

Impact of Training on Medical Representative in Their Performance Special Reference of Alembic Pharmaceuticals Ltd

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ABSTRACT:- Unlike other industry, pharmaceutical companies face unique personal selling challenges. The task of a pharmaceutical sales representative (PSR) is to inform about the company's products and persuade physicians to prescribe the products for therapeutic treatments, rather than to negotiate over prices and close a deal. Yet, personal selling is still an understudied topic in pharmaceutical marketing.

I. INTRODUCTION:

Medical representatives are the key link between pharmaceutical or medical equipment companies and healthcare professionals (Doctors, Chemists). They are responsible for building a network with healthcare professionals to promote product awareness, answer queries regarding usage of products and help introduce new products. MRs working in specialty divisions like cardiology, psychiatry, neurology, gastroenterology and so on, are well versed with the doctors' schedules and adjust their own work day to ensure meetings with these doctors. There are occasions when MRs' work from 8 Am to 11 Pm so they can target the right doctors.

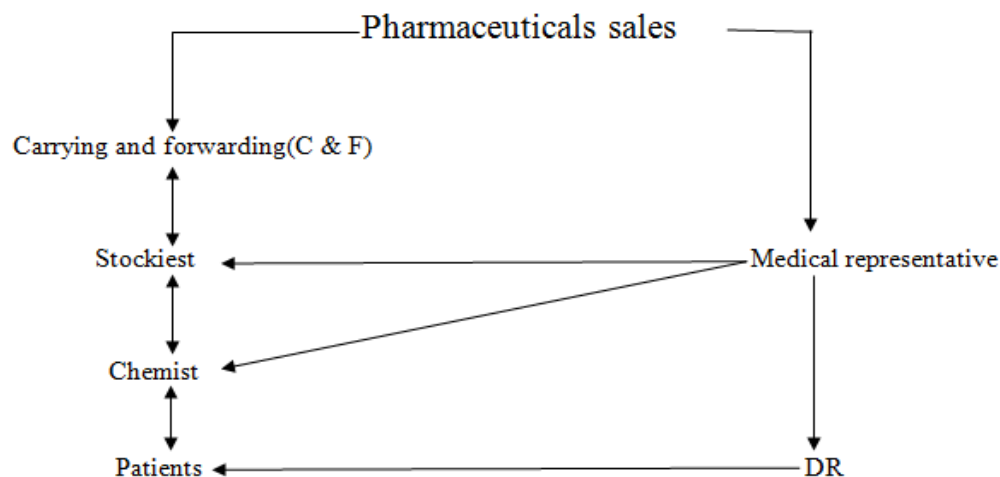
The Job Role and Responsibilities

Medical representatives are usually assigned a geographical territory within which they work. Their primary and main responsibility is to establish and maintain relations with the customers (Doctor, Chemist and Stockist) because if medical representatives maintain cordial relations with Doctors they will support the MRs' brands. Good relations with Chemists benefit the MRs in terms of getting information pertaining to the drugs doctors in the vicinity prefer to prescribe. Networking with stockists is advantages both for the MR as well as the company he represents because it enables him to get faster orders from the stockists.

KRAs can be summarized below:

- Identify and meet potential customers including doctors, hospital staff and other medical professionals and facilities
- Promote various product feature like new technology, USP
- Develop and manage assigned territory with the goal of maximizing sales
- Manage and develop top customers through regular interactions
- Provide feedback from customers to the company
- Maintain records and achieve sales targets

A graphical representation of the same is given below Fig. 1



Pharma Selling History: In India, pharmaceutical selling started before independence. Bengal Chemical and Pharmaceutical works appeared in 1930. For the next sixty years, in India, most of the drugs were brought in by the multinationals either in fully-formulated form or in bulk form. The government started to promote the growth of drug manufacturing by Indian Companies in the early 1960s, and with the Patents ACT in 1970 enabled the industry to become what is today. The concept of Medical Representative was introduced in India during 40's by Pfizer. It was followed by Park Davis, Glaxo, Alembic, Sarabhai, Rhone Palenque, Hoechst etc.

Pharmaceutical sales: Pharmaceutical selling is a very tough job because nowadays during a sales call there are not less than 15-20 representatives meeting a good potential doctor. That's why the sales call time has significantly reduced, resulting in the sales representatives having to prove their potential in each and every call. They have to be capable enough to promote their brand in limited time. For that they need to have strong communication along with good knowledge of their brand. They have to understand the needs and requirements of the doctors/clinicians and promote their brand according.

