

Research Excellence Framework 2028: issues for further consultation following initial decisions

Volume Measure

Decisions:

- Institutions will not submit staff to REF 2028
- Staff data will be gathered directly from HESA to determine the volume
- REF 2021 staff eligibility criteria will be used to identify staff posts that contribute to the volume measure
- The funding bodies will calculate the volume using an average FTE of eligible staff across AYs 25/26 and 26/27
- Institutions will be able to request an exemption from submission for very small disciplinary areas
- Institutions will be able to undertake a light-touch refresh of their REF 2021

Areas for further consultation:

1. What practical challenges may institutions face in implementing these changes?
<p>We support these changes to measure volume via HESA as a way of accurately capturing the size of institutions, lowering their administrative burden and, importantly, removing any reliance on a specific census date. This will be an important part of enabling outputs to be assessed independently of specific individuals.</p> <p>For this to be fully effective, however, we foresee the need to address longstanding discrepancies between the HESA coding structures and the UoAs in Main Panel A. At present, we are concerned that HESA coding structures do not reflect contemporary health research classifications, nor do they read across well onto the UoA structure in Main Panel A. This has historically led to staff being misclassified or aligned to codes that are not a truly accurate reflection of their role, for example creating a misleading picture of the number of clinical academics in the UK. For the purposes of the REF2028, this could result in the incorrect allocation of staff to UoAs and a distortion of the volume measure.</p> <p>Research England and the Higher Education Funding Councils should work with HESA, which is currently reviewing their Staff record, to reconcile these differences. This will offer the dual benefits of solving these longstanding issues to ensure we have better, more contemporary, data on the medical and clinical research workforce, as well as achieving the purposes of the REF2028. The Academy would be pleased to engage in further discussion on how to overcome these challenges.</p> <p>Additionally, as with the previous method of staff data collection, there is always a possible risk of institutions seeking to 'game' the system by removing staff deemed to have lower or insufficient quality and quantity of research outputs as soon as possible, so that these staff do not appear in the HESA returns. However, we consider that using an average of staff numbers over a set time period, rather than from a discrete census date should reduce the risk of this happening.</p>
2. How might the funding bodies mitigate against these challenges?
<p>To further mitigate against the gaming risk mentioned above, HESA could provide its own assessments of average FTE early in the cycle, so that it may be checked against the average FTE later in the cycle by the panels for accuracy, to identify any significant changes.</p>
3. What would be the impact of these changes on individual researchers and particularly those with protected characteristics?
<p>While we support the move to determine volume via HESA data, thereby shifting the focus of assessment away from the individual level, it is essential that the diversity of the workforce continues to be monitored and institutions are sufficiently incentivised to maintain this diversity.</p>

Since HESA data includes important information on EDI characteristics (including use of sign language, disability, ethnicity, gender identity, nationality, religion or belief, sexual identification), we strongly suggest that this data should be analysed once collected, with the results published, the implications of any trends considered, and then used to inform EDI initiatives by universities. As HESA are currently conducting a major review of the Staff record, which includes specific analysis into the coverage and demographics of Staff, it will be important to ensure the diversity data collected is as complete as possible. We also refer to the importance of monitoring and acting on this data in the context of Q4 below.

In determining how to measure diversity in institutions, the recommendations of the Equality and Diversity Advisory Panel's 2022 final report should be considered ahead of the next exercise. This report asked institutions to 'reflect on their data and report actual and planned outcomes, supported by quantitative and qualitative evidence' and ensure the protected characteristics of researchers are recognised and so that those who are underrepresented in the research workforce are supported to develop and engage in meaningful research careers. This includes, as recommended in the report, greater attention given to the long-term nature of some of characteristics, including disabled staff living with long-term physical and mental ill health.

Output Submission

Decisions:

- REF 2028 will fully break the link between individual staff members and unit submissions

Areas for further consultation:

4. What impact would these changes have on individual researchers and particularly those with protected characteristics?

As set out in the Academy's submission to the previous consultation on REF2021, the decoupling of researchers from outputs is to be welcomed as a means for focussing assessment at the level of the institution or department rather than the individual.

