Inaugural Healthcare Meetings Forum Asia 2014

The Future for Medical Meetings in Asia

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1ST AUGUST 2014

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Challenges ahead for meetings in the healthcare sector

The inaugural Healthcare Meetings Forum Asia held on Friday August 1st at Suntec Singapore was over-subscribed, an indication of the intrigue and interest created by the forum's content. The steering committee remained true to their commitment to promote evidence-based dialogue, access to experts and the involvement of all stakeholder groups.

With an overview of US & European regulations setting the tone for the day, the focus shifted from West to East as speakers from Johnson & Johnson and AstraZeneca shared perspectives on existing regulations in Asia. The increased overlaying of process and procedure from companies headquartered in the US and Europe might accelerate understanding of and compliance with regulations, but it is also at risk of detracting from the significant challenges and painstaking work associated with a healthcare system in Asia that is neither complete nor optimal.

The second session explored the correlation between corporate strategies for medical meetings (predicted change in size, format and funding), the demands of healthcare professional attendees (education not promotion) and the expectations of the local regulator, SAPI. Of the polled participants, 75% had either not read, or not even heard of the latest release of the SAPI Code of Marketing Practices, a startling statistic that would lead the SAPI representative to call for a behavioural change at the regulator, from passive to proactive and partnership-driven.

Assessing the evolution of medical congresses in Asia, there was a clear call for an improved focus on CME and CPD accreditation as 98% of the audience agreed with the perspective that delivering education and facilitating best practice should be top priorities for all stakeholders. With expected changes to the congress funding model, declining corporate sponsorship will act as a catalyst for creativity among associations, putting patient outcomes centre stage, rather than a limited focus on association member skills and knowledge, will help secure continued self-regulation. With the notion that content is king, forum partner SpotMe explored the shift from didactic lectures to audience engagement. With 2014 described by LBi Health, a multichannel healthcare marketing and technology agency, as '…the year of the digitally native HCP', expectations now are for everything from user-generated, user-contributed and even playful content, to immediate results and messaging free from commercial bias.

Commenting on the forum, steering committee member Richard Parker, Director of Healthcare Strategy at Zibrant said, 'After the success of the 2011 and 2013 forums in London, it became clear that there was a global enthusiasm for similar dialogue and this inaugural forum in Asia was the logical next step given the demand for increased awareness and understanding of regulatory codes in the US and Europe. The European steering committee was pleased to partner with Suntec, who shared our appetite for promoting education, discussion and networking among all stakeholder groups. Similar to previous experiences, attendees, speakers, panellists and partners have commented favourably on the inclusive nature of our format. It is one we will continue to protect as we develop forums in other regions.'

Mark Handforth, the host of the Forum commented, 'It is clear that the global rise of compliance to regulatory code is going to increasingly affect the Asia region, and along with budget pressures our audience was clear in that fact, just as it has in the US and Europe. The lack of knowledge and leadership of a single entity to guide all the players in the region will mean that there could be pain ahead, as industry implements regulatory policies, medical societies re-model their funding approach and Healthcare Professionals see changes to how their education is provided. If the Healthcare Meetings Forum taught us anything in answering the title of the meeting "The Future of Medical Meetings in Asia", it was the importance of dialogue between all parties to find the common ground we saw in the room, to create initiatives to simplify and encourage good ethical scientific communication.'

Planning is already underway for the second forum in 2015, and parties interested in joining the steering committee are encouraged to make contact with **Mark Handforth**, **Richard Parker** or **Bibiana Lau**.

What does 'regulation' in the healthcare industry mean and why is it important?

Session one of the day's proceedings concentrated on the global perspective for medical meetings, looking through the window at the regulatory environment developing in the US and Europe and challenging this picture with a sense of how this was being shaped in Asia.

The following areas were covered:

- Why do we have regulatory code?
- How is regulatory code in the US and Europe increasing in-depth and broadening to include further areas of scope?
- The challenge of implementing across borders
- The cultural, social and healthcare systems in Asia and how these should drive corporate thinking for patient care and the implementation of regulatory code.

