

In-Depth Look at Medical Meeting Content: What Drives HCPs to Attend, Engage, and Learn



In the everchanging world of health and medicine, new breakthroughs in treatments, drugs and devices emerge daily. To keep up with it all, Health Care Providers (HCPs) are in a constant state of continuing education. And they love it.

“I’m a total nerd. I like quizzes. I like [laughs] to ask questions...It’s one of the reasons I chose to be a doctor. I just can’t get enough education.”

Meetings play a vital role in an HCP’s career-long quest for education. To that end, they have access to countless opportunities to learn at meetings and conferences as well as online. The number of interactions with HCP learners has grown 37% over the past decade. In 2017 alone there were approximately 1,800 accredited Continuing Medical Education (CME) providers that offered close to 163,000 educational activities¹. This report will explore in-depth what impacts HCP consideration for attending medical meetings and what matters most to them about content and meeting design.

Why Not Another Survey?

There have been several studies published in recent years that detailed HCP preferences for meetings. In our own 2016 Doctor’s Order Study, we learned that HCPs often attend meetings to gain access to new information and continuing education. Forty-four percent of those surveyed preferred educational sessions offered by a practice, university, or hospital compared to other learning sources such as medical journals and websites. Thirty-eight percent preferred pharma company sponsored meetings and educational sessions. To dig in even further and to truly hear from the HCPs as people making these decisions rather than only data points, we decided to take a qualitative approach to uncover deeper nuances about meeting preferences.

We conducted in-depth interviews with 12 HCPs across specialties in North America and Europe to hear in their own words how they learn about medical meetings, decide which ones to attend, what their preferences are for content and the meeting format and what entices them to return to the same meetings again and again. Unless otherwise noted, all quotes in this report are from these in-depth interviews.



STUDY FINDINGS: How Do Physicians Decide Which Meetings to Attend?

To better understand how HCPs decide to attend a meeting, we asked them to share their thoughts on various consideration factors including the meeting invitation and meeting type, destination, the reputation of a meeting, policies, and funding as well as a range of questions about meeting content.

What we learned is that, of course, HCPs have many things competing for their time. They take patient care seriously, which is why they prioritize attending meetings for continuing education to improve patient outcomes. They don’t just attend *any* medical meeting though.

Of all the consideration factors, HCPs place the most weight for their attendance decision on the meeting’s reputation. Reputation has layers of complexity, but we learned HCPs believe that a meeting’s content—which is a combination of knowledgeable speakers and the latest research and insights—is the strongest influencer of its reputation.

The other strong consideration factor is the proximity of the meeting. Given all that’s on their plate, their goal is to minimize time away from home and their work.

So Many Invitations

On average, HCPs receive 16 invitations to medical meetings a year and attend roughly eight meetings according to our 2016 Doctor's Orders Study. Many of the HCPs we spoke with said they are receiving many more than that, some stating they receive invitations daily, especially to dinner meetings.

"I estimate the number of promotional e-mails I receive across all types to be about 40 a day on average. I would say that probably anywhere between two to five of those is some sort of event or meeting or conference or seminar."

Key Takeaway:

It's important that your invitation breaks through the noise and the HCP's inbox. Focus on the meeting topic and include prominent speakers by name. Pay attention to what subject line, time of day, and format gets the best response. Also consider cultural norms. In some countries, the expectation is that an invitation will be mailed or delivered in-person.

Meeting Type Matters

Each of the HCPs we interviewed had a slightly different preference about the type of meetings they prefer to attend. In many cases, time away from home and patients was the main consideration.



Local meetings were often preferred because they are closer to home and require less time away from family and their patients.

"Personally, I have a young daughter at home so to go further afield is quite difficult. Many of my colleagues quite like to go abroad for that because they can have a little bit of a holiday at the same time, but for me personally, it would be to stay somewhere in the UK."



Dinner meetings were less popular among some because they are often at the end of a physician's long day at work.

"Yes, lots of dinner meetings. You see, it's a long day for us...and I only want to go home. I don't go to dinner meetings."



