

Summary of discussion at the HEFCE/UUK workshop on user-valued research in the REF
31 October 2008

1. A workshop was held on 31 October 2008, to explore how to account for user-valued research within the emerging Research Excellence Framework (REF). This note summarises the discussions that took place. It covers the general issues raised in the plenary sessions, followed by a summary of each of the four break-out sessions.

General issues

2. Plenary presentations emphasised the following points:

- HEFCE is committed to supporting a research base which produces excellent research, is innovative and makes a difference to the economy and society. There is now a renewed importance in promoting research that makes a difference. This should be reflected across the totality of the research funding landscape; the measures taken in the REF must complement and reinforce other funding streams.
- The business research element of quality-related (QR) research funding was a first step towards a proxy for user-value; this needs to be refined and could in future be drawn into the REF as part of the quality assessment process. As we refine the approach, we must however guard against micromanaging or over-engineering the system.
- The 2008 RAE panels made efforts to ensure that all types of research would be assessed on an equal basis. However, institutions may have been cautious in the types of work they submitted. The REF should address institutions' perceptions and encourage HEIs to submit a wider range of work.
- REF must continue to focus on excellence. To qualify for excellence, it is essential that research is carried out with rigour; and that it must be original (rather than re-packaging existing findings). It must also have significance in moving the discipline forward and/or making a difference. We should consider how REF should assess submissions as a whole; an excellent submission can be expected to include a portfolio of work, some of which moves the discipline forward without any obvious value to users, as well as work which makes a difference/has wider impact.
- There are a range of 'tools' available in the REF for assessing research, including expert review, quantitative indicators qualitative information. While there has been much work to develop bibliometric indicators, this is just one of the 'tools' available in the REF. There is substantial flexibility in how these tools can be put together to form rounded quality judgements.

3. Plenary discussion revolved around related questions of whether the REF should focus on assessing the quality of research, or also assess the value it has to users; and whether user value should be considered an integral part of the quality of research, or a distinct dimension of research quality, to be assessed as such. It was argued that it would be difficult to assess direct value to users, as users are very diverse and diffuse and are often not readily identifiable (they do not 'carry badges'). Differences were noted between the quality of research; the extent to which the research has been disseminated to and accessed by users; and the impact that it has (the latter depends largely on the decisions of the users about what to do with the research).

Breakout sessions

4. The workshop divided into four groups to discuss the following issues:
- a. What are the distinguishing characteristics of user-valued research in your subject group (at broad subject group or discipline level or both)?
 - b. What particular challenges does this present to HEFCE in assessing research quality, and in supporting and promoting excellent research of all kinds, within the REF?
 - c. What particular types of research, or forms of research output, do we need to pay attention to? Can you provide concrete examples?
 - d. What is a practicable way forward for the REF (bearing in mind the aim of reducing burden and complexity)? What particular indicators and assessment approaches appear promising for assessment and funding in your field?

Arts and humanities

5. The group recognised the significant role played by arts and humanities research in contributing to economic competitiveness, public policy, and the quality of life and creativity. It felt it will be important to capture user-valued research within the REF.
6. There are a very diverse range of users of arts and humanities research, and they should be thought of as user communities rather than specific users. The key issue will be to recognise the range of interactions where they occur and to focus on the usefulness of the research wherever this might occur.
7. Assessment should address two key questions - is the research valued by users, and is it done in a high-quality way? These two criteria should not be set against each other; there should be a quality threshold for user valued research.
8. In terms of the way forward for arts and humanities research it was proposed that:

a. Institutions could flag user value associated with particular outputs and provide supporting evidence (for example, a history monograph that was turned into a TV programme). This should not be a requirement for all research, but where it is submitted would provide evidence of user value.

b. A range of metrics should be considered, for example, relating to policy importance, public access to outputs, or community engagement. These should be used alongside narrative to explain and provide evidence of how the 'submission' as a whole has delivered user value; and this portfolio of evidence as a whole should be reviewed by experts.

9. It was noted that output types and their associated user value differ between the arts and humanities disciplines and it that the disciplines should not therefore be aggregated for the purposes of assessment.

Engineering and physical sciences

10. The group considered that research in engineering is fundamentally connected to its use or application.

11. The group endorsed the approach used in the 2008 RAE to encourage a wide range of outputs to be submitted, and to take account of the impact of research outputs, industrial income and business collaboration, and felt it important not to lose the progress made in the 2008 RAE. It also felt that this approach has potential to be adapted and used for a wider range of subjects. There were concerns that momentum from the RAE could be lost if the REF moves to a metrics-driven approach (especially if it gives too much weight to journals/bibliometrics).

12. In terms of assessing outputs, the group identified the key issues as ensuring that all types of output are accepted, providing a 'guarantee' of equal treatment, and an appropriate weighting between the different elements of assessment. The limitations of citation-based indicators were noted, and some potential challenges raises for sensitive materials. It was recognised that while panels cannot predict future impact they can nevertheless consider the available evidence.

13. The group highlighted the importance of involving a wide range of users at all stages in the development and conduct of the assessment process, especially in defining excellence and setting the assessment criteria.

14. The group considered that research income from users is an important indicator, in the form of a 'rolling profile' of income over a period of time.

15. There was some discussion about the relationship between QR and the Higher Education Innovation Fund (HEIF), and whether the notion of excellent research includes dissemination to a range of audiences. It was felt there could be lessons to learn from HEIF for the REF.

Biosciences and medicine

16. The group felt that significance, rigour and originality are all important when assessing user valued research, and that the quality of the research should be the subject of assessment, not the importance or quality of the user.

17. There are a wide range of users of bioscience and medical research including patients, the NHS, the pharmaceutical industry, small- and medium-sized enterprises (SMEs), charities, health policy makers, and so on. User-valued research ranges from high-quality basic research (with much of this funded by users especially the pharmaceutical industry) through to experimental and translational research. There are a wide range of associated output types which could all feature in a portfolio of user-valued outputs, including:

- papers
- changes in policy
- 'things' such as patents, licences or collaborations
- endpoints such as drugs, changes in clinical practice or devices.

18. There are a number of challenges in assessing user-valued research, including:

- the importance of partnerships and the complex interrelationships with the health service and other users in the research process
- the long time frame for translational research (for example the introduction of a drug from development through trials to use can take 10-15 years) and the need to assess research relevant to its point on the timescale
- clinical research that impacts upon policy can be challenging as it may not have a tangible output.

19. Currently available income and other metrics exist but they can be difficult to interpret or place a value judgement. It was proposed that metrics should be used alongside narrative explanation, and assessed through expert judgement; this should involve a range of user experts.

Social sciences and subjects allied to health

20. The group considered that user-valued research should be assessed in a way that does not dilute or distort research quality and that expert judgement would be essential. It explored how users could input into the judgements either directly or indirectly. The group felt that quality judgements made by users would be a legitimate way to assess research, but there should be some means of ensuring consistency.

21. The group identified a wide range of output types that could be valued by users, including 'grey literature', products, advisory work, digital publications, and public engagement. It began to identify the range of evidence that could be used to assess these types of outputs, and suggested that a matrix could be produced to map the different types of outputs to appropriate types of evidence.

22. Types of evidence could potentially include qualitative judgements of users, quantitative indicators (such as income-related measures), qualitative indicators, feedback from Government or other users, evidence of impact (such as changes to patient care guidelines, public policy or legislation), virtual or digital evidence, or patents.