The removal of minimum output requirements is also important in helping to ensure that universities have greater freedom to hire more staff without track records of academic outputs, such as early-career researchers, those from the NHS and industry, or patient researchers; allow staff to take secondments outside academia; and include more contributions from 'research-enabling staff' in submissions. Enabling such flexibility for researchers was a key recommendation in our 2023 'Future-proofing UK Health Research' report and is highly encouraging to see. Clinical Lecturers across medical, dental and health research are a particular concern and vulnerable group, undertaking research post-PhD whilst simultaneously completing clinical training/ work in the NHS. REF2028 must continue to have practices which incentivises HEIs to support this critical career grade.

However, we heard that mitigations will be required to ensure that these changes do not disincentivise institutions from maintaining a diverse workforce or investing in diverse research themes.

As an institution no longer has to report the full diversity of the research staff and tie this to individual outputs, less attention could be paid to maintaining diverse teams. This is despite the detrimental consequences for the sector and the society that comes from a lack of diverse input into research; for example, underrepresentation of any group in research teams limits the applicability of research to society's needs. There could also be an effect on emerging research concerning the broader determinants of health, particularly where they relate specifically to certain groups of society.

Institutions (and Departments) should be asked to reflect on their diversity data and develop plans to improve their diversity outcomes where needed, as referred to in Q3, which could mitigate against this.

This decoupling could inadvertently incentivise institutions to rely on 'star researchers' to boost quantities of likely high scoring research, particularly as there is no longer a mechanism to place an upper limit on the number of outputs submitted from a given individual. It is possible that

this may lead to institutions submissions not fully reflecting the work being conducted in these departments.

We heard that this could create imbalances in submissions that might disproportionately affect research that relates to underrepresented groups, where it can be harder to find evidence and gain access to populations of relevance (such as women, ethnic minorities and older people), and therefore harder to produce the same quantity of research. It is therefore crucial that units are required to explain how their submitted output pool is representative of the research undertaken within the disciplinary area', as is being proposed by Research England.

5. What impact would these changes have on institutions in preparing output submission?

We did not hear any concerns around how these changes would affect the preparation of output submission.

6. What might be the unintended consequences of these changes?

As stated in our response to Q4, these changes may lead to imbalances in a unit's work by inadvertently deprioritising certain topics of research and focussing on large outputs by prolific researchers. If an upper limit on the number of outputs per researcher, which could mitigate against this, is incompatible with the decoupling of staff members and submissions, then we strongly support Research England's proposals for submissions to discuss the extent to which the outputs 'are representative of the research and researchers in the disciplinary area', as also mentioned in our response to Q4.

Additionally, now that outputs are no longer individually returned, there will not be a standardised process for institutions to account for individual, equality related circumstances while producing research outputs. Institutions should nevertheless continue to be incentivised to address such disruptions to research and properly support their staff, which could be ensured through the metrics and increased weighting of the 'People, Culture and Environment' element of assessment.

Decisions:

- Institutions may submit outputs produced by any staff member where there is a demonstrable and substantive link to the submitting institution within the REF assessment period

Areas for further consultation:

7. What may be the unintended consequences of allowing the submission of outputs produced by those on non-academic or teaching-only contracts?

We strongly welcome the move to allow the submission of outputs produced by those on non-academic or teaching-only contracts which will lead to a positive shift towards greater recognition for these staff – including technical grade staff - and research students. However, the effects of this change should be carefully monitored to ensure institutions are not disincentivised from moving these individuals into substantive positions.

In previous exercises, there was an opportunity to move those on teaching-only contracts into research positions in order to contribute to submissions. However, there is a chance that institutions will longer feel the need to facilitate the career development of those staff on more teaching-only contracts, which tend to be more precarious and held by those in the earlier stages of their career, into (generally more stable) research-focused positions where desired. As above, this could be accounted for in the 'People, Culture and Environment' element, which we note could measure the 'quantitative or qualitative information on the career progression and paths of current and former research staff'.

