Interview

Pfizer France: Viva la SFE Difference!

By Denise Silber

Our European correspondent, Denise Silber, met Annick Pichavant Ruty, VP of Sales for Pfizer France, at a recent pharmaceutical industry conference in Europe. The following interview was the result of this meeting. Surprisingly, lack of sales rep time with physicians is not a problem for Pfizer France. The company, however, had other internal issues that needed to be addressed to build an effective sales force following two mergers that doubled the number of reps.

DENISE: Let's start with your job definition. You told me that your first objective as VP of Sales at Pfizer France "is not really sales but managing the work process." Can you expand?

ANNICK. My first objective is not really sales, even though "Sales" is in my title. My main responsibility is to ensure that our 1200 sales reps are detailing the right physicians, at the right frequency, with the best impact.

My second responsibility, in order to optimize the sales process in our large organization, is to align managerial practices. If district managers (DMs) apply different rules and practices from one region to another, this is very demotivating for the reps.

We align man-agerial practices in order to ensure the equity of treatment for the reps.

We began aligning practices in October 2003, when we launched a major new development program for district managers. The program went back to basics—district managers were trained or retrained to coach their reps. Then we did a Web survey of 400 reps in order to evaluate the impact of the program. Ninety percent (90%) of the reps participated, and the vast majority recognized improvement in the DMs after the program.

DENISE: You made a presentation at the Pharma Sales World Conference in December, 2005, explaining how Pfizer transitioned forward from a trouble-ridden recently-merged set of separate field forces to one unified successful entity. You had left your position as Pfizer VP of Human Resources in 2002 to take up the post-merger sales force challenge. Can you walk us through this?

ANNICK: In fact, we went through two mergers, Warner Lambert and Pharmacia. In 2001, Pfizer France had 650 reps, in 2002 1,000 reps, and in 2003 we reached our current size of 1,200 reps.

Pfizer France: Pharma Sales Department

19 active products

2005 Sales: euros 1.2 billion for promoted products

1500 people including:

- 4 senior sales directors
- 15 sales directors
- 130 district managers
- 1200 sales reps

In 2002, the sales force situation was quite poor as a result of the merger. In France, the two companies were the same size, but Warner-Lambert had no experience with ETMS (Electronic Territory Management System) and their reps did not use laptops. Pfizer France had never promoted Lipitor, and we really did not have a results-oriented culture.

The first thing I did when I became VP of Sales was to organize a tour of France. We held 12 local meetings

with the reps to try to understand what was wrong. I met with more than 200 reps who provided us with feedback from their peers. With all the data, I drafted a recommendation that led to an action plan called "Regain." We identified problems at many levels and introduced 9 levels of sales force efficiency. [See next page.]

For example, the reps told us that the district managers no longer brought added value. This was true. The DMs spent no time with the reps because they were too busy organizing professional relations and other activities for 9 products. Our first decision was to give the DMs more time to work with the reps by reducing the number of products in each DM portfolio and refocusing them in a program called "What Pfizer can do for you." This program enabled us to show the reps that we were helping them. Six months later we introduced Phase 2, called "Fighting Spirit" or "What you can do for Pfizer."

DENISE: When you were setting up new working processes and in transition, how did the company keep focused on sales results?

ANNICK: I am performance-oriented and we were very focused on sales, but our performance was not good. Product sales' dynamics did not begin to turn around until after our national sales convention. The convention took place in Europe, outside of France, on a cruise ship, for one week in May, 2003. The objective was to restore the pride of the sales force. The seminar took a lot of work and energy to organize, but results began coming in right afterward.

Nine Enablers for Short and Mid-term Actions

- 1. Face to Face visit and Detailing optimization
- 2. New organization in Therapeutic Teams
- 3. Reward and recognition
 - · New bonus scheme
 - Top Performers program
- 4. Motivation Incentive
- 5. Headquarter Sales Force interface
- 6. Private life / professional life balance
- 7. Develop product expertise
- 8. Communication
- 9. Marketing and Sales interface

At the convention, we were able to publicly recognize our first top performers. These top performers emerged from two programs we initiated in 2002, one recognizing expertise and the other recognizing quantitative performance. We've pursued the contest each year since. It's a major event involving the whole executive committee. Reps may be eligible for trips, stock options, a better car, etc.

Let me mention some sales force effectiveness (SFE) tools that we employ. There is, of course, a sales incentive program. Ector, a homemade program, is our territory management system. We also have a dedicated Web site where every rep can follow our results. Finally, the Internal Communication team has a dotted line relationship with us and assists us tremendously in ensuring

that reps understand the context in which they receive their instructions.

