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Optimising External Engagement in the Digital Age

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OPTIMISING EXTERNAL ENGAGEMENT IN THE DIGITAL AGE

Digital Evolution, Changing Expectations and Volume of Content Have Necessitated a Rethink of How Companies Can Best Engage the Scientific Community

Digital advancement, general expectation of the availability of scientific information through digital channels, and the ever increasing breadth and depth of new information being generated, have driven many life sciences companies to focus on making information accessible to external stakeholders across multiple channels. Furthermore, user analytics provide an opportunity to better understand stakeholders and their content consumption, and therefore create the potential to build feedback loops that better tailor information to stakeholder needs.

In theory, companies can now provide the information that a stakeholder wants, when they want it, through a convenient channel and in a preferred format.

However, despite these drivers and enablers, not all 'multichannel' and/or 'omnichannel' investments are generating the expected value. We believe this is often because too much emphasis is placed on technology, while there can be a lack of focus on the strategic fundamentals of external engagement.

The Strategic Considerations for Effective Two-Way External Engagement Remain Largely Unchanged in a Digitally-Enabled World

At the fundamental level, the objectives for sharing information on a disease area or asset must be clearly established. These objectives drive downstream decisions, which will focus on ensuring the most appropriate people (either internal or external experts) develop and share relevant content with the right people externally, such as HCPs, segmented based on their engagement needs. These objectives will also determine what success looks like, and how it should be measured at a high level.

External stakeholders may be engaged through multiple company staff and other channels; they tend to think of life sciences companies as single entities and do not differentiate by function. Internal strategic coordination is therefore essential between commercial and non-commercial functions to deliver on the typical objective of initiatives focused on optimising delivery channels, i.e., to create as seamless as possible a customer experience in an appropriate and compliant fashion, while capturing resulting insights in an integrated way.

In general, objectives will focus either on improving knowledge and awareness of external stakeholders about a topic (such as with Medical Education), or shifting their perceptions and behaviours.



For Many Companies the Challenge is as Much About Navigating the Foundational Elements as it is the Use of Emerging Technology

Having established the strategy, the question is then how to engage? This is where the various channels, both digital and in person, must be explored and optimised in their entirety. Even if a decision is taken to create an 'omnichannel' approach in Medical Affairs (for example) and everyone involved understands what this means, it will likely still be useful to consider questions in a more stepwise fashion, such as:

- What channels exist across the company (including online portals)?
- How they are currently being used?
- What channels do our audiences want to use?
- What further channels might be used in future and how should they be connected?

This will enable the development of a more strategic and holistic approach to getting the right information to the right external stakeholders at the right time and maximising synergies between the digital and non-digital channels to continue to build mutually beneficial relationships with external stakeholders.

Furthermore, the use of analytics and generation of insights will enable a better understanding of behaviours, and compliance considerations do not prevent commercial and non-commercial departments from sharing analytics to garner and then respond to a richer understanding of stakeholder needs and preferences.

If set up in a stepwise manner, digitising all new content, incorporating feedback loops and smart use of analytics, then an effective and compliant operating model can differentiate a company in the eyes of the scientific community.

The in-depth sections of this paper further outline the current pace of change, a strategic framework for thinking about external engagement holistically, and key success factors from strategic and operational perspectives when considering 'omnichannel' and similar digital initiatives.



1. THE POSSIBILITIES OF THE DIGITAL AGE HAVE LED TO AN INCREASE IN FOCUS ON EXTERNAL ENGAGEMENT TECHNOLOGIES

Industry surveys suggest that most mid- and large-scale life sciences industry companies are thinking about digital customer engagement. This makes sense as shutdowns associated with the COVID-19 pandemic rapidly accelerated an existing trend toward virtual engagement. Healthcare practitioners (HCPs) have been highly receptive to receiving scientific information through digital means for some time¹, while access to in-person meetings with HCPs is challenging with some institutions and specialties².

However, industry executives typically report that limited progress has been made in their organisations; surveys suggest that Commercial functions may be a little more advanced than

Medical Affairs^{3,4}. While many report making strategic investments in 'omnichannel' approaches, frustration is building with this concept, as various technologies are introduced and touted as 'omnichannel' solutions, without clarity on the objectives or beneficial outcomes of the substantial investments that are required.