Session Summary

Mark Handforth, a member of the Healthcare Meetings Forum Steering Committee and a founding Director of Healthcare Venues presented the compliance view from the US and Europe, with Mr Vaidheesh Annaswamy, Vice President Corporate Government Affairs APAC for Johnson & Johnson concentrating on the Asia region. They were joined on the panel by Dr Ronald Yeoh - FRCS, FRCOphth DO FAMS Consultant Eye Surgeon, Singapore National Eye Centre and Secretary Asia Pacific Association of Cataract and Refractive Surgeons and Mr WONG, Chae Sing Compliance Director ASIA for AstraZeneca.

The session brought an overall sense of concern that a **Western style compliance template would and does not fit easily within Asia** from a Social, Cultural and Healthcare system perspective as it stands today. Vaideesh Annaswamy spoke from 30 years experience in the healthcare sector, the majority of which has been in the Asia region, about an incomplete healthcare system where morbidity and mortality rates, the lack of capacity in terms of patient care pathways and healthcare providers should be the top tier agenda point for all stakeholders. He suggested that the focus on the efforts required from all stakeholders should be with **the goal of increased patient care and treatment access** in mind and posed the question as to whether this should be put at risk against the development of a potentially complex regional compliance culture **when the dynamics of the region are at a different stage of development.** However, fair and transparent healthcare compliance principles are critical for all the stakeholders and in particular for the benefit of the patient. **Certainly a cookie cutter approach was likely to be ineffective.** Dr Yeoh echoed this position and counselled considered action and care in how Asia takes up and deploys compliance thinking and referenced the past, stating that as someone who had organised many meetings, he now had an additional elephant in the room, that of regulatory compliance, allied to the existing challenges of programme creation, venue selection and sponsorship liaison. His question was in the form of a plea to industry and all stakeholders to find a simplistic way of **telling him what to do**, namely how the compliance needs of industry can be easily accessed and understood. Ultimately, how can he deliver the education and critical scientific interchange needed and maintain the funding required to do so.

The call for considered thinking was prompted by the increased depth of regulatory compliance in Europe and the US, as presented by Mark Handforth. Asked if similar transparency initiatives would work in Asia, less than a third of the forum audience was positive, and almost half was unsure. Of significance, there was a balanced split among corporate representatives answering 'Yes' (31%), 'No' (31%) and 'Unsure' (38%). These telling statistics paint

a picture of uncertainty in the region, further supported by 70% of Medical Society/HCP respondents selecting 'Unsure' as the most accurate reflection of their current thinking. Put in perspective against other drivers for industry challenges, such as the funding for new drug development, clinical trial result transparency and the task of reducing counterfeiting.

Handforth was clear in his assertion that **Regularity Compliance was increasing in breadth and depth** and traditions were being cast aside to create a new dynamic between all stakeholders involved in medical meetings: medical societies, industry, healthcare professionals, specialist agencies and the extended supply chain. This new dynamic challenged what was appropriate in terms of the provisions from industry, be it financial or content, at meetings such as congresses in the form of exhibits, symposia, posters, or even at their own hosted events now focussing on the goal of optimal scientific interchange. He presented the complexities for healthcare and lifescience companies in the interpretation of regulatory authority codes, and how these sometimes for example resulted in confusion for the supply chain in terms of how an individual or organisation might differently interpret something as simple as the use of a venue. A review of transparency laws, namely the Sunshine Act / Open Payments regulation, and the drive in Europe for similar transparency on the Transfers of Value between HCP's and Healthcare organisations (e.g. medical societies) created some debate, with Dr Yeoh being clear that though he personally did not have any issue with the principle of transparency, it seemed a radical step and out of line with how he felt progress would be made to build an affective collaboration with good science at the tip. Mr Wong reminded us that in poorer countries such as Cambodia, HCP's were desperate for support to be able simply to practise medicine to a basic level.

So with simplification in mind it was interesting to hear from Mr Annaswamy that there were many other codes of conduct in the region, all focussing on behaviours, ethics

Fig 1. Audience response feedback at HCMF14 – ASIA

Fig 2. Compliance maturity in Asia summary from HCMF 14 – ASIA

Compliance Maturity in Asia

Singapore

Well evolved healthcare system and keen to raise the standards of compliance.

