Evaluation of Life Sciences 2022-2024
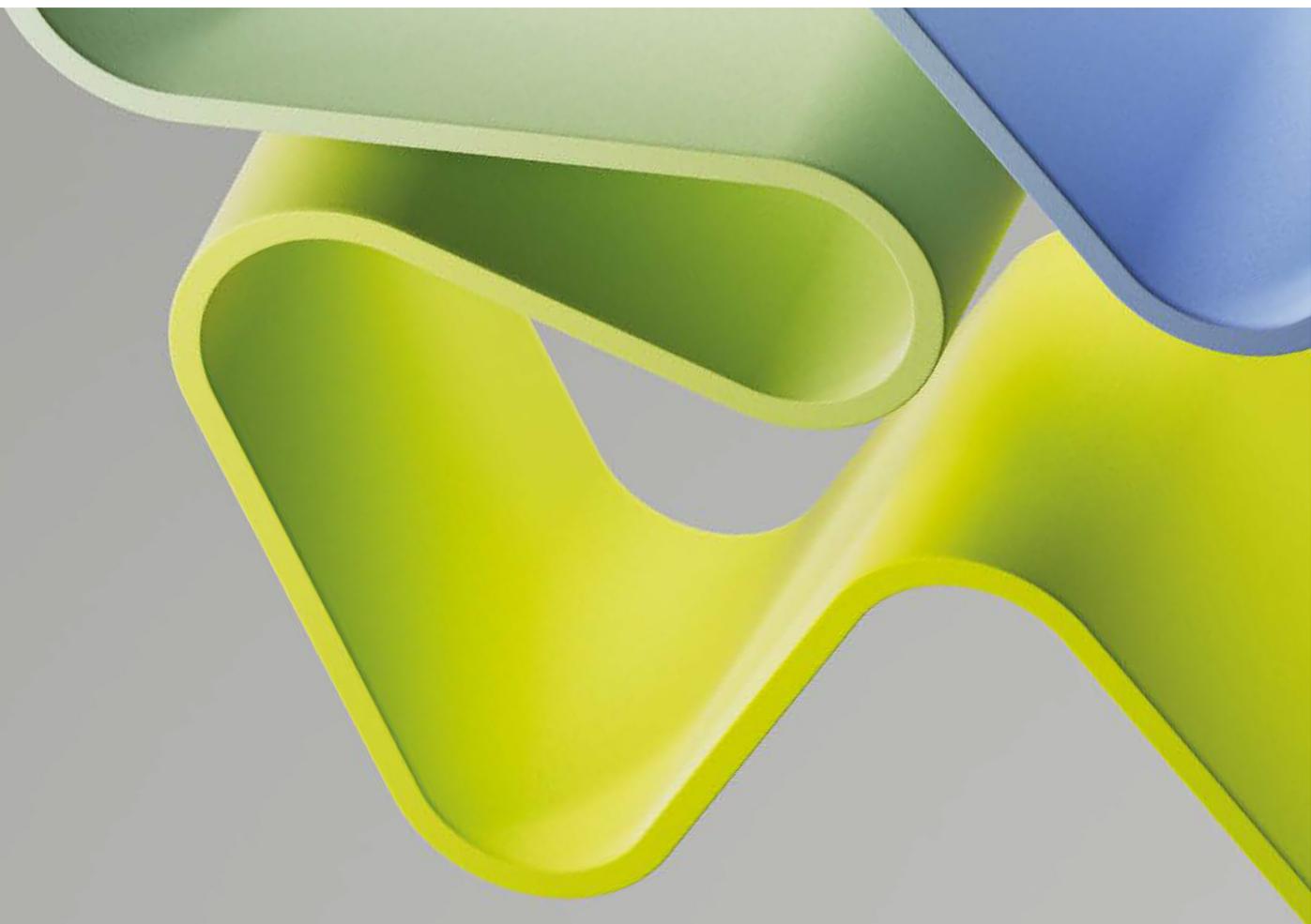
Evaluation of medicine and health 2023-2024

Evaluation report

ADMIN UNIT: MODUM BAD
INSTITUTION: Research Institute of MODUM BAD

December 2024

CONTENTS

Statement from Evaluation Committee Health Trusts 1

This report is from Evaluation Committee Health trust 1 which evaluated the following administrative units representing the hospital trust in the Evaluation of medicine and health 2023-2024:

