

# DACRIN Annual Progress Report 2025

NSW DRUG AND ALCOHOL CLINICAL RESEARCH AND IMPROVEMENT NETWORK



Welcome to the DACRIN Annual Progress Report 2025, a year marked by growth, collaboration, and tangible impact across NSW. Building on our Strategic Plan 2024–2029, we have strengthened governance, expanded our network to 18 member organisations, and implemented key initiatives that connect research with real-world practice. From launching the Research Endorsement Guidelines and updating reimbursement standards to securing over \$2.5 million in funding, DACRIN is driving evidence-based innovation in alcohol and other drug care. This report highlights how we are embedding consumer voices, building workforce capability, and positioning DACRIN for transformative projects like the MRFF DACRIN-X proposal. Together, we are shaping a research ecosystem that delivers equity, quality, and impact for the communities we serve.

## PRIORITY 1: LEAD DRUG AND ALCOHOL CLINICAL RESEARCH

Our agenda for alcohol and other drug (AOD) clinical research is collaborative, diverse, rigorous, and driven by clinical needs and consumer priorities

STRATEGIC GOALS	KEY STRATEGIC ACTIVITIES	2025 Progress
<p><b>1.1 Collective peer review and endorsement of research proposals</b></p> <p><i>Ensure that research and quality improvement (QI) activities investigate important clinical questions, are scientifically rigorous, and have sufficient engagement.</i></p>	Establish a committee to identify, prioritise and endorse new research and QI activities and subsequent publications	<ul style="list-style-type: none"><li>The DACRIN Executive Committee (EC) was formed in March 2025 with a formal Terms of Reference, providing governance for identifying, prioritising, and endorsing research and quality improvement (QI) activities and related publications.</li><li>The DACRIN Council Terms of Reference were revised to reflect the establishment of the Executive Committee and clarify roles, responsibilities, and endorsement pathways.</li><li>The EC reviewed eight research proposals during 2025:<ul style="list-style-type: none"><li>Seven approved, including three supported with formal letters of endorsement to strengthen funding applications.</li><li>One declined due to alignment and feasibility considerations.</li></ul></li></ul>
	Facilitate scale-up processes and feasibility assessments to ensure adequate engagement and capacity	<ul style="list-style-type: none"><li>Officially launched in Oct 2025, the <a href="#">DACRIN Research Endorsement Guidelines</a> introduce a formal submission process for AOD researchers from DACRIN member organisations and external institutions to seek endorsement for research and quality improvement (QI) projects.</li><li>As part of the guidelines, a formal <a href="#">Expression of Interest (EOI) process</a> was implemented to assess site feasibility, resources, and operational capacity. This process ensures all parties have a clear understanding of expectations from the outset, promoting transparency and collaboration.</li></ul>
<p><b>1.2 Set the research agenda for DACRIN</b></p> <p><i>Identify potential focus areas in NSW AOD research to better understand the most pressing issues related to substance use and addiction</i></p>	Set the research agenda for DACRIN through a formal process	<ul style="list-style-type: none"><li>In 2025, DACRIN established its research agenda through a structured consultation process involving the Council, affiliates, and lived experience representatives. This process resulted in six strategic research priorities:<ul style="list-style-type: none"><li>Evidence-informed interventions</li><li>Consumer and peer-led research</li><li>Data-driven insights</li><li>Underserved populations</li><li>Emerging issues</li><li>Workforce and system integration</li></ul></li><li>These priorities, documented in the <a href="#">DACRIN Research Priorities Report</a>, were finalised with input from people with lived experience and embedded into endorsement guidelines and communications. This provides a clear framework for research planning, project endorsement, and funding alignment across the network.</li><li><b>Next steps:</b> DACRIN will begin to translate its research priorities into actionable projects by developing concepts under each priority, engaging members through a call for ideas, and applying endorsement guidelines to assess feasibility and attract funding.</li></ul>
	Identify, prioritise, and support a broad range of AOD clinical research and QI activities	<ul style="list-style-type: none"><li>The research endorsement process began informally with the Executive Committee’s formation in March 2025 and was formalised after DACRIN’s research priorities launched. By year’s end, 10 new projects commenced, seven endorsed by the Committee. Projects with prior Council approval bypassed full review, streamlining initiation. This marks DACRIN’s highest activity to date, reflecting growing engagement and confidence in the network.</li><li>DACRIN affiliates published 70 peer-reviewed articles in 2025 across clinical research, implementation science, policy, and practice—including leading journals such as NEJM, International Journal of Drug Policy, Drug and Alcohol Review, and BMJ Open [1-70]. Thirty percent were led by DACRIN members, and seven stemmed directly from DACRIN-led studies, highlighting the network’s growing impact.</li></ul>
	Facilitate meaningful consumer engagement to inform and support AOD clinical research and QI activities	<ul style="list-style-type: none"><li>In July 2025, DACRIN submitted a \$7 million, 7-year MRFF Clinical Trial Enabling Infrastructure grant (DACRIN-X) to build statewide capacity for meaningful consumer engagement in AOD research. The proposal includes Consumer and Aboriginal Reference Groups, consumer researcher roles, and scholarships to embed lived experience in trial design and delivery. This is the first step toward genuine partnership.</li><li>Version 2 of the DACRIN Participant Reimbursement Guidelines (GD.05) was released in October 2025, providing clear, ethical guidance tailored to AOD research. This update expands options to include GiftPay and cash payments where permitted by LHD policy, ensuring flexibility and fairness for participants. Reviewed and approved by CIARA, the guidelines align with consumer standards and reinforce best practice in participant compensation.</li><li>Consumers were actively involved in the development of DACRIN’s scholarship program, including participation on the selection panel.</li></ul>

