



Australian Government

Department of Education, Science and Training

Research Quality Framework

RESPONSE TO THE ISSUES PAPER

March 2005

THE RESEARCH QUALITY FRAMEWORK

Response to the Issues Paper – How to Make a Submission

This submission template should be used for responding to the Issues Paper for the Research Quality Framework.

How do I make a submission?

You should use this template to make a submission to the consultation process. The sections in the template correspond to the numbered sections in the Issues Paper and the propositions posed in the Issues Paper are repeated in the template. Please provide your responses to the questions in the relevant spaces on the pro forma.

It is not necessary to respond to all the issues, only those propositions for which you have views. If you choose not to respond to some propositions, please do not delete the boxes; just leave them blank.

If you have additional ideas or comments on areas not addressed in the Paper we would welcome those at the end of your submission.

What contact details are required?

The template also includes a cover page for you to complete your contact details. This cover page can also be found as an attachment to the Issues Paper. We require these details to verify submissions.

For individuals

Emailed submissions must include your name, phone number and postal address so we can verify them. All submissions must have an original signed cover sheet sent to DEST.

For organisations

If the submission is from an organisation, please indicate this on the cover page of your submission. Include the signatory's position, and at what level the submission was authorised. All submissions must have an original signed cover sheet sent to DEST.

Please note that we might contact you during the consultation process to clarify or seek further information on any issues raised in your submission. If you do not wish to be contacted, please indicate this on the cover page of your submission.

How should I format my submission?

The Submission Template is provided in Word, PDF and RTF formats.

If you are unable to access or use the template, please contact the Research Quality Assessment Framework Team at rqa@dest.gov.au or by phone to 02 6240 8041 for a copy. Alternatively you can copy the questions into a new document and enter your responses into that document. Please ensure, however, if you do this, that you save the document in a format that is PC-compatible. Please ensure also that you include a cover

page with your submission, as we are not able to accept submissions without the relevant contact details and signature.

Will my submission be published?

Submissions will be published electronically at <http://www.dest.gov.au/resqual/default.htm> . Individuals may request not to have their details made public. A report analysing the submissions will be prepared and submissions will be referred to by number. If you make a submission on behalf of an institution and do not want the institution to be identified, please indicate this on the cover page.

You should be aware that the Department may be required to release the details of any submission by the operation of law (for example, if required to do so by Parliament). The Department can therefore give no undertakings that your submission will never be made publicly available or ensure that you will be protected from future legal action. If you have any concerns about this, the Department suggests that you should seek your own legal advice.

Where do I send my response?

Please email your responses to rqi@dest.gov.au.

If you are not able to email your response you can send a hard copy to:

The RQF Submissions Officer
Research Quality Assessment Framework Team, Loc. 767
Innovation & Research Systems
Department of Education, Science and Training
GPO Box 9880
CANBERRA ACT 2601

Or by fax to (02) 6123 5717

Submissions sent by email or fax will not be considered valid until an original signed cover sheet has been received by DEST.

The closing date for submissions is **COB (6pm) Monday 2 May 2005**.

If you have any questions or problems with the template, please contact the Research Quality Assessment Framework Team at rqi@dest.gov.au or on (02) 6240 8041 or (02) 6240 5415.

THE RESEARCH QUALITY FRAMEWORK (RQF)

Responses to the Issues Paper – Submission Cover Page

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Signature					

Is the submission made on behalf of an organisation? (Y/N)

Yes

If No:

A report on the outcomes of this submission process will be prepared by the Department and/or external consultants which will be made publicly available on the Department's website. Quotes may be used from submissions in this report. Do you consent to being identified in a report?	
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If Yes:

Name of Organisation	Council of Deans of Nursing and Midwifery (Aust. & NZ)				
Address of Organisation	School of Nursing, Deakin University				
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Name of Authorising Person	Associate Professor Kim Usher				
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Signature					

A report on the outcomes of this submission process will be prepared by the Department and/or external consultants which will be made publicly available on the Department's website. Quotes may be used from submissions in this report. Does the organisation consent to being identified in a report?	Yes
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Please ensure that all details on this page are completed. Submissions made on behalf of an organisation will not be accepted without authorisation from an appropriate person within the organisation.

Please note that we might contact you during the consultation process to clarify or seek further information on any issues raised in your submission. If you **do not wish to be contacted**, please check this box.

