Forskningsrådet

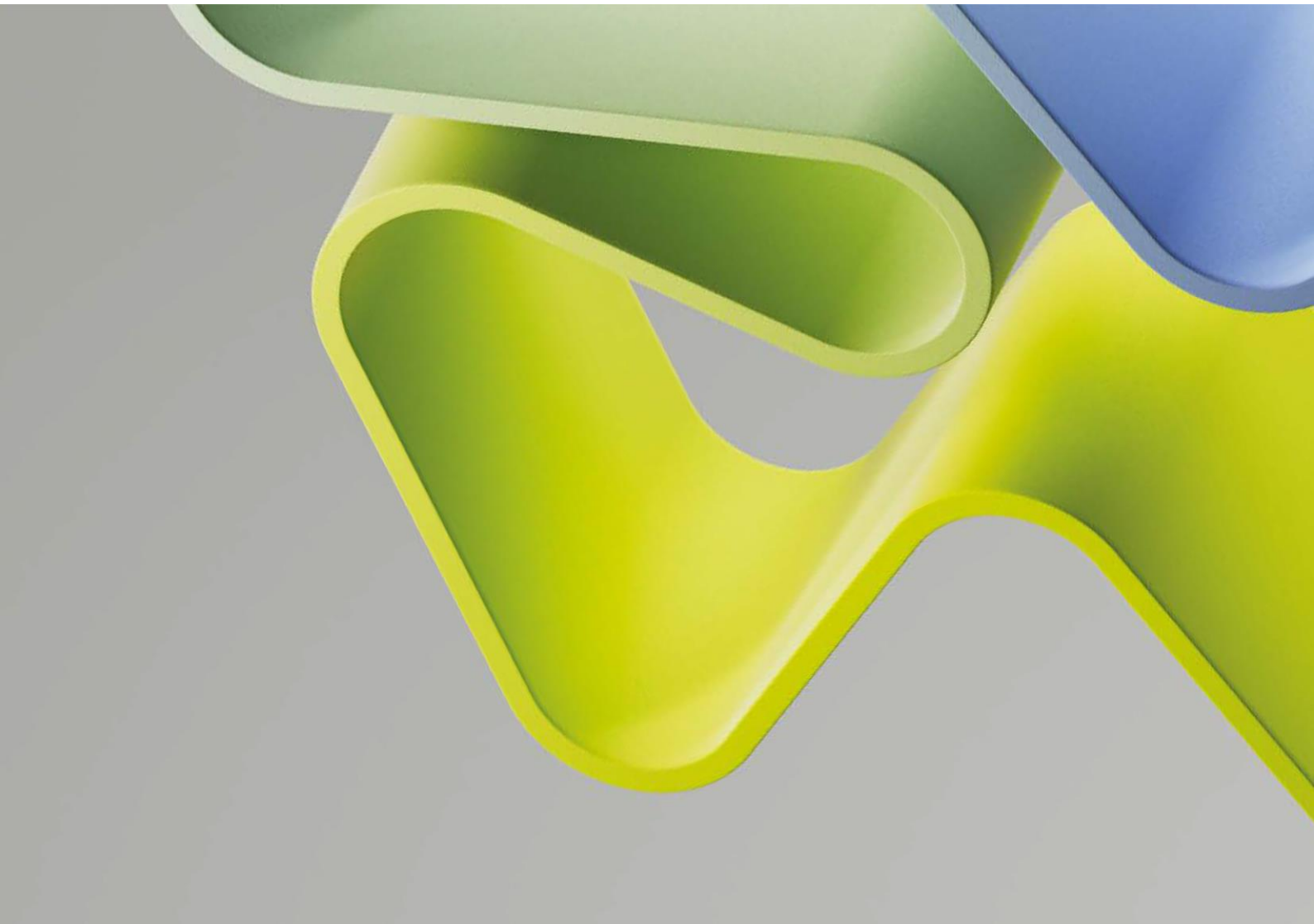
Evaluation of Life Sciences 2022-2024

Evaluation of medicine and health 2023-2024

Evaluation report

ADMIN UNIT: Faculty of Health and Social Sciences
INSTITUTION: Western Norway University of Applied Sciences (HVL)

December 2024



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Statement from Evaluation Committee Higher Education Institutions 1

This report is from Evaluation Committee Higher Education Institutions 1 which evaluated the following administrative units representing the higher education sector in the Evaluation of medicine and health 2023-2024:

- Faculty of Health and Social Sciences, Høgskulen på Vestlandet (HVL)
- Faculty of Social and Health Sciences, Inland Norway University of Applied Sciences
- Faculty of Nursing and Health Sciences, Nord universitet
- Faculty of Health Sciences (HV), Oslo Metropolitan University - OsloMet
- Faculty of Health, Welfare and Organisation, Østfold University College
- Department of Health and Care Sciences, UiT Artic University of Norway
- Department of Social Education, UiT Artic University of Norway
- Institute of Health and Society, University of Oslo (UiO)
- Faculty of Health Sciences, University of Stavanger (UiS)

The conclusions and recommendations in this report are based on information from the administrative units (self-assessment), digital meetings with representatives from the administrative units, bibliometric analysis and personnel statistics from the Nordic Institute for Studies of Innovation, Research, and Education (NIFU) and Statistics Norway (SSB), and selected data from Studiebarometeret (NOKUT). The digital interviews took place in Autumn 2024.

This report is the consensus view from committee Higher Education Institutions 1. All members of the committee have agreed with the assessments, conclusions and recommendations presented here.

Evaluation committee Higher Education Institutions 1 consisted of the following members:

Professor Falko Sniehotta (Chair)
Heidelberg University

Professor Lars Göran Kecklund
Stockholm University

Professor Joakim Öhlen
University of Gothenburg

Professor Maria Kristiansen
University of Copenhagen

Professor Nicola Shelton
University College London

Professor Annette Boaz
King's College London

Professor Stephanie Taylor
Queen Mary, University of London

Ivette Oomens, Technopolis Group, was the committee secretary.

Oslo, December 2024

Profile of the administrative unit

The Faculty of Health and Social Sciences (FHS) organises its research activities in five research areas. These areas are 1) person centred health research 2) public health and welfare services 3) service research 4) innovation and implementation 5) learning and educational research. Today the faculty has 23 different research groups. Three of the research groups are organised across two or three faculties, and two research groups are organised across institutions (e.g. Helse Bergen, Helse Førde). FHS has approximately 500 employees (academic and administrative staff). Out of these 32.55 person-years are professors, 4.8 professor (dosent), 69.64 associate professors, 29.16 senior lecturers, 3.35 researchers, 153.4 assistant professors, 9.7 post-doctoral researchers, 40.55 PhD students, one research assistant, one dean and three heads of departments. Women represent a majority in all categories except professor (dosent) where they represent 41.7%.

FHS is comprised of 23 research groups, four of which participated in this evaluation: Mental Health and Substance Abuse, DiaBEST - Best Practice Research in Diabetes and other Chronic Conditions, Comparative services research and Personalised health services (PERSONFORSK).

The research profile, action plans and allocation of resources of the FHS reflects the Western Norway University of Applied Sciences` strategy from 2019-2023, stating that their research should have a clear professional and working life-oriented profile. FHS has allocated resources and made priorities such as establishing two PhD programmes in 2019, one for Health, Function, and Participation, and another for Responsible Innovation and Regional Development (RESINNREG). They have also developed research collaborations for innovation and practice-oriented research, recruited PhD-fellows for research in public sector innovation, and allocated time to do research based on evaluation reports (associate professors are given up to 25 percent research time, while professors are given up to 35 percent research time).

According to its self-assessment, FHS's collaborative efforts with municipalities, specialised health services, and knowledge clusters in their region underscore their commitment to interdisciplinary engagement and addressing societal needs. For example, FHS is a part of several national and international partnerships such as the Bergen Summer Research School, the European Academy of Nursing Science, and the Baltic Sea Network on personalised health care. The latter exemplify their commitment to cross-border collaboration and knowledge sharing. Moreover, these partnerships extend their reach and enrich their research activity, ultimately benefiting both local communities and the global healthcare landscape.

Based on its self-assessment, in the future, FHS can take advantage of its recent internal assessment and evaluation of the research groups, that showed a close connection between bachelor, after graduate, master and PhD programmes. They may also take advantage of their nationally recognised research environment in areas such as service research and diabetes which enhances the institution's reputation and attracts talent. This also creates increased opportunities for external funding and collaboration. However, there are also challenges that may impact the future situation of the FHS. These include a limited connection between the PhD programmes and the research at the Centre for Care Research West (SOFV). FHS acknowledges the importance of fostering highly skilled professionals in the field of AI, which presents an opportunity in today’s technology-driven era.

Overall evaluation

The Faculty of Health and Social sciences (FHS) research strategy aims at promoting international collaboration, increase external funding, and integrating PhD programmes into the research profile. The overall organisation is suitable for the research strategy and the unit has the key internal support functions for the research groups. The five research areas are closely linked to the unit's PhD programmes and the master programmes, for example both master and bachelor students are involved in research projects. The FHS equality and diversity policy fits well with national legislation of non-discrimination, however, the share of women at the unit is 78% in 2021.

One of the unit's research strengths lies in its ability to develop innovative and sustainable solutions to challenging problems in the society, which is demonstrated by the impact cases. FHS also achieves sector specific impact by collaborating with different stakeholders doing research in the health and care sector. Another strong point is the link between the educational programmes in health and social care and the unit's research. It is a key strategic goal for the unit's research to drive both innovation and scientific advancement, and FHS contributes both to the Long-term plan for research and higher education (LTP) and United Nation's Sustainability Development Goals.

The scientific publication profile reflects the unit's educational activities, with an emphasis on nursing education. Several research groups are of high international quality and there is also collaboration with leading national and international institutions. The research production shows that the number of published articles has increased over the last five-year period, while citations of scientific publications remain at a stable level over the same period.

FHS also faces challenges such as operating on four different campuses after a merger of three university colleges in 2017. The share of external research funding is relatively low. However, FHS has a clear plan for increasing external funding, for example by focusing on smaller and less competitive grants. The unit also has a strategy to facilitate collaboration across the campuses, for example encouraging travelling and meeting in person, There are also other challenges such as a risk of financial cuts in the future, that half of the academic staff have no PhD or extensive research experience, and that a high share of leading senior researchers (professors) soon will retire.

The self-assessment reports shows that management of FHS is aware of its strengths and weaknesses. The unit shows a good understanding of how to address the weaknesses and improve the conditions for conducting high-quality research, for example by increasing external research funding and international collaboration. At the same time, the challenges, such as financial cuts, may require significant management efforts, in terms of priorities and allocation of resources to strengthen collaboration between research groups.

The terms of reference included a qualitative assessment of FHS in relation to the HVL unit AFII. The committee was unable to assess these aspects, as no information on AFII was available in the self-assessment for the unit.

Recommendations

The evaluation committee wishes to extend the following recommendations to the administrative unit.

- Monitor the unit's quality of research and research production over time to support the unit's future research strategy. Developing a research quality indicator report could complement the internal assessments of the research groups made by the unit. However, it is important that the indicator report does not mean collecting a lot of data and a sharp rise in bureaucracy.
- It is important that the unit follows up on possible synergies between primary research activities and the PhD programmes. The PhD programme started in 2019 and the unit has identified challenges linked to this initiative, such as do the PhD students get optimal research conditions?
- Continue to facilitate research collaborations across research groups and campuses. It is important that the unit continues to support joint research funding opportunities, and regular internal conferences, workshops, and research networks. Building a strong research culture creates the foundation for future research projects and facilitates development of new collaborations, cross-disciplinarity and creation of innovative, and cutting-edge projects.
- Allow for a more focused approach and prioritisation of research questions. To increase research quality some groups may benefit of a more focused approach and prioritisation of research questions that address important knowledge gaps. This approach may lead to stronger research publications that can be published in high standing journals.
- Provide extra research time for grant writing. Writing competitive applications is a time-consuming process and providing extra research time can be an important incentive to improve the quality of applications.
- Encourage participation of more researchers in strategic, longer-term formal collaborations. The national and international collaborations could be based on agreements, for example aimed at student exchange, mobility of researchers and seed funding leading to joint grants and educational activities.
- Consider introducing research sabbaticals. Implementing formal routines for research sabbaticals can be an important step towards enhancing research quality and increasing research time.
- Develop an attractive early career research programme, for example by offering more post-doctoral positions to researchers who have completed their PhD at the unit.
- Increase the number of international researchers. Few researchers in the unit have a PhD degree outside of Norway. More international researchers provide access to new networks, increases international collaborations, and can be a step towards increased international research funding.
- Maintain the focus on societal impact. There is a growing societal interest in several of the unit's research themes. Thus, the unit should maintain the focus on societal impact, for example by conducting high quality intervention and implementation research in health and social care sector.

1. Strategy, resources and organisation of research

1.1 Research strategy

The Faculty of Health and Social Sciences (FHS) at Western Norway University of Applied Sciences (HVL) was formally established in 2018, after the merge of three different university colleges in 2017 into Western Norway University of Applied Sciences. Research activities are organised in five research areas: 1) person-centred health research, 2) public health and welfare, 3) service research, 4) innovation and implementation, and 5) learning and educational research. FHS includes 23 research groups with the focus areas sustainable social development, welfare and innovation. The research groups are spread over several campuses. The research profile is directed to understanding and improving health, function and participation through studies that improve understanding, development and testing of health care interventions that have an impact on people and society.

