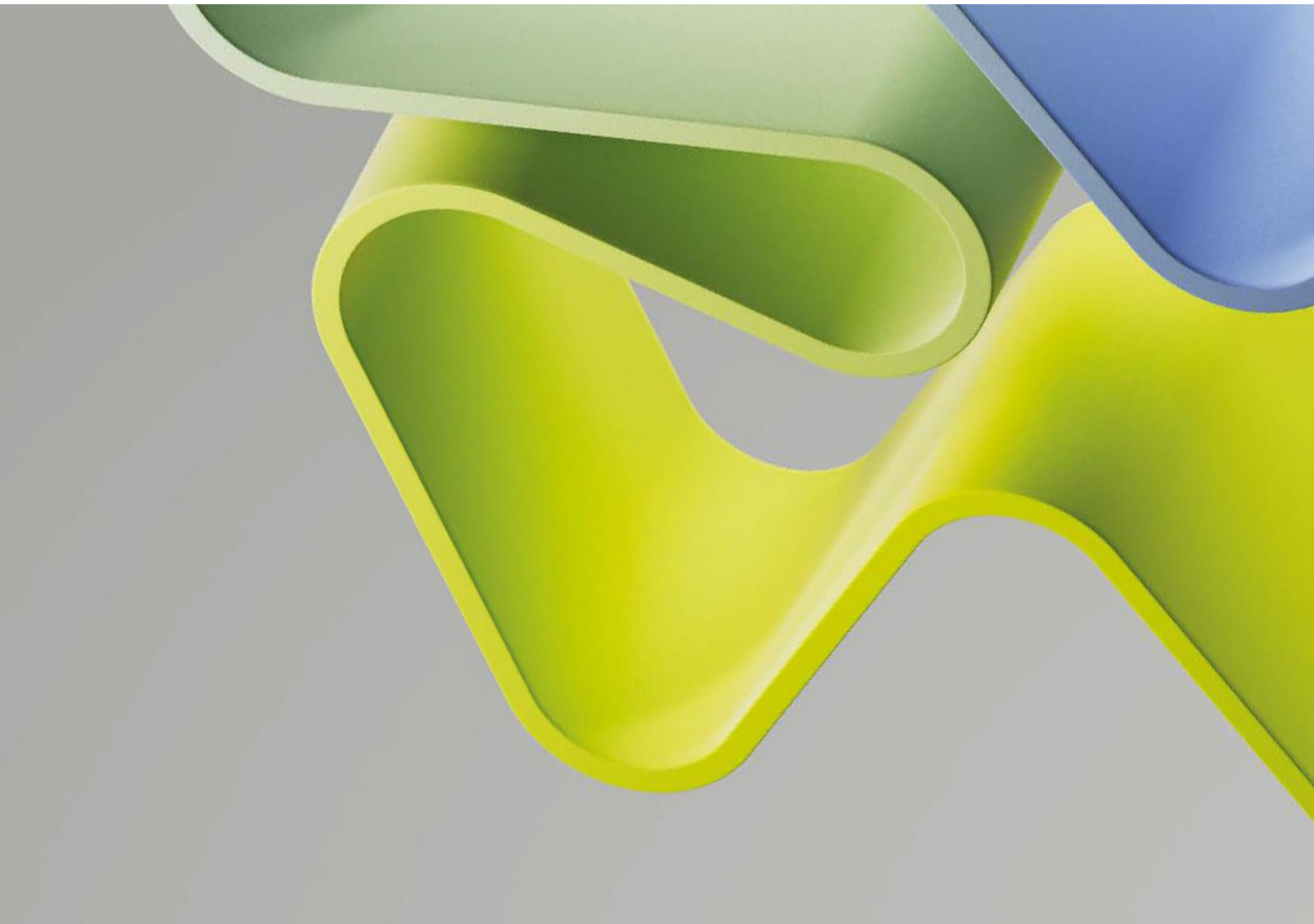
The Research Council of Norway

Evaluation of Medicine and Health 2023-2024

Evaluation report – Panel 4d
Research Group: Cluster for systematic reviews and health technology assessment (HTV)
Administrative Unit: Division of Health Services
Institution: Norwegian institute of Public Health