Selling Process consist of 3 steps

First step: Medical representatives are encouraged to interact with chemists before meeting Doctors in their territories and extract as much information as possible pertaining to the therapeutic area he represents like competitors' brands and doctors' prescription preferences. This process is called Retail Chemist Prescription Audit (RCPA) and it reveals the following:

1. Doctors' prescription Habits
2. Molecule preferred by the Doctors
3. Estimated potential of our brand vis-à-vis doctors' prescription potential.
4. Understand Doctors' Profile
5. Selection of Doctors' for Activity
6. Specific Brands that can be promoted to Doctors'.
7. Helps in PRECALL PLANNING meaning Planning which MRs do after RCPA and before meeting the Doctor, E.g. which brands MRs will promotes in front of the Doctor, decide 'Inclinic' communication, which inputs he will give like LBL, reminder cards, samples/gifts/activities etc.

Second Step: After completing and analysing the RCPA, Medical Representatives visit the Doctors generally in their clinics to share benefits about their products and solve queries if any related to the product.

Third Step: If the Doctors agree to prescribe their brands then the MRs have to ensure their brands are available in the chemist shops in the vicinity of the Doctor's clinic. This is when the MR visits the stockists and builds a rapport with them. It is this strong relationship which ensures repeat and timely future orders.

Pharmaceutical selling is different from Consumer selling

Pharmaceutical Selling	Consumer Selling
The end user i.e. patient is not the target customer	The buyer who is generally the end user is the target customer
Doctors make the purchase decision for the end user viz. the patient.	The end user, i.e. buyer makes the decision to purchase the product.
Demand generated by the MRs through Doctors' Rx, creates "PULL for the products"	Demand generated by Ads and point of purchase creates a "PUSH for the products in the market"
Distribution is serviced and controlled by the MRs	Distribution often works Independently i.e. based on consumer preferences.

Challenges of Pharmaceutical Selling:

1. Meeting his Prime customer: "Doctor"/"Clinician", who is much more learned, Smart, and Intelligent than the sales person. Also the Doctor/ Clinician have mastered the subject for minimum 10 years. In all other types of selling the sales person knows more than the customer. This makes the Job more challenging to convince a much more competent person to prescribe a particular Brand.

2. Customers are generally pressed for time: There are occasions when MRs' work from 8 Am to 11 Pm so they can target the right doctors who generally don't have more than a few minutes to spare for the Mrs. Many calls don't go beyond the reception counter

3. Indirect selling: The Pharmaceutical selling is also different as we do "Indirect selling", where sales person do not interact with the customers directly. He has to convince a Doctor to prescribe a brand for a particular ailment, to a patient suffering from a particular disease condition.

4. Non-healthcare graduates: Nowadays, several pharmaceutical organizations are recruiting non-healthcare graduates (BA, B.Com, BBA, B.Sc. math, diploma etc.)

5. Proper Doctor Selection: A doctor's prescription potential is related to the brands. Some doctors have potential for a particular molecule so you have to learn the process of selecting the right doctor.

6. Selling Skills: Product knowledge by itself does not generate prescription. To translate your product knowledge into prescription, knowledge has to be effectively presented to the doctors.

7. Managing and Building the Territory: The territory of a medical representative is the geographical area in which he works. The medical representative is the manager of his territory, and he shoulders the responsibility of strengthening the company's base in his territory.

Pharma Training: The various training programs a MR undergoes are:

- Induction/orientation,
- BTP/BOP,
- Refresher programs as per divisional requirements &
- Skills development for the next level.

Once the MR grows to the next level he/she gets training for developing basic managerial skills, team management, negotiation skills, and situation handling and so on.

Orientation/Induction program: During this program the new joiners get an understanding about the organization, its various policies, products & some communication skills

BTP: After some months of understanding the field dynamics the representative is called for a Basic Training Program (BTP) which is division wise. The purpose of the program is to develop good product understanding and selling skills which include communication, situation & objection handling. One of the biggest challenges faced currently is the amount of time the MR gets with the doctor which keeps dwindling due to the busy schedule of the doctor. This challenge is emphasised during training where tips or pointers are given regarding effective/optimal use of the few minutes the MR gets with the doctor.