China/Korea

There is a great effort and commitment from the government to bring in the compliance culture across the healthcare ecosystem.

Malaysia/Thailand

Good working healthcare system focussing on affordable healthcare is ramping up efforts on healthcare compliance.

Indonesia/Vietnam

Early stages of healthcare systems development and need for education on raising standards on healthcare compliance.

Cambodia

Fundamental underpinning of healthcare system needed to get established and hence compliance awareness and education is essential.

and business best principles. The APEC business code of conduct and ethics, to be released in November in Beijing, is a good example wherein multi-stakeholder engagement results in an appropriate agreement and alignment on principles. Added to this, cultural diversity is to be considered into perspective should codes be harmonised, and patient centricity is critical for the implementation of principles.

Mr Wong of AstraZeneca brought the meeting into focus with his observations on how to implement policies at the corporate level. He quoted his personal view, coming into the healthcare sector from financial services, that the reputation of it **'being all about parties'** was wrong and that the reality was a compliance system that had focussed on catching **offenders** as part of a KPI structure. The mood now was to break some of the control mechanisms, no small decision for a corporate organisation, with the aim to deliver the simplicity which was workable on the ground, certainly in such a diverse region as Asia. With a business goal of Ethical selling, that vision provided opportunities to focus less on replacing those that **'didn't get it'** but to drive individual accountability at all levels through advanced education. As a region with a reputation for corruption control, mechanisms and transparency were all necessary to retain confidence that business best practice merged effectively with a positive perception of the industry from the healthcare community and general public.

Conclusions

A number of key conclusions emerged from the first session:

- Asia did not have the same healthcare provision as the West, with less human and financial resources and simply less access to treatments that the West takes for granted, meaning that diverting any resources to addressing compliance had to be balanced with the provision of the best possible patient care.
- Asia is a complex and diverse region with religious, language and cultural elements that make a one size fits all regulatory compliance solution similar to the West difficult to envisage.
- The HCP and Medical Society communities need a simplification of compliance codes to allow them to support the overall educational goals, which all parties agree were critical.
- Compliance is becoming deeper and broader, and it is critical for all parties to continue the dialogue to ensure that everyone is talking the same language. If not, the provision of medical information will be at risk and, from that, patient care.

Corporate Healthcare Meetings Matching Future Needs:

What role is the commercial healthcare sector playing in delivering meetings, content and therefore scientific education? Are we still too commercial?

During the second session of the day, Glenn Cross, Head of Strategy & Commercial Excellence APAC, Bayer Healthcare Pharmaceuticals asserted how and why customer meeting formats and frequencies are changing in the commercial healthcare sector in Asia. Associate Professor CHAN Yew Weng, Senior Consultant, Department of Anaesthesiology, Singapore General Hospital articulated what the expectations of meeting content are from healthcare professionals and Miss NEO Kah Yean, SAPI President & Director, Regional Marketing & Integration Lead, Vaccines, Janssen Asia Pacific shared what the regulator expects of its members.

Session summary

Cross outlined the four categories of customer meetings:

- Large scale seminar/speaker tours delivering new information to a broad customer base
- Small scale Advisory Boards and discussion groups delivering complex information and detailed insight
- Sponsored conferences and conventions driving awareness and tactical relationship-building
- Tech enabled meetings providing cost efficient added reach, remain an important part of the traditional marketing mix.

Cross predicts a scaling back of large scale meetings and sponsored convention activity in favour **of small discussion groups and tech enabled meetings as company strategies shift from being sales-driven to medical/marketing-driven**. This seems to be aligned with the expectations of healthcare professionals, CHAN asserting a need for 'education not promotion', with workshop-driven experiential learning and specialist meetings favoured over generalist formats.

Referencing the compliance framework, Cross' view, endorsed by other pharma attendees, was that most of the Asia affiliates of companies headquartered in Europe or the US are comfortable operating in a structured regulatory meetings environment as policies and procedures are increasingly overlaid from West to East, but as was concluded in the first session, religious, cultural and language complexities make a 'one size fits all' regulatory compliance solution difficult to envisage.