We recommend that for digital initiatives such as omnichannel to be successful, the external engagement operating model needs to first be considered in its entirety, and that a stepwise approach should be taken to any digital initiative, prior to making any large-scale financial or time investments.

¹See e.g., Pharmaceutical industry: HCP engagement (2015), EPG Health Media; The Digitally-Savvy HCP (2017 and 2021), Indigene

²Veeva Pulse Field Trends Report, Nov 2022

³The State of Omnichannel HCP Engagement in Pharma: Where the Industry Stands in 2022 (2022), DHC Group

⁴Aspiration vs. Actuality – Assessing the progress of digital excellence in Medical Affairs (2021), Medical Affairs Digital Strategy Council and Indigene



2. IT IS VITAL THAT WE THINK ABOUT EXTERNAL ENGAGEMENT IN A HOLISTIC FASHION

Although content requirements are variable across therapeutic areas (TAs), indications and assets, the strategic considerations and core principles for external engagement are consistent, and are broadly unchanged by digitisation. **Figure 1** below the page outlines the major considerations that drive external engagement decision making. Strategic rationales and directional decisions on elements such as sharing of information, target audiences and timing should be discussed and documented

– at least in summary terms – through Asset / Brand and Medical Affairs planning processes.

Coordination across functions is essential at this level, to ensure clear accountability, tactic alignment with asset and indication objectives, development of a clear scientific narrative for stakeholders, appropriate scenario planning (to enable rapid response to the results of clinical studies, for example), synergy of Commercial and Medical Affairs-led tactics, and to avoid redundancy.