Refresher: Refresher programs are organized for the MR based on various needs like skills or knowledge development from time to time.

BOP: Basic Orientation Program (BOP) training consists of two parts Medical Training (frequently used medical terms and their meanings) & Selling Skill Training

- **Medical Training:** When sales representatives join pharmaceutical companies, they undergo intensive five days or one month pharmaceutical sales classroom training sessions (training days depend on organizations, therapy or number of products) where they are trained aggressively by doctors and medical trainers. This is equivalent to a full time certification course. In medical training, the trainer covers Anatomy & Physiology, Diseases and Drugs in detail. After completing medical training, the MR undergoes the Detailing process.

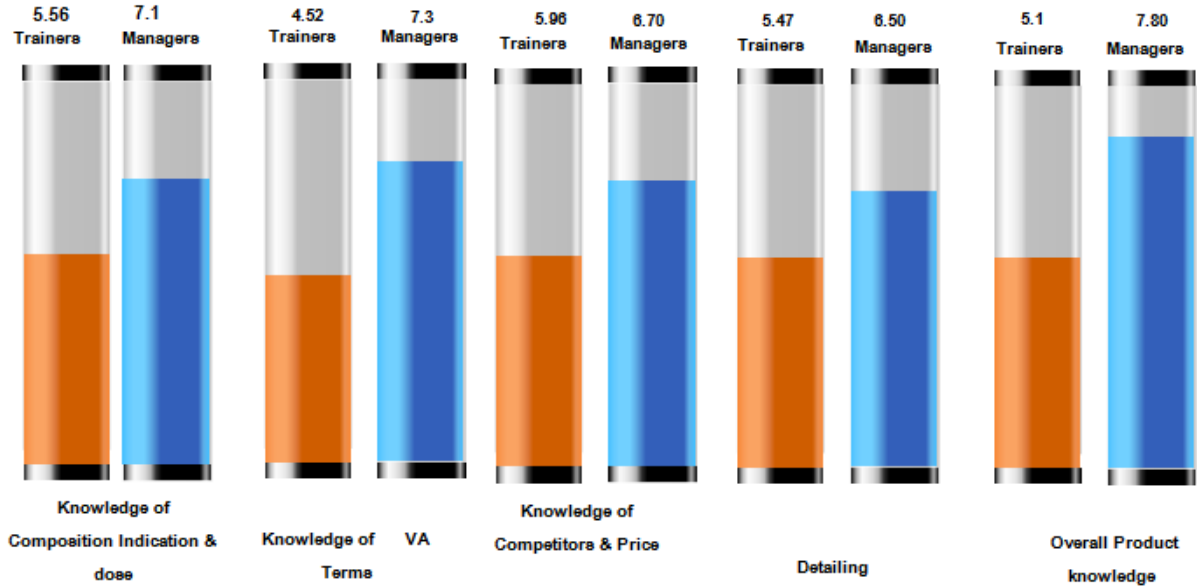
- **Behavioural / Selling Skill Training:** The definition of selling skill in pharma is 'communicate brands with science in effective way' and to learn this art, the MR has to undergo training in Behavioural / Selling Skills. Although selling skills are a part of the overall communication process of MRs with doctor, good communication alone will not generate prescriptions. Selling skills comprises of unearthing the needs of the doctors, trying to find out the unmet needs of patients, asking probing questions regarding the therapy the doctor prefers and justifying the mitigating features of the products the MR is trying to promote vis-à-vis competitors' products, listening skills, handling objections from doctors, developing rapport with doctors, selling benefits of the MRs products vis-à-vis competitors' products. If these skills are used properly during the conversation, it is likely that a representative may enhance the sales of his company. Some common modules used by pharma companies during selling skill Trainings are as under:

1. Retail chemist prescription audit 2. Smart calls objective 3. Scientific Opening and c Objection Handlin

Other Development programs: Training is a core function which drives the company's goals by developing & fine tuning the skills of employees at various levels. Keeping this in mind, other specialized programs are designed/developed and conducted from time to time for various managerial levels, based on internal promotion status. These trainings are either outbound or in-house for various departments to work on several aspects like communication, presentation & team building.