FHS's research profile reflects HVL´s strategy for 2023-2030, stating that research should be of high international quality and help to shape society and professions. HVL´s strategy also emphasises the working life-oriented profile, promotes cross-disciplinary research, and that the university should be an important innovator and the region's preferred knowledge partner. The unit also has a research strategy, but since this document was in Norwegian language it was not possible for the committee to evaluate the strategy. HVL´s research strategy is implemented through regular meetings with the research group leaders, and the faculty organises an internal annual research conference. They also offer leadership programmes and courses for the research leaders.

FHS has arranged an internal evaluation of the research groups to see how the faculty can strengthen external funding through international and cross-disciplinary research, as well as better matching the research groups profiles to their PhD-programmes. Based on the internal evaluation, FHS is in the process of establishing an assessment group with a mandate to come up with suggestions for priorities and allocation of resources to strengthen collaboration or mergers between research groups. The assessment group will also suggest how to enhance cross-disciplinary and international research collaboration to strengthen the faculty's capacity to apply for external funding. The internal evaluation will be repeated in two or three years.

The FHS research profile is also tightly connected with the PhD-programmes ("Health, Function and Participation" and "Responsible Innovation and Regional Development"). FHS has since its establishment in 2017 allocated resources and set priorities to be in line with HVL`s strategy of building research competence and capacity. A few examples of the key priorities are: allocating time to do research, associate professors are given up to 25% research time, while professors are given up to 35% research time; scholarships for early career researchers and scholarships for associate professors to become full professors; establishing two new PhD programmes and recruiting PhD fellows; involving students in research projects and implementing post doc scholarships. It should be noted that FHS is facing financial challenges and there is a risk of financial cuts in the coming year.

The committee's evaluation

FHS started in 2018 and the development of research since the start is promising. The research staff has a relatively high teaching load, but since the start it has been a strategic priority to increase research time for senior researchers. The other strategic priorities are

very reasonable and contribute to strengthening the research of the FHS, especially in the long term.

The research profile of FHS is broad and interdisciplinary, which is fully in line with the research strategy and vision of HVL. HVL's strategy for 2023-2030 is ambitious and has a clear vision, however, it is also brief, general and does not contain concrete research objectives. Given the applied focus of the university, this is reasonable, but it is important that the FHS concretises the strategy and adapts the goals to the research areas, especially given that the unit aims to grow its scientific activities in the coming years.

Another challenge for the FHS is that research groups are spread across several campuses, which can make it difficult to collaborate and there is a risk that smaller research groups in particular become isolated.

The committee´s recommendations

- FHS research strategy should specify objectives related to research quality, for example in relation to grant applications, collaborations and scientific productivity.
- Since FHS is a relatively new research unit, one of the key goals should be to continue to strengthen the research culture. A stronger focus on the research culture helps the researchers to explore ideas and share good practices, but it is also important to establish good support systems that reduce the administrative pressures within the research groups.
- Another goal is to support the research groups in prioritising and focusing on key research questions, and how to get stable funding for research. The recommendations to the research groups that have been assessed are in several cases about sharper focus on priority areas, and to build a strategy to address future developments and challenges.
- The unit should continue to facilitate research collaborations across research groups and campuses, for example joint research funding opportunities, regular conferences and workshops, and support for research networks.
- The FHS management is aware of economic challenges that can threaten research and reduce resources. To reduce the risk of research being affected by financial pressures, FHS should aim to improve teaching efficiency rather than reduce research time and continue to improve the quality of grant applications.
- The PhD programme started in 2019 and the unit has identified challenges linked to this initiative. It is important that the unit follows up on possible synergies between primary research activities and the PhD programmes. For example, do the PhD students get optimal research conditions, and do the PhD students add important research capacity to the research groups?

1.2 Organisation of research

The faculty has 23 research groups, of which some groups are organised across other faculties and institutions. Each research group has an identified senior leader responsible for leading, delegating and supporting group members in funding acquisition, project implementation, dissemination and impact. Moreover, when getting external funding, each project leader and group get an administrative resource to help with reporting, research ethics application, seminar activities, and outreach activities. In 2024, FHS will consolidate and facilitate cross disciplinary working, activities and collaboration between groups, interdisciplinary cooperation, build capability and capacity, and improve external funding acquisition and impact in our five strategic research areas.

FHS emphasises synergies between the faculty's research activities, educational programmes and innovation activities. For example, research groups include master and bachelor students in research projects.

FHS has approximately 500 employees (academic and administrative staff). The majority of academic staff are assistant professors, followed by associate professors. In addition, FHS has approximately 40 PhD students, 10 postdoctoral researchers and, nearly 40 full-time professors. Given that university colleges have a strong education tradition, the merger between three previous university colleges resulted in that a large share (approximately 50%) of the academic staff having no PhD degree or extensive research experience. FHS offers grants to support employees to qualify for professor, associate professor and senior lecturer.

Professors have up to 35% research time. The corresponding figures for associated professors are 25%, and 10% for university lecturers. Research group leaders get 50 hours per year to lead their research group. Currently, there is no arrangement for research leave/sabbaticals. This requires coordination at the institutional level but has not yet been formalised. Twice a year FHS announces travel grants for research purposes targeting associate and full professors.

The committee's evaluation

FHS has prioritised developing the research organisation since the merger of three research colleges. For example, it is a strength that FHS will evaluate and, if necessary, reorganise the research organisation. As researchers of FHS has a large teaching load, the research time of senior researchers and professors is limited. There is also a high (approx. 50%) share of research staff (especially among the teachers) who do not have a doctoral degree. It is a strength that the research groups receive administrative support in terms of ethics applications, outreach activities, and organising seminars. Another strength is that students, especially master students, participate in research projects during their training.

The committee´s recommendations

- The possibility to qualify for a higher position is important for the researchers themselves, while it is also crucial for the faculty to have highly qualified researchers. The share of postdoctoral researchers is relatively low and research would benefit of increasing the number of post-docs that can spend 100% of their work time on research activities. It is also important to not reduce research time for senior researchers if FHS experiences financial cuts.
- The unit should consider implementing formal routines for research sabbaticals. Research sabbaticals can be an important step towards enhancing research quality and increasing research time. Implementation will be determined at the HVL level, however, the unit should prioritise funding for shorter research stays.
- The high share of academic staff without a PhD degree can reduce research capacity. It is important to counteract these problems by developing an attractive early career research programme, for example by increasing post-doctoral positions to researchers who have completed their PhD at the unit.

1.3 Research funding

Throughout the period of 2018-2022, FHS received a total basic funding of approximately 1,6 million NOK allocated from the university, out of which 19.5% in average was research

funding. Competitive grants make up about 37% of research funding at the faculty during the period of 2018-2022. FHS achieved most funding from national grants, and about 7% of the funding coming from international grants. About 60% of funding through national grants comes from the Norwegian Research Council, followed by other governmental organisations (18% of the funding), foundations (15% of the funding), public sector (5% of the funding) and industry (2% of the funding). International grants at FHS comprise mainly of ERASMUS grants (46% of the international funding) and EVBRES Cost Action which was initiated and coordinated at FHS (34% of the international funding). FHS's primary goal with respect to grant applications is to improve the quality and thereafter the quantity. The unit is aware of the challenges related to research funding and has a clear strategy on how external funding can be increased. Examples of strategies are submitting applications for smaller, less competitive, grants that have a higher success rate, and continue to focus on international education programmes (e.g. Erasmus) as a gateway for further research collaboration.

The committee's evaluation

The external funding share (37%) is relatively low and there is opportunity for growth. FHS did not provide us with statistics on the number of submitted applications and the acceptance rate. The share of international grants is low (7%). Increasing external funding will make FHS less vulnerable to economical cuts of the basic funding.

The committee´s recommendations

- Stable research funding is one of most important long-term goals for FHS. The faculty's strategy to increase external funding is realistic and should be promoted. FHS is aware that the faculty needs to improve the quality of applications in order to obtain more external funding.
- Improved quality is also linked to have sufficient research time to prepare applications. Once the quality process has been improved, there is potential to submit more applications. To increase the number of applications submitted, FHS may need to create incentives to ensure that more applications are being submitted. It is also important to follow up on submitted applications, for example to analyse why certain applications are granted funding and which calls are suitable for FHS research activities. When it comes to international applications, it could be beneficial to collaborate with international partners who have the ability to get applications to the EU accepted.

1.4 Use of infrastructures

FHS has not participated in the national and international infrastructures listed in the evaluation report. This may be because the infrastructures do not align with the research topics at FHS.

FHS has access to fundamental research infrastructure at HVL, such as scientific equipment necessary for the researchers. This includes tools and programmes for handling large and complex datasets, including statistical analysis. Many researchers use various registry data in their research, and also data from population-based studies and clinical data. Depending on the research topic, researchers with their associated groups will establish connections with national and international collaborators and further engage in infrastructures that naturally belong to their subject of interest. For example, FHS has a group with research collaborations related to mental health, substance use and addiction.

This research group is involved in the KVARUS registry for substance use and addiction, as well as the PHV registry for mental health adult treatment. The DiaBEST research group has a strong collaboration with the National Diabetes Registry for adults.

FHS has guidelines for open publishing of research data, and dedicated personnel working with guidance on how research data should be processed for archiving according to the FAIR principles. The researchers have access to courses and webinars on open science. Researchers at HVL may publish their research data in the HVL Open Research Data archive: Western Norway University of Applied Sciences (dataverse.no).

The committee's evaluation

FHS's research themes will probably not benefit from using advanced laboratory research facilities and complex technical tools. Furthermore, participating in infrastructure related research often requires a financial commitment, and financial constraints in the research groups and/or FHS may limit participation. HVL's guidelines for open data policy follows the FAIR principles.

The committee´s recommendations

- Hosting infrastructure is not a top priority for FHS, but could possibly be further explored in future. However, a more realistic approach could be to collaborate with partners that hosts infrastructures, for example related to databases that are relevant to FHS research themes.

1.5 Collaboration

FHS participates in steering groups and strategic collaborations, such as the Alrek Health Cluster and Kunnskapskommunen. Engagement in regional cooperation bodies for research and innovation further amplifies the unit's reach. By aligning with the Western Norway Regional Health Authority and universities, FHS contributes to a shared research and innovation strategy, for example related to developing impactful solutions to healthcare challenges and enriching understanding and solutions for community health.

FHS participates in COST Actions research network for systematic reviews in health sciences and partnership with the European University Association (EUA). The unit also leads Cochrane Norway. These connections ensures that FHS's research remains relevant and informed by international perspectives. Collaborations within networks like the European Academy of Nursing Science (EANS) and the Baltic Sea Network on personalised health care exemplify FHS's commitment to cross-border collaboration and knowledge sharing. As associated partners in various research schools and networks, both nationally and internationally, FHS obtains more arenas for collaboration.

Co-authorship is a commonly used indicator of research collaboration. The share of publications with national co-authors have varied between 56 and 67% during the time period of 2018 – 2022. The share of publications for international co-authors has increased from 38% (2018) to 42% (2022). The top 3 most prevalent national institutions related to co-authoring of scientific publications are University of Bergen, Bergen Hospital Trust and University of Oslo. The corresponding top 3 list for international co-authoring is Karolinska institutet, University of Southern Denmark and Uppsala university. The NIFU report of bibliometric statistics shows that international collaboration with respect to scientific publications is below the average of other evaluated administrative units.

The committee's evaluation

FHS collaborates with municipalities, regions, and several national and international universities, which fits with the unit’s educational profile and the commitment to societal needs and interdisciplinary research. This is reasonable since one of the strategic goals of HVL is that the university should be the region’s preferred knowledge partner. FHS has a leading role in some research projects, such as the Diabetes research group. There is potential to strengthen the quality and relevance of the research if the unit took a more leading role in collaboration with regional, national and international partners. A greater focus on strategic, formal, collaborations can create conditions for stronger grant applications, more external research funding and stronger scientific publications. In the long term, this may mean that the unit's research receives more national and international attention.

The committee´s recommendations

- FHS should encourage the researchers to participate in strategic, long-term formal collaborations. The collaborations can include more national and international partners and be based on formal agreements aimed at student exchange and mobility of researchers. The agreements should be combined with seed funding leading to joint grants and educational activities.

1.6 Research staff

The majority of academic staff (64%) are assistant professors, followed by associate professors. Since 2019 and the establishment of the PhD programme Health, function and participation, FHS has approximately 40 (12% of all researchers at the faculty) PhD students. In addition, FHS has 8 PhD students at the interfaculty PhD programme Responsible Innovation and Regional development at the pillar Innovation in public sector. Also, FHS has about 10 (3%) postdoctoral researchers and nearly 40 (11%) full-time equivalent positions for professors.

The share of women at FHS was 78% in 2021, reflecting the highly gendered professions that constitute the faculty’s educational profile. In 2021 53% of the professors were above the age of 62 years old. The university currently has a hiring freeze.

The committee's evaluation

The share of professors and early career researchers at FHS is low. The early career researcher will probably increase when the PhD students complete their educations and become doctors. The high share of women is not surprising since the education is related to health care professions. The high share of professors above 62 years old and the hiring freeze indicates a capacity challenge in relation to FHS research activity in the future.

The committee´s recommendations

- The generation shift indicates that FHS needs to give priority to support of early and mid-career researchers. The faculty is aware of this challenge and has already launched activities that will support the career development for the mid-career researchers.
- An increase in post-doctoral researchers is desirable when the hiring freeze ends. However, top priority is to recruit new professors that can replace the currents professors when they retire.

- Recruitment of new professors should also target international candidates. International professors will give access to new research networks and research ideas, which may increase research quality and scientific publications.