- Regional Centre for Child and Adolescent, Regional Center for Child Adolescent Mental Health East and South
- Center for Psychopharmacology, Diakonhjemmet Hospital
- Center treatment of Rheumatic and Musculoskeletal Diseases (REMEDY), Diakonhjemmet Hospital
- Division of Paediatric and Adolescent Medicine, Oslo University Hospital and University of Oslo
- Division of head, neck and reconstructive surgery (HHA), Oslo University Hospital and University of Oslo
- Division of Mental Health and Addiction, Oslo University Hospital and University of Oslo
- Division of Gynaecology and Obstetrics, Oslo University Hospital and University of Oslo
- Modum Bad, Research Institute of Modum Bad
- Department of Research, SunnaasRehabilitation Hospital

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 Health trust 1. All members of the committee have agreed with the assessments, conclusions and recommendations presented here.

Evaluation committee Health trust 1 consisted of the following members:

<div align="center">

Professor Johan Hellgren (Chair)
University of Gothenburg

Professor Oskari Heikinheimo
Helsinki University Hospital

Professor Nick Hardiker
University of Huddersfield

Professor Fiona Gaughran
King's College London

Professor Claudi Bockting
Amsterdam University Medical Centre

Professor Li Felländer-Tsai
Karolinska Institute

Professor Ertan Mayatepek
University Hospital Düsseldorf

Dr Reda Nausedaite, Technopolis Group, was the committee secretary.

Oslo, December 2024

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Profile of the administrative unit

The Modum Bad Research Institute is an integrated part of the Modum Bad hospital and with its modest size, constitutes one defined research group (Modum Bad Research Institute) and one administration unit. In terms of research personnel, Modum Bad consists of 11 PhD students and 3,2 senior researchers. In terms of gender, women make up 63 percent of the PhD students and 37 percent of the senior researchers.

The administrative unit's main strategy is to elevate service quality and standards across professional fields through the Research Institute. Over the past decade, the focus has been on establishing national and international collaborations to enhance expertise in methods and statistics, facilitating high-quality psychotherapy research published in top journals. The administrative unit aims to initiate at least one research project per department, covering psychotherapy effectiveness, population studies on global crises like COVID-19, and burnout among healthcare professionals. This threefold focus provides insights into individual, societal, and professional well-being. Additionally, the administrative unit has innovated routine outcome monitoring in the clinic, strengthening the clinic-research connection and benefiting patients.

The Research Institute at Modum Bad is dedicated to fostering extensive national and international collaborations. Partnering with prominent universities such as the University of Oslo, University of Wisconsin, and Harvard University, the institute engages in multidisciplinary research. The institute's integration into collaborative networks is further strengthened by active involvement of staff holding academic positions at the University of Oslo. This strategic approach has cultivated high-level methodological and statistical competence, positioning Modum Bad as a key player in mental health research. However, maintaining this level of collaboration requires continuous monitoring, dedicated resources, and structured training programs.

According to its self-assessment, in the future, the Modum Bad Research Institute will leverage its close proximity to clinical environments to enhance research and innovation. This integration will foster dynamic collaboration and knowledge exchange, supported by a steady increase in high-level publications. The institute aims to establish its own laboratory to advance personalised treatment approaches for mental health disorders, utilising frequent patient registrations to prioritise process-outcome studies in psychotherapy. The institute is poised to explore machine learning and AI to optimise treatment outcomes and integrate digital health platforms, telemedicine, and mobile applications into mental health treatments. This strategic approach aims to keep the institute at the forefront of innovative practices. However, the institute faces significant challenges. The impending retirement of senior staff threatens the continuity of expertise, while financial constraints pose difficulties in securing sustainable funding and maintaining research activities. The slow pace of research due to extensive data collection and patient care commitments may impact the institute's ability to stay competitive. Additionally, rapid technological advancements could render existing methods obsolete, making it crucial for the institute to stay updated and competitive.