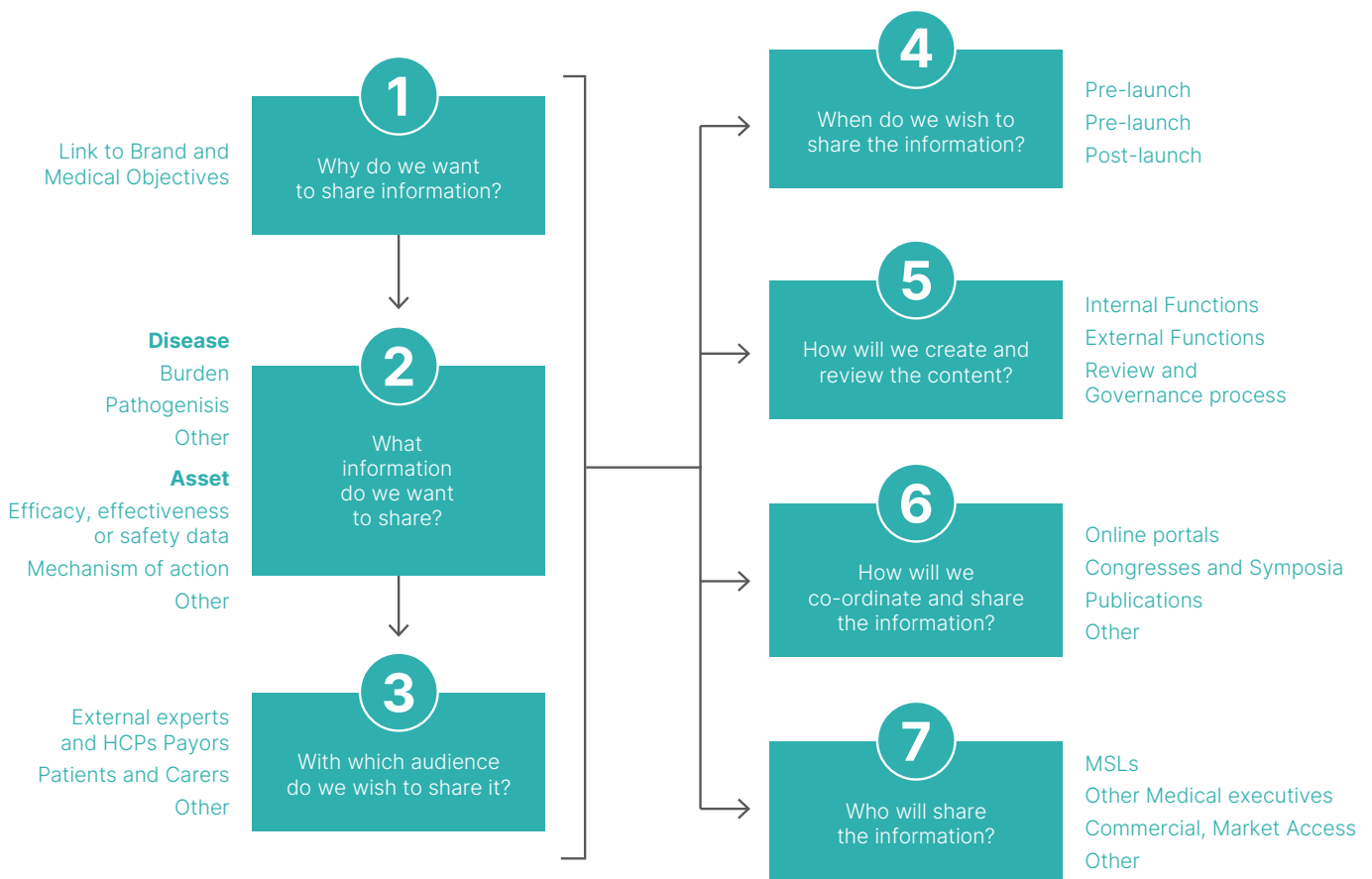


Figure 1. Key decisions related to external engagement.

Some are more strategic than others, but all elements are interlinked as each factor influences the effectiveness of any engagement.



Although some decisions may appear to be more operational, all factors influence the potential benefits and risks of any engagement. Specialised rare disease portfolios often target healthcare ecosystems with only a limited number of key expert stakeholders, where more targeted and personalised approaches are more feasible than with primary care portfolios, for example. In terms of when information is shared, pre-launch and peri-launch periods carry greater asset profile and compliance risks, and so require particularly robust governance. In terms of channel choices, sharing company science or educational material on an online global portal may increase potential reach if the portal is a well-known and respected source; surveys suggest HCPs and patients are sceptical of both social media and pharmaceutical company-managed sources for healthcare decision-making⁵.

In summary, engagement needs and therefore decisions on channel and audience cannot be viewed in isolation. They are linked to the needs

of the company portfolio including asset life cycle stages, target stakeholder preferences and the scale of the healthcare landscape (such as the size of the relevant 'HCP universe'), among other factors. It is therefore important that digitisation and omnichannel initiatives are planned cross-functionally in partnership with business stakeholders across therapeutic areas and assets, and any associated implementation is applied in a structured fashion that aligns with external engagement objectives and needs.

Analogous integration of asset and indication external engagement tactics can be driven by an integrated scientific communications planning (iSCP) process; if this is in place, there is a great opportunity to roll-up the strategic outputs of iSCPs to therapeutic area and global levels to support integrated thinking on external engagement digitisation.

⁵Digital R&D – The Next Frontier for Biopharmaceuticals, McKinsey (2017).



3. DEFINING 'OMNICHANNEL', AND THE POTENTIAL ADDED VALUE FOR EXTERNAL STAKEHOLDERS

Given the above caveats, how should companies approach digital and omnichannel opportunities? It is crucial to first be clear on what is meant by 'omnichannel'. Typically it refers to orchestration across engagement channels, such that a customer can seamlessly transition from one engagement format to another, and the entire system will reflect and build upon previous engagements with that user, incorporating captured knowledge of customer preferences and needs. **Figure 2** schematically represents this principle.