1.7 Open Science

The Western Norway University of Applied Sciences (HVL) has an Open Access Policy adhering to international requirements for open access publications according to PlanS. An institutional repositor, HVL Open, is available for archiving scientific works. The university is part of the Norwegian academic institution’s transformative agreements also known as "Publish and read" agreements.

HVL’s Open Data policy regulates ownership to data, data management and data sharing. The Open Data Policy follows the FAIR Guiding Principles for scientific data management and stewardship. The repository HVL Open Research Data is part of the national, generic repository for open research data DataverseNO. The policy states that all research data should be made openly accessible, in accordance with the Norwegian strategy on access to and sharing of research data. Juridical, ethical, commercial, or other circumstances may open up for exceptions to this rule, which must be accounted for in the research project's data management plan. All research that involves human subjects is obliged to ensure protection of participant’s personal data. Data protection entails respect for the individual, the use of informed and expressive consent, and that personal data are processed confidentially. The guideline adheres to the Norwegian Act on Medical and Health Research and Norwegian Act relating to the processing of personal data.

The most important contributions for Open Sciences are open access publishing, then followed by open research data. FHS currently has no policy for public research/citizen science. In 2024, FHS will start the process of developing a new Open Science policy that will encompass several of these elements (public research and code).

The committee's evaluation

FHS shows a good understanding of different aspects of open science, including the importance of having a data management plan that clarifies which types of data are collected and how they will be accessed. Because some data may include sensitive information, it is not always possible to make data openly accessible. Open science is well implemented and the institution’s guidelines and regulations are followed. The share of open access publications is high (89%) and the share of gold open access is higher than for the average of evaluated administrative units.

The committee´s recommendations

- The FHS demonstrates good knowledge and awareness of the benefits of open science. By developing the policy (to be done in 2024), FHS can increase its scientific impact, which may mean that scientific publications receive more citations.

2. Research production, quality and integrity

Introduction

FHS has five dominant research areas: 1) Person-centred health research, 2) Public health and welfare research, 3) Service research, 4) Innovation and implementation, and 5) Learning and educational research. These areas reflect the thematic research areas and FHS research profile, although the research activities are organised at the research group level. Accordingly, the research areas are not an organisational unit for the research activities taking place in the research groups. In addition, there are research networks connected to the research centre “Centre of Care Research”, which has a special focus on elderly care, municipality health, social care service research and public sector innovation research.

FHS’s research production highlights article contributions in the field of Nursing, Public, Environmental and Occupational Health as well as in Social Work. However, the faculty’s researchers also publish articles and book chapters within the field of Psychology, Multidisciplinary Social Sciences and Rehabilitation, Physiotherapy, Ergotherapy and Orthopaedic engineering. The overall scientific publication profile reflects FHS’s educational profile, with an emphasis in nursing as the largest profession and education programme. The number of publications has increased with 40% during the last five years. A majority of the publications is published in level 1 (standard) journals according to the Norwegian list, however, some of the most cited publications is published in level 2 (high standing) journals. FHS’s most cited articles are within evidence-based practice and systematic reviews reflecting the faculty`s long lasting priority on evidence-based practice (established as a master programme in 2005). The mean normalised citation score shows a relatively high variability across years, and the average was 102 for the years 2019-2021. In contrast to number of publications, the time trend of the citation score has been relatively stable during the last five years. This observation is also supported by the share of 10% most cited publications that very between 5.4 and 9.2% during the last five years.

All health research projects are assessed by the regional research ethics committee. Research projects that are not included in the Health Research Act are handled at the institutional review board at the faculty. FHS established a research ethical committee in 2023, which handles research applications that are beyond the scope of the regional committee for medical and health research ethics. The research ethical committee at the faculty conducts an assessment of the project and gives a recommendation. In addition, the faculty arranges for seminars for research ethical training targeting academic staff.

2.1 Research quality and integrity

This part includes one overall evaluation of each research group that the administrative unit has registered for the evaluation. The overall assessment of the research group has been written by one of the 18 expert panels that have evaluated the registered research groups in EVALMEDHELSE. The expert panels are solely behind the evaluation of the research group(s). The evaluation committee is not responsible for the assessment of the research group(s).

Best Practice Research in Diabetes and other Chronic Conditions (DiaBEST)

The DiaBEST group's contribution to health of patients with diabetes is considerable, given what is expected from groups in the same research field in Norway and elsewhere. A

particular strength of the research group is the strong and relevant focus on secondary health care for patients with diabetes, and the close relationships with practice and with education of practitioners. The DiaBEST research group is, despite its size, a highly focused research group. The group has significantly contributed knowledge about the treatment of these patients, benefiting both the healthcare system and patients in Norway and elsewhere. The group's strength lies in its strong foundation in nursing work with these patients, its multidisciplinary approach, and its excellent use of various research methods to improve the prognosis for patients with diabetes. The strong focus has enabled the group's diverse work

Comparative Services Research

This is a research group that is well-established with an appropriate structure. A strong group with a clear ambition and strategy to deliver on its goals and objectives. Most of the group's funding portfolio is external and competitively won, a strength of the group. Of note is the group's collaborative funding from an international funding agency, the Canadian Research Council. Importantly the research group focuses on the pedagogy of research supervision and researcher training in terms of the skills required to deliver on project goals. The projects listed in the self-assessment report are focused on the group's expertise. The main outcome for some projects is publications. They are addressing very important topics for society, e.g., migrant women's participation in the workforce. There is a focus from knowledge to action, an important component of the evidence of research impact. Other important societal areas researched include multicultural staff in nursing homes, focus on care quality, primary care. The group also engages in CPD activities, again going beyond publications. Although there is reference to involving users and user participation in the research the group delivers there is no explicit explanation of user engagement. For example, in section 1.2 'Strategies' the following is stated: 'involve users and non-academic partners in research'; however, how this is actioned is not outlined or described. Given the area of research is health and care services putting user involvement at the core of its research activities is key to ensuring the outcomes and outputs of the research enhance the quality of life for those at whom the research is targeted. Another weakness is the lack of searchable profiles of the group members.

Mental Health and Substance Abuse

This research group focuses on Mental Health and Substance Abuse which it describes as an under-studied research area, however there are mentions of wider interests. It aims to develop new knowledge about challenging life experiences especially mental ill health and substance abuse. It is located within the Faculty of Health and Social Sciences of the Western Norway University of Applied Social Sciences, itself the product of smaller university mergers. This long-established research group now comprises 27 members with 4 associate members. It aims to meeting faculty and university objectives through undertaking research and contributing to educational programmes. All research group members have teaching duties and the research group aims to integrate its research with its teaching commitments. While receiving core funding from the university it also attracts greater amounts of other external funding from the Research Council of Norway and from other bodies, but no international funding. The 8 PhD students provide a reasonably large cohort and are evidence of the research group building research capacity. The research group or university manages no national infrastructure but the group is adequately

supported. Its publications are of national quality in terms of rigour, scientific quality and originality and the group members have contributed well to these.

There is mention of substantial service user involvement and this might be more embedded into the overall work of the research group. The research group might also address some of the implications of population diversity in its studies. This research group undertakes research but it is heavily engaged in teaching and learning. The panel was of the view that it compares well to other research groups nationally in the quality of its work but suggests that it could consider the balance of research and teaching, develop a sharper focus on its priority areas, and build a strategy to address future developments or challenges. Specific measures for its benchmarking might give greater focus.

Personalised health services (PERSONFORSK)

The PERSONFORSK group has 23 members and is led by a professor who has positions clinically and academically across the two named institutions. The focus is on developing research studies 'bridging psyche and soma in health services' and benchmarking underlines and emphases this aim. The group appears well aligned with the overarching and broad strategy of both organisations. Strategic aims are carefully listed and are ambitious; they provide a solid framework for future assessments.

Although the listed funding and outputs fall clearly within the main topic area, there is a concentration of research on mental health, substance abuse treatment and in surgical services such as bariatric surgery, stoma care and post-operative pain. It is noteworthy that finances are stable, and that funding has steadily increased over the review period - including after the re-organisation.

There are six research studies listed, and these are from several sources, although the majority are provided by core funding. The volume of outputs is good - 15 are listed - and journals are clinically relevant to the topic areas but leaning towards the more modest side of publication ranking.

The group contributes to Master's and PhD programmes as well providing specific support to 11 PhD candidates within the immediate research group. They also support 2 post-doctoral students. There are ten books/monographs listed. All this underlines the significant output of the group, even considering the relatively large number of members.

The grading for the organizational dimension was 4 (very strong for supporting the production of excellent research). For the quality dimension the group received 3/4 (high score for the "research group´s contribution"), and for the societal impact decision the score was 3/3 (indicating that the group's societal contribution is on par with what is expected from groups in the same research field, and that societal partners have considerable involvement in the research process).

3. Diversity and equality

HVL practices are in accordance with national legislation and institutional regulations to fulfil the principle of non-discrimination. HVL has a Council for Equality, Diversity and Inclusion, and one of the members of the committee comes from FHS. HVL also has an Action plan for equality, inclusion and diversity. HVL adheres to the Government's Inclusive Workplace Initiative. One of HVL`s three main values in the strategy is inclusion: "Everyone is treated with respect and consideration. By inclusion, we mean that we value diversity and promote academic development, well-being and a sense of security". The overall aim is to promote equality and prevent discrimination among staff and students.

HVL has worked out an action plan to implement institutional legislation on diversity and equality, and has an application in progress on Charter & Code Certification, involving being a charter for recruitment and conduct of researchers (see The European Charter for Researchers).

The committee's evaluation

FHS reflects well on the gender imbalance and other data related to diversity and equality. HVL's action plan for equality, inclusion and diversity is concrete and structured according to goals, how the goals will be reached, and who is responsible for reaching the goal.

The committee´s recommendations

- Although the HVL action plan is good, there are no performance indicators of discrimination, bullying and harassment at the research group level.
- It is important that FHS follows up on how the action plan works. Research group leaders have a key role in this work and should pay attention to occurrences of harassment and discrimination. FHS may consider offering mandatory courses on diversity and harassment to the research groups.
- It is important that diversity, e.g. related to ethnic and gender minorities, are taken into account in the recruitment and advertisement of research positions at all academic levels.

4. Relevance to institutional and sectorial purposes

FHS aims to ensure that the knowledge produced will improve health and social care practices and services, and the unit strives to collaborate closely with clinical practice to make certain that research is relevant and has high impact. FHS also achieves sector specific impact by collaborating closely with different stakeholders when doing research, for example by co-creating knowledge with stakeholders in health and social care services to ensure relevance and knowledge exchange and uptake.

FHS undertakes complex intervention research that analyses and identifies anticipated and unanticipated outcomes and tries to explain these outcomes. In addition, FHS conducts implementation science research, such as investigating the process of introducing new knowledge and analysing intended and unintended effects. Some of the research groups have focused on public sector innovation research. In contrast to implementation science, that is focused on doing research on the process and effect of “putting research evidence” into practice, public sector innovation follows the process of introducing new ideas into established health and welfare services.

Research-based innovation and commercialisation projects are a strong priority for FHS and the faculty has been awarded several successful innovation projects funded by a variety of sources, including the Norwegian Research Council (NFR) and Norway Grants and Regionale Forskingsfond (RFF).

When applying for research and innovation funding, the researchers are required to register planned proposals with the research administration. The central research administration together with project economists, assists researchers in both the proposal development, contract development (including the handling of IPR issues) and the successful execution of the funded projects. HVL also has an internal funding programme for early-stage innovation projects, available for both researchers and students, with an annual call.

The committee's evaluation

FHS contributes to institutional and sectorial knowledge through education and research. The close link between research and the master programmes provides the health and social care sector with competent workforce. FHS’s research provides significant contributions to development of new approaches and methods that are necessary for conducting high quality complex intervention and implementation research. Researchers at FHS are involved in innovation projects that lead to new findings that can be commercialised. It is a strength that FHS also has a PhD programme related to innovation and regional development. The available administrative support teams are important to enable innovations that can develop into spin-off companies and commercial services.

The committee´s recommendations

- FHS's expertise in evaluating and developing innovations in health and social care services means that this research theme can grow, provided there are opportunities to fund social innovations. However, as innovation-oriented research and evidence-based health and social service practices is a priority in Norway (according to the “Long term plan of research and education”), funding is likely to increase for this type of research.

- An important component of doing high quality innovation research is to continue to develop methods and interventions that can be translated into testable innovations that are implemented in health and social care.

4.1 Higher education institutions

FHS has seven bachelor programmes (e.g. nursing, social work, physiotherapy), 13 master programmes (e.g. advanced nursing practice, applied social science, mental health and substance abuse), more than 20 after-graduate programmes (e.g. one semester or one year training programmes), and one PhD-programme: “Health, Function and Participation”. Moreover, the Faculty has a co-responsibility for a cross-faculty PhD programme in Responsible Innovation and Regional Development.

The bachelor programmes are the backbone of FHS and form the basis for professional further education and master's programmes, as well as for the Ph.D. education within health, function, and participation. Together, they represent the span and depth of FHS academic and research environments. The faculty has a scientific ambition to strengthen research-based teaching, guidance, and practice with particular emphasis on the areas of the PhD programmes.

The faculty has doubled the number of master's programmes after the merger in 2017, and the programmes attract students from all health regions in Norway. Objectives outlined in the faculty plans refer to an overarching goal that all students should have a seamless educational path from bachelor's education to PhD. Through the close connection between the research groups activities and the master education, master students have the opportunity to become involved in existing research activities led by the research group. This close connection to master and PhD education, is resulting in an effective recruitment pipeline for doctoral and early career researchers. A master portal has been introduced and the goal of the portal is to give a better overview for students to find relevant projects to work on, and for employees working in the professions.