Overall evaluation

Modum Bad is a strong national player and has several strengths such as their own data registry for patient/service monitoring and research purposes and this data-registry is also accessible for other research groups. The strong focus of Modum Bad is on improvement of treatment outcomes and patients' satisfaction with it. This is also visible in the development of their own Routine Outcome Measurement questionnaire (ROM/ (M-POQ)) to follow these processes and outcomes. The M-POQ has been validated; it is not clear whether the results are published in peer reviewed journals. Another strength is its ambition for the future in terms of methodological innovations such as an increased interest in the use of sophisticated methodological innovations such as Bayesian statistics, network-analyses and ecological momentary assessments for which they have found the appropriate partners for the actual conduct of EMA as well as the analytic work that comes with it. The collaboration with these external partners (and University of Oslo (UiO) partly mitigate the relatively small research group and uncertain leadership due to the retirement of two seniors and relatively low budgetary resources. Other strengths include the direct translational components of their work as well as a strong scientists-practitioners focus. Regarding weaknesses, the Modum Bad is, despite its growth, still a small research group. The impending retirement of senior staff members raises concerns about a talent drain. This poses a threat to the institute's knowledge base and institutional memory, affecting the continuity and quality of ongoing and future projects. The overall future aims have been defined such as becoming a central hub for clinical research, and a leader in precision treatment. These ambitions have not been benchmarked in terms of feasibility in terms of budgets and available staff.

Recommendations

- A focus on (comparative) cost-effectiveness studies of new treatments would be recommended given the strong focus on improvement of treatment quality in routine care practices.
- Modum Bad has innovative ambitions which are to be praised but these are also broadly defined, covering many different mental disorders and methods. Given the small size of the group and limited financial resources it would to be recommended to prioritise topics of excellence which are feasible, doable and benchmarked.
- In alignment with the above, senior staff is retiring which puts a further strain on the acquisition potential of the remaining senior staff. It is recommended to enrich low hanging fruit' funding to develop the research prioritisation in combination with EU or other international partnerships, not as the Project Lead per se but as a partner to guarantee sufficient staff. Developing a variety in research functions by adding postdocs or junior researchers to the team would mitigate the risk when seniors available would fall out.

1. Strategy, resources and organisation of research

1.1. Research Strategy

The strategic approach aims are:

To facilitate the execution of psychotherapy research projects with high- quality designs, methodologies, and statistical analyses, published in well acknowledged international peer-reviewed research journals.

To contribute to the development of precision treatment and therapist competence in mental health care and be a cutting-edge environment on innovative research methodology, such as network and dyadic analysis.

To be a leading environment for research in occupational health as well as health-promoting and preventive activities.

Continuously work on monitoring and improving own practices.

The strategies and scientific priorities related to the "specific aspects" indicated in the administrative unit´s Terms of Reference are as follows:

- To be a leading Centre for Clinical Research: Emphasise becoming a central hub for clinical research, delving into both the outcomes and processes of psychotherapy.
- Strive to position research at the forefront and actively engage in the advancement of precision treatment and psychotherapy within the field of mental health care.
- To play an active role in promoting research collaboration on both national and international fronts.
- To evaluate the extent of Modum Bad's research accomplishments, including scholarly publications and research infrastructure and also considering the organisation's visibility in media to effectively communicate research-related expertise.
- To evaluate how the research endeavours and outcomes are aligned with the sector's stated objectives as deliver up to date evidence based critical assessments, new diagnostic methods and treatment options.

This strategic approach aims at psychotherapy research projects with high- quality designs, methodologies, and statistical analyses. There is a clear ambition to initiate at least one research project per department, ensuring comprehensive treatment studies across various thematic areas. The research endeavours are characterised by a threefold focus.

Firstly, to engage in psychotherapy research projects, examining the effectiveness of different therapeutic approaches and understanding the mechanisms of change within therapy sessions.

Secondly to conduct population studies to explore the impact of global crises, such as the ongoing COVID-19 pandemic.

Thirdly to investigate burnout within a specific cohort of healthcare professionals, contributing to a broader understanding of mental health and well-being in professional settings. In particular, this addresses prophylactic endeavours for groups of professionals at risk of burnout.

The committee's evaluation

The main aim of the administrative unit is to improve the quality of inpatient care that the psychiatric hospital provides. The research is focussed on the efficacy/efficiency of

psychotherapy treatment, the exploration of different therapeutic approaches and the working mechanisms of change. Over the last decade this focus has been extended with an increased interest and use of sophisticated methodological innovations such as Bayesian statistics, network-analyses and routine outcome measurements (ROM). For ROM purposes the Modum Bad has developed a specific questionnaire: the Modum Process Outcome Questionnaire (M-POQ). The psychometric qualities of this questionnaire have been validated but it is not yet reported whether these are published. The strategy's implementation involves a strategic allocation of resources to support research projects.