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		<ul style="list-style-type: none"><li><b>Next steps:</b> Council members agreed to explore a joint NUAA–DACRIN Consumer Engagement Strategy, outlining both funded and unfunded scenarios. This strategy will provide a clear roadmap for embedding lived experience in research governance and trial delivery, ensuring flexibility regardless of resource constraints.</li></ul>
	Consider NSW Health Alcohol and Other Drugs and Future Health priorities when identifying and prioritising AOD clinical research and QI activities	<ul style="list-style-type: none"><li>When identifying and prioritising DACRIN’s research priorities, we considered NSW Health Alcohol and Other Drugs priorities and Future Health objectives to ensure alignment where possible.</li><li>DACRIN will continue to consider these priorities, along with the NSW Drug Summit response, when shaping future research ideas and initiatives.</li></ul>
<b>1.3 Better use of data</b>  <i>Use available AOD clinical data to guide AOD clinical research, QI activities, and pilot studies</i>	Use available AOD clinical outcomes data to guide AOD clinical research and QI activities	<ul style="list-style-type: none"><li>DACRINs recently released <a href="#">Research Priorities</a> encourage the use of available AOD clinical outcomes data to inform and guide AOD clinical research and QI.</li><li><b>Next steps:</b> Accessing data from Local Health Districts (LHDs) is complex, presenting both challenges and opportunities. DACRIN will explore the development of an AOD Clinical Data Access and Management Guide to standardise how AOD data held by LHDs can be accessed and used for research and QI.</li></ul>
	Invest in gathering data through pilot studies to determine the feasibility and potential of large-scale projects	<ul style="list-style-type: none"><li>The recently released Research Endorsement Guidelines introduce a new category for DACRIN-led exploratory initiatives, including QI projects and pilot studies. These initiatives will help test feasibility, gather essential data, and inform larger-scale projects, fostering innovation and laying the groundwork for impactful research across the AOD sector.</li></ul>

## PRIORITY 2: BUILD CLINICAL RESEARCH AND TRANSLATION CAPACITY

*Our network has the capacity and capability to produce practice-changing outcomes*