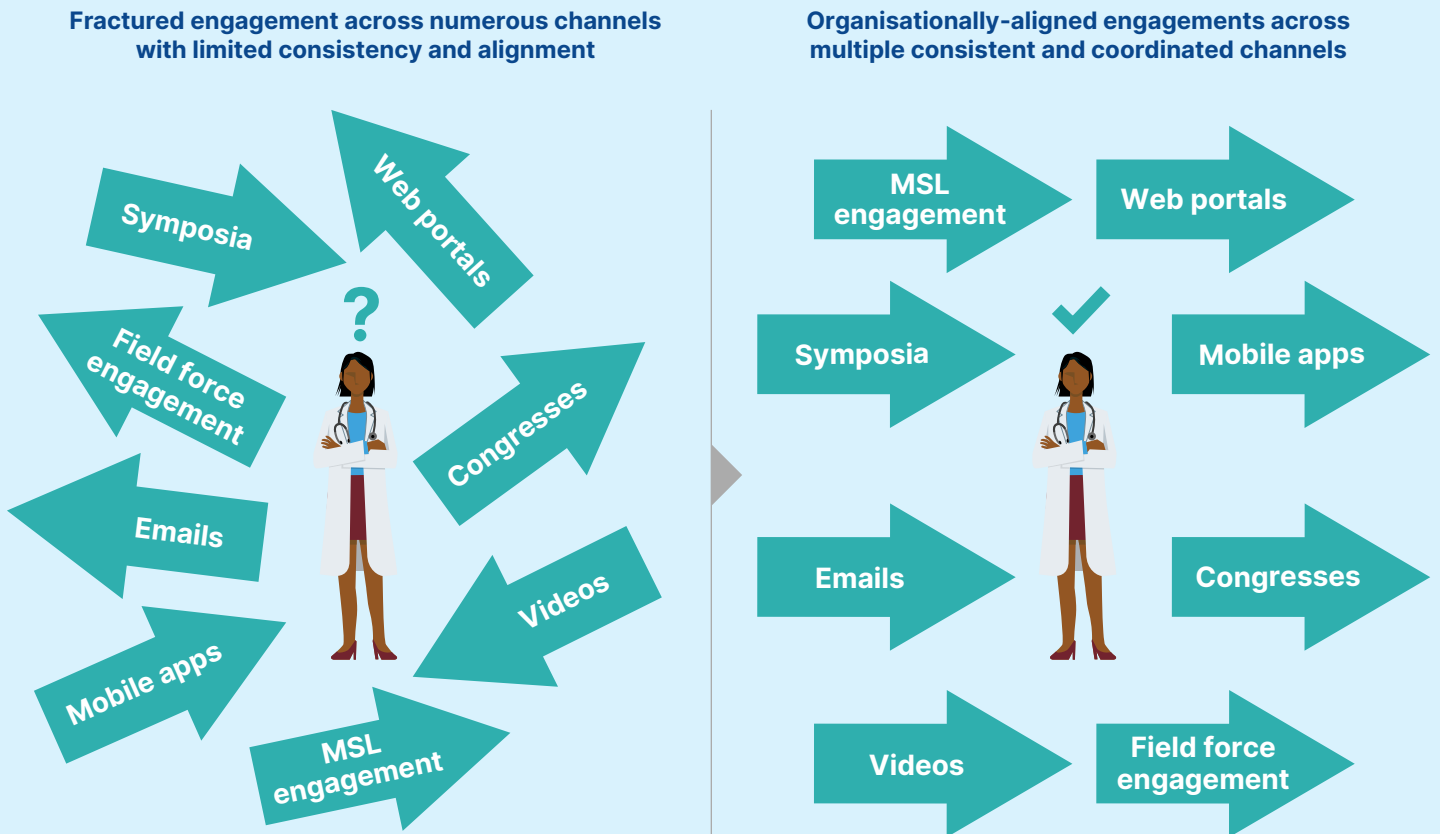


Figure 2. Moving from multiple channels to 'omnichannel': Orchestration of user experience across channels



In practice, this would mean that insights derived from data from both in-person and digital engagements across multiple channels are used to optimise and, where appropriate, automate external engagements across content and channels (**Figure 3**) to create a streamlined and seamless user experience.





	Foundation optimisation	Digital enabled optimisation "Omnichannel"
Content  What digital content do we need to support in-person, remote and digital engagements?	Consistency in message across content	Automated personalisation of content, requiring modular elements
Engagement data  What engagement data will be leveraged in order to better understand our external stakeholders?	Robust utilisation of basic metrics focused on key stakeholders	Automated intergration of analytics across all systems
Channels  What channels are required to deliver the right stakeholder preferences?	Use of multiple channels to augment traditional engagement methods	One platform which delivers all digital content in a compliant fashion
Timing and Coordination  To what extent are we delivering timely and coordinated engagements?	Coordination across all customer facing staff	Automated recommendation of next best actions*

Figure 3. 'Omnichannel' seeks to use analytics to optimise external engagements across multiple channels. *'Next best action' is the use of data and insights to generate engagement actions tailored to an individual.