8. Should outputs sole-authored by postgraduate research students be eligible for submission? If so, should this include PhD theses?

So long as output submissions are not duplicated (e.g. PhD thesis and peer reviewed publications with the same data), and so long as a submission to REF during preparation of a thesis does not become an undue distraction for the student, we agree that such outputs by postgraduate students should be eligible.

9. What would be appropriate indicators of a demonstrable and substantive link to the submitting institution?

We heard broad agreement in our consultations that the benchmark of being employed by the institution on a minimum 0.2 FTE contract for at least 6 months was sensible, especially in recognition of part-time employees or those with joint appointments who frequently contribute to outputs, and who should now be captured within the volume calculations from HESA headcount. This requirement should also provide staff within HEIs greater freedom to take secondments outside academia, and vice versa. The importance of encouraging this flexibility and mobility across sectors was referenced in our response to Q4, and also in our 'Future-proofing UK Health Research' report.

However, it is vital that a 'demonstrable and substantive link' to the institution is sufficiently broad in scope to recognise the contributions of NHS-employed active researchers (formerly Category C staff) and industry-employed researchers working with an HEI through secondment or other formal arrangement.

As the Academy has called for in its 2020 'Transforming health through innovation' and 'Future-proofing' reports, those with honorary or joint appointments with an HEI must also be captured by this link, and institutions should be incentivised to increase the number of honorary academic appointments offered to healthcare professionals, who contribute significantly to research.

We heard that there is variability between institutions in the evidence required of an individual's contributions to an institution when being offered honorary status, with a suggestion that this could be clarified by asking HEIs to define this contribution within their Code of Practice and declare it in their submissions. Once defined, the indicators of a demonstrable link should be accompanied by clear guidance on their sufficient contributions, which could include, for example, time spent undertaking work with university colleagues or students. Anyone fitting these criteria can then have their outputs and impact included.

While the recognition of such individuals will be beneficial to NHS employees and the medical disciplines, it will similarly be beneficial for other forms of collaboration with commercial and not-for-profit partners across other disciplines.

Decisions:

- Institutions will be able to submit one output to multiple submissions, provided it falls within the UOA descriptors

Areas for further consultation:

10. Do the proposed arrangements for co-authored outputs strike the right balance between supporting collaboration and ensuring that assessment focuses on the work of the unit?

Interdisciplinary and multi-authored research is increasingly important, for cross-cutting issues like mental health as well as global research challenges like multi-morbidity. We therefore support the move to allow multi-authored papers to be allowed to be included in all relevant submissions. This would align with the themes in the Academy's 2016 report on 'Improving recognition of team science contributions' by enabling the contribution of skills specialists to be more readily recognised. It could also solve a current challenge of having to state who contributed what, when and where in multi-authored papers that may not be submitted multiple times by a single institution.

11. Are there any further considerations around co-authored outputs that need be taken into account?

Alongside the enabling multi-authored outputs to be included in all relevant submissions, we also welcome the fact that 'People, Culture and Environment' element has been expanded in scope and weighting. As we set out in our 'Future-proofing UK Health Research' report, this element of assessment should further incentivise opportunities for, and ensure recognition of, team science activities.

While encouraging multiple submissions of co-authored outputs is a useful way of incentivising effective academic collaborations, it is important to note that the REF as a whole should

encourage this to happen externally across sectors at an institutional level. Such markers of assessment could include the ability to collaborate effectively on academia/industry and basic/translational projects, which are not fully accounted for at present, though publications and grants are valid measures.

There may be broader measures that do not involve publication but could still be recognised, such as moving forward a drug development programme. The funding bodies could consider that such forms of collaboration, if not submissible as outputs themselves, are credited as part of an external engagement activity in the impact case studies.

Decisions:

- Given there is no minimum output requirement for volume-contributing staff there is no need for a process to account for individual equality-related circumstances
- REF 2028 will include consideration of the impact of equality-related circumstances within an overall process for determining potential reductions in output requirements at submission level. The process will not be based on the aggregation of individual equality-related circumstances.