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RESEARCH QUALITY FRAMEWORK (RQF)

Responses to the Issues Paper

Part 2: Creating an Australian RQF

Please indicate your response by placing an X in the relevant box.

2.1 Structuring an RQF

Issue 1: How should an RQF be applied to universities and publicly funded research agencies?

(a) An RQF should be applied in the same way to both universities and publicly funded research agencies.

Strongly agree Strongly disagree X No comment
Somewhat agree Somewhat disagree

(b) Within the university sector, an RQF should be applied differentially to specific types of institutions.

Strongly agree Strongly disagree No comment

X Somewhat agree Somewhat disagree

Additional comments

The place of the publicly funded institutes is not relevant to nursing and midwifery research and we decline to comment.

Measures of research quality remain constant despite the institutional context. Judgements of excellence and impact at a disciplinary level should not dramatically differ across institutions with divergent foci. Nursing and midwifery research has its impact on patient care and practice in these fields and should be judged accordingly. We consider it essential that an RQF be sensitive to measures of excellence in applied and professional research fields.

Should a differential RQF be applied there will need to be some consistency at a disciplinary level. The fact that much nursing research occurs at the newer universities should not entrench the disadvantage of a new discipline if the RQF was going to be differentially applied.

We strongly endorse the remarks in # 1.4 of the Issues paper on “the need to engage the support of the research community” and the need for “a level playing field” in comparing research in different disciplines. This is not simply a matter of “humanities and social sciences compared with ... the physical sciences”; Nursing/midwifery is a practice-based discipline and has areas and methods of research specific to that kind of activity. This rejection of “one size fits all” is behind our reluctance to give whole-hearted support to propositions expressed in such broad terms as those above.

2.2 Defining and measuring research quality and impact

Issue 2:	Research quality and impact should be assessed by appropriately constituted panels.		
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	

Additional comments

In line with our comments on item 2.1 we strongly agree with this because we believe the key phrase is “appropriately constitted panels”, panels which understand the nature of Nursing/Midwifery as an activity, of Nursing/Midwifery as a field of study, and of good research in Nursing/Midwifery. We endorse the comment quoted from the Canadian paper, at the foot of page 18 of the Issues Paper.

The level of aggregation is also critical to panel composition. If there are few panels covering a broad range of disciplinary and research fields, it is then critical that the composition of the panels in comprehensive enough to evaluate disciplinary excellence in nursing research.

2.3 Measuring research quality and impact

<p>Issue 3: Assessment panel members should include the following (the categories are not necessarily mutually exclusive):</p>			
<p>(a) Experts reviewers able to assess impact in a discipline area/academic field.</p>			
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	
<p>(b) Expert reviewers able to assess impact more widely.</p>			
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	
<p>(c) International expert reviewers.</p>			
<input checked="" type="checkbox"/>	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	
<p>Additional comments</p> <p>We agree with all these categories, provided the reviewers are genuinely expert in our field, in our eyes. This underlines the importance of our earlier remark on “the need to engage the support of the research community”. We would like the “research community” in our field to have some say in the nomination of experts and the constitution of the panels.</p> <p>We support the idea of international experts; however the number of panels and level of aggregation and budget are relevant considerations here.</p> <p>Should the level of aggregation be wider than the disciplinary level, there needs to be some input into the process at a disciplinary expert and industry expert level. We would recommend disciplinary sub panels at the very least.</p> <p>Also we need to ensure that local and national research drivers and measures of impact issues are given full credence.</p> <p>We endorse the idea of having some members sit on several panels to ensure consistency of approaches.</p>			
<p>Issue 4: Assessment panels should be informed by metrics whose nature and relative influence may vary across different disciplines.</p>			
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	
<p>Additional comments</p> <p>We agree with the use of the various metrics proposed – bibliometrics, competitive research grants, HDR students, esteem indicators – and those listed in Table</p>			

1 to the extent they are appropriate for research in Nursing/Midwifery. We would expect the “nursing and midwifery research community” to be involved in determining which metrics are appropriate.

Practice-based disciplines have common issues: involvement with industry; development of policy; uptake of knowledge; changes within the profession, both technological and sociological; and issues of the national benefit. Disciplines need to determine their own esteem indicators, those generally recognised within the discipline, not ones relevant to some other discipline.

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Bibliometrics are of some, but limited value in nursing and were not used in the UK or NZ exercises for this reason.