The typical desired outcome for the stakeholder is therefore high quality, relevant content which is accessible when desired, in a preferred format, as summarised in Figure 4. The expected benefits for companies are usually enhanced dissemination of company science and educational resources into the healthcare environment, increased external stakeholder satisfaction in their interactions with company staff and services, and enhanced internal decision making from improved data and insights.



Figure 4. The promise of 'omnichannel' for external stakeholders



4. STEPS TOWARDS 'OMNICHANNEL' UTOPIA

The description above outlines a potential ideal future state. This may not be feasible in the short to medium term in most life sciences companies, however. We therefore recommend a sequential approach that starts by generating an aligned Commercial and Medical Affairs management view of desired outcomes from digitisation investments, with an assessment of current capabilities, practices and customer priorities (**Figure 5**).

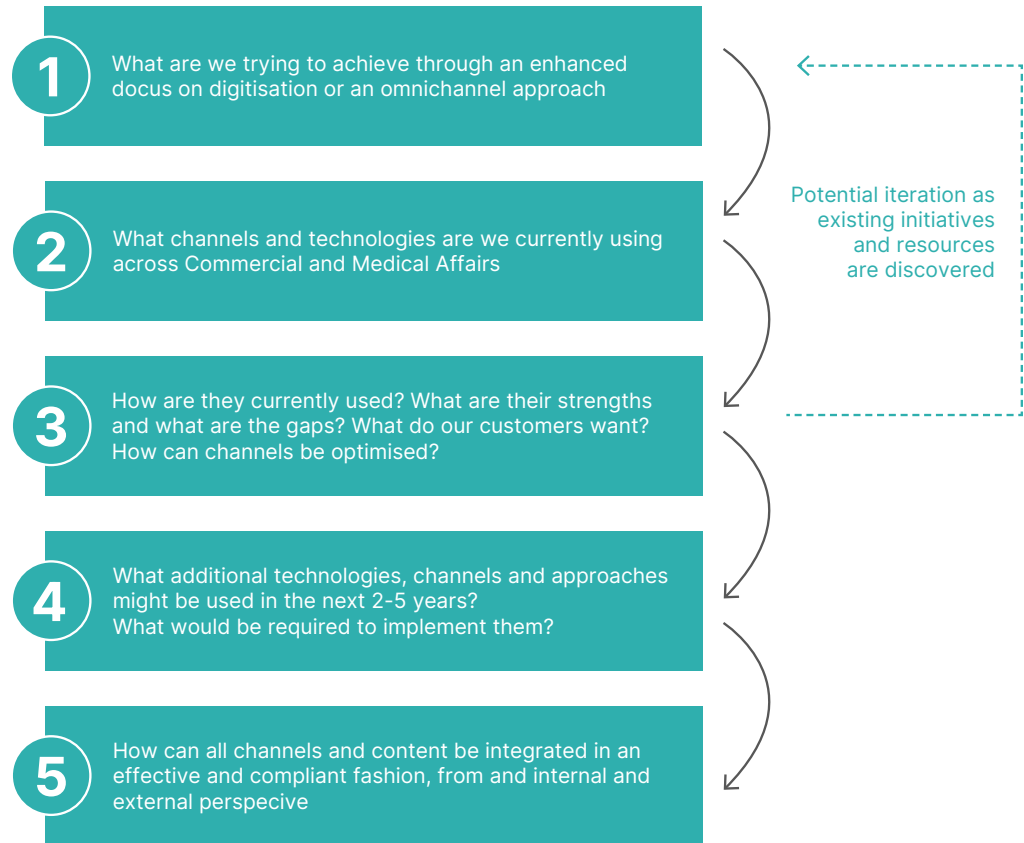


Figure 5. A stepwise approach to the initial design of an omnichannel program

4.1. Set clear objectives and desired outcomes against which to manage performance

Desired outcomes may be those outlined in Section 3 above, but it is important to have an aligned company view on the value any investments are expected to accrue, and how this value will be assessed. These objectives and associated metrics should be agreed with senior budget-holders, as well as realistic milestones toward achieving those objectives, to avoid setting expectations that do not match operational reality, and the subsequent risks to budgets and resources that may result.