The committee´s recommendations

- Modum Bad has innovative ambitions which are to be praised but these are also broadly defined, covering many different mental disorders and methods. Given the small size of the group and limited financial resources it would to be recommended to prioritise topics of excellence which are feasible, doable and benchmarked. There is priority to secure external funding through new position announcements and grant applications. Key occasions for prioritisation include the announcement of new research positions, where there is assessment of the alignment of candidates with the strategic objectives. Applying for external funding is a crucial juncture in the future.

1.2 Organisation of research

The Research Institute was established in 1985, and to date, 28 doctoral dissertations have been produced (12 between 2012 and 2022). The Research Institute is organised directly under the CEO of the organisation and serve both the prevention department and the hospital. Most of the focus and work are as part of Modum Bad psychiatric hospital. Modum Bad is a non-profit hospital with a formal agreement with the public health authorities to provide residential care services.

There are established structures and practices that actively support researcher careers and facilitate the entry of early-career researchers into the profession. The integrated approach involves close collaboration between the research institute and clinical departments, ensuring a dynamic environment where insights are translated into patient treatment.

There are 11 PhD candidates and 3,2 senior researchers.

There is opportunity for smooth transition of clinicians into research roles and the initiation of impactful projects. Clinicians can transition into a Ph. D. position and initiate research projects.

Staff members are encouraged to establish collaborations with external research institutions, universities, or organisations. These partnerships may involve joint research projects, knowledge exchange, and collaborative publications. Modum Bad facilitates short-term research visits for staff to other research institutions or academic centres. These visits provide opportunities to learn from other experts, access unique resources, and strengthen collaborative ties.

The committee's evaluation

Given an ongoing generational shift and the imminent completion of several Ph.D. projects, the focus on developing specific strategies for the smooth transition of younger researchers into central positions has becomes paramount for the future.

The committee´s recommendations

- Modum Bad has innovative ambitions which are to be praised but these are also broadly defined, covering many different mental disorders and methods. Given the small size of the group and limited financial resources it would to be recommended to prioritise topics of excellence which are feasible, doable and benchmarked.

1.3 Research funding

Between 2018 and 2022 Modum Bad received public sector funding of 7,25 MNOK and other national grant funding of 1,238 MNOK. Public management funding of 3,746 MNOK related to special hospital tasks was also granted.

The committee's evaluation

The obtained research funding in the period of 2018 – 2022 came mainly from basic funding and other national grants while funding from industry, private and public organisations was limited, this also holds for funding from the Research Council of Norway and other national health research sources. No international funding is obtained in this period.

The committee´s recommendations

- Expansion of external funding from both national and international sources is recommended.

1.4 Use of infrastructures

Modum Bad does not have any of their researchers affiliated with the national infrastructures mentioned in the Norwegian roadmap for research infrastructures, either as participants or host institutions. Modum Bad have prioritised open access to research data, adhering to the FAIR data principles (Findable, Accessible, Interoperable, and Reusable).

The committee's evaluation

The approach in terms of FAIR principles fosters transparency and allows for the reuse of data, promoting collaborative research practices.

The committee´s recommendations

- Explore possibilities to participate in relevant Norwegian and European infrastructures.

1.5 Collaboration

The Research Institute is dedicated to fostering extensive collaboration both nationally and internationally. This collaboration spans a diverse array of expertise and includes partnerships with prominent universities such as the University of Oslo, The Arctic University of Norway, Dalhousie University, University of Wisconsin, University of Amsterdam, Harvard University, University of Bergen, National University of Singapore, Stockholm University, and the University of Manchester. Additionally, Modum Bad engage

with various institutions, contributing to a multidisciplinary and comprehensive approach, including NKVTS (Norwegian Centre for Violence and Traumatic Stress Studies), Sørlandet Hospital, Vestre Viken, and the Norwegian Public Health Institute.

The integration of Modum Bad into collaborative networks is further strengthened by the active involvement of full-time employees holding associate professor positions at the University of Oslo, Department of Psychology, and professors from the University holding part-time positions at Modum Bad. This interconnection establishes Modum Bad as an integral part of the university's research environment. Additionally, collaboration extends to the University of South-Eastern Norway and the Medical Faculty, University of Oslo, where they jointly participate in various projects, reflecting the depth and breadth of the commitment to collaborative research endeavours.

The Research Institute at Modum Bad has successfully implemented a strategic policy to foster extensive national and international collaborations. As a small research institute, establishing collaboration agreements has been essential for creating networks and engaging with external stakeholders.

A collaboration has been established with a provider for digital services for measurement in clinical practice enabling patient involvement (Checkware AS) as well as a data analyst firm. The Modum Process Outcome Questionnaire (M-POQ) which is a feedback system has been developed at Modum Bad for clinical use.

