PATIENT-CENTRIC: A Key Concept at GlaxoSmithKline

Talking with Beth Molloy, Head, Performance Enhancement and Continuing Health Education, GlaxoSmithKline



Beth Molloy heads the CHE team at GSK.

Please discuss your background and how you came to be involved with Continuing Health Education (CHE).

I have always been passionate about CHE and firmly believe the industry plays an important role in maintaining and upgrading the skills of physicians.

My career started in nursing and, from the very beginning, I found myself focusing my efforts on nursing education. Later, I joined the pharmaceutical industry and held positions in Sales and Marketing, progressing to the role of Director, Reimbursement Strategy & Health Policy at GlaxoSmithKline (GSK). I have since returned to the commercial area and currently head Performance Enhancement and Continuing Health Education at GSK.

How is the CHE department structured at GSK?

We have a comprehensive CHE department at GSK, with personnel at our head office overseeing the design of our programs as well as regional personnel responsible for local opportunities and coordination of CHE efforts.

Our regional CHE specialists work in the field with sales representatives and district sales managers to determine how programs will fit specific regional requirements. Our programs are developed to ensure our representatives have the knowledge and tools they need to provide value to physicians.

hat is your vision for CHE at GSK?

Patient-centric! We have recently aligned our departmental strategic priorities with our new patient-centric vision. This was a critical move for us in order to remain a CHE partner of choice with health-care providers. Our approach also focuses on listening to our customers and developing strong partnerships with academic centres, national and provincial colleges and medical associations.

What role does GSK play in the changing CHE market within Canada?

We make a point of involving Quebec heath-care professionals in the design of our programs.

CHE is very competitive in Canada and more and more companies are now investing in CHE activities. This new reality contributes to a key challenge we are facing: How do we maintain a leadership position in the industry while continuing to meet the business objectives of the organization? To help meet this challenge, we use regular needs assessments and conduct ongoing market research to determine what drives health-care professionals' interest in attending CHE programs. This information acts as our base for the development of new and innovative educational programs.

What is different, if anything, about GSK's approach to CHE in Quebec?

The medical associations and universities in Quebec are very focused on continuing education for health-care professionals. As a result, we make a point of involving Quebec health-care professionals in the design phase of our program development. We place priority on developing and delivering CHE programs in partnership with Quebec academic centres, such as the Collège des Medecins du Québec, and educational institutions like the Université de Montréal. The model for CHE in Quebec is one of a partnership. We work with various stakeholders to understand the educational needs of customers as well as the preferred learning format.

What are some of the unique CHE programs you have been involved with?

The uniqueness of our programs stem from our understanding that physicians have different preferred learning styles, which vary from highly interactive CHE events to didactic lectures and most everything in between. We are always excited to develop unique formats, which provide physicians with new events that they have not attended in the past.

A recent example is our Script Concordance Testing format. This is a co-facilitated event where a family physician or specialist leads the discussion. This format is different from the standard case study and really allows physicians to think through practical patient scenarios they might face in their practice. It's not a program that leads the physician down the path to a specific answer; rather, it presents physicians with challenging questions for further exploration.

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What's your perspective on the future direction of CHE in Canada?

CHE will likely become even more competitive in Canada. Physicians are very selective in the programs they attend, and the program delivery format is a primary driver. CHE departments must stay on top of guideline changes for novel treatments and diagnosis, as well as offer educational programs in a wide variety of formats, including e-CHE.

CHE will continue to evolve according to the needs of the health-care community. I expect that broader audiences, such as allied healthcare team members, will be participating in CHE and that more and more partnerships will be formed to address the educational needs of all audiences.