Global pharma awareness aside, **75% of the polled audience* admitted to having either no awareness of or having not read the latest release of the SAPI Code of Marketing Practices**. This local industry code, which is kept aligned with the IFPMA code, aims to ensure healthcare and the well-being of patients as the first priority of the pharmaceutical industry and ensure its activities are ethical, appropriate and professional. Members of the Association are obliged to adhere to this Code. NEO urges that, beyond that, wherever possible, companies should ensure decision making associated with meetings should pass the 'red face test'. NEO noted the lack of awareness of the Code and encourages all involved in the organizing of such to familiarize themselves with all applicable codes. She also asserted that SAPI can be more proactive in communicating the code, engaging stakeholders and building partnerships in the process, as more knowledge and understanding of the code, under which many activities and venues are possible and appropriate, will enable informed decision making.

** the audience of 120 attendees represented South East Asia, specifically Singapore. All stakeholder groups were represented; Medical Societies, Industry, specialist agencies, meeting supply chain partners.*

CHAN spoke with passion and pride about his own and others' efforts to bring international medical meetings to Singapore, sharing his ongoing frustration with association models that de-select the destination owing to Singapores limited healthcare community size and perceived influence. On a broader level he shared **a vision of opportunity for world congresses to shift from West to East**, citing the World Congress of Anaesthesiology in Hong Kong 2016, pointing to western compliance limitations and a growth in major clinical trials involving Asia as contributory factors. China though remains a market of concern for the pharma industry and healthcare professionals in Asia. Whilst the absence of a recognised compliance framework offers greater freedom of customer interaction in China, the question remains, 'how can big pharma exert its influence to minimise the prevalence of counterfeiting?'

Conclusions

- Medical meetings in Asia are evolving.
- There is evidence supporting pharma meetings not being perceived as 'too commercial' as their size, structure and messaging change.
- The regulator in Singapore has a self-driven call to act to develop a more active voice and engagement with all stakeholder communities.
- Healthcare professionals have lost none of their appetite to attend the face to face meetings that feed their desire for education and optimised patient outcomes.

What will drive the evolution of medical congresses, what are the factors that will affect medical meetings in Asia, what do we need to embrace to provide viable congresses in the future?

To provide some context and a platform for development of dialogue, Richard Parker, Healthcare Meetings Forum Steering Committee Chairperson and Director of Healthcare Strategy at Zibrant Ltd shared an overview of a similar session run at the London forum in October 2013. Lisa Sullivan, Group Managing Director at In Vivo Communications shared the perspective of medical societies and in particular why their models need to change. Pierre Metrailler, COO at SpotMe majored on creating truly interactive events 'when content is king'.

Session summary

Parker shared with the audience how a focus on 'the patient' had been prevalent in discussions at the London forum, much as it was in Singapore. Drawing on the results of some pre-forum audience polling, Parker revealed that compliance had featured heavily, in particular the lack of clarity and ways in which provisions of European, National and even corporate codes were open to interpretation. Additional scrutiny was given to congress costs and in-person attendance. Of particular note was the message from the European Society of Cardiology who recorded a 28% drop in pharma sponsored HCP attendance from 2009 to 2013 whilst maintaining growth in overall attendance, supporting a notion of increased self-funded attendance amongst HCPs. Polled for their views, the majority of the Singapore audience agreed that healthcare/lifescience sponsorship of HCP attendees to medical congresses is decreasing.

Specific to the notion that changes in funding models in Europe demand a shift of focus for future medical congress formats, sub-specialisation and collaboration among like-minded associations are two approaches being adopted by European societies to broaden the content reach and widen participant viewpoints in an effort to improve perceived value to congress participants. At the same time the future of the exhibit booth is creating interesting dialogue. The forum audience was asked for its views on the importance of exhibit booths to scientific exchange and

Fig 3. ESOT attendee registration income sources 2009-2013

" Attendance at the scientific congress is still one of the most important forums for the pharma industry to be able to engage in a compliant fashion with physicians…

…the patient who's looking for improved outcomes, for better treatment, is going to have an impact on the evolution of the scientific congress, raising the bar of the education that's offered."