The committee's evaluation.

Given the position of the research institute in terms of being integrated with routine care, one could expect more studies into broader issues of relevance for clinical practice, e.g., implementation studies. Societal contribution is mostly through education.

The committee´s recommendations

- The social contributions of Modum Bad could be worked out in a much more fine-grained manner which is assumed possible given the clinical impact the group may have. Such an analysis could also be of use in further acquisition potentials.

1.6 Research staff

There are 11 PhD students (63% women) and 3,2 senior researchers (37% women). The Modum Bad is an integrated part of the hospital and with its relatively small size, it constitutes one defined research group. The staff also actively participate in various external research groups.

The committee's evaluation

Senior staff is retiring which puts a further strain on the acquisition potential of the remaining senior staff.

The committee´s recommendations

- It is recommended to enrich 'low hanging fruit' funding to develop the research prioritisation in combination with EU or other international partnerships, not as the Project Lead per se, but as a partner to guarantee sufficient staff. Developing a variety

in research functions by adding postdocs or junior researchers to the team would mitigate the risk when seniors available would fall out.

- To sustain the group, it is recommended that the primary focus is on safeguarding new senior staff and on acquisition of new projects as senior staff is soon retiring, project funding is limited, and PhD projects are also nearing their end.

1.7 Open Science

The administrative unit has actively embraced open access publishing, making scholarly works freely accessible. Researchers have consistently published in reputable open-access journals, enhancing the visibility and impact of their publications. Modum Bad aspires to establish a comprehensive open policy and are actively working towards attaining a strategic position to realise this objective. The intention is to advocate for the allocation of a dedicated budgetary provision to support the implementation of this policy. Modum Bad has actively shared educational resources openly. This supports broader access to learning materials and contributes to the democratisation of education. The institutional policy at Modum Bad places a high priority on the responsible ownership of research data, emphasising ethical data management and confidentiality. They strictly adhere to well-defined data management plans to ensure the systematic and secure handling of research data. These measures align with ethical standards, contributing to the preservation of the integrity and privacy of the collected information. Additionally, they have a dedicated Data Protection Officer (DPI), and before the commencement of each new project, they implement an evaluation plan to assess privacy impact in collaboration with the DPO through a Digital Privacy Impact Assessment (DPIA).

The committee's evaluation

Modum Bad supports the principle that the outcomes of publicly funded research should be openly accessible to all. Researchers at Modum Bad should publish in reputable, high-quality journals within their respective fields. Modum Bad recommends publishing in open-access journals when choosing among equivalent publishing channels within the field.

The committee´s recommendations

- Continue collaborations with universities in order to benefit from agreements by major educational institutes with publishers in order to secure open access publication.

2. Research production, quality and integrity

Introduction

A significant majority of the publications are in the fields of psychology and, to a lesser extent, psychiatry. Notably, there has been a recent upsurge in publications related to public environmental health, driven by our response to the COVID-19 pandemic and other societal crisis. Primarily, the involvement in psychotherapy research projects is focused on assessing the effectiveness of various therapeutic approaches and comprehending the mechanisms of change within therapy sessions. Over the past decade, they have conducted randomised controlled studies spanning eating disorders, trauma disorders, family and relational domains, anxiety disorders, and both inpatient and outpatient clinical settings. Two of these studies were conducted as multi-site endeavours, specifically in the areas of family and relational problems and outpatient clinics.

Concurrently, they undertake population studies to investigate the repercussions of global crises, such as the ongoing COVID-19 pandemic, on communities.

Lastly, Modum Bad focuses on studies of burnout within a specific cohort of healthcare professionals, contributing to a broader understanding of mental health and well-being in professional settings.

The institution's research integrity policy is designed to uphold the highest standards of ethical conduct, transparency, and accountability in all research activities. Researchers are expected to conduct their work with utmost integrity and honesty, and the falsification, fabrication, or plagiarism of data and results is strictly prohibited.

2.1 Research quality and integrity

This part includes one overall evaluation for 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 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 overall assessment of the research group(s) presented in this section.