2.4 Measuring research impact

Issue 5 (a): An RQF should recognise research impact through the measurement of different outcomes for different types of research and disciplines.			
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	
Issue 5 (b): An RQF should recognise the production and diffusion of technology and knowledge as elements of research impact.			
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	
Issue 5 (c): Where appropriate, users and those commissioning research should contribute to the assessment process by providing an external perspective on research under consideration.			
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	

Additional comments

We endorse these three propositions but we point out that the text of #2.4 in the Issues Paper deals very much in terms of commercialisation and technological industry. Research in Nursing/Midwifery is oriented to improving health, with relatively little scope or desire for commercialisation, patents and so on, and should not be judged in those terms. We agree with the Issues Paper that “research impact may be considered through influencing social and cultural outcomes in changes to government policies and practices” and “the facilitation of new understandings and practices”. This reinforces our point that the research community should be involved in the establishment of the panels and the criteria. The diffusion of innovation leading to practice change, clinical impact and the embrace of end-user or consumer perspectives in clinical practice are all vital elements in the measure of excellence in research in nursing and midwifery, as we believe they are to the research endeavours of all professional disciplines.

A broader grid of reference that includes measures of benefit to health, economic benefit and national benefit, as well as benefit to knowledge should be considered and will be elaborated and proposed by the discipline.

Part 3: Applying an Australian RQF

Please indicate your response by placing an X in the relevant box.

3.1 Level of aggregation for assessment

Issue 6: What is the most appropriate level of aggregation for assessment?

- X Subject/discipline area
- Research grouping/research team/s
- Department/schools
- Faculties/Divisions
- Institutional level - university/PFRA

Additional comments

We consider the discipline to be the most appropriate level of aggregation. Certainly we believe that higher level aggregations would give little indication of the quality of research in Nursing and Midwifery, the area which concerns us as Deans of those fields. Schools or Faculties of Nursing may also be appropriate aggregations, but not Faculties of Health Sciences and the like, where Nursing is aggregated with other health disciplines. While cross-disciplinary research is critical to all the disciplines and needs to be accommodated in an RQF, aggregations at the research group or cluster level would undermine disciplinary integrity in our view and lead to ‘cherry picking’ of successful researchers

Should the final level of aggregation be larger than a disciplinary or School level we recommend that measures be introduced to prevent the distortive gaming responses that were a feature of early RAEs in the UK. There should be disincentives to universities that restructure, merge and close units, divisions or schools simply to aggregate research output for the benefit of the RQF.

3.2 Who should be assessed?

Issue 7: Who should be assessed as part of an RQF?

X Eligible staff nominated by institutions (based on guidelines to be provided)

All eligible staff

Additional comments

There could be difficulties with either of these approaches, depending on what the guidelines say. In Nursing/Midwifery many of the staff are clinicians engaged in clinical practice rather than what is commonly understood by the term “research”. In a highly feminised academic workforce of Nursing/Midwifery a proportion of staff is always on maternity or other forms of leave. Thus at any one time a number of valuable members of staff are not active in research. For these reasons we would recommend that assessment be applied to a high proportion of staff, but not to all.

The guidelines for selection and nomination should be such as to encourage universities to nominate not only their well-established researchers but also early career researchers of promise. We understand that the New Zealand system which evaluated all eligible staff led to serious problems of morale and led to the subsequent casualisation of teaching staff.

We believe that the unit of assessment should not structurally disadvantage practice disciplines where the proportion of professionally or industry-active teaching staff is of necessity quite high and the research-focused staff correspondingly lower than other disciplinary fields.

3.3 Link to training of researchers

Issue 8: **The training received by higher degree students in research requires a separate quality audit and/or assessment process.**

Strongly agree	X	Strongly disagree	No comment
Somewhat agree		Somewhat disagree	

Additional comments

Since all higher degree students are enrolled in universities, we see the training of researchers as part of the research performance of a School of Nursing/Midwifery. We do not see a case for separating research training and requiring a different assessment process. There is a vital correlation between high performing research departments and high quality research training. Furthermore, the cost of conducting a separate exercise would be difficult to justify.

3.4 Focus of assessment

Issue 9: **Assessment for an RQF should include a forward-looking strategic element as well as being based on past performance.**

X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	

Additional comments

We agree that a strategic element is critical in assessing excellence and impact of research. Nursing/Midwifery researchers tend to work in teams and with a view to improvement of practice and patient care, and therefore inevitably their work tends to be multidisciplinary, targeted and linked to the national interest in health.

