



Background

In any industry, a situation could arise that may threaten to harm people, interrupt business, damage reputation, and/or negatively impact the bottom line.¹

Crisis management is the “holistic management process that identifies potential impacts that threaten an organization and provides a framework for building resilience, with the capability for an effective response that safeguards the interests of its key stakeholders, reputation, brand, and value-creating activities as well as effectively restoring operational capabilities.”²

Successful crisis management involves understanding how to handle crisis before they occur. This includes diagnosis of impending troubles or danger signals, choosing turnaround strategies, and implementing change processes and monitoring.

Sharing best practices may allow for medical information centers to better prepare for potential crisis events.

Objective

The purpose of this study was to survey medical information centers on the resources available and the processes implemented during the event of a crisis.

The data may be utilized to evaluate the current readiness of medical information centers and to determine best practices for crisis management.

Methods

This is a descriptive study that utilized an anonymous web-based survey disseminated to medical information personnel at 24 pharmaceutical and biopharmaceutical companies.

Recipients were given two weeks to complete the survey, with a reminder e-mail sent after one full week.

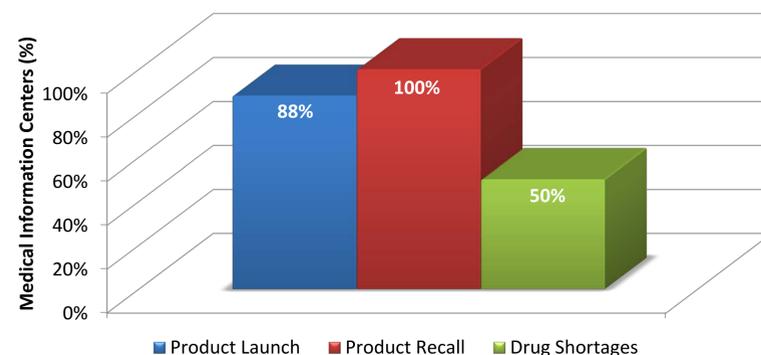
Survey questions assessed availability of resources, representation in crisis management teams, implementation of crisis management processes and timelines.

Results

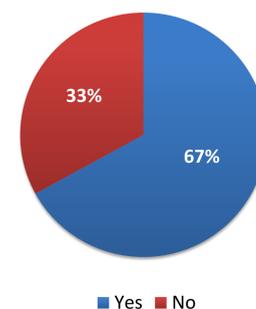
Of the 24 industry representatives contacted, 42% responded to the survey (n=10). Response rates for each question varied. Information provided from each respondent was included in the analysis.

Results (continued)

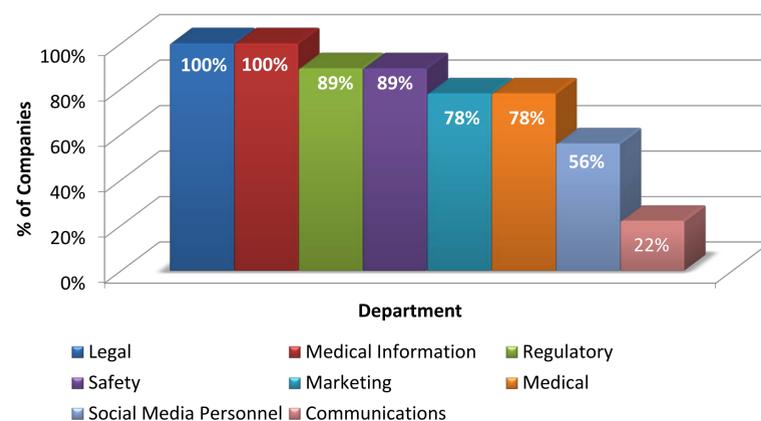
Contingency Plan Based on Type of Crisis (n=8)