Content

Preface

The Research Council of Norway (RCN) is given the task by the Ministry of Education and Research to perform subject-specific evaluations. The primary aim of the evaluation of medicine and health (EVALMEDHELSE) 2023-2024 is to reveal and confirm the quality and relevance of research performed at Norwegian Higher Education institutions, research institutions (the institute sector) and the health trusts, in an international perspective. Such knowledge is useful for the institutions that participate in the evaluation, for the Research Council who advice the authorities on how research should be developed further, and for the authorities, who set targets and frameworks for research and higher education. Research groups submitted by their administrative unit will be assessed by 18 expert panels organised by research subjects or themes. The expert panels will assess research groups across institutions and sectors based on research group's self-assessments and examples of scholarly output. These research reports will be part of the evaluation of their belonging administrative units.

Abstract

Following a series of structural changes, the group was incorporated as a cluster for Systematic Reviews and Health Technology Assessments (HTV), with its own 'matrix' organization, into the Division for the Health Services (DHS) within the Norwegian Institute for Public Health (NIPH). HTV is led by a Research Director and four Department Directors, and the staffing base (63 in total) is made up of health economists, information specialists and researchers/advisors. Operating within and reflecting the Institute's vision of 'Better health for all', the stated mission of HTV is 'to provide high quality evidence for decision making processes while continuing to innovate new methods for conducting systematic reviews'. Most of the work of HTV takes the form of commissions from state actors, which to a large part determines the foci of investigation. Significant financial and in-kind support is provided by the Division. In addition to support generated from core funding, the bulk of the work of HTV appears to be sustained via routine commissions. HTV considers itself to have been a global leader in conducting systematic reviews and in systematic review methodologies at the start of the previous decade and still retains a number of international links.

Overall assessment

Despite its 'loose' structure, the overall strategic aim of HTV is clear, pointing to specific areas of strategic focus. The work of HTV appears to be aligned with the higher-level Institute strategy. HTV is part of a statutory body, which may limit aspirations and engagement with other research activities. External funding is relatively modest considering the size of HTV and the nature of its work. Core funding appears to have declined in recent years which may further impact on current and future sustainability. It is unclear what the international relevance of commissioned work might be, although the quality of published output would likely sit at a level of international relevance, with some at international excellence. The implementation aspects of the evaluations/research are not clear, and there appears to have been no tangible assessment made of their impact(s). There is a recognition of challenges and threats to the research ambitions of HTV. However, based on the information provided in the self-assessment, there appears a lack of resilience or a strategy to deal with these potentially harmful influences.

Grading:

Dimensions		**Score**
Organisational dimension	How adequate the organisational environment is in supporting the production of excellent research	3
Quality dimension	Research and publication quality	3
	Research group's contribution	3
Societal impact dimension	Research group's societal contribution	3
	User involvement	2

Recommendations

The reduction in core funding for HTV, and the potentially precarious nature of its commissions, represent risks to HTV, and should be taken as an incentive for HTV to engage more actively in seeking external sources of funding. Greater clarity in structure and roles may help to deliver on wider strategy, to better partition the work into statutory and non-statutory

activity (with an increase in ‘external’ activity), and to catalyse development pathways for HTV members at all levels. Articulating the existing quality benchmarks as measurable performance indicators might stimulate greater ambition, particularly when moving beyond traditional commissions, with a view to reasserting the position of HTV as a leader in the field. HTV might consider the development of both a documented impact strategy to ensure maximum benefit, and a related citizen engagement strategy, to ensure societal relevance and contextual fit.