Research group members are teaching at the master level. For example, members of the DiaBEST research group have systematically developed the master’s programme in Nursing (established 2011) to ensure the quality in health care services by high academic and clinical competence. Within the diabetes specialty (25 students every other year), members of the research group are the course leaders for all seven modules.

The committee's evaluation

FHS has an extensive educational activity and there is a link between undergraduate and postgraduate education. Master's students are offered good opportunities to participate in research projects, which means students with a talent for research can be spotted early.

The committee´s recommendations

- In line with supporting the research culture at FHS, strengthening the research profile of some master programmes (and maybe even create a more research-oriented master) would be beneficial for the PhD programme. A concrete example could be to increase the number of master's theses that can be published in scientific journals.
- As the doctoral programmes at FHS has not existed for very long, it is important to evaluate the doctoral education, for example the quality of the theses, and how many PhD students go on to get an early career position.

5. Relevance to society

Introduction

FHS contributes to the overall objectives of the long-term plan for research and higher education (LTP) through research in close collaboration with municipalities and end-users. This fosters knowledge-based innovation and development in the public sector, but also in the private sector. FHS aims to make results easily accessible for researchers, health and care services, the business sector and the public at large by an Open Access Policy and the Open Data Policy. In addition, through strong clinical practice collaborations with health and care services, research results will be diffused to end-users. Furthermore, HVL has developed an action plan for sustainability 2023-2026.

The research at FHS is interdisciplinary, cross-sectoral and based on international collaboration, which is needed to solve the great societal challenges. This objective is closely related to the UN Sustainability Development Goals (SDGs). Of the three dimensions (environmental, economic, and social sustainability), research at FHS specifically contributes to the dimension of social sustainability, which is in accordance with the overall aim of all the five research areas of FHS. One of the thematic priorities of LTP is health, which addresses SDG 3 - good health and well-being. FHS contributes to educate highly qualified personnel, and, at the same time, contributes to the goal of increasing research in and on services at municipal and county authority level.

The committee's evaluation

FHS contributes extensively to the LTP and the UN SDGs and the high relevance for society fits well with HVL’s research strategy. For example, the FHS educates health and social care professionals, thereby reducing the risk of skills shortages in this sector. FHS research in health and social care is important given society's challenges of an ageing population and the need to improve the efficiency of health care. FHS impact cases provide good examples of the societal benefit, relevance, and innovative as well as commercial potential of research.

The committee´s recommendations

- For FHS, high scientific quality goes hand in hand with relevance for society. FHS's interdisciplinary and cross-sectorial research, based on collaborations with the clinical field, contributes to creating a sustainable society, and it is important that HVL and FHS invest in being at the forefront of research-based innovations in the health and care sector. An example of opportunity for innovation could be in eHealth technology.

The committee’s comments on impact case 1: Experiences of COVID-19 in Norwegian nursing homes

The Norwegian Corona Commission commissioned a report on preparedness for and experiences of the corona pandemic at Norwegian nursing homes. The assignment was led by Centre for Care Research west. The aims of the assignment were: 1. To investigate experiences of COVID-19, including how the nursing homes were prepared for a pandemic, what challenges they encountered, and how they managed to deal with the pandemic. 2. To establish statistics on nursing home deaths. Case studies were performed in five nursing

homes in five different municipalities spread geographically, varying in size and exposure to COVID-19.

The key findings were related to both a statistical analysis and an interview study. Data from the first year of the pandemic (March 2020 to March 2021) showed that approximately 50 % of all COVID-19 related deaths in Norway occurred in nursing homes. The qualitative study showed that leaders, care staff and physicians reported a decline in activities for residents, in particular social activities. Contact with resident's family was a huge challenge, including in wards with no COVID-19 in affected nursing homes.

The results from the project have been widely disseminated nationally and internationally in terms of scientific articles, conference contributions, knowledge sharing with decision-makers nationally and internationally, including a report to the Norwegian Corona Commission and knowledge-sharing with decision-makers in UK and Canada.

The impact case was good and had both significant research/academic impact and impact for the general society, in Norway and abroad.

The committee's comments on impact case 2: Norse Feedback – technologies for personalised mental health services

The Norse Feedback (NF) research programme spawned two medical technology spin-offs: Mental Health Informatics Holding AS and Norse Feedback AS. NF developed personalized healthcare tech from institutional research, impacting Norway and beyond. The technology has influenced major service organizations in the USA and the UK as part of health tech exports. In Norway, approximately 10,000 monthly patients benefit from this technology, ensuring precision and user involvement in their ongoing healthcare processes.

The NF research programme employed a multilevel approach to health service research. The approach involved basic clinical research, clinical technology, and stakeholder needs, laying the foundation for research-based innovations. To ensure the dissemination of clinical innovations, a separate level focuses on implementation research. Additionally, the program also addresses health service and health economics aspects.

NF impact lies in its implementation across healthcare settings, driving new processes, decisions, and treatments. As a medical tool designed for professional settings, NF relies on empirical evidence and research. The technology and knowledge following the NF research program, and its technological spin out, is far reaching. The major stakeholders experiencing and benefitting from this impact are, first and foremost, patients suffering from different health problems. Second, treatment providers benefit from the availability of new tools that make their jobs easier. Last, health care organisations are impacted positively by having evidence-based technologies to support and guide their processes.

The impact case is a good example of a technological innovation with international impact.

The committee's comments on impact case 3: The Drug-Death Related Bereavement and Recovery Project (the END-project)

Drug-related death (DRD) is a serious public health issue and there has been a critical lack of knowledge concerning the living situation of DRD-bereaved persons. The END-project, launched in 2017, emerged as the largest international initiative to address this research gap. The END-project has significantly influenced the recognition and availability of support initiatives for individuals in Norway bereaved by drug-related deaths. Changes have been made in national steering documents and local practices to ensure that this group of

bereaved get the help they need. Several measures of peer support have been established, as well as a national association for bereaved after substance-related death. Educational programmes, including e-learning, have been developed to strengthen the research-based foundation for professional practice.

The research that underpins the impact case derives from studies examining the bereaved's situation before death, strains and consequences related to the death and help and support in the aftermath of death. Secondly, the project included studies that examined helpers' perspectives. Thirdly, the project addressed implementation research-based knowledge from the END-project into relevant services for the DRD bereaved persons using a co-creation method named "research circle".

Through dissemination of research results and in dialogue with key actors, members of the END project group have contributed to shedding light on the importance of conceptualizing bereaved persons after DRD as a distinct group with specific challenges and needs. The work has impacted changes in public policy documents, guidelines, and organizational practices. In 2023 "overdoses" were included as an example of sudden and unnatural deaths in the National Guidelines for psycho-social follow-up after sudden death ("Mestring, samhørighet og håp"). Research-based knowledge from the END-project has been implemented into several educations at HVL, and the focus on grief and bereavement has been strengthened in the curriculum of different study programmes at HVL, for example within social pedagogy, social work, childcare pedagogy, and family therapy. Renewed educational programmes will increase practitioners' knowledge of grief and bereavement in general and, in particular, the special grief and the related consequences that can follow an unnatural death.

The impact of this case on the local and national level is clear and convincing, and there is a potential for the guidelines and policy to be implemented internationally.

Appendices

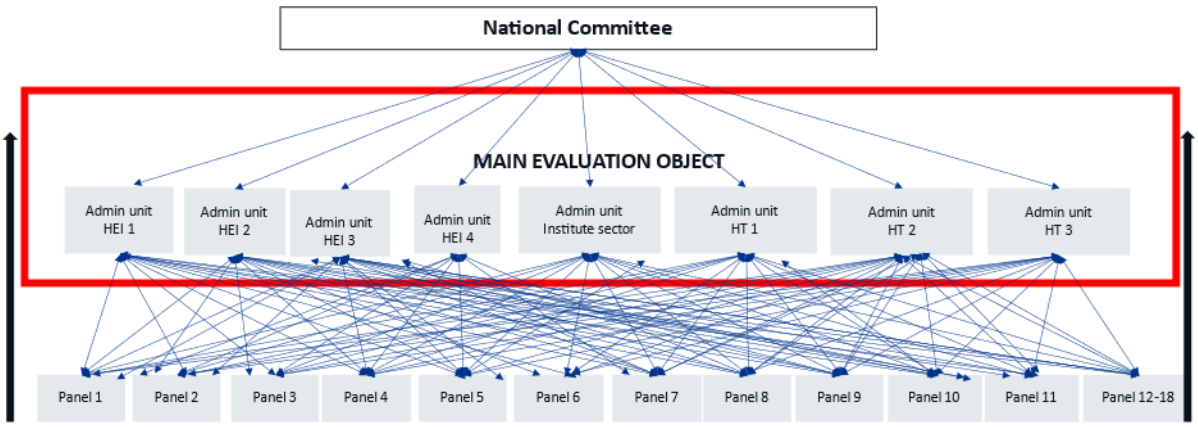
Evaluation of Medicine and health 2023-2024

By evaluating Norwegian research and higher education we aim to enhance the quality, relevance, and efficiency. In accordance with the statutes of the Research Council of Norway (RCN), the RCN evaluates Norwegian professional environments to create a solid and up-to-date knowledge base about Norwegian research and higher education in an international perspective.

The evaluation of life sciences is conducted in 2022-2024. The evaluation of medicine takes place in 2023-2024. The evaluation of biosciences was carried out in 2022-2023. The primary aim of the evaluation of life sciences is to reveal and confirm the quality and the relevance of research performed at Norwegian Higher Education Institutions (HEIs), the institute sector and the health trusts. The evaluation shall result in recommendations to the institutions, the RCN and the ministries.

Evaluation of medicine and health (EVALMEDHELSE) 2023-2024
The evaluation of medicine and health includes sixty-eight administrative units (e.g., faculty, department, institution, center, division) which are assessed by evaluation committees according to sectorial affiliation and other relevant similarities between the units. The administrative units enrolled their research groups (315) to eighteen expert panels organised by research subjects or themes and assessed across institutions and sectors.

Organisation of evaluation of medicine and health 2023-2024



The institutions have been allowed to adapt the evaluation mandate (Terms of Reference) to their own strategic goals. This is to ensure that the results of the evaluation will be useful for the institution's own strategic development. The administrative unit together with the research group(s) selects an appropriate benchmark for each of the research group(s).

The Research Council of Norway has commissioned an external evaluation secretariat at Technopolis Group for the implementation of the evaluation process.

Each institution/administrative unit is responsible for following up the recommendations that apply to their own institution/administrative unit. The Research Council will use the results from the evaluation in the development of funding instruments and as a basis for advice to the Government.

The web page for the evaluation of medicine and health 2023-2024: [Evaluation of medicine and health sciences (forskningsradet.no)]

Forskningsrådet

Se vedlagte adresseliste

Vår saksbehandler / tlf.	Vår ref.	Deres ref.	Sted
Hilde G. Nielsen/40922260	23/3056	[Ref.]	Lysaker 28.4.2023

Invitasjon til å delta i fagevaluering av medisin og helsefag (EVALMEDHELSE) 2023-2024

Vi viser til varsel om oppstart av nye evalueringer sendt institusjonenes ledelse 9. november 2021 (vedlegg 2).

Porteføljestyret for livsvitenskap har vedtatt å gjennomføre fagevaluering av livsvitenskap 2022-2024 som to evalueringer:

- Evaluering av biovitenskap (EVALBIOVIT) (2022-2023)
- Evaluering av medisin og helsefag (EVALMEDHELSE) (2023-2024)

Hovedmålet med fagevalueringen av livsvitenskap 2022-2024 er å vurdere kvalitet og rammebetingelser for livsvitenskapelig forskning i Norge, samt forskningens relevans for sentrale samfunnsområder. Evalueringen skal resultere i anbefalinger til institusjonene, til Forskningsrådet og til departementene. Den forrige fagevalueringen av biologi, medisin og helsefag ble gjennomført i 2010/2011 (vedlegg 3).

Fagevaluering av livsvitenskap retter seg mot UH-sektor, helseforetak og instituttsektor (vedlegg 4). Forskningsrådet forventer at aktuelle forskningsmiljøer deltar i evalueringene, selv om beslutning om deltagelse gjøres ved den enkelte institusjon. Videre ber vi om at deltakende institusjoner setter av tilstrekkelig med ressurser til å delta i evalueringsprosessen, og at institusjonen oppnevner minst én representant som kontaktperson for Forskningsrådet.

Invitasjon til å delta i fagevaluering av medisin og helsefag (2023-2024)

Fagevaluering av medisin og helsefag er organisert over to nivåer (vedlegg 4, side 11). Internasjonale ekspertpaneler vil evaluere forskergrupper på tvers av fag, disiplin og forskningssektorer (UH, institutt og helseforetak) etter kriteriene beskrevet i kapittel 2 i evalueringsprotokollen (vedlegg 4).

Panelrapporten(e) for forskergruppene vil inngå i bakgrunnsdokumentasjonen til forskergruppen(e)s administrative enhet (hovedevalueringsobjektet i evaluering), og som vil bli evaluert i internasjonale

sektorspesifikke evalueringskomiteer. Evalueringskriteriene for administrative enheter er beskrevet i kapittel 2 i evalueringsprotokollen (vedlegg 4).