II. RESEARCH METHODOLOGY

Post training analysis of Effectiveness of Training:



The participants are evaluated first by the trainer once the training module is completed on the following five parameters:

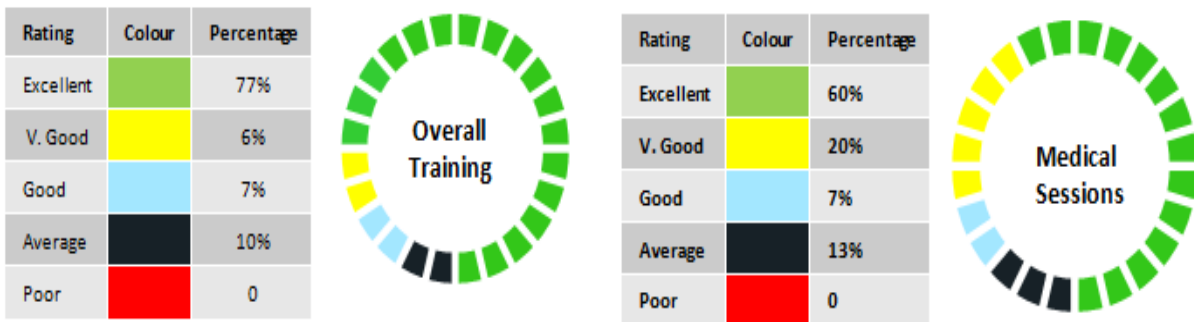
1. Knowledge of Composition Indication & dose
2. Knowledge of VA Terms
3. Knowledge of Competitors & Price
4. Detailing
5. Overall Product knowledge

Based on their performance, there are either requested to repeat the training or report to their respective territories. The trained MRs’ immediately starts their fieldwork and are accompanied at least once by their managers. The managers observe their performance for a period of 10 days, after which they submit their individual evaluations of their respective MRs on the same 5 parameters mentioned above. A graphical comparison of the trainer’s evaluation and the respective manager’s evaluation is given in Fig. 2 above.

Real time data of the past six months have been taken for this graph, and it can be concluded that the managers are almost always more than satisfied by the training imparted, implying that the training programs in alignment with management’s expectations.

Feedback:

At the end of each training session, feedbacks are taken from the participants on 7 parameters, all of which have to be rate on a scale of 1 to 5, 1 being the lowest or poor and 5 being excellent. Analysis of the feedbacks received over last three months reflects that almost 60 to 65 % of the participants rated all sessions as excellent or very good. A tabular and graphical representation of the same is given below. Fig. 3



Impact of Training on Medical Representative in Their Performance Special Reference of...

Rating	Colour	Percentage
Excellent	Green	80%
V. Good	Yellow	5%
Good	Light Blue	5%
Average	Dark Grey	8%
Poor	Red	2%



Rating	Colour	Percentage
Excellent	Green	89%
V. Good	Yellow	4%
Good	Light Blue	7%
Average	Dark Grey	0%
Poor	Red	0%



Rating	Colour	Percentage
Excellent	Green	93%
V. Good	Yellow	6%
Good	Light Blue	1%
Average	Dark Grey	0%
Poor	Red	0%



Rating	Colour	Percentage
Excellent	Green	67%
V. Good	Yellow	21%
Good	Light Blue	5%
Average	Dark Grey	4%
Poor	Red	3%



Rating	Colour	Percentage
Excellent	Green	71%
V. Good	Yellow	5%
Good	Light Blue	11%
Average	Dark Grey	9%
Poor	Red	4%



This enabled us to conclude that the course materials designed for the trainings were highly effective and the trainers were lucid in explaining technical terms to the participants

III. CONCLUSION:

More you sweat in Training the less we bleed in war but the universal truth of Training is- “Training is a continuous process and nobody likes to be trained”. Knowledgeable people feel that “What is the need of Training- I know everything?”

Training however, makes competent people more effective. Training helps to increase the Competency of a person in any field. Competency can be defined in a simple way by:

$$C = A + S + K \text{ (C- competency, A- Attitude, S-Skill, K- Knowledge).}$$

There are many methodologies to evaluate the effectiveness of training. Most of the trainers and organizations are satisfied when the participants eloquently fill up feedback forms and generally assign best ratings to the trainer. The actual effectiveness of the training happens only when their Manager Observe changes in Attitude, Skill and Knowledge.

Cash investments can crash anytime, but investment on training will give you real earnings.

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