1. Strategy, resources and organisation

1.1 Research group's organisation and strategy

Following a series of structural changes, HTV was incorporated as a cluster, with its own 'matrix' organisation (with several members and advisors), into the Division for Health Services within the Norwegian Institute for Public Health. The leadership team (Department Directors who act as contact points for projects) appears to be responsible for directing support, which is provided by the Division in the form of a Research Director, and by the Institute in the form of administrative support from the Department of Research. Benchmarking for HTV takes the form of principles or guidance, which points towards quality, excellence, alignment, responsiveness, accessibility, and innovation. The self-assessment identifies several avenues to commissioning (the Ministry of Health and Care services, two Directorates, a commissioning forum, and municipalities), and cites several completed commissions. Operating within and reflecting the Institute's vision of 'Better health for all', the stated mission of HTV is 'to provide high quality evidence for decision making processes while continuing to innovate new methods for conducting systematic reviews'. In order to fulfil this mission, the work of HTV has involved the use of plain language and the development of summaries of existing knowledge for end users, and changes to work processes and the incorporation of machine learning approaches to the systematic review process.

Most of the work of HTV takes the form of commissions from state actors, which to a large part determines the foci of investigation. HTV has recruited new colleagues with relevant knowledge, skills and experience as new commissions have come on board. At a strategic level, there has been a focus on methods, identification of new commissioners and additional external funding for specific projects, and the consolidation of international networks. Researchers within the Institute benefit from access to what is described as a cohesive infrastructure, comprising databases, software, and privileged access to sensitive data. HTV houses the Helsebibioteket.no and the public facing Kunnskapsbasertpraksis.no. HTV delivers teaching to 6 Universities across Norway.

Following several reported re-organisation activities earlier in the past decade, for the past 7 years, HTV has been loosely organized from a human resources perspective as a matrix. Despite its 'loose' structure, the overall strategic aim of HTV is clear, pointing to specific areas of strategic focus. The benchmarks as presented appear as principles, rather than pointing to any specific measures or comparators for this particular group. Involvement in teaching and learning activity is documented in the self-assessment but the nature of this involvement and the specific contribution of HTV is unclear (other than delivery at postgraduate level to a range of professions). As part of a statutory body, and due to the nature of the commissions, HTV is expected to respond to the demands of health services and government bodies, which may serve to limit aspirations and engagement with other activities.

Recommendations to the research group

While there may be advantages, such as flexibility, to a 'loose' organizational structure, greater clarity in structure and roles may help to deliver on wider strategy and achieve agreed benchmarks. It may also help HTV better partition their work into statutory and non-statutory activity. The principles underlying the existing benchmarks provide useful guidance to HTV – articulating these as measurable performance indicators might stimulate greater ambition, particularly when moving beyond using traditional commissions.

1.2 Research group's resources

HTV has a Research Director, four Department Directors, and staff made up of health economists, information specialists and researchers/advisors. From the information given there appears to be a headcount of 63 (4 leaders, 29 researchers, 1 search specialist and 29 advisors) which is a substantial number. Each employee is randomly assigned a Department Director, who has HR responsibility for them. Each Department Director is a contact point for a number of projects within a delivery line. A team is put together to meet the needs of a new commission when it is received, and disbanded when it is completed. Staff participate in around 2-4 teams at a time. Professional development pathways for staff are unclear and HTV does not appear to offer their own PhD studentships. HTV cites a number of international links although the strength of these links and tangible benefits are unclear. In addition to core funding, the bulk of the work of HTV appears to be supported via routine commissions.

The host organisation provides institutional in-kind support to HTV, and significant core funding. However, core funding appears to have declined in recent years which may impact on current and future sustainability. External funding is relatively modest considering the headcount of HTV and the nature of its work.

Recommendations to the research group

The reduction in core funding for HTV, and the potentially precarious nature of its commissions should be seen as an incentive for HTV to engage more actively in seeking external sources of funding. The mobilization of existing partners and networks might be beneficial in this regard. A more robust organizational structure, with greater clarity in, and relevance of, line management, may catalyse development pathways for HTV members at all levels. It may also provide the focus required for greater external engagement, allowing HTV to access a much broader potential market for its work.