Innmelding av administrative enheter og forskergrupper – frist 6. juni 2023

Administrative enheter (hovedevalueringsobjektet i evalueringen) – skjema 1

Forskningsrådet inviterer institusjonene til å melde inn sine administrative enhet/er ved å fylle ut skjema 1. Definisjonen av en administrativ enhet i denne evalueringen er å finne på side 3 (kap 1.1) i evalueringsprotokollen (vedlegg 4). Ved innmelding av administrativ/e enhet/er anbefaler Forskningsrådet institusjonene til å se innmelding av administrativ enhet/er i sammenheng med tilpasning av mandat for den administrative enheten (Appendix A i evalueringsprotokollen).

Forskergrupper – skjema 2

Forskningsrådet ber de administrative enheter om å melde inn forskergrupper i tråd med forskergruppedefinisjonen (kap 1.1) og minimumskravene beskrevet i kapittel 1.2 i evalueringsprotokollen. Hver administrative enhet melder inn sin/e forskergruppe/r ved å fylle ut Skjema 2. Vi ber også om at forskergruppene innplasseres i den tentative fagpanelinndelingen for EVALMEDHELSE (vedlegg 5).

Forskningsrådet vil ferdigstille panelstruktur og avgjøre den endelige fordelingen av forskergruppene på fagpaneler *etter* at alle forskergrupper er meldt inn. Mer informasjon vil bli sendt i slutten av juni 2023.

Invitasjon til å foreslå eksperter – skjema 3

Forskningsrådet inviterer administrative enheter og forskergrupper til å spille inn forslag til eksperter som kan inngå i evalueringskomitéene og i ekspertpanelene. Hver evalueringskomité vil bestå av 7-9 komitémedlemmer, mens hvert ekspertpanel vil bestå av 5-7 eksperter.

Obs. Det er to faner i regnearket:

- FANE 1 – forslag til medlemmer til evalueringskomitéene. Medlemmene i evalueringskomitéene skal inneha bred vitenskapelig kompetanse, både faglig kompetanse og andre kvalifikasjoner som erfaring med ledelse, strategi- og evalueringsarbeid og kunnskapsutveksling.
- FANE 2 – forslag til medlemmer til ekspertpanelene. Medlemmene i ekspertpanelene skal være internasjonalt ledende eksperter innen medisin og helsefaglig forskning og innovasjon.

Utfylte skjemaer (3 stk):

- innmelding av administrative enhet/er (skjema 1)
- innmelding av forskergruppe/er (skjema 2)
- forslag til eksperter (skjema 3)

sendes på epost til evalmedhelse@forskningsradet.no **innen 6. juni 2023.**

Tilpasning av mandat – frist 30. september 2023

Forskningsrådet ber med dette administrative enheter om å tilpasse mandatet (vedlegg 4) ved å opplyse om egne strategiske mål og andre lokale forhold som er relevant for evalueringen.

Forskningsrådet

Tilpasningen gjøres ved å fylle inn de åpne punktene i malen (Appendix A). Utfylt skjema sendes på epost til evalmedhelse@forskningsradet.no innen 30. september 2023.

Digitalt informasjonsmøte 15. mai 2023, kl. 14.00-15.00.
Forskningsrådet arrangerer et digitalt informasjonsmøte for alle som ønsker å delta i EVALMEDHELSE.

Påmelding til informasjonsmøtet gjøres her: Fagevaluering av medisin og helsefag (EVALMEDHELSE) - Digitalt informasjonsmøte (pameldingssystem.no) .

Nettsider
Forskningsrådet vil opprette en nettside på www.forskningsradet.no for EVALMEDHELSE hvor informasjon vil bli publisert fortløpende. Her kan dere lese om Fagevaluering av biovitenskap (EVALBIOVIT) 2022-2023. Fagevaluering av medisin og helsefag vil bli gjennomført etter samme modell.

Spørsmål vedrørende fagevaluering av medisin og helsefag kan rettes til Hilde G. Nielsen, hgn@forskningsradet.no eller mobil 40 92 22 60.

Med vennlig hilsen
Norges forskningsråd

Ole Johan Borge	Hilde G. Nielsen
avdelingsdirektør	spesialrådgiver
Helse	Helse

Dokumentet er elektronisk godkjent og signert og har derfor ikke håndskrevne signaturer.

Kopi
Helse- og omsorgsdepartementet
Kunnskapsdepartementet

Vedlegg
1. Adresseliste
2. Nye fagevalueringer – varsel om oppstart november 2021
3. Erfaringer med oppfølging av fagevaluering av biologi, medisin og helsefag 2010/2011
4. Fagevaluering av livsvitenskap 2022-2024 – Evalueringsprotokoll
5. Tentativ panelinndeling EVALMEDHELSE mai 2023
6. Skjema 1 – Innmeldingsskjema Administrative enheter
7. Skjema 2 – Innmeldingsskjema Forskergrupper
8. Skjema 3 – Forslag til internasjonale eksperter til evalueringskomiteene og ekspertpanelene
9. Appendix A – word format

The Research Council of Norway

Evaluation of life sciences in Norway 2022-2023

LIVSEVAL protocol version 1.0

By decision of the Portfolio board for life sciences April 5., 2022

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Oslo, 5 April 2022

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1 Introduction

Research assessments based on this protocol serve different aims and have different target groups. The primary aim of the evaluation of life sciences is to reveal and confirm the quality and the relevance of research performed at Norwegian Higher Education Institutions (HEIs), and by the institute sector and regional health authorities and health trusts. These institutions will hereafter be collectively referred to as Research Performing Organisations (RPOs). The assessments should serve a formative purpose by contributing to the development of research quality and relevance at these institutions and at the national level.

1.1 Evaluation units

The assessment will comprise a number of *administrative units* submitted for evaluation by the host institution. By assessing these administrative units in light of the goals and strategies set for them by their host institution, it will be possible to learn more about how public funding is used at the institution(s) to facilitate high-quality research and how this research contributes to society. The administrative units will be assessed by evaluation committees according to sectoral affiliation and/or other relevant similarities between the units.

The administrative units will be invited to submit data on their *research groups* to be assessed by expert panels organised by research subject or theme. See Chapter 3 for details on organisation.

Administrative unit	An administrative unit is any part of an RPO that is recognised as a formal (administrative) unit of that RPO, with a designated budget, strategic goals and dedicated management. It may, for instance, be a university faculty or department, a department of an independent research institute or a hospital.
Research group	Designates groups of researchers within the administrative units that fulfil the minimum requirements set out in section 1.2. Research groups are identified and submitted for evaluation by the administrative unit, which may decide to consider itself a single research group.

1.2 Minimum requirements for research groups

1) The research group must be sufficiently large in size, i.e. at least five persons in full-time positions with research obligations. This merely indicates the minimum number, and larger units are preferable. In exceptional cases, the minimum number may include PhD students, postdoctoral fellows and/or non-tenured researchers. *In all cases, a research group must include at least three full-time tenured staff*. Adjunct professors, technical staff and other relevant personnel may be listed as group members but may not be included in the minimum number.

2) The research group subject to assessment must have been established for at least three years. Groups of more recent date may be accepted if they have come into existence as a consequence of major organisational changes within their host institution.
3) The research group should be known as such both within and outside the institution (e.g. have a separate website). It should be able to document common activities and results in the form of co-publications, research databases and infrastructure, software, or shared responsibilities for delivering education, health services or research-based solutions to designated markets.
4) In its self-assessment, the administrative unit should propose a suitable benchmark for the research group. The benchmark will be considered by the expert panels as a reference in their assessment of the performance of the group. The benchmark can be grounded in both academic and extra-academic standards and targets, depending on the purpose of the group and its host institution.

1.3 The evaluation in a nutshell

The assessment concerns:

- research that the administrative unit and its research groups have conducted in the previous 10 years
- the research strategy that the administrative units under evaluation intend to pursue going forward
- the capacity and quality of research in life sciences at the national level

The Research Council of Norway (RCN) will:

- provide a template for the Terms of Reference[1] for the assessment of RPOs and a national-level assessment in life sciences
- appoint members to evaluation committees and expert panels
- provide secretarial services
- commission reports on research personnel and publications based on data in national registries
- take responsibility for following up assessments and recommendations at the national level.

RPOs conducting research in life sciences are expected to take part in the evaluation. The board of each RPO under evaluation is responsible for tailoring the assessment to its own strategies and specific needs and for following them up within their own institution. Each participating RPO will carry out the following steps:

1) Identify the administrative unit(s) to be included as the main unit(s) of assessment
2) Specify the Terms of Reference by including information on specific tasks and/or strategic goals of relevance to the administrative unit(s)

[1] The terms of reference (ToR) document defines all aspects of how the evaluation committees and expert panels will conduct the [research area] evaluation. It defines the objectives and the scope of the evaluation, outlines the responsibilities of the involved parties, and provides a description of the resources available to carry out the evaluation.

3) The administrative unit will, in turn, be invited to register a set of research groups that fulfil the minimum criteria specified above (see section 1.2). The administrative unit may decide to consider itself a single research group.
4) For each research group, the administrative unit should select an appropriate benchmark in consultation with the group in question. This benchmark can be a reference to an academic level of performance or to the group's contributions to other institutional or sectoral purposes (see section 2.4). The benchmark will be used as a reference in the assessment of the unit by the expert panel.
5) The administrative units subject to assessment must provide information about each of their research groups, and about the administrative unit as a whole, by preparing self-assessments and by providing additional documentation in support of the self-assessment.

1.4 Target groups

- Administrative units represented by institutional management and boards
- Research groups represented by researchers and research group leaders
- Research funders
- Government

The evaluation will result in recommendations to the institutions, the RCN and the ministries. The results of the evaluation will also be disseminated for the benefit of potential students, users of research and society at large.

This protocol is intended for all participants in the evaluation. It provides the information required to organise and carry out the research assessments. Questions about the interpretation or implementation of the protocol should be addressed to the RCN.

2 Assessment criteria

The administrative units are to be assessed on the basis of five assessment criteria. The five criteria are applied in accordance with international standards. Finally, the evaluation committee passes judgement on the administrative units as a whole in qualitative terms. In this overall assessment, the committee should relate the assessment of the specific tasks to the strategic goals that the administrative unit has set for itself in the Terms of Reference.

When assessing administrative units, the committees will build on a separate assessment by expert panels of the research groups within the administrative units. See Chapter 3 'Evaluation process and organisation' for a description of the division of tasks.

2.1 Strategy, resources and organisation

The evaluation committee assesses the framework conditions for research in terms of funding, personnel, recruitment and research infrastructure in relation to the strategic aims set for the administrative unit. The administrative unit should address at least the following five specific aspects in its self-assessment: 1) funding sources, 2) national and international cooperation, 3) cross-sector and interdisciplinary cooperation, 4) research careers and mobility, and 5) Open Science. These five aspects relate to how the unit organises and actually performs its research, its composition in terms of leadership and personnel, and how the unit is run on a day-to-day basis.

To contribute to understanding what the administrative unit can or should change to improve its ability to perform, the evaluation committee is invited to focus on factors that may affect performance.

Further, the evaluation committee assesses the extent to which the administrative unit's goals for the future remain scientifically and societally relevant. It is also assessed whether its aims and strategy, as well as the foresight of its leadership and its overall management, are optimal in relation to attaining these goals. Finally, it is assessed whether the plans and resources are adequate to implement this strategy.

2.2 Research production, quality and integrity

The evaluation committee assesses the profile and quality of the administrative unit's research and the contribution the research makes to the body of scholarly knowledge and the knowledge base for other relevant sectors of society. The committee also assesses the scale of the unit's research results (scholarly publications, research infrastructure developed by the unit, and other contributions to the field) and its contribution to Open Science (early knowledge and sharing of data and other relevant digital objects, as well as science communication and collaboration with societal partners, where appropriate).

The evaluation committee considers the administrative unit's policy for research integrity and how violations of such integrity are prevented. It is interested in how the unit deals with research data, data management, confidentiality (GDPR) and integrity, and the extent to which independent and critical pursuit of research is made possible within the unit. Research integrity relates to both the scientific integrity of conducted research and the professional integrity of researchers.

2.3 Diversity and equality

The evaluation committee considers the diversity of the administrative unit, including gender equality. The presence of differences can be a powerful incentive for creativity and talent development in a diverse administrative unit. Diversity is not an end in itself in that regard, but a tool for bringing together different perspectives and opinions.

The evaluation committee considers the strategy and practices of the administrative unit to prevent discrimination on the grounds of gender, age, disability, ethnicity, religion, sexual orientation or other personal characteristics.

2.4 Relevance to institutional and sectoral purposes

The evaluation committee compares the relevance of the administrative unit's activities and results to the specific aspects detailed in the Terms of Reference for each institution and to the relevant sectoral goals (see below).

Higher Education Institutions

There are 36 Higher Education Institutions in Norway that receive public funding from the Ministry for Education and Research. Twenty-one of the 36 institutions are owned by the ministry, whereas the last 15 are privately owned. The HEIs are regulated under the Act relating to universities and university colleges of 1 August 2005.

The purposes of Norwegian HEIs are defined as follows in the Act relating to universities and university colleges[2]

- provide higher education at a high international level;
- conduct research and academic and artistic development work at a high international level;
- disseminate knowledge of the institution's activities and promote an understanding of the principle of academic freedom and application of scientific and artistic methods and results in the teaching of students, in the institution's own general activity as well as in public administration, in cultural life and in business and industry.

In line with these purposes, the Ministry for Research and Education has defined four overall goals for HEIs that receive public funding. These goals have been applied since 2015:

1) High quality in research and education
2) Research and education for welfare, value creation and innovation
3) Access to education (esp. capacity in health and teacher education)
4) Efficiency, diversity and solidity of the higher education sector and research system

The committee is invited to assess to what extent the research activities and results of each administrative unit have contributed to sectoral purposes as defined above. In particular, the committee is invited to take the share of resources spent on education at the administrative units into account and to assess the relevance and contributions of research to education, focusing on the master's and PhD levels. This assessment should be distinguished from an

[2] https://lovdata.no/dokument/NLE/lov/2005-04-01-15?q=universities

assessment of the quality of education in itself, and it is limited to the role of research in fostering high-quality education.