3.5 Reporting arrangements

Issue 10: How should the outcomes of an RQF be reported?

- (a) Reporting the outcomes of an RQF should be aligned to:
- X Subject/discipline areas
- Research grouping/research team/s
- Department/schools
- Faculties/Divisions
- Institutional level – university/PFRA
- (b) Reporting on subject/discipline areas within any level of aggregation for the RQF should be aligned to the ABS RFCD codes or an appropriate subset.
- | | | | |
|---|----------------|-------------------|------------|
| | Strongly agree | Strongly disagree | No comment |
| X | Somewhat agree | Somewhat disagree | |

Additional comments

The reporting [10 a] should be consistent with the assessment, Issue 6. Again if the level of aggregation is wider than the disciplinary level – there needs to be expert academic and industry input into the reporting at the disciplinary level.

With respect to the ABS RFCD codes, since so much data is already collected by universities in accordance with these codes, it would seem sensible to align reporting mechanisms. However, a great deal of nursing research fits under the ‘nursing not otherwise classified’ category and the resultant collection is therefore not particularly meaningful if the data collection was to be used as the basis of evaluation of national benefit.

Issue 11: What should be the format of the ratings/rankings/benchmarks of an RQF? Please provide examples.

We would support the Allen Consultancy Group benchmarks set out in the Issues Paper. We recognise and recommend use of standard measures of research excellence, scholarship and peer esteem.

We would expect that these will include measures relevant to the practice-based disciplines – policy impact, transfer of knowledge to practice, clinical change and national benefit – as mentioned in our response to Issue 4.

3.6 Links to funding

Issue 12: **The resource intensity required for an RQF should be directly related to the level of funding that it informs.**

	Strongly agree	Strongly disagree	No comment
X	Somewhat agree	Somewhat disagree	

Additional comments

The overall cost of the exercise is an issue and needs to be in logical relation to the funding pool.

We are also concerned that universities with large research budgets should not be additionally advantaged by the resource implications attached to participation in an RQF.

3.7 Administrative benefits

Issue 13:	An RQF ought to lead to commensurate reductions in reporting requirements for other Australian Government research accountability mechanisms.		
X	Strongly agree	Strongly disagree	No comment
	Somewhat agree	Somewhat disagree	

Additional comments

This seems axiomatic.

OTHER COMMENTS

If you have additional ideas or comments on areas not addressed in the paper we invite you to provide these in this submission.

The Council of Deans of Nursing and Midwifery welcomes the forthcoming national focus on excellence and impact of research signalled by this exercise. We regard these issues as important for development of the disciplines of Nursing and Midwifery, and for the academy as a whole. We welcome the proposal that national benefit, impact on national policy and on the health industry be included in the discussion. We are however concerned that issues relevant to practice-based disciplines be given adequate scope and substance, as opposed to lip service. We are also concerned that research uptake and impact be assessed by experts recognised by the Nursing/Midwifery profession.

The main difficulty in formulating the response to the Issues Paper is that the critical information upon which to provide recommendations is missing. What will be the funding implication? What pools of money will be involved? IGS? RTS? RIBG? How will an RQF intersect with untagged funds such as the ARC and NHMRC? Where will national research priorities fit?

In addition to these mechanistic questions there is the further issue of ranking and benchmarking. What will be the role of the RQF in ranking research and research training for Australian universities and what will be the impact of RQF performance on subsequent RTS funding?

These are critical questions. Any national system that serves to concentrate research funding among the G8, particularly were RTS to follow that funding concentration, will have a major impact on the capacity of nursing to build its research base. As a new discipline distributed widely among the newer and less research-intensive universities, nursing research in Australia has so far failed to receive significant infrastructure support, nor has it benefited from capacity building initiatives, such as those that have taken place in the United States, Canada, and more recently, in the UK.

The Council of Deans of Nursing and Midwifery is most concerned that any funding redistribution, benchmarking or league list of research performance in Australia will not entrench the difficulties that nursing researchers have tended to meet when applying for competitive research funding, or ultimately lead to less funding for research training.

Having said that, we are confident that should the measures of excellence agreed upon for the RQF encompass the professional and disciplinary issues common to all the professions, excellence in nursing and midwifery will be appropriately reflected.