Nigel Glover, Takeda HCMF steering committee member

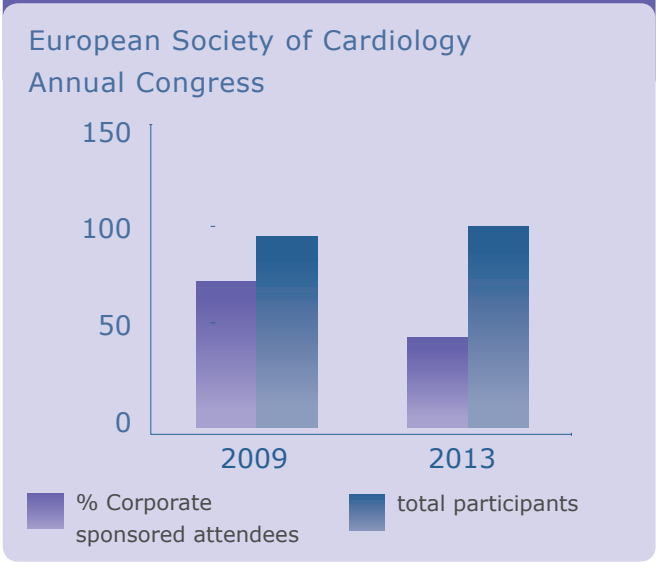


Fig 4. Audience response feedback at HCMF 14 – Exhibit booths as a scientific exchange tactic

To what extent exhibit booths continue to be an important part of scientific exchange

	Medical Society/ HCP	Healthcare Company	Agency	Others
Critical	9.1%	12.5%	15.4%	8.3%
Important	45.5%	25%	38.5%	33.3%
Declining	36.4%	37.5%	30.8%	16.7%
Had their day	9.1%	12.5%	15.4%	33.3%
Not relevant to my role		12.5%		6.3%

Fig 5. Audience response feedback at HCMF 14 – HCP sponsoring by industry to medical congress

Do you think healthcare/ lifescience sponsorship of HCP attendees to medical congress is...

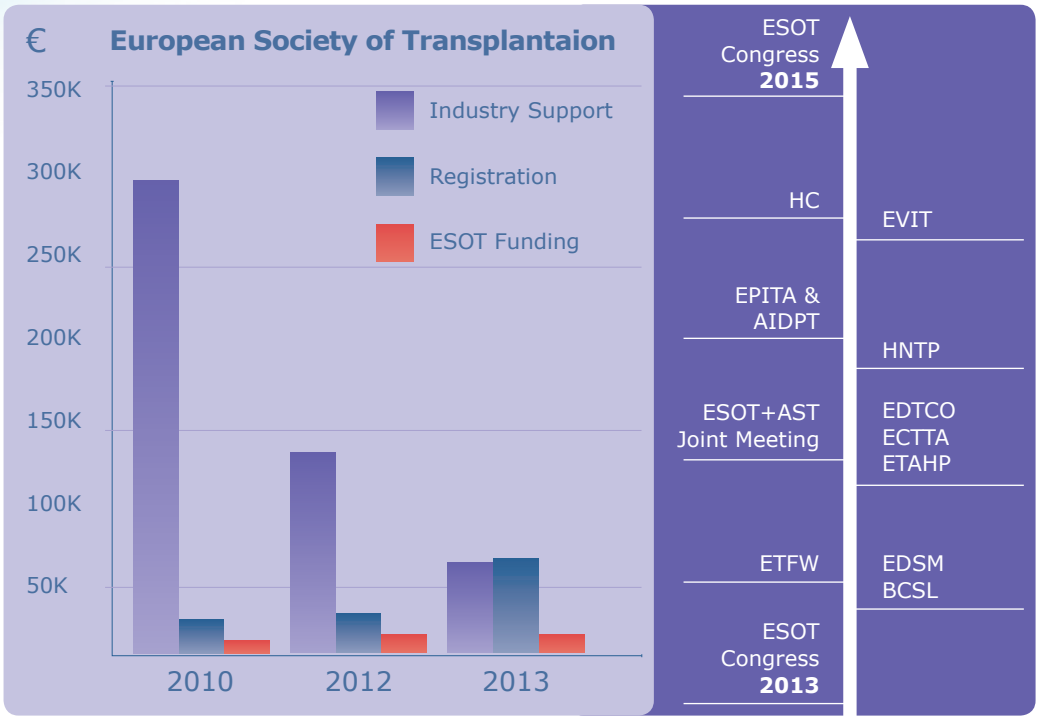
	Medical Society/ HCP	Healthcare Company	Agency	Others
Increasing	18.2%	15.4%		23.1%
Decreasing	63.6%	69.2%	78.6%	53.8%
Static	18.2%	15.4%	14.3%	7.7%
Not relevant to my role			7.1%	15.4%