Areas for further consultation:

12. What impact would changes to staff and unit circumstances have on individual researchers and particularly those with protected characteristics?

Following the removal of the minimum output requirement, we understand that institutions will now be required to capture circumstances at submission level. While this should provide a reasonable picture of any potential reductions in output, it will continue to be important that staff are still supported by their institutions at an individual level when facing circumstances that affect their research. Institutions should be incentivised to show how they are still doing so in the 'People, Culture, and Environment' section of assessment.

Engagement and impact

Decisions:

- The structured statement will make up at least 20% of the quality sub-profile for this assessment element.
- The funding bodies intend to weight the statement on a sliding scale, proportionate to the number of case studies submitted to ensure that its contribution to the sub-profile is no less than that of a single impact case study

Areas for further consultation:

13. To what extent do you support weighting the impact statement on a sliding scale in proportion to the number of case studies submitted?

It makes sense to weight the impact statement in proportion to the number of case studies submitted, and should be fairer to smaller, less resourced institutions who are less able to produce multiple case studies. The Academy also supports the proposals from Research England to broaden the definition of impact to include engagement.

However, as there will be instances where the case study could constitute up to half of the weighting of the sub-profile, it will be crucial that guidance is as clear and accessible as possible for institutions on how to submit examples of the newly expanded impact element, i.e. to demonstrate 'engagement'.

Likewise, and as with all newly introduced aspects of the next REF, clear guidance and briefing for panels and chairs is necessary for how the markers of high-quality engagement can be identified and assessed.

As stated in our response to the Future Research Assessment Programme last year, this guidance must have clear criteria to explain whether one impact (e.g. encouraging a change in

government policy) is as important as another (e.g. changing behaviour, or generating an economic return from research).

Consideration of the different levels of resource available to different institutions may be appropriate when assessing the relative impacts of engagement, although further work could be needed on how to best to fairly measure and assess their resource levels. For example, one case study could highlight mass media engagement that informs mainstream audience of millions, whereas another could report on the activity of focus group with local patients. However, both could exhibit a similar level of quality in two-way communication, achieving behavioural change, and genuine participation of relevant members of Society, despite their differing levels of resource and scale. As set out in our 'Future-proofing UK Health Research' report, the funding bodies should also measure and reward meaningful patient and public involvement – a particularly important form of engagement across the medical disciplines.

Decisions:

- The number of case studies required in each submission will be determined by the average FTE of volume-contributing staff in the unit.
- Institutions will be required to submit a minimum of one impact case study per disciplinary submission.
- The funding bodies propose to revise the thresholds between case study requirements.

Areas for further consultation:

14. What will be the impact of reducing the minimum number to one?

Impact case studies are an essential portion of the submission, so keeping a minimum requirement of at least one case study is reasonable. However, it is important that the quality of engagement is still a substantial criterion of assessment for that single case study even if only one is submitted. This should be made clear to institutions in the guidance.

15. What will be the impact of revising the thresholds between case study requirements?

While the Academy supports the principle of opening opportunities for as broad a range of institutions to display evidence of quality engagement activities, there should not be any sacrifice to the robustness of the evidence base that impact stems from research. Therefore, we do not support the removal of the requirement that the research underpinning impact case studies is of minimum 2* quality. Instead, we recommend that the full range of engagement activity could better captured through other measures, such as the Knowledge Exchange Framework.

Unit of Assessment

Decisions:

- REF 2028 will retain the REF 2021 Unit of Assessment structure and will include advisory panels on Equality, Diversity and Inclusion, and Interdisciplinary research

Areas for further consultation:

16. The funding bodies invite views from institutions and disciplinary communities on any disciplinary developments since REF 2021 that would require changes to be made to the UOA structure.

