.org.au/collaborate/symposium/symposium-2019-2022/>

Media

Supporting healing on Nauo and Barngarla Country. NCCRED; 2023 Oct 23; video abstract. https://youtu.be/um8_Axsgsqc