4.2. Understand the current and likely future internal landscape

In addition to understanding objectives on a cross-functional basis, an assessment of current capabilities and user needs is also vital on the same cross-functional basis. This is key to enable integrations that will maximise the use of current investments in systems and technologies. It is also key to creating a better user experience. No company can achieve 'omnichannel' experiences while different departments use disconnected systems and work on content and engagement in siloes.

Of course, purposes must remain clear and compliant with any necessary firewalls, particularly the differentiation of promotional vs. non-promotional content and engagements, but there is nothing in principle that stops much better partnership between Commercial and Medical Affairs groups on external engagement strategy than is usually the case, nor better integration of the platforms used by them.

Company compliance policies are also often cited as barriers to this kind of internal collaboration, in addition to potentially misaligned objectives between functions⁶. Often this is not the reality, and better partnering with compliance groups can resolve these misunderstandings to chart a path forward.

In the more rare cases where a risk avoidance (rather than risk management) mindset leads to unnecessary barriers on the path to innovating a better customer experience, then these barriers should be examined more closely.

As well as current channels, digital leaders in an organisation need to understand – and be empowered to find out – the new channels and technologies that are under consideration, and also emerging technologies that are likely to be applicable in the coming years.

Unfortunately some of this information is often hidden in functional and/or regional siloes – anywhere where budgets are held. These elements must be made transparent, as the introduction of any new system or process in an uncoordinated fashion will immediately revert the organisation from 'omnichannel' back to a more fragmented state of affairs with multiple uncoordinated channels.

On uncovering all the ongoing activities and investments in a company, it may even be necessary to redefine omnichannel objectives based on this better understanding of the internal and external landscape, and what is feasible with current operational and budgetary provisions (this is indicated by a feedback loop on **Figure 5**).

4.3. Design the integration and future approach in a targeted way

An omnichannel approach may not involve introducing new channels but enhancing the ones already used, through better analytics and enabling technology. This involves linking of data on user activities and preferences to understand engagement patterns, and may support automated delivery of the most impactful content.

This is increasingly reliant on explicit user consent across the globe, therefore legal guidance should be sought early and often, and the value to the user ('data subject' or 'consumer', amongst other legal terms) must be clearly

articulated and regularly demonstrated to them in order to gain and maintain their consent.

Finally, it is important to consider how a digitisation or omnichannel initiative will be rolled out. Which geographies and/or assets are best placed to prove the concept, before a broader approach is considered? Unlike Silicon Valley technology firms, most life sciences organisations do not have the resources or confidence to conduct a 'big bang' change across the organisation, therefore a stepwise roll-out in targeted areas of the business will likely be necessary.

⁶Medical-Commercial Collaborating to Win in the Digital Era, Reuters Events (2021).



5. ENABLERS OF SUCCESS

There are several enablers of success for external engagement and omnichannel, summarised in **Figure 6**.