Pharma-sponsored meetings were viewed as valuable sources of information, but some HCPs wonder if the content is truly objective.

"Pharma companies also give us good information in their meetings but sometimes, it is more towards their drug. It's a marketing thing too."

"I think as long as a learner is aware that, 'Hey, you try to take this with a grain of salt. This information is coming from somebody that has a profit motive.' That doesn't mean that what they're telling you is incorrect either."



National/International Congresses are viewed as less biased and more focused on a specific topic area. They are also a good place to meet new people in their area of study.

"I like all these national meetings because, they get to the nits and grits of a topic... it's a common meeting and mostly they are not biased."

Key Takeaway: Understand the needs of your target attendees and how they align with the goal of the meeting. For example, a local meeting means less time away from the office, but the content may not be as targeted for their specialty as a larger, national or international meeting. Consider adding sessions that provide more depth in a topic area and increase the quality of your speakers to enhance the appeal. Also, be mindful that when sponsoring an HCP, the content needs to be objective and the data needs to be transparent to ease any worry about bias.



Destination

Similar to the findings about meeting type preferences, many of the HCPs we spoke to echoed the sentiment that proximity to home influenced their destination preferences. When staying close to home is not possible, HCPs are more enticed by an exciting city and nice venue.

“I typically am going to at least one of these events a month. Sometimes two. Really, proximity and accessibility is more heavily prioritized than travel interest per se.”

Many of the HCPs were concerned about the optics of leisure destinations and international conferences.

“In private practice, I used to go to the ESMO meetings in Europe, but not anymore. My hospital would not approve of the CME if you go out of the country. They say, ‘There are so many meetings within the United States. Why don't you attend those meetings rather than go outside the country?’ They're not going to buy a meeting in Barcelona.”

“It might be convenient to say, ‘I'm going to go to the Caribbean on my CME,’ but I'm not so sure that that would fly with my company. You've got to be reasonable about it. Especially if somebody else is paying—you have in your contract that you're going to get so much for CME, you don't want to abuse it either.”



Key Takeaway:

A nice destination and venue will add appeal, but should be chosen cautiously with optics in mind. If you are sponsoring an HCP, be sure to abide by your local regulations on what is allowable for meeting extensions. In many cases, booking travel beyond the dates of the meeting is not allowed.

Reputation: Word Spreads Fast

Reputation plays a big role in the selection of which meetings to attend. Not surprising considering the many pulls on their time, HCPs were more willing to attend conferences known for delivering on their promises. They value meetings that are known for being well organized, with good speakers, and delivering valuable content year after year. Typically, these were national or international congresses.

“That’s the thing, I think the key is that if you run a really good meeting, you’re going to be well attended for a long time. Because word gets out very quickly. If you run a very poor meeting, it will take you four or five years to recover. Because word gets around that fast.”

“The ASCO Annual Meeting, you will see a lot of the ground-breaking presentations that most of the time is not in the publication yet but we know is coming.”

Key Takeaway:

Make your meeting memorable. This can be challenging year after year, but keep focused on quality content and top-notch speakers as they often make the biggest impact. Post-event surveys can be a useful way to understand how attendees experienced your meeting, and what they may be telling their colleagues.



Policies & Funding Largely a Non-issue

While HCPs have an awareness of regulations like Transfer of Value (ToV), Sunshine Act, and EFPIA HCP Code, they don't have much insight into what gets reported by Pharmaceutical companies. However, there was a strong understanding among the HCPs we interviewed of how medical meetings have changed since increased regulation. In some ways, it relieves the burden on the HCP to justify attending, especially for CME.

“From a Pharma standpoint, they've certainly changed the way they present conferences. I don't even think you need the word spa anymore. If the hotel happens to be a hotel and spa, you can't say that, just because of those laws. There's been a lot of change for sure in the last 10 years with that stuff and how it's presented.”

The organizational policies and guidelines about medical meeting attendance varied widely. Some organizations required their HCPs to seek approval to attend all meetings, while others only had to if they were using organizational funding.