Research institutes (the institute sector)

Norway's large institute sector reflects a practical orientation of state R&D funding that has long historical roots. The Government's strategy for the institute sector[3] applies to the 33 independent research institutes that receive public basic funding through the RCN, in addition to 12 institutes outside the public basic funding system.

The institute sector plays an important and specific role in attaining the overall goal of the national research system, i.e. to increase competitiveness and innovation power to address major societal challenges. The research institutes' contributions to achieving these objectives should therefore form the basis for the evaluation. The main purpose of the sector is to conduct independent applied research for present and future use in the private and public sector. However, some institutes primarily focus on developing a research platform for public policy decisions, others on fulfilling their public responsibilities.

The institutes should:

- maintain a sound academic level, documented through scientific publications in recognised journals
- obtain competitive national and/or international research funding grants
- conduct contract research for private and/or public clients
- demonstrate robustness by having a reasonable number of researchers allocated to each research field

The committee is invited to assess the extent to which the research activities and results of each administrative unit contribute to sectoral purposes and overall goals as defined above. In particular, the committee is invited to assess the level of collaboration between the administrative unit(s) and partners in their own or other sectors.

The hospital sector

There are four regional health authorities (RHFs) in Norway. They are responsible for the specialist health service in their respective regions. The RHFs are regulated through the Health Enterprises Act of 15 June 2001 and are bound by requirements that apply to specialist and other health services, the Health Personnel Act and the Patient Rights Act. Under each of the regional health authorities, there are several health trusts (HFs), which can consist of one or more hospitals. A health trust (HF) is wholly owned by an RHF.

Research is one of the four main tasks of hospital trusts.[4] The three other mains tasks are to ensure good treatment, education and training of patients and relatives. Research is important if the health service is to keep abreast of stay up-to-date with medical developments and carry out critical assessments of established and new diagnostic methods,

[3] Strategy for a holistic institute policy (Kunnskapsdepartementet 2020)

[4] Cf. the Specialist Health Services Act § 3-8 and the Health Enterprises Act §§ 1 and 2

treatment options and technology, and work on quality development and patient safety while caring for and guiding patients.

The committee is invited to assess the extent to which the research activities and results of each administrative unit have contributed to sectoral purposes as described above. The assessment does not include an evaluation of the health services performed by the services.

2.5 Relevance to society

The committee assesses the quality, scale and relevance of contributions targeting specific economic, social or cultural target groups, of advisory reports on policy, of contributions to public debates, and so on. The documentation provided as the basis for the assessment of societal relevance should make it possible to assess relevance to various sectors of society (i.e. business, the public sector, non-governmental organisations and civil society).

When relevant, the administrative units will be asked to link their contributions to national and international goals set for research, including the Norwegian Long-term Plan for Research and Higher Education and the UN Sustainable Development Goals. Sector-specific objectives, e.g. those described in the Development Agreements for the HEIs and other national guidelines for the different sectors, will be assessed as part of criterion 2.4.

The committee is also invited to assess the societal impact of research based on case studies submitted by the administrative units and/or other relevant data presented to the committee. Academic impact will be assessed as part of criterion 2.2.

3 Evaluation process and organisation

The RCN will organise the assessment process as follows:

- Commission a professional secretariat to support the assessment process in the committees and panels, as well as the production of self-assessments within each RPO
- Commission reports on research personnel and publications within life sciences based on data in national registries
- Appoint one or more evaluation committees for the assessment of administrative units.
- Divide the administrative units between the appointed evaluation committees according to sectoral affiliation and/or other relevant similarities between the units.
- Appoint a number of expert panels for the assessment of research groups submitted by the administrative units.
- Divide research groups between expert panels according to similarity of research subjects or themes.
- Task the chairs of the evaluation committees with producing a national-level report building on the assessments of administrative units and a national-level assessments produced by the expert panels.

Committee members and members of the expert panels will be international, have sufficient competence and be able, as a body, to pass judgement based on all relevant assessment criteria. The RCN will facilitate the connection between the assessment levels of panels and committees by appointing committee members as panel chairs.

3.1 Division of tasks between the committee and panel levels

The expert panels will assess research groups across institutions and sectors, focusing on the first two criteria specified in Chapter 2: 'Strategy, resources and organisation' and 'Research production and quality' The assessments from the expert panels will also be used as part of the evidence base for a report on Norwegian research within life sciences (see section 3.3).

The evaluation committees will assess the administrative units based on all the criteria specified in Chapter 2. The assessment of research groups delivered by the expert panels will be a part of the evidence base for the committees' assessments of administrative units. See figure 1 below.

The evaluation committee has sole responsibility for the assessments and any recommendations in the report. The evaluation committee reaches a judgement on the research based on the administrative units and research groups' self-assessments provided by the RPOs, any additional documents provided by the RCN, and interviews with representatives of the administrative units. The additional documents will include a standardised analysis of research personnel and publications provided by the RCN.

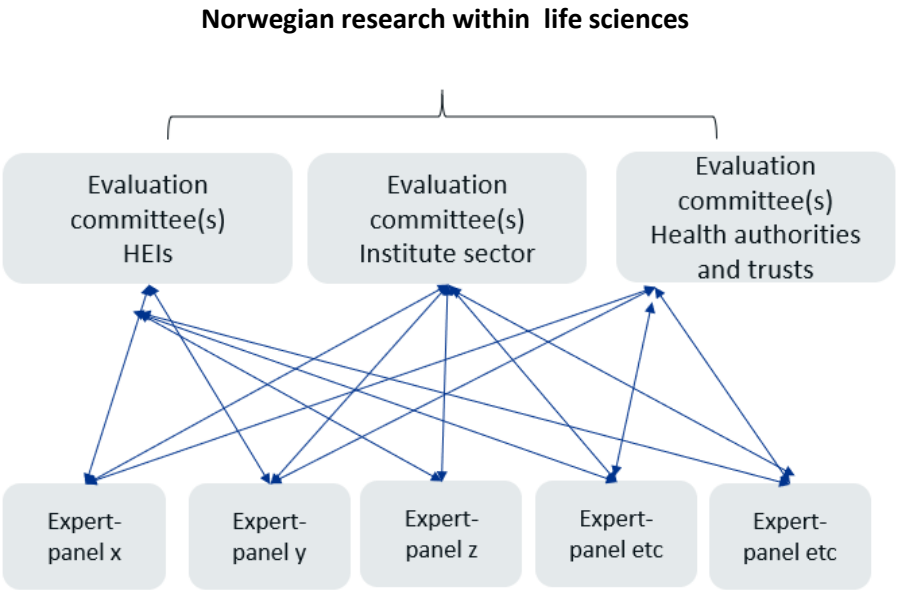

Figure 1. Evaluation committees and expert panels

The evaluation committee takes international trends and developments in science and society into account when forming its judgement. When judging the quality and relevance of the research, the committees shall bear in mind the specific tasks and/or strategic goals that the administrative unit has set for itself including sectoral purposes (see section 2.4 above).

3.2 Accuracy of factual information

The administrative unit under evaluation should be consulted to check the factual information before the final report is delivered to the RCN and the board of the institution hosting the administrative unit.

3.3 National level report

Finally, the RCN will ask the chairs of the evaluation committees to produce a national-level report that builds on the assessments of administrative units and the national-level assessments produced by the expert panels. The committee chairs will present their assessment of Norwegian research in life sciences at the national level in a separate report that pays specific attention to:

- Strengths and weaknesses of the research area in the international context
- The general resource situation regarding funding, personnel and infrastructure
- PhD training, recruitment, mobility and diversity
- Research cooperation nationally and internationally
- Societal impact and the role of research in society, including Open Science

This national-level assessment should be presented to the RCN.

Appendix A: Terms of References (ToR)

[Text in red to be filled in by the Research-performing organisations (RPOs)]

The board of [RPO] mandates the evaluation committee appointed by the Research Council of Norway (RCN) to assess [administrative unit] based on the following Terms of Reference.

Assessment
You are asked to assess the organisation, quality and diversity of research conducted by [administrative unit] as well as its relevance to institutional and sectoral purposes, and to society at large. You should do so by judging the unit's performance based on the following five assessment criteria (a. to e.). Be sure to take current international trends and developments in science and society into account in your analysis.

a) Strategy, resources and organisation
b) Research production, quality and integrity
c) Diversity and equality
d) Relevance to institutional and sectoral purposes
e) Relevance to society

For a description of these criteria, see Chapter 2 of the life sciences evaluation protocol. Please provide a written assessment for each of the five criteria. Please also provide recommendations for improvement. We ask you to pay special attention to the following [n] aspects in your assessment:

1. …
2. …
3. …
4. …

…

[To be completed by the board: specific aspects that the evaluation committee should focus on – they may be related to a) strategic issues, or b) an administrative unit's specific tasks.]

In addition, we would like your report to provide a qualitative assessment of [administrative unit] as a whole in relation to its strategic targets. The committee assesses the strategy that the administrative unit intends to pursue in the years ahead and the extent to which it will be capable of meeting its targets for research and society during this period based on available resources and competence. The committee is also invited to make recommendations concerning these two subjects.

Documentation
The necessary documentation will be made available by the life sciences secretariat at Technopolis Group.

The documents will include the following:

- a report on research personnel and publications within life sciences commissioned by RCN
- a self-assessment based on a template provided by the life sciences secretariat
- [to be completed by the board]

Interviews with representatives from the evaluated units
Interviews with the [administrative unit] will be organised by the evaluation secretariat. Such interviews can be organised as a site visit, in another specified location in Norway or as a video conference.

Statement on impartiality and confidence
The assessment should be carried out in accordance with the *Regulations on Impartiality and Confidence in the Research Council of Norway*. A statement on the impartiality of the committee members has been recorded by the RCN as a part of the appointment process. The impartiality and confidence of committee and panel members should be confirmed when evaluation data from [the administrative unit] are made available to the committee and the panels, and before any assessments are made based on these data. The RCN should be notified if questions concerning impartiality and confidence are raised by committee members during the evaluation process.

Assessment report
We ask you to report your findings in an assessment report drawn up in accordance with a format specified by the life sciences secretariat. The committee may suggest adjustments to this format at its first meeting. A draft report should be sent to the [administrative unit] and RCN by [date]. The [administrative unit] should be allowed to check the report for factual inaccuracies; if such inaccuracies are found, they should be reported to the life sciences secretariat no later than two weeks after receipt of the draft report. After the committee has made the amendments judged necessary, a corrected version of the assessment report should be sent to the board of [the RPO] and the RCN no later than two weeks after all feedback on inaccuracies has been received from [administrative unit].

Appendix B: Data sources

The lists below shows the most relevant data providers and types of data to be included in the evaluation. Data are categorised in two broad categories according to the data source: National registers and self-assessments prepared by the RFOs. The RCN will commission an analysis of data in national registers (R&D-expenditure, personnel, publications etc.) to be used as support for the committees' assessment of administrative units. The analysis will include a set of indicators related to research personnel and publications.

- **National directorates and data providers**
- Norwegian Directorate for Higher Education and Skills (HK-dir)
- Norwegian Agency for Quality Assurance in Education (NOKUT)
- Norwegian Agency for Shared Services in Education and Research (SIKT)
- Research Council of Norway (RCN)
- Statistics Norway (SSB)

National registers

1) R&D-expenditure
    a. SSB: R&D statistics
    b. SSB: Key figures for research institutes
    c. HK-dir: Database for Statistics on Higher Education (DBH)
    d. RCN: Project funding database (DVH)
    e. EU-funding: eCorda
2) Research personnel
    a. SSB: The Register of Research personnel
    b. SSB: The Doctoral Degree Register
    c. RCN: Key figures for research institutes
    d. HK-dir: Database for Statistics on Higher Education (DBH)
3) Research publications
    a. SIKT: Cristin - Current research information system in Norway
    b. SIKT: Norwegian Infrastructure for Bibliometrics
    (full bibliometric data incl. citations and co-authors)
4) Education
    a. HK-dir/DBH: Students and study points
    b. NOKUT: Study barometer
    c. NOKUT: National Teacher Survey
5) Sector-oriented research
    a. RCN: Key figures for research institutes
6) Patient treatments and health care services
    a. Research & Innovation expenditure in the health trusts
    b. Measurement of research and innovation activity in the health trusts
    c. Collaboration between health trusts and HEIs
    d. Funding of research and innovation in the health trusts
    e. Classification of medical and health research using HRCS (HO21 monitor)

Self-assessments

1) Administrative units
    a. *Self-assessment covering all assessment criteria*
    b. Administrative data on funding sources
    c. Administrative data on personnel
    d. Administrative data on the division of staff resources between research and other activities (teaching, dissemination etc.)
    e. Administrative data on research infrastructure and other support structures
    f. SWOT analysis
    g. Any supplementary data needed to assess performance related to the strategic goals and specific tasks of the unit

2) Research groups
    a. *Self-assessment covering the first two assessment criteria (see Table 1)*
    b. Administrative data on funding sources
    c. Administrative data on personnel
    d. Administrative data on contribution to sectoral purposes: teaching, commissioned work, clinical work [will be assessed at committee level]
    e. Publication profiles
    f. Example publications and other research results (databases, software etc.) The examples should be accompanied by an explanation of the groups' specific contributions to the result
    g. Any supplementary data needed to assess performance related to the benchmark defined by the administrative unit

The table below shows how different types of evaluation data may be relevant to different evaluation criteria. Please note that the self-assessment produced by the administrative units in the form of a written account of management, activities, results etc. should cover all criteria. A template for the self-assessment of research groups and administrative units will be commissioned by the RCN from the life sciences secretariat for the evaluation.