1.3 Relevance to the institution

The strategic direction of HTV appears to have been informed by the higher-level strategy of the Institute with its focus on ‘faster and better knowledge production, research excellence, open science and infrastructure focusing on new digital solutions’. The work of HTV has also been directed towards many of the Institute’s strategic initiatives, such as ‘identifying interventions to improve health, provide sustainable health care services, a focus on dialogue and user involvement, working across sectors, simplifying the navigation of complex health data, and shortening the time for data collection to knowledge and innovation’. This has allowed HTV to focus on new tools and techniques.

The work of HTV thus appears to be aligned with the higher-level Institute strategy. Benchmarking appears to be consistent although, as previously stated, it does not necessarily direct work towards this strategy.

Recommendations to the research group

Given the nature of work of HTV, it is well-placed not only to interface with the Institute strategy but has clear potential to draw on its skill base to inform that strategy more proactively.

2. Research quality

2.1 Research group's scientific quality

The self-assessment states that at the start of ten-year period, HTV was a global leader in conducting systematic reviews and in systematic review methodologies. The self-assessment provides summary information that points to several relevant national and international collaborative arrangements, although research income appears to support evaluations that are most relevant to Norway. Summary information was provided for 15 publications underlining the productivity of the group and, of note, many of these are in clinically relevant journals with modest to good impact.

Regarding the collaborative arrangements cited, the report lacks examples of the specific contribution of HTV to these collaborations. Commissioned projects tend to focus on aspects of methodology, capacity, and capability. Regarding the commissioned work, it is unclear what the international relevance might be. There is a clear focus on quality for HTV's research endeavours, although no specific guiding principles are given that might sustain and maximise that quality. The publications listed in the self-assessment reflect niche or relatively specific areas, although this might be expected given the nature of the work. The quality of these publications would likely sit at a level of international relevance, with some at international excellence.

Recommendations to the research group

HTV might consider the adoption of clearer guidelines for maximising the quality, reach and significance of published output, and being more strategic in partnership working to increase international relevance and to reassert the position of HTV as a leader in the field.

2.2 Research group's societal contribution

HTV play host to the Norwegian Electronic Health Library and appear to make good use of relevant research infrastructures. The self-assessment makes explicit mention of citizen engagement and documents a variety of societal contributions.

However, the extent of citizen and other user involvement in the research activity of HTV is unclear, and any description of systems and processes to support engagement, participation and involvement is lacking. The implementation aspects of the evaluations/research are not well documented. It is unclear how user-oriented the societal contributions might be, as they appear to be largely academic-facing, with no tangible assessment made of their impact (for example, they do not appear to have triggered funding awards nationally, nor informed white papers or guidelines).

Recommendations to the research group

HTV should consider a documented impact strategy to ensure that its work reveals maximum benefit (with opportunities for monitoring across agreed measurable indicators). In addition, they should consider a related citizen engagement strategy, to ensure appropriate engagement, involvement, and participation in the work to confirm societal relevance and contextual fit.

Appendices

(to be added by RCN / Panel Secretary)

- Mandate for expert panels
- Expert panel description and list of experts
- Template research group self-assessment
- Scales for research group's assessment

The Research Council of Norway

Evaluation of Life Sciences in Norway 2022-2024

Evaluation of Medicine and Health 2023-2024

Mandate Expert panels

The Research Council of Norway (RCN) is given the task by the Ministry of Education and Research to perform subject-specific evaluations. The Portfolio board for Life Sciences in the Research Council of Norway has decided to carry out an evaluation of medicine and health in 2023-2024 as the second of two evaluations within Life Sciences. The evaluation of biosciences takes place in 2022-2023.

1. The objective of the evaluation

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), by the institute sector and by health trusts.

The results of the evaluation will be used as recommendations to the institutions, the Research Council, and the ministries.

2. Tasks of the expert panels

The panels are requested to:

- evaluate the strategy, resources and organisation of/for the research groups.
- evaluate research production and quality of the research groups.
- grade and write a short evaluation text to the evaluated research groups.

Each of the expert panels will write a brief report with evaluations of the different research groups as well as specific recommendations.