“I have been to certain events that have been sponsored by medical device companies. They'll usually cover the cost of the hotel or a flight. The University knows because they have to approve of it, so it's already noted. Regarding Sunshine Act and looking back, it's usually non-issue.”



Even with regulations in place, some medical organizations are still concerned about the intentions of pharmaceutical-sponsored meetings. One HCP reported that his organization discouraged residents from attending these meetings.

In some cases, HCPs seem to be more open to sponsored meetings than their organizations, noting that there can be mutual benefit between doctors and pharmaceutical companies. Ultimately, HCPs value the opportunity to get CME and exposure to other experts in their industry and noted that their patients rarely ask them about their relationships with pharmaceutical companies.

“In the last couple of decades, the industry has tended to vilify the efforts of the corporations that manufacture products that we use. We cannot change the fact that without their products, we really can't work.”

“The fear or the concern amongst academic programs is that residents are going to be too easily swayed by corporate interests. I actually disagree with that. I don't think that that's preparing your residents to be real-world physicians.”

Key Takeaway:

While HCPs may not feel they need to know the ins and outs of pharmaceutical meeting regulations, rest assured they appreciate the due diligence required. Knowing that pharmaceutical companies are taking measures to provide a compliant meeting with compelling educational content makes it easier to build a case for attending within their own organizations.

STUDY FINDINGS: Content Reigns

A meeting that consistently delivers solid speakers, presentations, and experiences is one that earns a good reputation. We heard over and over from HCPs that a meeting's content—or what the HCP can learn—is what excites and energizes them to attend medical meetings. In our previous study, HCPs cited content for two of the top three most important considerations when deciding whether to attend a meeting—access to new information and the opportunity to earn CME credits.



Speakers and Topics

HCPs value speakers who are not only credible, published, key opinion leaders in their field, but also ENGAGING public speakers who will be able to hold the audience's attention.

“I think the key is that you've got to do your research and get good speakers. If you don't, you only get away with that once. The things that hurt you—speakers, and the same content over and over every year.”

“I think the big cardinal sin, what everybody just hates, just cringes, is when someone stands there and reads a slide. You've lost them at the second slide.”

No matter how established and engaging a speaker is in terms of public speaking ability and interaction during the presentation, the topic needs to be interesting and relevant. Resoundingly, the HCPs we interviewed were looking for clinical applications they could take back and apply with patients and share with their practice. They have an expectation that they'll learn a new technique or treatment at the meeting.

“I'm a clinical oncologist, I'm not into a lot of research oriented things. If there is a particular drug that I'm following or I have a particular patient in mind and there is a clinical trial, I might go to the meeting. Mostly, I go to learn what is new in the common cancers, what is new in lung cancer, what is new in colon.”

Surprisingly, many HCPs also valued hearing about topics that aren't directly related to the medical field. They cited out-of-the-box topics such as administrative needs around billing, coding, changing healthcare reimbursement patterns, and identifying human trafficking, among others. One HCP noted the increase in content around coping with stress.

“Most recently there's been a lot of talks on physician burnouts, stress, coping mechanisms, ergonomics. Especially for surgeons about the physical strains and ergonomics of the job, so that's interesting. In particular, there was one session that used different sensors on the body during an operation to see how we put certain pressure and stress on the neck, the shoulders, the hands, and how to alleviate that during an operation.”