Fig 6. Audience response feedback at HCMF 14 – Trends in HCP sponsorship to medical congresses

Do you think healthcare/ lifescience sponsorship of HCP attendees to medical congress is...

1. Increasing — **13.5%**
2. Decreasing — **67.3%**
3. Static — **13.5%**
4. Not relevant to my role — **5.8%**

Fig 7. ESOT attendee registration income sources 2010-2013 and indicative activity summary 2013-2015



there was a clear lack of alignment between healthcare companies and medical societies/HCPs.

Given the current prevalence for content repetition and saturation in Asia, the region would appear primed to adopt similar strategies to those in Europe described above. Jeanne Lim, Area MEMS, Asia, Alcon Ltd, a member of the session panel, shared an example of **more than 6 ophthalmology congresses per year in Asia Pacific, not including each country's local meetings, all with (largely) the same audience**. How does pharma judge ROI and decide which of the organisers' requests for sponsorship to support? Certainly there was a reticence to say no, in deference to a call for less frequent meetings on overlapping subjects. Another panel member, Dr Lim Lii, Honorary Secretary Singapore Dental Association, supported this model and gave evidence of her association's large congress being held every two years, interspersed with smaller, niche meetings often in collaboration with other special interest groups to spread cost and encourage attendance. Forum host and panel moderator Mark Handforth identified this as likely best practice, driven by common sense given '…the corporate bank account is not unlimited, everyone has budgets to manage.'

Lisa Sullivan called for an improved commercial awareness among medical societies at a time of diminishing industry funding for international meetings, reiterating the point with a European case study from the Society of Organ Transplantation who are upbeat that they have more than doubled registration income against a backdrop of a two-thirds decline in industry support. Having adjusted their model in that time from a single annual meeting to **'blended learning', a combination of smaller, focussed, special interest meetings and online self-teaching,** has been positive. 'We have to do that in Asia, it's proved extremely successful… the concept of presenting all day is simply not satisfactory for the younger healthcare professional' was Lisa's message.

Sullivan went on to challenge the audience to think positively about **the prospect of consumer company sponsorship** of healthcare meetings. Having successfully negotiated such a funding mechanism, albeit with strict covenants for a healthcare meeting that she is involved with in Australia, she asserted that this 'out of the box' thinking needed broader adoption by medical societies. It was a topic that drew much interest and comment from the floor, and a largely positive poll response, albeit the risks highlighted by a rhetorical question from Parker, '…will pharma sponsors feel their investment in supporting educational content risks dilution alongside a BMW-sponsored cappuccino break?'

As someone who has spent 30 years in the medical industry, Lisa built on a conclusion from the London forum that **delivering education and facilitating the exchange**

of best practice should be top priorities for all stakeholders. She tested the level of audience agreement, with 98% affirming this was correct. As a CME/CPD expert, she commented that '…accredited education is an extraordinarily valuable tool,' going on to say that bothering to deliver high quality education is rewarding, leverages image and value, which in turn increases membership and revenue.

The audience affirmed Sullivan's own view of a direct correlation between increased efforts from societies and associations to develop accredited CME/CPD content that showed patient outcomes and a future rise in pharma industry funding for meetings. Why? Because such a move would enable pharma industry executives to see a tangible, valuable return on their investment for shareholders.

Building on the notion that 'content is king', Pierre Metrailler painted a picture of the changing demographic of HCP meeting attendees. Described as 'digitally native', meaning they have been exposed to digital technology for the majority of their training and careers, this group aged 27 to 46 make up the majority of audiences at healthcare meetings.