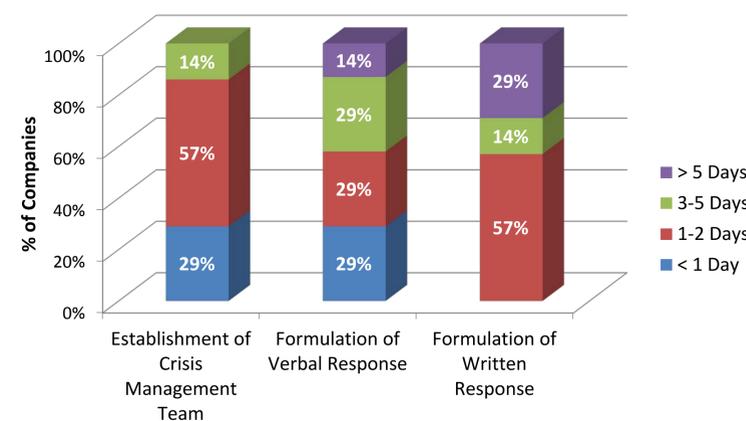
Process Implementation Resulting from Past Catastrophic Event or Media Crisis (n=9)



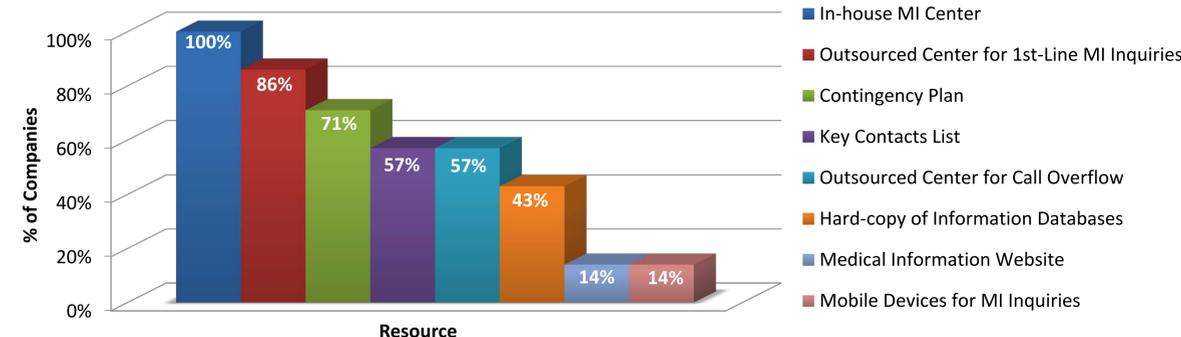
Crisis Management Team Representation (n=9)



Average Time to Response (n=7)



Availability of Resources to Medical Information Centers (n=7)



Results (continued)

Average Rank of Resources (n=7)

Resource	Average Rank
Contingency plan	2.1
In-house medical information center	3.3
Outsourced center for 1 st -line inquiries	4.2
Outsourced center for call overflow	4.3
Key contacts list	4.4
Hard-copy of information databases	4.4
Medical information website	5.0
Mobile Devices for medical information inquiries	6.3

Limitations

Due to a limited sample size, substantial conclusions cannot be drawn that would be applicable to all pharmaceutical and biopharmaceutical companies

Due to the nature of the web-based survey, resources available to some medical information centers may not have been captured or ranked appropriately

Conclusions

Although all medical information centers included in this survey reported having contingency plans for product recalls and most reported having contingency plans for product launches, only half reported having contingency plans for drug shortages.

One-third of all medical information centers included in this survey do not have processes implemented as a result of a past catastrophic event or a past media crisis.

Respondents ranked hard copies of information databases, medical information websites, and mobile devices for medical information inquiries as the least important resources in the event of a crisis; however these resources were available least frequently to the medical information centers.

Disclosure

The views and opinions expressed in this poster are those of the individual presenters and should not be attributed to Sanofi.

References

- Mohan SC. Routes of Crisis-To Understand and to Underline. Research Journal of Social Science & Management. 2013 Feb;2(10):67-73.
- Organizational Resilience: Security, Preparedness, and Continuity Management Systems-Requirements with Guidance for Use, ASIS SPC.1-2009, American National Standard. ASIS International. March 2009.