



Ashfield Keeps Specialty and Rare Disease Patients Engaged Despite Stay-At-Home Mandates

April 2020-Fort Washington, PA: Ashfield Patient Solutions, part of UDG Healthcare plc, a global leader in commercialization services for the pharmaceutical and healthcare industry, is experiencing better connectivity with its specialty and rare disease patient client base during a time of restrictions on traditional healthcare ministrations due to the COVID-19 pandemic, resulting in increased rates of patient engagement.

Ashfield Patient Solutions delivers next-generation patient engagement programs via Clinical Educators and patient support programs to patients and their care partners on behalf of its pharmaceutical clients. The programs are built on behavioral science strategies developed in collaboration with MicroMass Communications, another UDG Healthcare company, and patient-centric technology via the company's innovative Trak360 Patient Experience Platform allowing customized omnichannel communication for a cohesive, personal experience.

Virtually all of the patients enrolled in Ashfield's Patient Support Programs are suffering from specialty or rare diseases. As a vulnerable population, even without the COVID-19 risk looming, adherence to prescribed protocols is vital to their well-being. Practically overnight, it became paramount to use virtual interactions to support this population.

Ashfield has always offered virtual patient interactions as part of its service offerings, and all client engagements have had a reliable, virtual back-up plan in the event that face-to-face, personal visits become impossible to implement. Accordingly, when the virus struck, Ashfield was able to pivot to virtual visits immediately, relying on the Trak360 platform to maintain engagement with no special effort from the patient required. The platform connectivity can be fully integrated and launched from the patient profile, and the entire audio session recorded for quality monitoring purposes. Both tele-visits and video visits are possible.

"We initially thought we might have resistance to a virtual support visit from some of our elderly patients, who have historically been reluctant to turn to digital resources," remarked Nareda Mills, President of Ashfield Patient Solutions, US, "But what we discovered is, in fact, all populations were embracing social platforms for virtual interaction to remain connected, which has been further evidenced by the uptick in telehealth visits with physicians."

A case in point is that of an elderly patient/care partner couple who were very concerned about their ability to navigate technology and successfully participate in a virtual training. The Ashfield Clinical Educator made a confirmation call to them the night before their training was to take place and eased their fears by guiding them through the process together. They were delighted

when they saw each other on the screen and happily responded with “Well now, would you look at that? Amazing!”

As patients become increasingly aware that a virtual visit may be their only option, they are embracing the virtual training provided by Ashfield Clinical Educators. In one client engagement, a number of patients were on a waiting list for in-home trainings when COVID-19 social distancing measures went into place. Once patients understood they would be waiting longer for an in-home visit, 56% of the patient pool changed their visit preference to virtual within two weeks. In March, some patients who had opted out of the program actually called back to participate virtually.

One patient commented: “I’m so grateful that you are able to train us virtually. My son has spent almost a month in the hospital and my husband is homebound with heart failure. My hands are full and I’ve got my own health issues. You have reassured me that I can DO this. “

These increases in connectivity and engagement are further enhanced by the Clinical Educators working from home. Specialty and rare disease populations are normally not geographically clustered, putting Clinical Educators on the road for a good part of the day, or on airplanes to cover their case load. Now, working from home, Ashfield Clinical Educators can be more engaged in their actual patient support activities, and the likelihood of reaching the patient who is also at home, is virtually guaranteed. Clinical Educators can actually support more patients in a day and engagement remains high.

Since the pandemic has started, Ashfield Clinical Educators are able to maintain a 100% completion rate, actually increasing outbound call volume by 67%, accommodating and completing more follow up calls. Although Ashfield has not witnessed any strong preference between phone and video trainings, patients with care partners were more likely to choose the video interaction, 54% of these video trainings being done with care partners present, whereas 35% of phone trainings involved a care partner.

Patients requiring self-infusions can be considered a challenge to virtual support visits. However, many conditions are life-threatening without an infusion, and Ashfield is experiencing success supporting these populations with educational videos on how to administer a self-infusion product either by the patient or care partner.

In some instances, the patient or care partner cannot administer the infusion as it must be provided in a medical center of excellence, most of which are now closed. While the industry seeks to establish partnerships with treatment centers to continue providing these infusion administrations, Ashfield continues to support the whole patient – including the psychosocial aspect of maintaining hope while also supporting locating alternate treatment centers to accommodate the patient.

“Our real test in serving this population remains the same, but it is so much more difficult for the patient,” notes Nareda. “It is difficult without a COVID-19 pandemic for someone suffering with a specialty or rare disease to find a primary care doctor who can recognize their condition and provide a diagnosis, and then refer them to the appropriate specialist. Now it is almost

impossible, and amidst COVID-19 concerns, the needs of this patient population are not being addressed at all.”

Having stay-at-home orders eventually relaxed does not necessarily mean a return to pre-COVID operations according to Nareda. “Once members of the household go out into the workplace, they can be putting family members and Ashfield Clinical Educators at risk,” states Nareda. “Clients may want to continue with the virtual support model in a post-COVID world, due to its inherent safety and cost-effectiveness.”

As some areas of the country start to reopen, Ashfield plans to use its Trak360 program to navigate where Clinical Educators can physically go. The platform has a built-in zip code level algorithm that can be used to identify patient areas where face-to-face visits can be possible.

Looking towards the future, Ashfield’s Trak360 platform has a built-in mapping technology which can be programmed to track those who have tested positive for COVID-19. With this feature, Ashfield is in a position to support any plans being discussed by companies and local authorities to monitor and contact trace patients.

About Ashfield

Ashfield, part of UDG Healthcare plc, is a global leader in commercialization services for the healthcare industry. We partner with our clients across Advisory, Healthcare Communications, Commercial, Patient Solutions and Medical Affairs to build creative, scalable and tailored health solutions that are executed flawlessly, to address our client’s challenges and deliver positive outcomes for patients. With more than 7,000 employees, the company operates in 25 countries, delivering services in more than 50 countries across Europe, North America, South America and Asia. It works with more than 250 businesses, including all of the world’s top 25 pharmaceutical companies.

Its mission is to partner with its clients, helping to improve lives by ensuring healthcare professionals and patients get the medicines, knowledge and support they need.

Ashfield provides strategic consulting, audit, advisory, healthcare communications, field and contact center sales teams, in-home and contact center Clinical Educators, medical information and event management services.

For more information, go to www.ashfieldhealthcare.com.

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