Metrailler picked up on content delivery mechanisms and in particular the criticality of interactivity at meetings, given an accepted threshold that audiences have on average a 20 minute attention span. He mapped the content delivery journey that has evolved from didactic lectures heavy on data and slides to behaviourally, cognitively and emotionally engaged audiences who expect to be involved in influencing content, making it accessible to all and free from commercial bias (5 years research by SpotMe of pharma events in Europe with an international audience concluded that as much as 6% of audiences felt content was commercially biased).

Conclusions

- The age of the digitally native HCP is here, for whom user-generated/contributed content with immediate results is king.
- Mandatory accredited CME/CPD in Asia for all HCPs and harmonise CPD rules and credits across borders.
- Asia needs accredited commercial providers of CME to enable the provision of more education similar to that achieved in countries such as the US, UK and Australia.
- Pharma educational grants in Asia with recipients chosen by panels of independent educational experts & independent clinical care experts based only on patient outcomes could be the only way industry & HCP practitioner funding will survive.
- Continuous education and blended learning will replace the annual society meeting.
- Dialogue needs to continue on the subject of consumer company sponsorship of healthcare meetings.

Fig 8. SPOTME Information retention analysis HCMF14 - ASIA

Final Panel Q&A

Our final panel session brought together speakers from the day's proceedings including Prof Chan Yew Weng, Senior Consultant Department of Anaesthesiology Singapore General Hospital, Ms Lisa Sullivan, Group Managing Director - In Vivo Communications and Mr Wong Chae Sing, Compliance Director Asia – AstraZeneca. We were joined by Ms Neeta Lachmandas, Assistant Chief Executive - Singapore Convention & Exhibition Bureau and started our conversation highlighting what it takes for a destination to be at the forefront of medical meetings.

Meetings and Business Events contribute
1.1%
to Singapore's GDP

Ms Lachmandas confirmed that based on the Economic Impact Analysis (EIA), meetings and business events contribute some 1.1% to the total of annual GDP of Singapore in 2012. This is a substantial contribution, and a clear recognition of Singapore as a global and regional hub for travel and meetings connecting Asia and the rest of the world. With medical congresses and meetings being some 20% of ICCA-related events, the medical cluster is an important segment that the Singapore Tourist Board (STB) continues to cultivate and grow. This was echoed by Chae Sing Wong of AstraZeneca, who along with other panel members spoke of the economic and political stability, safety and with some exceptions an infrastructure in Singapore that supports medical meetings in-line with the expectation of the global healthcare industry. As a key economic cluster, Ms Lachmandas confirmed that the Singaporean Government was eager to support the infrastructure and also the development of local knowledge for the local HCP community, whilst at the same time encouraging business travellers to be converted to leisure travellers.

Professor Chan called for the now clear message from the group for talks between key stakeholders, particularly those encouraging scientific content to be delivered in Singapore at a regional level. He spoke directly to the representatives of healthcare companies, directing them to get involved with postgraduate training as a key way of supporting education at the grass roots level, a message Lisa Sullivan was keen to reinforce built into the wider context of the need for an Asia regional approach to Continued Medical Education (CME) programmes, which she passionately hopes to be formally recognised and accredited across borders. Her point was that this would encourage those with the money, industry, to be closer to those that need the money, education providers.

With comments from the floor questioning the need for compliance and it's practical implementation, it fell to Chae Sing Wong of AstraZeneca to remind us all that the activities of the past were being repaired with industry ensuring that ethical selling and non-promotional education were pillars of the modern pharmaceutical company. Compliance was there to ensure that upon scrutiny the intent was clear – **education**, the acts were clear – **appropriateness** and that the role of sales, marketing and medical functions were focussed to these outcomes.

The dialogue of the day made it clear that **there is still a large amount of conversation, consensus and collaboration to be had to ensure that the goal of good quality educational meetings would not be swallowed up by the compliance conversation**. Good sense was counselled and a simplified approach should be developed at a regional level to provide a robust financial base for the future, ensuring continued scientific information was available to the benefit of patients.