Table 1. Types of evaluation data per criterion

Evaluation units / Criteria	Research groups	Administrative units
Strategy, resources and organisation	Self-assessment Administrative data	Self-assessment National registers Administrative data SWOT analysis
Research production and quality	Self-assessment Example publications (and other research results)	Self-assessment National registers
Diversity, equality and integrity		Self-assessment National registers Administrative data
Relevance to institutional and sectoral purposes		Self-assessment Administrative data
Relevance to society		Self-assessment National registers Impact cases
Overall assessment	*Data related to:* *Benchmark defined by administrative unit*	*Data related to:* *Strategic goals and specific tasks of the admin. unit*

Evaluation of Medicine and Health (EVALMEDHELSE) 2023-2024

Self- assessment for administrative units

Date of dispatch: **15 September 2023**
Deadline for submission: **31 January 2024**

Institution (name and short name):_____
Administrative unit (name and short name): _____
Date:_____
Contact person:_____
Contact details (email):_____

Content

Introduction

The primary aim of the evaluation is to reveal and confirm the quality and the relevance of research performed at Norwegian Higher Education Institutions (HEIs), the institute sector and the health trusts. These institutions will henceforth be collectively referred to as research performing organisations (RPOs). The evaluation report(s) will provide a set of recommendations to the RPOs, the Research Council of Norway (RCN) and the responsible and concerned ministries. The results of the evaluation will also be disseminated for the benefit of potential students, users of research and society at large.

You have been invited to complete this self-assessment as an administrative unit. The self-assessment contains questions regarding the unit's research- and innovation related activities and developments over years 2012-2022. All submitted data will be evaluated by international evaluation committees. The administrative unit´s research groups will be assessed by international expert panels who report their assessment to the relevant evaluation committee.

Deadline for submitting self- assessments to the Research Council of Norway – 31 January 2024
As an administrative unit you are responsible for collecting completed self-assessments for each of the research groups that belong to the administrative unit. The research groups need to submit their completed self-assessment to the administrative unit no later than 26 January 2024. The administrative unit will submit the research groups' completed self-assessments and the administrative unit's own completed self-assessment to the Research Council within 31 January 2024.

Please use the following format when naming your document: name of the institution and short name of the administrative unit, e.g. *NTNU_FacMedHealthSci* and send it to evalmedhelse@forskningsradet.no within 31 January 2024.

For questions concerning the self-assessment or EVALMEDHELSE in general, please contact RCN at evalmedhelse@forskningsradet.no.

Thank you!

Guidelines for completing the self-assessment

- Please read the entire self-assessment document before answering.
- The evaluation language is English.
- Please be sure that all documents which are linked to in the self- assessment are in English and are accessible.
- The page format must be A4 with 2 cm margins, single spacing and Calibri and 11-point font.
- The self-assessment follows the same structure as the evaluation protocol. In order to be evaluated on all criteria, the administrative unit must answer all questions.
- Information should be provided by link to webpages i.e. strategy and other planning documents.
  - Provide information – provide documents and other relevant data or figures about the administrative unit, for example strategy and other planning documents.
  - Describe – explain and present using contextual information about the administrative unit and inform the reader about the administrative unit.
  - Reflect – comment in a reflective and evaluative manner how the administrative unit operates.
- Data on personnel should refer to reporting to DBH on 1 October 2022 for HEIs and to the yearly reporting for 2022 for the institute sector and the health trusts. Other data should refer to 31 December 2022, if not specified otherwise.
- Questions in 4.3c should **ONLY** be answered by administrative units responsible for the Cand.med. degree programme, cf. Evaluation of the Professional programme in Medicine (NOKUT).
- It is possible to extend the textboxes when filling in the from. **NB!** A completed self- assessment cannot exceed 50 pages (pdf file) excluding question 4.3.c. The evaluation committees are not requested to read more than the maximum of 50 pages. Pages exceeding maximum limit of 50 pages **might not** be evaluated.
- Submit the self- assessment as a pdf (max 50 pages). Before submission, please be sure that all text are readable after the conversion of the document to pdf. The administrative unit is responsible for submitting the self-assessment of the administrative unit together with the self-assessments of the belonging research group(s) to evalmedhelse@forskningsradet.no within **31 January 2024.**

Please note that information you write in the self- assessment and the links to documents/webpages in the self- assessment are the only available information (data material) for the evaluation committee.

In exceptional cases, documents/publications that are not openly available must be submitted as attachment(s) to the self- assessment (pdf file(s)).

1.Strategy, resources and organisation

1.1 Research strategy

Describe the main strategic goals for research and innovation of the administrative unit. You may include the following:

- How are these goals related to institutional strategies and scientific priorities?
- Describe how the administrative unit's strategies and scientific priorities are related to the "specific aspects that the evaluation committee should focus on" indicated in your Terms of Reference (ToR)
- Describe the main fields and focus of research and innovation in the administrative unit
- Describe the planned research-field impact; planned policy impact and planned societal impact
- Describe how the strategy is followed-up in the allocation of resources and other measures
- Describe the most important occasions where priorities are made (i.e., announcement of new positions, applying for external funding, following up on evaluations)
- If there is no research strategy – please explain why

Table 1. Administrative unit`s strategies

For each category present up to 5 documents which are most relevant for the administrative unit. Please delete lines which are not in use.

Research strategy		
No.	**Title**	**Link**
1		
2		
3		
4		
5		
Outreach strategies		
No.	**Title**	**Link**
1		
2		
3		
4		
5		
Open science policy		
No.	**Title**	**Link**
1		
2		
3		
4		
5		

1.2 Organisation of research

a) Describe the organisation of research and innovation activities/projects at the administrative unit, including how responsibilities for research and other purposes (education, knowledge exchange, patient treatment, researcher training, outreach activities etc.) are distributed and delegated.

b) Describe how you work to maximise synergies between the different purposes of the administrative unit (education, knowledge exchange, patient treatment, researcher training, outreach activities etc.).

1.3 Research staff

Describe the profile of research personnel at the administrative unit in terms of position and gender. Institutions in the higher education sector should use the categories used in DBH, https://dbh.hkdir.no/datainnhold/kodeverk/stillingskoder.

RCN has commissioned reports from Statistics Norway (SSB) on personnel for the administrative units included in the evaluation. These reports will be made available to the units early November 2023.

Only a subset of the administrative units submitted to the evaluation is directly identifiable in the national statistics. Therefore, we ask all administrative units to provide data on their R&D personnel. Institutions that are directly identifiable in the national statistics (mainly higher education) are invited to use the figures provided in the report delivered by Statistics Norway. Please delete lines which are not in use.

Table 2. Research staff

	Position by category	**No. of researcher per category**	**Share of women per category (%)**	**No. of researchers who are part of multiple (other) research groups at the admin unit**	**No. of temporary positions**
No. of Personell by position	Position A (Fill in)				
	Position B (Fill in)				
	Position C (Fill in)				
	Position D (Fill in)				

1.4 Researcher careers opportunities

a) Describe the structures and practices to support researcher careers and help early-career researchers to make their way into the profession.

b) Describe how research time is distributed among staff including criteria for research leave/sabbaticals (forskningstermin/undervisningsfri).

c) Describe research mobility options.

1.5 Research funding

a) Describe the funding sources of the administrative unit. Indicate the administrative unit´s total yearly budget and the share of the unit's budget dedicated to research.

b) Give an overview of the administrative unit's competitive national and/or international grants last five years (2018-2022).

Table 3. R&D funding sources
Please indicate R&D funding sources for the administrative unit for the period 2018-2022 (average NOK per year, last five years).

For Higher Education Institutions: Share of basic grant (grunnbevilgning) used for R&D[1] **For Research Institutes and Health Trusts: Direct R&D funding from Ministries (per ministry)**	
Name of ministry	NOK

National grants (bidragsinntekter) (NOK)	
From the ministries and underlying directorates	
From industry	
From public sector	
Other national grants	
Total National grants	
National contract research (oppdragsinntekter)[2] (NOK)	
From the ministries and underlying directorates	
From industry	

[1] Shares may be calculated based on full time equivalents (FTE) allocated to research compared to total FTE in administrative unit

[2] For research institutes only research activities should be included from section 1.3 in the yearly reporting

From public sector	
Other national contract research	
Total contract research	
International grants (NOK)	
From the European Union	
From industry	
Other international grants	
Total international grants	
Funding related to public management (forvaltningsoppgaver) or (if applicable) funding related to special hospital tasks, if any	
Total funding related to public management/special hospital tasks	
Total all R&D budget items (except basic grant)	

1.6 Collaboration

Describe the administrative unit's policy towards national and international collaboration partners, the type of the collaborations the administrative unit have with the partners, how the collaboration is put to practice as well as cross-sectorial and interdisciplinary collaborations.

- Reflect of how successful the administrative unit has been in meeting its aspirations for collaborations
- Reflect on the importance of different types of collaboration for the administrative unit: National and international collaborations. Collaborations with different sectors, including public, private and third sector
- Reflect on the added value of these collaborations to the administrative unit and Norwegian research system

Table 4a. The main national collaborative constellations with the administrative unit
Please categorise the collaboration according to the most important national partner(s): 5-10 institutions in the period 2012-2022. Please delete lines which are not in use.

National collaborations

Collaboration with national institutions – 1 -10	
Name of main collaboration or collaborative project with the admin unit	
Name of partner institution(s)	
Sector of partner/institution(s)/sectors involved	
Impacts and relevance of the collaboration	

Table 4b. The main international collaborative constellations with the administrative unit
Please categorise the collaboration according to the most important international partner(s): 5-10 international institutions in the period 2012-2022. Please delete lines which are not in use.

International collaborations

Collaboration with international institutions – 1-10	
Name of main collaboration or collaborative project with the admin unit	
Name of partner institution(s)	
Sector of partner/institution(s)/sectors involved	

Impacts and relevance of the collaboration	

1.7 Open science policies

a) Describe the institutional policies, approaches, and activities to the Open Science areas which may include the following:

- Open access to publications
- Open access to research data and implementation of FAIR data principles
- Open-source software/tools
- Open access to educational resources
- Open peer review
- Citizen science and/or involvement of stakeholders / user groups
- Skills and training for Open Science

b) Describe the most important contributions and impact of the administrative unit's researchers towards the different Open Science areas cf. 1.7a above.

c) Describe the institutional policy regarding ownership of research data, data management, and confidentiality. Is the use of data management plans implemented at the administrative unit?

1.8 SWOT analysis for administrative units

Instructions: Please complete a SWOT analysis for your administrative unit. Reflect on what are the major internal Strengths and Weaknesses as well as external Threats and Opportunities for your research and innovation activities/projects and research environment. Assess what the present Strengths enable in the future and what kinds of Threats are related to the Weaknesses. Consider your scientific expertise and achievements, funding, facilities, organisation and management.

Internal	**Strengths**	**Weaknesses**
External	**Opportunities**	**Threats**

2. Research production, quality and integrity

2.1 Research quality and integrity

Please see the bibliometric analysis for the administrative unit developed by NIFU (available by the end of October, 2023).

a) Describe the scientific focus areas of the research conducted at the administrative unit, including the unit's contribution to these areas.

b) Describe the administrative unit's policy for research integrity, including preventative measures when integrity is at risk, or violated.

2.2 Research infrastructures

a) Participation in national infrastructure

Describe the most important participation in the national infrastructures listed in the Norwegian roadmap for research infrastructures (Norsk veikart for forskningsinfrastruktur) including as host institution(s).

Table 5. Participation in national infrastructure

Please present up to 5 participations in the national infrastructures listed in the Norwegian roadmap for research infrastructures (Norsk veikart for forskningsinfrastruktur) for each area that were the most important to your administrative unit.

Areas in roadmap	Name of research infrastructure	Period (from year to year)	Description	Link to website

b) Participation in international infrastructures

Describe the most important participation in the international infrastructures funded by the ministries (Norsk deltakelse i internasjonale forskningsorganisasjoner finansiert av departementene).

Table 6. Participation in international infrastructure

Please describe up to 5 participations in international infrastructures for each area that have been most important to your administrative unit.

Project	Name	Period (from year to year)	Description	Link to infrastructure

c) Participation in European (ESFRI) infrastructures

Describe the most important participation in European (ESFRI) infrastructures (Norske medlemskap i infrastrukturer i ESFRI roadmap) including as host institution(s).

Table 7. Participation in infrastructures on the ESFRI Roadmap
Please give a description of up to 5 participations that have been most important to your administrative unit.

Social sciences and the humanities				
Name	**ESFRI-project**	**Summary of participation**	**Period (from year to year)**	**Link**

d) Access to research infrastructures
Describe access to relevant national and/or international research infrastructures for your researchers. Considering both physical and digital infrastructure.

e) FAIR- principles
Describe what is done at the unit to fulfil the FAIR-principles.

3. Diversity and equality

Describe the policy and practices to protect against any form of discrimination and to promote diversity in the administrative unit.

Table 8. Administrative unit policy against discrimination
Give a description of up to 5 documents that are the most relevant. If the administrative unit uses the strategies, policies, etc. of a larger institution, then these documents should be referred to.
Please delete lines which are not in use.