Check Those Facts

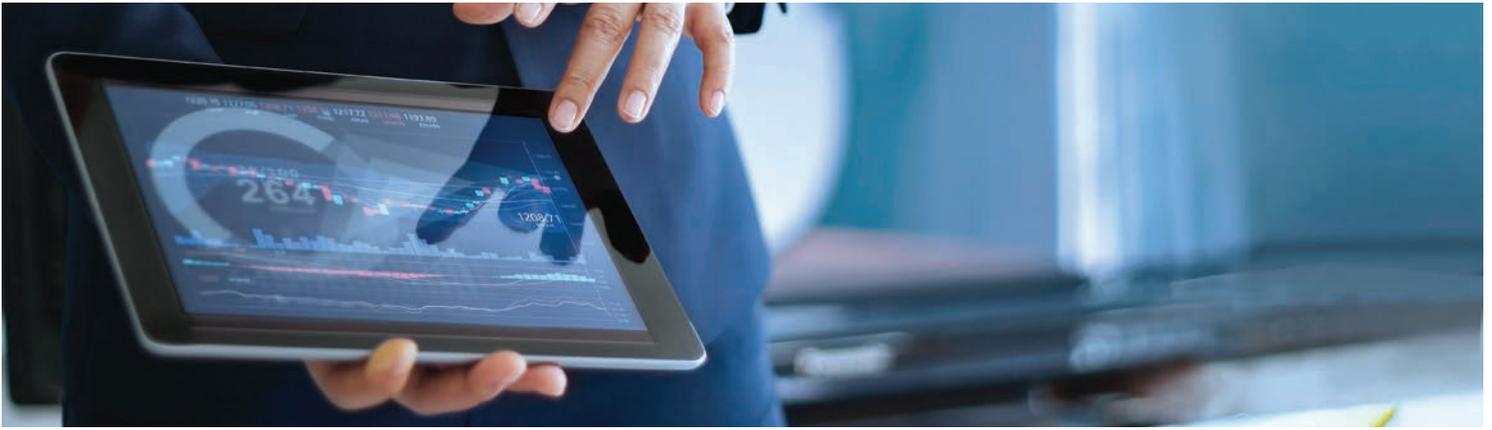
As might be expected with HCPs, validity of data being presented is top of mind. Many HCPs want to have easy access to the data being presented so that they can review it before or after a session. They feel compelled to ensure the data adds up and to verify that reputable sources were used to compile it.

“We spend so much time to attend a meeting, meeting organizers have to make sure that the speakers are credible, unbiased, and present published, high-quality data that are important for us to know, not just so their drugs will sell better or to influence a prescribing method.”

“I would not take everything 100%, I would use my own judgment.”

Key Takeaway:

Invest in the main speaker to pique interest. The speaker should be well known in his or her field and an engaging presenter. Plan a few sessions around uncommon topics that HCPs won't find in a medical journal such as ergonomics, insurance billing and coding or even topics related to stress management.



STUDY FINDINGS: Meeting Design Brings Content to Life

Meeting design is all about how the content and experiences are delivered to attendees. An unforgettable meeting has a certain “wow factor” that’s usually a combination of great content that is delivered in a memorable way. The HCPs we spoke with cited numerous examples of specific experiences they had at medical meetings. Their memory of the details illustrates the power of meeting design.

Live Demos & Hands-on Elements Are in Demand

HCPs are looking for quality data, but they also are looking to be entertained. They are more interested in attending presentations that include interactive, hands-on elements and even humor where appropriate. Live demos or recordings of new devices or new techniques are most sought after.

One surgeon noted a demonstration that used virtual reality to navigate vessels, which is not something being used with patients yet, as an example of a very future-looking procedure that was popular with attendees.

“Hands-on demonstrations are becoming more frequent, but you have to keep your eyes out to look for them. They are available, but they tend to be booked up pretty quickly because they're quite popular.”

“I was recently in Las Vegas in March for a Society of Clinical Vascular Surgery meeting and they do a very nice involved hands-on demonstration. They have a lot of booths set up, displaying different types of catheters and stents and devices, so it's nice to see all that.”



Traditional Formats Still Appreciated

HCPs outside of the surgical field noted a preference for more traditional session formats, such as moderated panels or teaching presentations. They like to have a structured platform to hear other opinions and observations from fellow HCPs.

“What I find particularly useful is where you’re able to interact with the speaker or ask questions...They’ll have a patient case. They’ll go through the case and ask everybody’s opinion and what they would do for the outcome. It’s quite interesting to see the general consensus from the audience.”