Final Panel Conclusions

The Future for medical meetings:

- Good education based on clear needs assessment is a must for the Asia region to improve patient outcomes and provide a collaboration point between all parties.
- An Asia region CME accreditation system recognised by all would improve the delivery of education with content at the heart of the intent behind the meeting, not what in the past was as important, the environment.
- 'Big Pharma' runs the risk of marginalising itself against a more local approach from some companies to compliance. A regional approach is required to ensure a level playing field.
- If compliance is not simplified and consistent, and developed in collaboration with all parties at the regional level, it runs the risk of affecting what should be the primary objective, a focus on the patient instead of the development of a potentially restrictive environment less conducive to high quality scientific information exchange.

Fig 9 Audience response feedback - objectives at HCMF14 – ASIA

To speak to any of our committee members, speakers or panellists please contact

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LinkedIn: groups/Healthcare-Meetings Forum-3857409

About The Healthcare Meetings Forum

The Healthcare Meetings Forum was created by Zibrant who chair the independent steering committee of corporate, healthcare specialist agencies and medical societies. The mission of the meeting is to provide an unbiased view of medical meetings, placing on record the views and evidence of experts to better understand and deliver meetings and events in the healthcare sector.

The Healthcare Meetings Forum Asia

This unique event created by healthcare meeting professionals, for healthcare meeting professionals and associated stakeholders was an inclusive environment for open dialogue on headline topics impacting healthcare sector meetings and created a lasting legacy promoting ongoing discussion and driving best practices. The format allowed for varying opinions and required the audience to engage, speak up and learn.

Steering Committee for The Healthcare Meetings Forum Asia

Bibiana Lau – Senior Director Sales
Suntec Singapore Convention and Exhibition Centre

Bibiana Lau is the Senior Director of Sales for Suntec Singapore Convention and Exhibition Centre. Her portfolio and responsibilities include driving business growth, strengthening Suntec Singapore's sales initiatives and calculated business direction as well as implementing sales strategies and driving sales performance. She is also accountable for enhancing revenue growth in the traditional and new MICE segments of the venue's core business. She joined Suntec Singapore in November 2006 as Senior Manager, Convention Sales and has progressively taken on leadership positions with additional responsibilities over the years. She has consistently achieved high levels of accomplishments. Under her dedicated leadership, the venue has secured and hosted several prominent events, such as the Singapore International Water Week, Singapore International Energy Week, Singapore Garden Festival, FDI Annual World Dental Congress 2009 as well as the International Conference on Emergency Medicine 2010, to name just a few. Prior to joining Suntec Singapore, Bibiana gained over 20 years of MICE industry experience with various companies, such as Terrapinn, Pacific World and also National Kidney Foundation.

Mark Handforth – Director
Healthcare Venues

Mark Handforth is a recognized expert in meetings and events with over 20 years strategic and tactical experience. A career starting in the hotel sector took Mark via a number of operational roles to a position as Director of World Events (now Ashfield Events), a Global Event Management company where he delivered bottom line growth and service differentiation for over 15 years. As Head of Global Events for F. Hoffmann La Roche, Mark was the principal architect to the successful consolidation of above market activities, considered by many to be an industry benchmark, integrating over 35 markets into a centralized solution. More recently he enjoyed a role as subject matter expert at Grass Roots, where he worked with international offices to create an aligned multi-market offer for meetings and events. Mark is a director of 360 Event Consulting, a meetings and events consultancy specialising in the development of regional and national meetings strategies for corporate clients, and also Compliant Venues Ltd and Healthcare-Venues.com, a solution for meeting venues to enable them to work effectively with the healthcare sector.

Richard Parker – Director of Healthcare Strategy
Zibrant

Richard Parker's career has been split equally between agency and corporate sectors with ten years in each and 18 years in total in healthcare meetings management. He is Director of Healthcare Strategy at Zibrant and Chairperson of the Healthcare Meetings Forum Steering Committee. A focus on strategic meetings management programmes, outsourcing and implants in both healthcare and financial services sectors has given Richard unique insights into stakeholder engagement, meetings technology, plus initiatives to maximise both brand projection and protection. A member of MPI and current President-Elect of the UK & IE chapter, Richard is supporting industry efforts to raise the profile of the meetings industry as a professional career choice for young people.