Modum Bad

Modum Bad is a strong national player and has several strengths such as their own data registry for patient/service monitoring and research purposes and this data-registry is also accessible for other research groups. The strong focus of Modum Bad is on improvement of treatment outcomes and patients' satisfaction with it. This is also visible in the development of their own Routine Outcome Measurement questionnaire (ROM/ (M-POQ)) to follow these processes and outcomes. The M-POQ has been validated; it is not clear whether the results are published in peer reviewed journals. Another strength is its ambition for the future in terms of methodological innovations such as an increased interest in the use of sophisticated methodological innovations such as Bayesian statistics, network-analyses and ecological momentary assessments for which they have found the appropriate partners for the actual conduct of EMA as well as the analytic work that comes with it. The collaboration with these external partners (and UiO) partly mitigate the relatively small research group and uncertain leadership due to the retirement of two seniors and relatively low budgetary resources. Other strengths include the direct translational components of

their work as well as a strong scientists-practitioners focus. The overall future aims have been defined such as becoming a central hub for clinical research, and a leader in precision treatment. These ambitions have not been benchmarked in terms of feasibility in terms of budgets and available staff.

3. Diversity and equality

At Modum Bad, they are committed to fostering an inclusive and diverse administrative environment, and they have implemented comprehensive policies and practices to protect against all forms of discrimination.

There is a clear and comprehensive non-discrimination policy that explicitly outlines commitment to providing an environment free from discrimination based on race, ethnicity, gender, sexual orientation, religion, age, disability, or any other protected characteristic. Modum Bad promotes equal employment opportunities for everyone. They ensure that all employment decisions, including recruitment, hiring, promotions, and training opportunities, are based on merit, qualifications, and job-related criteria. In the recruitment processes, they actively seek diversity by using inclusive language in job advertisements and implementing strategies to attract candidates from a variety of backgrounds. They are committed to building a workforce that reflects the diversity of the communities they serve. There are robust anti-harassment policies in place to prevent and address any form of harassment or discriminatory behaviour. Their employees are encouraged to report incidents, and they have established confidential channels for reporting have been established.

The committee's evaluation

There are robust principles in place to secure non-discrimination, equality, diversity and anti-harassment. Compliance seems to be good and support the creation of a workplace that values and respects individual differences, promotes diversity, and ensures equal opportunities for all employees.

The committee´s recommendations

- Committee supports initiatives to ensure a balanced age profile for future workflow needs.

4. Relevance to institutional and sectorial purposes

Modum Bad has developed and implemented specialised treatment programmes in psychotherapy tailored to address specific mental health issues. These programmes are designed to meet the unique needs of individuals, contributing to sector-specific objectives related to effective treatment outcomes. The impact of the work includes improved treatment outcomes, enhanced professional practices, and a positive influence on psychotherapy. Modum Bad participates in national and international forums related to psychotherapy, exchanging knowledge and insights with experts in the field.

Modum Bad invests in ongoing research and development initiatives to explore innovative approaches to mental health treatment. This includes studying emerging therapeutic techniques, integrating technology into interventions, and exploring new modalities for improved patient outcomes. The administrative unit encourages the implementation of pilot programmes and the prototyping of new interventions. This allows them to test and refine innovative ideas in real-world clinical settings before scaling up, ensuring that the innovations are practical and effective. In the last 10 years partnerships with industry stakeholders interested in advancing mental health care have been established.

The research staff at Modum Bad is highly motivated to engage in innovation and commercialisation activities, driven by a shared commitment to advancing mental health care, improving patient outcomes, and contributing to the broader field of mental health research. The motivations among their research staff for participating in these activities are based on a desire to make a positive impact on patient care and finding solutions on unmet needs within the mental health care landscape. Engaging in innovation allows them to address gaps in existing treatments and develop novel interventions that offer more effective and tailored solutions for diverse patient populations.

Innovation and commercialisation are fostered through dedicated support mechanisms that include providing resources for research and development, facilitating collaborations with industry partners, and offering guidance on intellectual property protection. Additionally, they promote a culture that encourages creative thinking and the translation of research outcomes into practical applications.

The committee's evaluation

The administrative unit is integrated with the services, health professionals and students of the residential hospital. It enables the institution to increase and safeguard their evidence-based treatment programmes based on sound empirical research.

The committee´s recommendations

- To sustain the administrative unit, it is recommended that the primary focus is on safeguarding new senior staff and on acquisition of new projects as senior staff is soon retiring, project funding is limited, and PhD projects are also nearing their end.

4.1 Health trusts

The administrative unit's clinical research, innovation, and commercialisation efforts play a pivotal role in advancing the development, assessment, and implementation of new diagnostic methods, treatments, and healthcare technologies.

