

Pharma's new leaders in field engagement: MSLS

With the whole of pharma in various states of 'hybridisation', how can MSLS be supported to deliver enhanced personal service across physical and virtual engagements?

Written by Andrew Stone

As the COVID-19 pandemic hit and healthcare professionals (HCPs) became elusive, Medical Science Liaisons (MSLS) got to work by deftly transitioning into virtual engagement. With this transition came an expansion in responsibilities that has resulted in MSLS occupying a central role in pharma's field engagement strategy.

But, what now?

Some industry insiders didn't expect virtual engagement trends to continue as the pandemic eased, says Mark-Rees Saunders, Director of External Engagement, Astellas: "But virtual channels have proven themselves to be an excellent opportunity and they are here to stay. Going forward, MSLS must embrace the virtual while harmonizing it with traditional face-to-face strategies."





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Why not go fully virtual?

For some time, virtual-only engagement was the new norm for most industries, including pharma. However, according to Dr. Maja Beilmann-Schramm, Director, Global Field Medical Excellence and HCP Exchange, Merck, virtual-only engagement has several shortcomings.

“Virtual-only engagement can make it harder to create a real connection,” Beilmann-Schramm adds. “Even if HCPs share their video, we are losing the third dimension, hence losing out on parts of that personal component. Online meetings are flexible in regards to timing, however, if an HCPs doesn’t dial in, there is only a small chance the meeting will happen later that day, unlike waiting in a clinic until an urgent time conflict has been solved.”

Caroline Phillips, Executive Director of Medscape Global Medical Affairs, takes a different perspective, challenging the oft-held belief that in-person engagement is the ultimate prize that trumps all other types of engagement. In reality, she says, “For many MSLS, an ‘on spec’ meeting is unlikely to be quality time. Even with a pre-arranged appointment, there’s always the chance the HCP will be late or there will be interruptions. So, in fact, a quality 15-minute virtual engagement can be more valuable than half an hour face-to-face.”

Phillips also believes that virtual engagement can be more convenient and more directly focused on HCPs actual educational needs: “At Medscape, we are seeing that physicians are engaging with our platform for education over a much greater timeframe during the day, both during and outside consultations. I think this illustrates the fact they are seeking information as and when they need it. The

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same principle can be applied to the meeting with MSLS – it can be a responsive and needs-based discussion, at a time that is most likely to be valuable to the HCP without the need for rigid diary planning and consuming so much time as a traditional meeting.”

Finding the right balance

Still, the big trend is going to be giving HCPs a choice of both virtual and physical engagement – which poses the challenge of finding the right balance for a successful hybridised approach.

During the pandemic, some company leaders have oversaturated HCPs’ emails in a bid to close the gap left by reduced physical meetings. Going forward, Saunders hopes for a more balanced approach where companies are weighing quality, appropriateness, and compliance over convenience.

“Achieving balance between physical and virtual interactions shouldn’t mean companies conduct a certain percentage of virtual meetings in a quarter,” Saunders says. Instead, they must allow the choice of communication channel to be solely led by the preferences of the customer, what needs be communicated and also still meeting the needs of delivering on the medical strategy.

Customisation drives value

“Adding value to hybridised engagement is all about customising,” says Suzanne Giordano, Vice President, Head of Field Medical, Sunovion Pharmaceuticals. “When you understand the needs of your customer, the hybrid approach can be used to deliver what HCPs need, when they need it.” Some HCPs want to

meet in person to discuss certain data in greater depth, while having other meetings completed quickly online. “As a company, it is important to remain flexible, while simultaneously keeping in mind the goals of the engagement strategy,” she adds.

“Virtual engagement offers a tremendous opportunity to personalize the HCP’s learning journey experience,” adds Phillips. “To fully engage the HCP, formats, duration and personalization are all important – physicians have different preferences for virtual and it’s important to consider the range of learning preferences when designing virtual interactions.”

To this end, Medscape has over 30 educational formats, ranging from foundational didactic approaches to sophisticated case-based and simulation programs.

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Beilmann-Schramm builds on the value of customisation, stating, “Customising the content and presenting data in easy-to-digest formats can help capitalise on the customer’s attention span. However, true to the hybrid approach, MSLs should also consider more focused in-person meetings when necessary.”