No.	**Name**	**Valid period**	**Link**
1			

4. Relevance to institutional and sectorial purposes

4.1 Sector specific impact

Describe whether the administrative unit has activities aimed at achieving sector-specific objectives or focusing on contributing to the knowledge base in general. Describe activities connected to sector-specific objectives, the rationale for participation and achieved and/or expected impacts. Please refer to chapter 2.4 in the evaluation protocol.

- Alternatively, describe whether the activities of the administrative unit are aimed at contribution to the knowledge base in general. Describe the rationale for this approach and the impacts of the unit's work to the knowledge base.

4.2 Research innovation and commercialisation

a) Describe the administrative unit's practices for innovation and commercialisation.

b) Describe the motivation among the research staff in doing innovation and commercialisation activities.

c) Describe how innovation and commercialisation is supported at the administrative unit.

Table 9. Policies for innovation including IP policies, new patents, licenses, start-up/spin-off guidelines
Describe up to 5 documents of the administrative unit's policies for innovation, including IP policies, new patents, licenses, start-up/spin-off guidelines, etc., that are the most relevant. If the administrative unit uses the strategies, policies, etc. of a larger institution, then present these documents. Please delete lines which are not in use.

No.	Name	Valid period	Link
1			

Table 10. Administrative description of successful innovation and commercialisation results
Please describe up to 10 successful innovation and commercialisation results at your administrative unit in the period 2012-2022. Please delete lines which are not in use.

No.	Name of innovation and commercial results	Link	Description of successful innovation and commercialisation result.
1			

4.3 Higher education institutions

a) Reflect how research at the administrative unit contributes towards master and PhD-level education provision, at your institutions and beyond.

b) Describe the opportunities for master students to become involved in research activities at the administrative unit.

c) **ONLY** for administrative units responsible for the Cand.med. degree programme, cf. Evaluation of the Professional programme in Medicine (NOKUT).

- Reflect on how research at the administrative unit contributes towards the quality of the Cand.med. degree programme at your institutions and beyond.
- Describe the different opportunities for students on the Cand.med. degree programme to become involved in research activities at the administrative unit, and the extent to which students use those opportunities.

4.4 Research institutes

a) Describe how the research and innovation activities/projects at the administrative unit contribute to the knowledge base for policy development, sustainable development, and societal and industrial transformations more generally.

b) Describe the most important research activities with partners outside of research organisations.

4.5 Health trusts

a) Reflect on how the administrative unit's clinical research, innovation and commercialisation contribute towards development, assessment and implementation of new diagnostic methods, treatment, and healthcare technologies.

b) Reflect on how research at the unit contributes towards the quality of relevant education programme at your institutions or beyond.

c) Describe the different opportunities for students on relevant educational programmes to become involved in research activities at the administrative unit, and the extent to which students use those opportunities.

5. Relevance to society

Reflect on the administrative unit's contribution towards the Norwegian Long-term plan for research and higher education, societal challenges more widely, and the UN Sustainable Development Goals.

5.1 Impact cases

Please use the attached template for impact cases. Each impact case should be submitted as an attachment (pdf) to the self-assessment.

Impact case guidelines

Each case study should include sufficiently clear and detailed information to enable the evaluation committee to make judgements based on the information it contains, without making inferences, gathering additional material, following up references or relying on members' prior knowledge. References to other sources of information will be used for verification purposes only, not as a means for the evaluation committee to gather further information to inform judgements.

In this evaluation, impact is defined as an effect on, change or benefit to the economy, society, culture, public policy or services, health, the environment or quality of life, beyond academia.

Timeframes

- The impact must have occurred between 2012 and 2022
- Some of the underpinning research should have been published in 2012 or later
- The administrative units are encouraged to prioritise recent cases

Page limit

Each completed case study template will be limited to **five pages** in length. Within the annotated template below, indicative guidance is provided about the expected maximum length limit of each section, but institutions will have flexibility to exceed these so long as the case study as a whole remains no longer than **five pages** (font Calibri, font size 11). Please write the text into the framed template under the sections 1–5 below. The guiding text that stands there now, can be deleted.

Maximum number of cases permitted per administrative unit

For up to 10 researchers: one case; for 10 to 30 researchers: two cases; for 30-50 researchers: three cases; for 50-100 researchers: four cases, and up to five cases for units exceeding 100 researchers.

Naming and numbering of cases

Please use the standardised short name for the administrative unit, and the case number for the unit (1,2,3, etc) in the headline of the case. Each case should be stored as a separate PDF-document with the file name: [Name of the institution and name of the administrative unit] [case number]

Publication of cases

RCN plans to publish all impact cases in a separate evaluation report. By submitting the case the head of the administrative units consents to the publication of the case. Please indicate below if a case may not be made public for reasons of confidentiality.

If relevant, describe any reason to keep this case confidential:

Please write the text here

[Name of the institution and name of the administrative unit] [case number]

Institution:
Administrative unit:
Title of case study:
Period when the underpinning research was undertaken:
Period when staff involved in the underpinning research were employed by the submitting institution:
Period when the impact occurred:

1. Summary of the impact (indicative maximum 100 words)
This section should briefly state what specific impact is being described in the case study.

2. Underpinning research (indicative maximum 500 words)
This section should outline the key research insights or findings that underpinned the impact, and provide details of what research was undertaken, when, and by whom. This research may be a body of work produced over a number of years or may be the output(s) of a particular project. References to specific research outputs that embody the research described in this section, and evidence of its quality, should be provided in the next section. Details of the following should be provided in this section:

- The nature of the research insights or findings which relate to the impact claimed in the case study.
- An outline of what the underpinning research produced by the submitted unit was (this may relate to one or more research outputs, projects or programmes).
- Dates of when it was carried out.
- Names of the key researchers and what positions they held at the administrative unit at the time of the research (where researchers joined or left the administrative unit during this time, these dates must also be stated).
- Any relevant key contextual information about this area of research.

3. References to the research (indicative maximum of six references)
This section should provide references to key outputs from the research described in the previous section, and evidence about the quality of the research. All forms of output cited as underpinning research will be considered equitably, with no distinction being made between the types of output referenced. Include the following details for each cited output:
- Author(s)
- Title
- Year of publication
- Type of output and other relevant details required to identify the output (for example, DOI, journal title and issue)
- Details to enable the panel to gain access to the output, if required (for example, a DOI or URL).

All outputs cited in this section must be capable of being made available to panels. If they are not available in the public domain, the administrative unit must be able to provide them if requested by RCN or the evaluation secretariate.

4. Details of the impact (indicative maximum 750 words)
This section should provide a narrative, with supporting evidence, to explain:

- How the research underpinned (made a distinct and material contribution to) the impact;
- The nature and extent of the impact.

The following should be provided:
- A clear explanation of the process or means through which the research led to, underpinned or made a contribution to the impact (for example, how it was disseminated, how it came to influence users or beneficiaries, or how it came to be exploited, taken up or applied).

- Where the submitted administrative unit's research was part of a wider body of research that contributed to the impact (for example, where there has been research collaboration with other institutions), the case study should specify the particular contribution of the submitted administrative unit's research and acknowledge other key research contributions.
- Details of the beneficiaries – who or what community, constituency or organisation has benefitted, been affected or impacted on.
- Details of the nature of the impact – how they have benefitted, been affected or impacted on.
- Evidence or indicators of the extent of the impact described, as appropriate to the case being made.
- Dates of when these impacts occurred.

5. Sources to corroborate the impact (indicative maximum of ten references)

Institution	Administrative unit	Name of research group	Expert panel
Western Norway University of Applied Sciences	Faculty of Health and Social Sciences	Comparative services research	Panel 4c
Western Norway University of Applied Sciences	Faculty of Health and Social Sciences	DiaBEST - Best Practice Research in Diabetes and other Chronic Conditions	Panel 4c
Western Norway University of Applied Sciences	Faculty of Health and Social Sciences	Mental Health and Substance Abuse	Panel 4a
Western Norway University of Applied Sciences	Faculty of Health and Social Sciences	Personalised health services (PERSONFORSK)	Panel 4d

Scales for research group assessment

Use whole integers only – no fractions!

Organisational dimension

Score	Organisational environment
5	An organisational environment that is outstanding for supporting the production of excellent research.
4	An organisational environment that is very strong for supporting the production of excellent research.
3	An organisational environment that is adequate for supporting the production of excellent research.
2	An organisational environment that is modest for supporting the production of excellent research.
1	An organisational environment that is not supportive for the production of excellent research.

Quality dimension

The quality dimension consists of two judgements: 1) Research and publication quality, and 2) Research group's contribution. The first judgement is defined as follows:

Score	Research and publication quality	Supporting explanation
5	Quality that is outstanding in terms of originality, significance, and rigour.	**The quality of the research is world leadin**g in terms of quality, and is comparable to the best work internationally in the same area of research. The publications submitted provide evidence that the work of the group meets the highest international standards in terms of originality, significance, and rigour. Work at this level should be a key international reference in its area.
4	Quality that is internationally excellent in terms of originality, significance and rigour but which falls short of the highest standards of excellence.	**The quality of the research is internationally excellent**. The research is clearly of an international standard, with a very good level of quality in terms of originality, significance, and rigour. Work at this level can arouse significant interest in the international academic community, and international journals with the most rigorous standards of publication (irrespective of the place or language of publication) could publish work of this level.
3	Quality that is recognised internationally in terms of originality, significance and rigour.	**The quality of the research is sufficient to achieve some international recognition.** It would be perceived nationally as strong and may occasionally reach an internationally recognised level in terms of originality, significance and rigour. Internationally recognised journals could publish some work of this level.
2	Quality that meets the published definition of research for the purposes of this assessment.	The international academic community would deem the research to be nationally acceptable, but below world standards. Legitimate nationally recognised peer-reviewed journals could publish work of this level.
1	Quality that falls below the published definition of research for the purposes of this assessment[1].	**The quality of the research** is well below international level, and is unpublishable in legitimate peer-reviewed research journals.

[1] A publication has to meet all of the criteria below:

Societal impact dimension

The societal impact dimension is also composed of two judgements, defined as presented in the table below.

Score	Research group's societal contribution, taking into consideration the resources available to the group	Score	User involvement
5	The group has contributed extensively to economic, societal and/or cultural development in Norway and/or internationally.	5	Societal partner involvement is outstanding – partners have had an important role in all parts of the research process, from problem formulation to the publication and/or process or product innovation.
4	The group's contribution to economic, societal and/or cultural development in Norway and/or internationally is very considerable given what is expected from groups in the same research field.	4	Societal partners have very considerable involvement in all parts of the research process, from problem formulation to the publication and/or process or product innovation.
3	The group's contribution to economic, societal and/or cultural development in Norway and/or internationally is on par with what is expected from groups in the same research field.	3	Societal partners have considerable involvement in the research process, from problem formulation to the publication and/or process or product innovation.
2	The group's contribution to economic, societal and/or cultural development in Norway and/or internationally is modest given what is expected from groups in the same research field.	2	Societal partners have a modest part in the research process, from problem formulation to the publication and/or process or product innovation.
1	There is little documentation of contributions from the group to economic, societal and/or cultural development in Norway and/or internationally.	1	There is little documentation of societal partners' participation in the research process, from problem formulation to the publication and/or process or product innovation.

Methods and limitations

Methods

The evaluation is based on documentary evidence and online interviews with the representatives of Administrative Unit.

The documentary inputs to the evaluation were:

- Evaluation Protocol Evaluation of life sciences in Norway 2022-2023
- Administrative Unit´s Terms of Reference
- Administrative Unit's self-assessment report
- Administrative Unit's impact cases
- Administrative Unit's research groups evaluation reports
- Panel reports from the Expert panels
- Bibliometric data (*NIFU Nordic Institute for Studies of innovation, research and education*)
- Personnel data (*Statistics Norway (SSB)*)
- Funding data – The Research Council´s contribution to biosciences research (*RCN*)
- Extract from the Survey for academic staff and the Student Survey (*Norwegian Agency for Quality Assurance in Education (NOKUT)*)

After the documentary review, the Committee held a meeting and discussed an initial assessment against the assessment criteria and defined questions for the interview with the Administrative Unit. The Committee shared the interview questions with the Administrative Unit two weeks before the interview.

Following the documentary review, the Committee interviewed the Administrative Unit in an hour-long virtual meeting to fact-check the Committee's understanding and refine perceptions. The Administrative Unit presented answers to the Committee's questions and addressed other follow-up questions.

After the online interview, the Committee attended the final meeting to review the initial assessment in light of the interview and make any final adjustments.

A one-page summary of the Administrative Unit was developed based on the information from the self-assessment, the research group assessment, and the interview. The Administrative Unit had the opportunity to fact-check this summary. The Administrative Unit approved the summary without adjustments. ***(Adjust the text if the AU asked for corrections. Include the AU request and explain what adjustments were made).***

Limitations

(Choose one of the three options below and delete the others. Feel free to elaborate slightly if necessary. For example, if you choose option 3, explain the missing information. Note that the Committee can provide detailed feedback and suggestions on improving the evaluation in the Memorandum to the RCN. This section has to remain concise and only summarise whether the information was or was not sufficient.)

(1) The Committee judged the information received through documentary inputs and the interview with the Administrative Unit sufficient to complete the evaluation.

(2) The Committee judged that the Administrative Unit self-assessment report was insufficient to assess all evaluation criteria fully. However, the interview with the Administrative Unit filled gaps in the Committee's understanding, and the information was sufficient to complete the evaluation.
(3) The Committee judged that the Administrative Unit’s self-assessment report was insufficient to assess all evaluation criteria fully, and some information gaps remained after the interview with the Administrative Unit.

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