STRATEGIC OBJECTIVES	ACTIVITIES	2025 Progress
<b>2.1 Training and professional development</b>  <i>Invest in ongoing training, professional development, and mentoring opportunities to equip our emerging and existing workforce with the capacity and confidence to produce high-quality, relevant research</i>	Offer continuous training and opportunities for professional growth	<ul style="list-style-type: none"><li>In 2025, DACRIN strengthened its partnership with PRAXIS Australia, enrolling around 100 AOD staff in clinical research training—a 30% increase on 2024. Supported by CAOD funding, training was delivered in a hybrid format to improve access for regional and rural services.</li><li>DACRIN continued its collaboration with SophieMephamGCP™ to provide free Good Clinical Practice (GCP) training, completed by about 80 staff statewide—a 20% increase from the previous year. The program was updated from ICH-GCP R2 to R3 to meet international standards, and role-specific short courses were introduced for pharmacists, nurses, and other professionals, making training more targeted and accessible.</li><li>To further support professional growth, DACRIN launched a CAOD-funded scholarship program offering up to \$1,500 per member organisation. Consumers were involved in application review and selection to ensure transparency and relevance. To date, 15 scholarships have been awarded, including 11 supporting attendance at APSAD 2025.</li></ul>
	Develop a multidisciplinary (including nursing) clinical research workforce	<ul style="list-style-type: none"><li>DACRIN has strengthened its multidisciplinary research workforce through the Member Affiliate model, now engaging 299 affiliates across medicine (74), nursing (62), allied health (61), research (80), and peer/community roles (20). Representation spans 18 member organisations covering 88% of NSW LHDs/Networks, plus key NGOs (NADA and NUAA) and Canberra Health Services. This diverse network is supported by targeted capability-building initiatives, including GCP training, REDCap access, and involvement in AOD clinical trials and implementation studies, ensuring nursing and allied health perspectives are embedded in research and translation efforts.</li></ul>
	Actively involve and guide the next generation of AOD clinical researchers through mentoring, support, and professional development opportunities	<ul style="list-style-type: none"><li>The Research Endorsement Guidelines, implemented in 2025, provide a structured process for early-career investigators to gain endorsement through DACRIN, embedding mentorship and collaboration into research development. Endorsed projects meet best-practice standards and gain visibility across the statewide network, opening pathways for multi-site collaboration and funding.</li><li><b>Next steps:</b> DACRIN will assess existing mentoring structures to determine the most effective approach for a formal mentoring program. This will ensure early-career researchers receive tailored support, professional development, and opportunities to lead AOD clinical research.</li></ul>
<b>2.2 Research infrastructure</b>  <i>Create and preserve a central infrastructure that supports the collaborative development of research and QI activities and ensures quality by design</i>	Develop a quality by design infrastructure that can be reused for subsequent trials	<ul style="list-style-type: none"><li>In 2025, DACRIN strengthened its regulatory resources by updating the SharePoint site with links to national and international clinical research regulations, laying the groundwork for a future Quality by Design (QbD) framework. The global release of ICH E6(R3) GCP introduced stronger risk-based approaches and QbD principles. To prepare, DACRIN transitioned its online training from R2 to R3 and is retraining member affiliates on new standards.</li><li><b>Next steps:</b> Full development of the QbD infrastructure will commence after the Therapeutic Goods Administration (TGA) issues guidance on R3 adoption, expected in 2026. This staged approach ensures that DACRIN’s QbD framework is fully aligned with Australian regulatory requirements and future-proof for subsequent trials.</li></ul>

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	Implement standardised study tools specific to DACRIN AOD research and QI activities	<ul style="list-style-type: none"><li>• <b>Next Steps:</b> DACRIN will embed its Quality by Design (QbD) approach by introducing standardised study tools—such as protocol and PICF templates—to improve consistency, reduce risk, and streamline trial start-up across AOD research and QI activities.</li><li>• To support sustainability, DACRIN will implement three fee schedules for cost recovery:<ul style="list-style-type: none"><li>○ IIT with funding – reasonable cost recovery</li><li>○ IIT with no/limited funding – basic cost recovery</li><li>○ Industry-funded trials – maximum cost recovery</li></ul></li><li>• Additionally, DACRIN will seek funding for Phase 2 of the Data Project, expanding the core dataset to include Social Outcomes, Health Outcomes, and Consumer Engagement domains, strengthening real-world impact measurement and consumer involvement</li></ul>
	Facilitate internet-based approaches to supplement traditional participant recruitment strategies	<ul style="list-style-type: none"><li>• In 2025, DACRIN leveraged social media methods developed in a previous study to enhance participant recruitment. The Cannabidiol (CBD) for Cannabis Use Disorder trial, led by Professor Nick Lintzeris, used a targeted digital campaign and achieved recruitment on time and on target. This demonstrates the value of standardised online strategies for reaching diverse populations and improving screening efficiency. DACRIN will continue refining these approaches to ensure they remain effective, scalable, and compliant for future trials.</li></ul>
<b>2.3 Better translation activities</b> <i>Plan scale-up strategies in advance and leverage technology to enhance the sharing of research or QI activity findings</i>	Identify services early on that are capable of effectively and efficiently translating research into practice, particularly if the outcome is favourable	<ul style="list-style-type: none"><li>• The EOI process, part of the Research Endorsement Guidelines, can assess an individual site's readiness to translate research into practice. Sites may be prioritised based on their preparedness, while others will receive targeted support.</li></ul>
	Utilise e-technologies to disseminate study findings to researchers, clinicians, individuals who participated in the study and the public	<ul style="list-style-type: none"><li>• DACRIN will implement digital strategies to ensure study results reach researchers, clinicians, participants, and the public. Future planning includes establishing a communication approach aligned with NSW Health requirements—such as leveraging the NSW Health LinkedIn platform with standardised templates—and defining clear parameters for website design and content. These steps will create a compliant, scalable framework for transparent and timely dissemination of research outcomes.</li></ul>