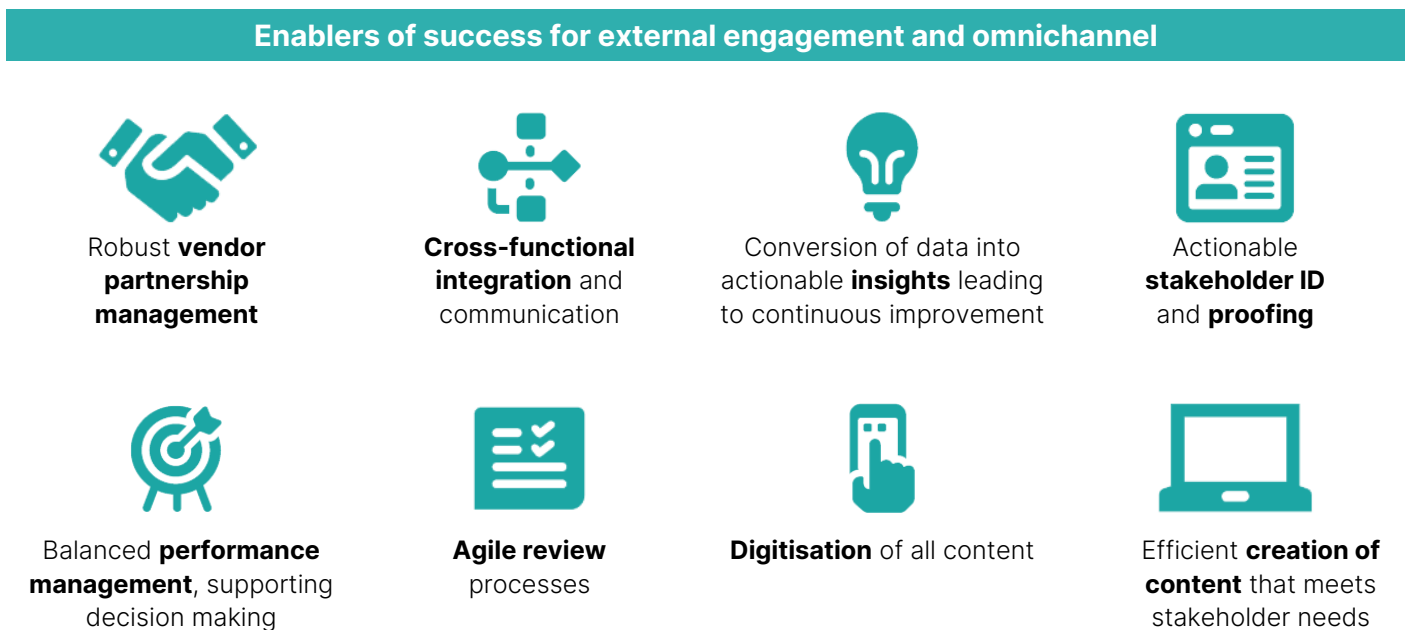


Figure 6.

It is important that all of the above factors are managed effectively, recognising that several are interlinked. The importance of crossfunctional alignment has been mentioned before but cannot be overstated, as it is critical in terms of building coherent strategy, as well as for optimal insights management, streamlining technology vendor partnerships (including partner selection to bring the right capability at the right time, at the right cost), and content digitisation. The latter, including digitisation of content used for in-person meetings, is vital so that the same analytics approaches can be applied across all types of engagement. Content creation must therefore work with digital and modular formats in mind from the earliest stages, to avoid the highly inefficient step of retrofitting material later.

Stakeholder profiling is an area where commercial and non-commercial functions may necessarily take different views. Specialist areas (such as HCP sub-specialty, payor archetype, patient sub-population, carer and any other group the company is offering content to) may be common, but profiles based on stakeholder

behaviour modification or influence on product sales are generally limited to commercial functions. This is an integration challenge that must be handled on a company-specific basis, depending on policies and management decisions.

Initiatives to drive efficient content creation that addresses stakeholder needs may include working with external stakeholders themselves to build engagement and a feeling of peer dialogue, development of clear processes and guidelines for localisation of global content where required, and deprioritisation and removal of content that is not used and does not meet needs, to spare resources for more impactful work. For example, reviews of Medical Information library usage metrics can show up to half of global content being unused in any country, despite still requiring maintenance efforts.

In terms of content review, the common and long-standing resource, governance and efficiency challenges of ensuring content is locally appropriate and compliant, up to date and accurate remain. Customisation of external



engagement brings the additional challenge of requiring content to be modular, and ideally rapidly available following key events, such as congresses and study readouts. MLR (Medical, Legal & Regulatory) review processes therefore need to be appropriately resourced and more agile than they have historically been.

Finally, performance management should identify meaningful metrics and KPIs linked to objectives and continuous improvement decisions. For example, absolute numbers of open website hits are not helpful if the viewers are unknown (many will likely be agencies, competitors and web trawler bots), but shifts in stakeholder understanding and professional practice can be highly impactful in driving patient access to

the right products at the right time. For further discussion, see Lucid Consulting's white paper 'Medical Affairs KPIs 2025'.

The ultimate vision

The ultimate aim of omnichannel is to ensure functions are connected such that targeted content is created, reviewed and used efficiently, all channels feed the same dataset, there is one view of the customer, and each customer experiences individually tailored, seamless in-person and online interactions with a company. This is a long-term vision to strive for, and one that is achievable when the steps on the path are clear.



ILLUSTRATIVE CASE STUDY: WHAT DOES COMPANY ENGAGEMENT LOOK LIKE WITH A SINGLE EXTERNAL EXPERT?