The Academy supports the current UoA structure as appropriate. However, we heard from some Fellows that interdisciplinary research was difficult to reward under the framework of REF 2021. They reported a degree of subjectivity and inconsistency as to how panels assess interdisciplinary, collaborative outputs, with a seemingly high degree of discretion awarded to the panel chairs. As reported by the IDR Advisory Panel's final report, the IDR 'flag' on outputs was not consistently applied by HEIs, leading to a lack of reliability in identifying interdisciplinarity. On this basis the Academy welcomes the removal of the flag system for the

next exercise, and keenly awaits further consultation on what automated approaches will be used to identify IDR in the next exercise.

It is also crucial that the advisory panels on equality, diversity and inclusion are retained and they should be empowered to influence the final quality profile with their assessments. It is pleasing to see in the initial decisions that REF2028 will build on learnings from the final report of the Equality and Diversity Advisory Panel from REF 2021. Particular attention should be paid to EDAP's call for greater diversity on the panels, and there could be a consideration of its suggestion to introduce recommended targets for under-represented groups, for nominating bodies and/or panel chairs.

Relatedly, if there is an ongoing investigation or evidence of research fraud, misconduct or bullying within institutions, it is important that panels consistently have access to information about this to inform their assessments. From the perspective of monitoring EDI and the cultural environment of institutions, it will be particularly important for panels to gain information on misconduct and staff treatment issues, which disproportionately affect groups with protected characteristics.

Impact of the Covid-19 pandemic

Decisions:

- The funding bodies intend to retain the statements on Covid impact that were used in REF 2021, and to require some consideration of how Covid impacts have been addressed in output selection as part of Codes of Practice

Areas for further consultation:

17. What is your view on the proposed measures to take into account the impact of the Covid pandemic?

The Academy is a signatory of a cross-funder statement, in which we commit to ensuring that the impacts of COVID-19 are taken fairly into consideration by our panels and committees when assessing an individual applicant's record of outputs, research achievements, and career progression. We were pleased to see 27 different funders from across the sector, including UKRI, sign up to this pledge to recognise COVID-19 disruption when assessing grant applicants.

We therefore strongly support the view that the impact of COVID-19 must continue to be taken into account. Medical, Biomedical and all Health related subjects were particularly impacted by COVID-19; over and above the halting of research, the majority of staff were diverted to front line of care. It is also worth noting that the Academy's grants processes capture the impact of COVID-19 at both the application and output reporting phases of the grant life cycle.

18. What other measures should the funding bodies consider to take into account the impact of the Covid pandemic?

In our review of the cross-funder statement on considering the impact of COVID-19 in future grant applications, we found that the majority of signatories intended to continue considering factors relating to COVID-19. Therefore, we would advise that there are a number of broader impacts of Covid-19, both short and long-term, that should continue to be accounted for in REF.

For example, the way that researchers had to pivot their research during the immediate response to the pandemic should be considered alongside the longer-term impact on the type of research being undertaken. The latter saw a trend towards research into vaccines and infectious diseases, with a detrimental effect of reducing efforts in other areas of research. It should also be noted that, while the acute effects of COVID-19 were felt up to the REF2021 output deadline of December 2020, it is likely some of these will have carried on over into this REF period.

There may also be a COVID-19 legacy seen in the publication behaviours of researchers and such trends should be monitored. For example, a drive towards shorter, single study papers that were quicker to get out in the public domain during the pandemic response may have crowded out more comprehensive papers that take much longer to complete.

As EDAP recommends in its final report, the funding bodies should consider how best to capture the longer-term effects of COVID-19 on research productivity and research careers. This could include the effects of burn out and other mental health related absences (including the career stages at which these happened), along with the impact on the volume of outputs (due to clinical commitments and laboratory closures).

There are two main ways through which these effects should be accounted for. Firstly, now that equality-related circumstances are captured at submission level, it is important that COVID-related disruptions continue to be legitimate considerations in this 'overall process'. Secondly, however, COVID-19 should equally remain a valid reason for providing support to staff at an individual level. As stated in our response to Q12, this must continue to be incentivised as part of an inclusive research culture via the 'People, Culture, and Environment' element.