## PRIORITY 3: EXPAND THE NETWORK AND INFLUENCE CHANGE

*Our AOD clinical research network is inclusive and has an excellent reputation Our stakeholders recognise the importance of our role and contributions*

STRATEGIC GOALS	KEY STRATEGIC ACTIVITIES	2025 Progress
<b>3.1 Network membership</b> <i>Include NSW AOD services and people across disciplines, government and non-government jurisdictions, and into regional and rural areas of NSW to ensure a broad representation of real-world practice</i>	Increase awareness about DACRIN's activities and the benefits of network membership	<ul style="list-style-type: none"><li>• Canberra Health Services joined DACRIN, bringing membership to 18 organisations and strengthening cross-border collaboration to support multi-site studies and evidence generation.</li><li>• Northern NSW and Southern NSW LHDs became full members following the appointment of Research Coordinators in 2025, enabling active participation and building regional research capacity.</li><li>• Sydney Children's Hospitals Network (SCHN) is progressing toward membership, with discussions ongoing since late 2024. We anticipate welcoming SCHN in 2026/2027, adding paediatric expertise and expanding research scope.</li><li>• Far West NSW and Murrumbidgee LHDs remain engaged, with DACRIN providing professional development where available to upskill staff and work toward securing dedicated research coordination time.</li><li>• Seven of 18 member organisations had Council representative changes in 2025, including new Research Coordinators and Directors. Despite this, engagement remained strong across the network.</li><li>• DACRIN renewed Australian Clinical Trials Alliance (ACTA) membership, and the Statewide Coordinator presented an accepted abstract at the ACTA 2025 international symposium, showcasing DACRIN's growth and vision for an inclusive, decentralised trial network that expands access and equity in AOD research.</li></ul>
	Foster collaboration among diverse disciplines and external organisations with the capacity to contribute to AOD clinical research and QI activities and assist with translation efforts	<ul style="list-style-type: none"><li>• In July 2025, DACRIN submitted a \$7M, seven-year MRFF DACRIN-X proposal, bringing together 17 partners—LHDs, NGOs, consumer bodies, Aboriginal health leaders, and academic institutions—to expand and strengthen the network. The submission process united stakeholders around shared goals, embedding collaborative frameworks and governance structures that will support future initiatives. Regardless of the funding outcome, this collaboration has already strengthened relationships and positioned DACRIN for future partnership opportunities.</li><li>• In 2025, DACRIN welcomed 87 new affiliates—medical practitioners, nurses, allied health professionals, research staff, and peer/community representatives—bringing total membership to 299. This diverse mix (27% research, 25% medical, 20% allied health, 20% nursing, 7% other) strengthens DACRIN's capacity for clinical research, quality improvement, and evidence translation across NSW.</li></ul>
	Grow the number of study sites and participant enrolment	<ul style="list-style-type: none"><li>• In 2025, DACRIN expanded its research footprint with eight new studies across multiple LHDs, progressing several to ethics and activation. Recruitment highlights included the OLAM methamphetamine withdrawal trial (commenced July), the Cannabis Use in Opioid Treatment</li></ul>