The below outlines an illustrative sequence of events with a key stakeholder. All these events have been observed in companies in the recent past.

1. A global Medical Affairs lead meets a leading expert who is based in Greece for coffee at a top congress in the US. They have an engaged discussion, but the topics are not logged and no-one else in the company can benefit.
2. The expert attends a global advisory board in Paris. Outcomes are useful for global planning, but are only shared in cursory fashion with the Greek team. Payment to the expert is subsequently delayed by internal finance department issues.
3. A Greek MSL visits the expert at his practice two months later. Topics of discussion are logged in a CRM tool, but the expert's advice is not captured in a sufficiently structured way to support subsequent analysis. The expert complains that they have not been paid for their advisory board work; the MSL is not aware of the circumstances but promises to follow up.
4. The company releases a product website in the expert's TA of interest. However the expert does not look at it as they are not made aware of it, and generally do not consider pharmaceutical company websites a valuable source of information for their clinical practice.

HOW CAN THIS BE IMPROVED IN THE NEAR TERM?

Aside from broad-reaching omnichannel, there are separate human and technology considerations which could improve customer experience in this example:

A technology-agnostic possibility would be to allocate a single point of contact (POC) within the company to each target list customer. This POC would orchestrate their interactions - email them about all congress activities, invite them to events, conduct in-person visits, and so on. For larger companies this model is feasible in areas where the universe of target HCPs numbers in the hundreds or low thousands, and is similar to business customer management

approaches used in other industries such as IT and manufacturing.

In terms of technological enablement, one platform should ideally contain all relevant content, including detail aids, medical content, webinars, and all other content used by field teams. Further, stakeholder profiles can be linked to a unique identifier that is used across all internal systems and apps which store information about them, when appropriate user consent is in place. Industry experience suggests user consent is usually obtainable from most stakeholders, provided the benefits are clearly explained to them.



THE ROLE OF AI IN EXTERNAL ENGAGEMENT

Artificial Intelligence (AI) is by far the most talked-about innovation topic across healthcare and other industries currently, brought into the spotlight by rapid advances in generative Large Language Models (LLMs) such as ChatGPT. Company executives are attracted to the potential productivity gains on offer through automation. As a leading example, Eli Lilly reports already running over 100 AI projects in areas including drug discovery, robotic-process automation and chatbots. Lilly claim these projects equate to around 1.4 million hours (160 uninterrupted years) of human activity as of June 2023, with a plan to increase to 2.4 million hours by the end of 2023⁸.

In the area of external engagement, AI is most readily applicable to the generation and provision of material that can be standardised in terms of content and format. Several companies have deployed chatbots and voicebots to answer common Medical Information queries, where responses can be generated from approved documentation such as the Summary of Product Characteristics (SmPC). Scientific content including publications will increasingly be developed to at least the first draft stage using AI tools, using company data and standard templates. Simple translation work may also be automated, although human input is still currently required for complex information and language structures, and particularly with less commonly-spoken languages. AI can be used in engagement data analysis, potentially uncovering trends and

insights that human analysis and interpretation may miss. Planning and administrative tasks (such as contract development) will also be increasingly supported by automated tools and templates to simplify workflows.

AI carries risks, however – particularly in the use of publicly available LLMs. They are prone to providing biased and false information, do not consider intellectual property rights (leaving businesses prone to copyright infringement lawsuits), and they may also be subject to security vulnerabilities, enabling hackers to access sensitive business or personal information. For these reasons among others, life sciences companies will typically use secure and specific AI tools for any work that involves sensitive data or direct interactions with external stakeholders, or both.

Notwithstanding the risks that will need to be managed, AI will undoubtedly make a huge impact on many aspects of company operations – including external engagement – in the near future. The immediate priorities are to identify the areas of greatest opportunity for the use of AI (initial content creation, for example), then establish appropriate and scalable solutions with the right combination of specialist partners and in-house capabilities, and to integrate these tools while closely monitoring their impact on productivity. The core value proposition of effective AI is to support and enable company staff to deliver more, in less time and using less budget.

⁸<https://www.businessinsider.com/eli-lilly-ceo-interview-ai-artificial-intelligence-biotech-healthcare-2023-5?op=1&r=US&IR=T>



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