3. Time schedule

Digital panel meetings will take place in the period March 15. - June 15. 2024.
Deadline for submitting panel report to the Research Council: June 15. 2024.

4. Miscellaneous

Other important aspects of Norwegian life sciences research that ought to be given consideration.

EVALMEDHELSE 2023-2024 – Panel group description – January 2024

Panel group	Description	Panel no.
Group 1 PHYSIOLOGY Physiology-related disciplines (human physiology), including corresponding translational research	Anatomy, physiology, embryology, nutritional physiology, pathology, basic odontological research, exercise physiology, neurobiology, toxicology, pharmacology, medicinal chemistry, chemistry, biology, pathology.	Panel 1a Panel 1b
Group 2 MOLECULAR BIOLOGY Molecular Biology, including corresponding translational research	Microbiology, bacteriology, inflammation and infection disease research, forensic medicine, genetics, immunology, vaccine development, microbiological diagnostics, pharmaceutical microbiology, cell biology, molecular medicine and -biophysics, medical biochemistry, omics, organoids, imaging, toxicology, pathology, drug development, cancer research, translational research, systems biology, personalized medicine, biomarkers, oncology, genetics, genomics, epigenetics, proteomics, bioinformatics-/statistics, computational science, AI, biology, virology, radiology, ionisation, molecular biology, microbiology, pharmacology, pharmacogenomics, regenerative medicine and related subjects.	Panel 2a Panel 2b Panel 2c
Group 3a CLINICAL RESEARCH	Clinical Research, including surgery and translational research within: paediatrics, women's health, gynaecology, otorhinolaryngology, head and neck surgery, oncology, haematology, radiology and medical imaging.	Panel 3a_1 Panel 3b_2
Group 3b CLINICAL RESEARCH	Clinical Research, including surgery and translational research within: general medicine, emergency medicine, anaesthesiology, neurology, geriatric medicine, rehabilitation medicine, cardiology, nephrology/urology, endocrinology, pulmonary medicine, orthopaedics, rheumatology, Infection, gastroenterology.	Panel 3b_1 Panel 3b_2 Panel 3b_3
Group 4 PUBLIC HEALTH Public Health and Health-related Research	Public health, community research, epidemiology, preventive medicine, mental health, behavioural research and ethics, medical statistics, environment, nutrition, preventive medicine, physiotherapy, sports medicine, implementation research, public health, health care services research, global health, nursing	Panel 4a Panel 4b Panel 4c

	sciences, rehabilitation sciences, public health systems, digital health care services, ICT, HTA, health competence, genetic and epigenetic epidemiology, non-communicable diseases, pharmacology, nursing research, professional research, occupational medicine.	Panel 4d Panel 4e Panel 4f
Group 5 PSYCHOLOGY Psychology and Psychiatry	Clinical psychology, personality psychology, developmental psychology, cognitive psychology, biological psychology and forensic psychology, psychiatry, including geriatric psychiatry, child and adolescent psychiatry and biological psychiatry, social-, community- and workplace psychology, organizational psychology, developmental psychology, behavioural and health psychology, health promotion and well-being.	Panel 5a Panel 5b

Panel group 4 PUBLIC HEALTH

Expert panel 4d

Name	Title	Institution
Nick Hardiker (chair)	Professor	University of Huddersfield
Nawi Ng	Professor	Gøteborg university
Marja Kaunonen	Professor	Tampere University
Avril Dummond	Professor	University of Nottingham
Per Nilsen	Professor	Linkøpig university

Evaluation of Medicine and Health (EVALMEDHELSE) 2023-2024

Self-assessment for research groups

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

Updated: **13. October 2023**

Institution (name and short name):_____
Administrative unit (name and short name):_____
Research group (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 a research group. The self-assessment contains questions regarding the group's research- and innovation related activities and developments over the years 2012-2022. All submitted data will be evaluated by expert panels.

Deadline for submitting the self- assessment to your administrative unit – 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 submit completed self- assessment to the administrative unit no later than 26 January 2024.