They have responsibility for the second-semester clinical practice for psychology students, for main clinical practice supervision for psychology students in the professional programme towards the end of their studies and for fifth-year medical students during their psychiatry rotation this semester. They also have responsibility for master's degrees among nursing students. Additionally, they take charge of the academic and clinical education of dual-competency Ph.D. candidates, ensuring the seamless execution of the entire practical component. Furthermore, the involvement extends to mentoring students in their master's or doctoral theses. In addition, one of the staff members has taken the initiative to establish a research track within the psychology graduate programme at the UiO to foster a research-oriented learning environment for students.

Students have excellent opportunities to engage in research at the administrative unit. They can actively participate in ongoing projects, attend research meetings, have one-on-one sessions with experienced researchers. While the extent of student involvement varies, there's a strong culture supporting active participation, enriching their academic experience, and preparing them for future careers in research or related fields. The researchers are frequently allocated from clinical roles to Ph.D. positions, creating a research team with a strong clinician-researcher orientation.

The committee's evaluation

The research group assumes responsibility for academic training, actively involved in educating healthcare professionals such as physicians, psychologists, and nurses. Through a formal contractual arrangement, they have established agreements with both the UiO and the University of Southeast Norway, to oversee and facilitate specific aspects of practical training required for the completion of master's degrees.

The committee´s recommendations

- The committee supports efforts to provide increased financial support for students and postgraduate focussed research projects.

5. Relevance to society

Introduction

Modum Bad´s administrative unit significantly contributes to the Norwegian Long-term plan for research and higher education by actively engaging in impactful research initiatives. These efforts address societal challenges by providing evidence-based insights to enable policy formulation, promoting sustainable development through projects exploring and contributing to understanding societal transformations.

Aligned with the UN Sustainable Development Goals, Modum Bad's research endeavours focus on areas such as mental health, societal dynamics, and sustainable practices. By conducting rigorous research and collaborating with industry partners, the administrative unit aims to create knowledge that not only advances academic understanding but also addresses real-world challenges, making a positive impact on society and contributing to the global goals for sustainable development. In our new strategic plan, we have embraced a commitment to adhere to the UN Sustainable Development Goals.

The committee´s comments to impact case 1 - Mental health and adherence during the COVID-19 pandemic (MAP-19)

MAP-19 is a large-scale longitudinal study. It examines the impact of non-pharmacological interventions on mental health during the pandemic. With over 10,000 participants and 50 measurement time-points over three years, the project aims to inform policymakers, healthcare professionals, and the public about the psychological implications of COVID-19 measures.

Through their multidisciplinary approach, the consortium strives to identify risk factors, develop interventions, and promote resilience in the face of the mental health challenges arising from the pandemic. Their collective efforts encompass comprehensive data collection, analysis, and dissemination of findings to inform evidence-based mental health support during and beyond the pandemic.

The aforementioned study has gained considerable attention: Ebrahimi, Omid Vakili et al. The Evolution of Depressive Symptomatology in a Representative Sample of Adults Across a 17-Month Period During COVID-19. Journal of Psychopathology and Clinical Science. ISSN 2769-7541. doi: 10.1037/abn0000786.

The project has provided a foundation for policymakers and healthcare professionals to implement interventions that protect the public against psychological stressors related to the pandemic. The MAP-19 project has significant implications for understanding the impact of NPIs on mental health and identifying vulnerable subgroups within the population. It has garnered international recognition and plays a central role in understanding the mental health consequences of the pandemic.

The committee´s comments to impact case 2 - Randomised Controlled Trial at the department of Anxiety Disorders

The research focused on a novel therapeutic approach (metacognitive therapy, MCT) for anxiety disorders providing valuable insights into its effectiveness. The study's rigorous methodology and comprehensive analysis attracted attention within the scientific community. It influenced clinical practices, prompting further research and exploration in this area.

The researchers conducted a randomised controlled trial to evaluate the effectiveness of a novel therapeutic intervention. They compared this intervention to the standard treatment methods currently used for anxiety disorders. 90 patients with a primary diagnosis of Post Traumatic Stress Disorder, Social Phobia or panic disorder, with and without Agoraphobia, were randomised to either CBT (cognitive behavioural therapy) or MCT. The RCT was combined with a process-outcome study on a within-person level using repeated measures. MCT seems to have a more rapid effect on anxiety symptoms, but there were no significant differences in the long term for patients with comorbid anxiety disorders.