The Value of the “Curbside Consult”

Thinking beyond a meeting’s sessions, HCPs value opportunities to network with other attendees and speakers. Perhaps surprisingly, many of the HCPs we spoke to were not interested in networking to advance their career. Rather, they cited networking as a critical way to get ad-hoc advice from peers or experts in their industry about a treatment or patient case.

Interactions like these are what make meetings important—medicine is not a black and white practice—there is a lot of nuance and art in how HCPs approach treatments. Most importantly, HCPs aren’t just attending meetings to gather information, they are looking for ways to have a positive impact on an individual life. They are committed to and passionate about improved patient outcomes and highly value having informal opportunities to discuss gray areas or new ways of thinking.

“It’s like a curbside consult. We do it all the time. If you see a well-known figure sitting and having coffee, they will swarm like bees. All of us will be there asking questions. This patient has certain complications, what do I do? It’s important for us.”



Key Takeaway: Content is the most critical element to attracting and retaining HCP attendees. To truly stand out, consider a mix of delivery methods for session content such as out-of-the-box learning environments, live demos and hands-on elements. Consider including sessions that allow for two-way interaction among speakers and attendees as well as attendee-to-attendee interaction. Build in more workshopping sessions to share advice on cases and provide plenty of time in the agenda for HCPs to consult with peers.



Get Mobile

The HCPs we spoke with viewed mobile and social channels as pertinent to a good meeting experience. They noted audience interaction and voting within sessions as effective ways to enhance a presentation. They also highly value having all the meeting information in one place, and noted unique features, such as continuing education quizzes built in that could be completed right after the presentation. One HCP spoke of a very personalized experience, a mobile app feature that tracked everything he participated in—presentations, booths visited, contacts made, etc.

Many HCPs spoke about the importance of a holistic app—for use before, during, and after the meeting. Most importantly, they expect to be able to access all session presentations during and after the meeting.

“Sometimes you can gain access to the actual PowerPoints used in the presentations. When that's not a feature, that's annoying because especially if I'm paying to be there, I feel like I shouldn't have to spend my time taking notes. I expect to be able to just be focused in the moment and not have to feel like I'm a kid in college again writing notes and getting distracted by writing notes.”

“I'm also expected to be able to bring something from those experiences that I can take back and share with my colleagues in the form of a presentation over lunch.”

One HCP noted Twitter as an effective social media platform to get a pulse on other attendees' views and comments on a session. Social media sharing is good not only for attendees who may want to check it out, but also as an immediate way to share with colleagues back home.

Key Takeaway:

Offer attendees a mobile event app to access session content and make sure the session presentations are available the day of the session as well as after the event. Include any studies or reports referenced during the sessions so that HCPs can review the data's validity on their own time. Lastly, a mobile app can go a long way in personalizing the meeting experience for the HCP.

Conclusion

HCPs are arguably one of the toughest crowds for meeting owners. It's understandable that they have high expectations for education considering they've spent more time in classrooms and as residents than many other professionals. HCPs are committed to helping their patients and success requires they stay informed of the latest medical guidelines, treatments, and trends.

So, how do meeting owners triumph over these high educational expectations and the significant demands for a HCP's time?

During our in-depth discussions, we learned that a meeting's reputation is one of the most important consideration factors. HCPs place a strong emphasis on attending meetings that are known for their consistently good speakers, engaging sessions and workshops, and overall meeting design. Therefore, meeting content should be a high priority for medical meeting owners. Another unexpected learning was, in fact, a reminder. A reminder that meetings are about connecting people, and for HCPs, these connections result in saving and improving individual lives. Whether making time in a busy schedule to attend a local meeting or dedicating hours of travel, sometimes across borders, to get an expert opinion at a congress, HCPs are committed to patient outcomes. To be successful, medical meeting owners should strive to create an experience that will best facilitate top HCP objectives—continuing education on new drugs and procedures and getting advice on difficult cases.

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1. ACCME Data Report: Growth and Diversity in Continuing Medical Education—2017, <http://www.accme.org/news-releases/2017-data-report>



MEETINGS & EVENTS

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