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		<p>Programs survey (launched October across six sites), and the CBD-CUD trial, which exceeded its target ahead of schedule, enrolling 253 participants across five sites. The NSW Opioid Dependence Survey recruited 400 participants, with findings presented at APSAD 2025. Overall, DACRIN-led studies enrolled at least 288 participants, supported by strong engagement in externally led projects—underscoring DACRIN’s commitment to statewide growth.</p>
<p><b>3.2 Communication and brand awareness</b></p> <p><i>Promote our activities and track record to enhance the confidence of stakeholders, journal editors, funding bodies, and guideline developers in the quality of trials conducted through the network</i></p>	<p>Increase awareness of DACRIN-endorsed research and QI activities through the effective use of the logo</p>	<ul style="list-style-type: none"><li>• In 2025, DACRIN promoted consistent branding by encouraging authors and scholarship recipients to include DACRIN affiliation and logo on all outputs. The Statewide Coordinator represented DACRIN nationally with presentations at:<ul style="list-style-type: none"><li>◦ WHRN Symposium 2025 (Orange): Showcased DACRIN’s Member Affiliate model for building rural research capacity.</li><li>◦ APSAD Conference 2025 (Sydney): Highlighted DACRIN’s growth to 18 member organisations and strategies for consumer engagement and cultural safety.</li><li>◦ ACTA National Summit 2025 (Melbourne): Presented DACRIN’s vision for an inclusive, decentralised AOD trial network.</li></ul></li><li>• These efforts strengthened DACRIN’s visibility, credibility, and collaboration, supporting strategic goals such as workforce development, sustainability, and leadership in inclusive clinical research.</li></ul>
	<p>Maintain and enhance information-sharing platforms with a focus on promoting our track record and study outcomes</p>	<ul style="list-style-type: none"><li>• In 2025, DACRIN updated its website to promote collaboration and highlight research priorities, including the creation of a dedicated <a href="#">DACRIN Collaboration page</a>. This page provides clear guidance on how organisations can engage with DACRIN and outlines membership benefits.</li><li>• Website analytics for 2025 show that the DACRIN website site attracted 1,485 users, mostly via desktop (85%), with Google search driving nearly half of all traffic. The homepage was the most visited page, followed by DACRIN People, Membership, and Research Underway. Engagement was strongest on the DACRIN Map page, with users spending almost eight minutes exploring statewide coverage. The new collaboration page and the strategic direction pages also showed low bounce rates, indicating genuine interest.</li><li>• <b>Next steps:</b> Future enhancements to the website will include showcasing member achievements through plain-English summaries of study outcomes, links to publications, and citation metrics to demonstrate collective impact and increase visibility across the AOD sector.</li></ul>
<p><b>3.3 Strategic influence</b></p> <p><i>Help break down AOD research barriers and improve translation into practice using our voice and influence</i></p>	<p>Seek and leverage funding opportunities to support our strategic goals and activities</p>	<ul style="list-style-type: none"><li>• DACRIN investigators secured over \$2.5M in 2025 to advance AOD research capacity and innovation. This included CAOD support for training (\$45K) and scholarships (\$25K), plus major competitive grants:<ul style="list-style-type: none"><li>◦ \$150,000 – Clinical Review of Public Antenatal Medical Records</li><li>◦ \$984,831 – NHMRC Collaborations in Health Services Research</li><li>◦ \$499,848 – Telehealth step-down withdrawal care (TRGS Round 8)</li><li>◦ \$860,008 – Phase II medicinal cannabis study (MRFF AOD Grant)</li></ul></li><li>• DACRIN also lodged its largest bid to date—the \$7M MRFF DACRIN-X grant (July 2025)—to transform statewide AOD research through Teletrials, harmonised data systems, and consumer-led governance.</li><li>• To maintain momentum, DACRIN streamlined access to future funding by updating the Grant Opportunities SharePoint and introducing email alerts for new and time-sensitive grants.</li></ul>
	<p>Actively seek out opportunities to engage and support clinicians in integrating research into their practice domain, strengthening the connection between evidence-based research and clinical practice</p>	<ul style="list-style-type: none"><li>• In 2025, DACRIN advanced clinician engagement by linking training and endorsement processes to practical application. Over 100 clinicians completed PRAXIS training, and 11 scholarships supported professional development.</li><li>• The newly implemented Research Endorsement Guidelines created a clear pathway for clinicians to lead projects aligned with best practice and consumer priorities. DACRIN also promoted research integration at APSAD and WHRN Symposiums.</li></ul>
	<p>Proactively seek opportunities to address barriers within the AOD clinical research sector</p>	<ul style="list-style-type: none"><li>• In 2025, the Statewide Coordinator—embedded within CAOD’s Strategic Research and Evaluation team—continued to guide research within LHDs and act as a conduit between CAOD, LHDs, and stakeholders, supporting alignment for key evaluations such as ACM and SUPPs.</li><li>• DACRIN also initiated collaboration with the Centre for Epidemiology and Evidence (CEE) and CAOD executives to align priorities, promote transparency, and identify opportunities. CEE now attends DACRIN Council meetings biannually to provide updates on activities impacting LHDs, strengthening sector-wide coordination.</li></ul>
	<p>Promote the translation of DACRIN research outcomes into policy</p>	<ul style="list-style-type: none"><li>• The Research Endorsement Guidelines emphasise early engagement with CAOD for studies that have the potential to influence policy or clinical practice. This proactive approach strengthens collaboration and ensures research findings are positioned for real-world impact, supporting their translation into actionable policy recommendations.</li><li>• <b>Next steps:</b> we will enhance the DACRIN website to showcase completed studies and their outcomes, including summaries of policy-relevant findings and practical implications. This transparency promotes knowledge translation and demonstrates DACRIN’s commitment to improving clinical practice and informing policy through evidence.</li></ul>

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