The aforementioned paper is a good example of leading research in the field Johnson, S. U. et al (2017). Metacognitive therapy versus disorder-specific CBT for comorbid anxiety disorders: A randomised controlled trial. Journal of anxiety disorders, 50, 103–112. https://doi.org/10.1016/j.janxdis.2017.06.004

Overall, the paper played a significant role in advancing the understanding and treatment of anxiety disorders. Based on the findings, a new treatment section focusing on anxiety disorders will be established at the department.

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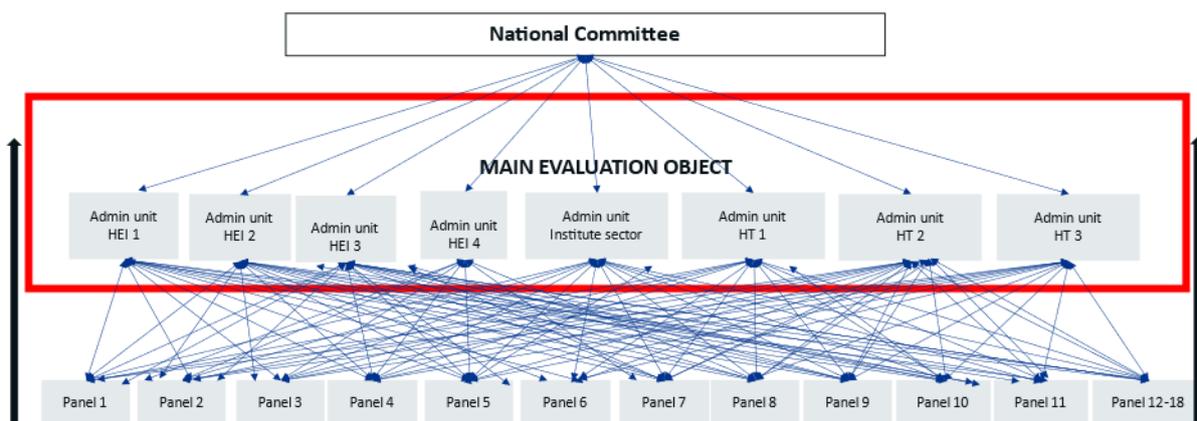
The institutions have been allowed to adapt the evaluation mandate (Terms of Reference) to their own strategic goals. This is to ensure that the results of the evaluation will be useful for the institution's own strategic development. The administrative unit together with the research group(s) selects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

Forskningsrådet

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

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 institdution(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)

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[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

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[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,

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[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.
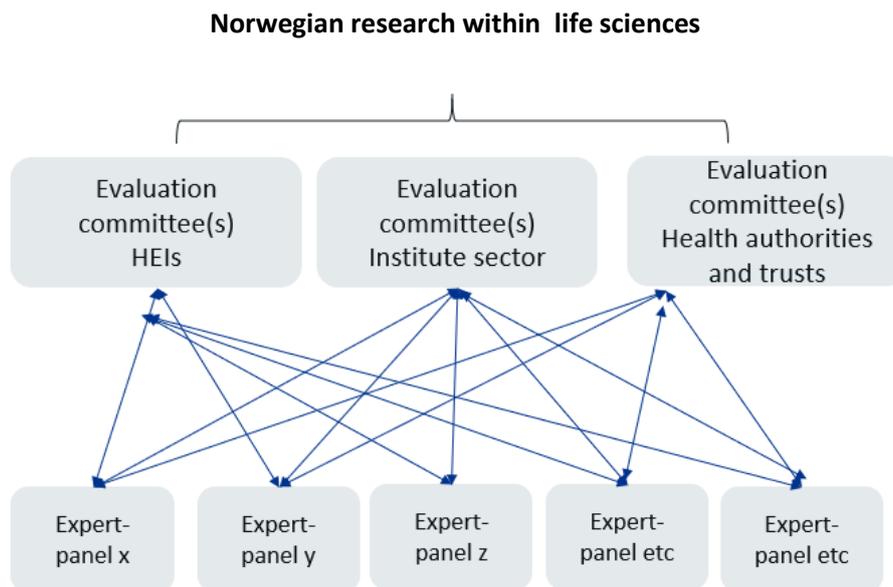
Norwegian research within life sciences

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

Criteria / Evaluation units	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 <u>all</u> 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 <u>(max 50 pages)</u>. 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	

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[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:	

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

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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.

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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.

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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
Research Institute of Modum Bad	Modum Bad	Modum bad Research Institute	Panel 5a

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 leading** 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.

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[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.