Please use the following format when naming your document: [short name of the institution]_[short name of the administrative unit]_[short name of the research group], e.g. *UiT_DepPsy_Short name of the research group*.

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 link to websites/documents in the self-assessment where relevant.
- Please be sure that all documents linked to in the self- assessment are written 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 the two evaluation criteria described in the evaluation protocol, the research group must answer all questions.
    - ⇨ Provide information – provide documents and other relevant data or figures about the research group, for example strategy and other planning documents, as well as data on R&D expenditure, sources of income and results and outcomes of research
    - ⇨ Describe – explain and present using contextual information about the research group and inform the reader about the research group.
    - ⇨ Reflect – comment in a reflective and evaluative manner how the research group operates.
- Data on personnel should refer to data reported to DBH on 1 October 2022 for HEIs and to the yearly reporting for 2022 for the institute sector and the health authorities. Other data should refer to 31 December 2022 if not specified otherwise.
- It is possible to extend the textboxes when filling in the form. **NB!** A completed self- assessment form cannot exceed 25 pages (pdf file). Expert panels are not requested to read more than the maximum of 25 pages. Pages exceeding maximum limit of 25 pages **might not** be evaluated.
- Submit the self- assessment as a pdf (max 25 pages) to the administrative unit within **26 January 2024**. Before submission, please be sure that all text are readable after the conversion of the document to pdf. The self- assessment should be sent from the administrative unit to evalmedhelse@forskningsradet.no within **31 January 2024.**

Please note that information your write in the self assessment and the links to documents/websites in the self-assessment are the only available information for the expert panel.

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

1. Organisation and strategy

1.1 Research group´s organisation

Describe the establishment and the development of the research group, including its leadership (e.g. centralised or distributed etc.), researcher roles (e.g. technical staff, PhD, post docs, junior positions, senior positions or other researcher positions), the group's role in researcher training, mobility and how research is organised (e.g. core funding organisation versus project based organisation etc.).

Table 1. List of number of personnel by categories
Instructions: Please provide number of your personnel by categories.
For institutions in the higher education sector, please use the categories used in DBH, https://dbh.hkdir.no/datainnhold/kodeverk/stillingskoder. Please add new lines or delete lines which are not in use.

	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 Personnel by position	Position A (Fill in)				
	Position B (Fill in)				
	Position C (Fill in)				
	Position D (Fill in)				

1.2 Research group´s strategy

a) Describe the research group's main goals, objectives and strategies to obtain these (e.g. funding, plans for recruitment, internationalization etc.) within the period 2012-2022.

b) Please describe the benchmark of the research group. The benchmark for the research group should be written by the administrative unit in collaboration with the research group. The benchmark can be a reference to an academic level of performance (national or international) or to the group's contributions to other institutional or sectoral purposes.

Example: A benchmark for a research group is related to the research groups' aim which again is included in the strategy for the administrative unit. A guidance for the administrative unit to set a benchmark for the research group(s) can e.g. be: What do the administrative unit expect from the research group(s)?

c) Describe the research group`s contribution to education (master´s degree and/or PhD).

d) Describe the support the host institution provides to the research group (i.e., research infrastructure, access to databases, administrative support etc.).

1.3 Relevance to the institutions

Describe the role of the research group within the administrative unit. Consider the research group's contribution towards the institutional strategies and objectives, and relate the research group`s benchmark to these.

1.4 Research group´s resources

Describe the funding portfolio of the research group for the last five years (2018-2022).

Table 2. Describe the sources of R&D funding for the research group in the period 2018-2022.