DENISE: I understand you measure the image of Pfizer France's sales force internationally.

ANNICK: Yes, we have two barometers:

- Every two years we do a customer survey of physicians in 21 countries in Europe and Canada. The most recent results in 2004 showed that we were no better than our main competitors; so we launched "the year of talent" in 2005.
- 2) Every 18 months, we do a survey of the sales force. The 2005 results showed that among the 21 Europe/Canada Pfizer affiliates, France tied with Portugal and Hungary for its positive dynamic, placing France number one of the 6 largest markets.

DENISE: It is getting more difficult for reps to see doctors in the US and elsewhere. Yet Pfizer France doesn't seem to have this problem. Can you explain why?

ANNICK: I know that this will surprise you, but we don't think that physician access is a real problem for Pfizer France. With the regular improvement of our content and the implementation of a new approach to our calls last December, our reps can reach an average of 20 minutes per visit, which is double the French average and vastly greater than the US figures. A year ago we decided that the reps would have to re-allocate all their calls because they were both over and under-detailing physicians. Some doctors were seen 20 times a year and others almost never. It's not easy to ask the reps to visit the difficult-to-see physicians more often, but we did, because we felt that there was no other solution.

Our new approach to detailing includes improved content. Eight members from our department are members of a sales leadership team working on "best practices in healthcare," an umbrella concept covering all of our therapeutic areas. The eight include myself, four senior sales directors, the training and development director, the SFE director, and a partnerships specialist who interfaces with external influencers. We work on the content and impact of each call by making it more relevant to the physician. We also aligned our sales work to corporate communication on "healthy aging."

For the first time in three years the unit market share of nine-year old Amlor/Norvasc is rising.

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DENISE: What do you think of eDetailing, one form of which is video detail set up by appointment with the doctor?

ANNICK: We have tried eDetailing. But we find that only a very small number of doctors are ready for it here. The face-to-face call has a much greater impact. Even "saturated" physicians still accept reps, so there must be a need. However, we are not technology laggards. We were among the first sales forces to use a PDA and we have a very good PDA-enabled ETMS.

DENISE: When did you first think about leaving HR for Sales? Are there many female VP's in France?

ANNICK: I came into sales as a district manager at age 26, without direct field experience, which is

rare and went on to become sales director. From there, I joined HR. When the VP of Sales opportunity came up, I had been VP of HR for two and a half years, but I had always found sales very interesting, so I accepted the new challenge. Sales, after all, is the operational side of HR. The best HR directors come in from operational responsibilities, as does our current VP of HR. As to women head of sales, I am aware of one other in the French pharma market. We don't yet know each other.

DENISE: Annick, any concluding words?

ANNICK: The few years following the mergers were quite difficult. But I can see now that everything is easier because we are building from success.

Pharma Marketing News

Women in Pharma

Originally posted to Pharma Marketing Blog, November 30,. 2005.

If you want to focus on women as an asset to your business, then look at what women can actually do really well that male leaders struggle with:

- Link [rather than rank] workers;
- favour interactive-collaborative leadership style [empowerment beats top-down decision making];
- sustain fruitful collaborations;
- comfortable with sharing information;
- see redistribution of power as victory, not surrender;
- favour multi-dimensional feedback;
- value technical & interpersonal skills, individual & group contributions equally;
- readily accept ambiguity;
- honour intuition as well as pure "rationality"; (this is one of my personal favourites, but as a male, most women already knew that)
- inherently flexible;
- appreciate cultural diversity.
- -- Brian Towell

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Resource List

The following resources were consulted in the preparation of this issue or cited within this issue.

- "FDA Issues Advice to Make Earliest Stages Of Clinical Drug Development More Efficient," FDA Press Release announcing steps to advance the earliest phases of clinical research in the development of innovative medical treatments. http://www.fda.gov/bbs/topics/news/2006/NEW01296.html
- Public Hearing on CDER's Current Risk Communication Strategies for Human Drugs, December 7-8, 2005. The purpose of the hearing was to obtain public input on CDER's current risk communication tools, identify stakeholders for collaboration and implementation of additional tools, and obtain greater understanding of the strengths and weaknesses of CDER's existing risk communication. http://www.fda.gov/cder/meeting/RiskComm2005/default.htm

Experts Consulted and/or Cited In Articles

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