Sunovion Pharmaceuticals provide customisation by offering a wide variety of ways in which HCPs can access information. “MSLs can choose between various platforms, as well as various tools for academic key opinion leaders (KOLs) or formulary decision-makers – all of them embedded with interactive components to engage the customer,” says Giordano. “For formulary decision-makers, we have set up a portal through which they can gain access to a field medical person, data, posters, information, presentations, videos, publications or summaries whenever needed.”

Medscape is facilitating customisation within medical affairs, with the customisation being about the mindful deployment of both content and personnel. Medscape’s ‘Next Best Engagement’ approach allows for a curated onsite educational journey, interwoven with opportunities for contact with MSLs.

For example, a HCP may be served editorial coverage, following a congress data presentation. A few days later, they receive the key data abstracts, prioritized to the top of their newsfeed. The MSL or field medical representative then provides further insights around the primary endpoints of the study, which is followed with content aligned with this information, served to the HCP by Medscape. This is then followed up with further interactions around the study, generating additional invitations from Medscape to engage in education content, says Phillips.

“In this way, we’ve created a personalized and responsive learning journey for the HCP, led by the MSL, that both addresses the HCP learning gap and increases the value of the MSL interaction in the eyes of the HCP.”

Empowering MSLs with the necessary digital skills

According to Phillips basic technology management skills were an immediate gap at the start of COVID and while these have been addressed, gaps remain. “We still hear of a basic skills gap amongst many MSLs who have been hurled into virtual engagement with no specific training on how to optimize it.”

Competency with digital tools is vital for the hybrid MSL, says Rees-Saunders. “While high-quality coaching can help fulfil competency gaps, consistency is also key. Companies should adopt a long-term view, ensuring these skills are embedded in their employees.”

Giordano points out that a one-size-fits-all approach to training is not sufficient: “Some older MSLs who lack digital skills may require more basic technical support in attending virtual meetings or ad boards.

Therefore, training programs must be customised for the employee.”

“Internal meetings can be used to help MSLs practice with digital communication platforms,” offers Beilmann-Schramm. “Ultimately, MSLs should also be able to guide HCPs in use of the chosen platform in case they struggle with the functionality instead of cancelling the meeting or moving to a less efficient channel.”

The role of interpersonal skills in building rapport during virtual meetings cannot be underestimated. “Remembering to create the right atmosphere on camera by managing backgrounds and noise, including personal conversation, and using eye contact are all important, especially if you have never met the HCP in person,” says Phillips.

“During the pandemic, we offered our MSLs online courses in a wide variety of virtual engagement skills,” says Rees-Saunders. “We also taught them how to convert raw data into scientific narratives with a patient focus. However, now it is an ongoing effort. They are no longer just one-off courses, rather best practices that are built over time.”

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Benchmarking the hybrid strategy

Benchmarking metrics and key performance indicators (KPIs) will also help evaluate the effectiveness of existing strategies while incentivising further growth, says Giordano. “The effectiveness of the engagement strategy should be measured by how you are meeting the needs of the customer and if the MSL has the flexibility to do that.”

Measuring the outcomes of engagement with HCPs or formulary decision-makers can prove challenging. In such cases, Giordano encourages companies to look at metrics such as diagnosis rates and timed treatment, among others. Alternatively, feedback from HCPs can also provide valuable information regarding the effectiveness of an engagement strategy. “Essentially, a measure of success is having access to the HCP, being able to communicate our data with them, and engaging them as partners,” she says.

Some companies also seek external contractors to benchmark the success of hybrid engagement strategies. “Although this can prove expensive, external vendors can provide more independent reviews of quality and performance using metrics such as the Net Promoter Score,” Rees-Saunders explains. “Companies can also internally benchmark success by regularly sharing best practices between teams and geographies.”

Consistent, defined changes in behaviour and competencies resulting from training programs can provide additional indicators of success, along with having field medical teams with clearly defined roles and responsibilities.



Embracing the hybrid future

“Although MSL training remains a work in progress, we are moving in the right direction,” says Giordano. “In addition to training our teams, we are providing them with specific objectives and helping them understand the value that hybridisation offers.”

It is up to leadership to ensure positive trends in hybrid engagement continue by empowering their MSL teams, investing in the right infrastructure, and keeping motivation and enthusiasm for hybrid engagement alive.

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