	2018 (NOK)	2019 (NOK)	2020 (NOK)	2021 (NOK)	2022 (NOK)
Basic funding					
Funding from industry and other private sector sources					
Commissioned research for public sector					
Research Council of Norway					
Grant funding from other national sources					
International funding e.g. NIH, NSF, EU framework programmes					
Other					

1.5 Research group´s infrastructures

Research infrastructures are facilities that provide resources and services for the research communities to conduct research and foster innovation in their fields. These include major equipment or sets of instruments, knowledge-related facilities such as collections, archives or scientific data infrastructures, computing systems communication networks. Include both internal and external infrastructures.

a) Describe which national infrastructures the research group manages or co-manages.

b) Describe the most important research infrastructures used by the research group**.**

1.6 Research group´s cooperations

Table 3. Reflect on the current interactions of the research group with other disciplines, non-academic stakeholders and the potential importance of these for the research (e.g. informing research questions, access to competence, data and infrastructure, broadening the perspectives, short/long-term relations).

Interdisciplinary (within and beyond the group)	About 1/3 page
Collaboration with other research sectors e.g. higher education, research institutes, health trusts and industry.	About 1/3 page
Transdisciplinary (including non academic stakeholders) *Transdisciplinary research involves the integration of knowledge from different science disciplines and (non-academic) stakeholder communities with the aim to help address complex societal challenges.*	About 1/3 page

2. Research quality

2.1 Research group's scientific quality

Describe the research profile of the research group and the activities that contribute to the research group´s scientific quality. Consider how the research group's work contributes to the wider research within the research group's field nationally and internationally.

Please add a link to the research group`s website:

Table 4. List of projects

Instructions: Please select 5-10 projects you consider to be representative/the best of the work in the period 1 January 2012 – 31 December 2022. The list may include projects lead by other institutions nationally or internationally. Please delete tables that are not used.

Project 1 -10: *Project title/Project period (year from – year to)*	**Project owner(s)** (project leaders organisation)	
	Total budget and share allocated to research group	
	Objectives and outcomes (planned or actual) **and link to website**	

Table 5. Research group's contribution to publications

Instructions: Please select 5-15 publications from the last 5 years (2018-2022) with emphasis on recent publications where group members have a significant role. **If the publication is not openly available, it should be submitted as a pdf file attached to the self-assessment.** We invite you to refer to the Contributor Roles Taxonomy in your description: https://credit.niso.org/.

Cf. Table 1. List of personell by categories: Research groups up to 15 group members: 5 publications. Research groups up to 30 group members: 10 publications. Research groups above 30 group members: 15 publications.

Please delete tables that are not used.

Publication 1 -15: *Project title/Journal/Year/DOI/URL*	**Authors** (Please highlight group members)	
	Short description	
	Research group's contribution	

Table 6. Please add a list with the research group´s monographs/scientific books.
Please delete lines which are not used.

1	Title - Authors (Please highlight group members)- link to webpage (if possible)
2	

2.2 Research group´s societal contribution

Describe the societal impact of the research group's research. Consider contribution to education, economic, societal and cultural development in Norway and internationally.

Table 7. The research group's societal contribution, including user-oriented publications, products (including patents, software or process innovations
Instructions: Please select 5–10 of your most important user-oriented publications or other products from the last 5–10 years with emphasis on recent publications/products. For each item, please use the following formatting. Please delete lines which are not used.

3. Challenges and opportunities

Information about the strengths and weaknesses of the research group is obtained through the questions above. In this chapter, please reflect on what might be the challenges and opportunities for developing and strengthening the research and the position of the research group.

Scales for research group assessment

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

Score	Research and publication quality	Score	Research group's contribution Groups were invited to refer to the Contributor Roles Taxonomy in their description https://credit.niso.org/
5	Quality that is outstanding in terms of originality, significance and rigour.	5	The group has played an outstanding role in the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
4	Quality that is internationally excellent in terms of originality, significance and rigour but which falls short of the highest standards of excellence.	4	The group has played a very considerable role in the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
3	Quality that is recognised internationally in terms of originality, significance and rigour.	3	The group has a considerable role in the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
2	Quality that meets the published definition of research for the purposes of this assessment.	2	The group has modest contributions to the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
1	Quality that falls below the published definition of research for the purposes of this assessment.	1	The group or a group member is credited in the publication, but there is little or no evidence of contributions to the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.

Societal impact dimension

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.

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