ESOMAR 28

QUESTIONS TO HELP RESEARCH BUYERS OF ONLINE SAMPLES

FIELDWORK INTERNATIONAL

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Company profile

Q1. What experience does your company have in providing online samples for market research?

Fieldwork International has been providing quality service and expertise in healthcare data collection since 1992, and has been part of Ipsos MORI UK Limited and the worldwide Ipsos group of research companies since January 2012.

Our services include qualitative and quantitative studies involving healthcare professionals via our global online panel, patient studies, medical translations, and a broad portfolio of healthcare services across all methodologies, including mobile research.

We use our global healthcare panels for both proprietary and third party research which is well supported by our network of local offices.

Our breadth allows us to better understand our clients research needs, across a number of specific divisions.

Our research experts and locally-based support teams are able to provide detailed feedback and guidance on everything from sample sizes and methodology to best approach and regional healthcare systems.

Sample sources and recruitment

Q2. Please describe and explain the type(s) of online sample sources from which you get respondents. Are these databases? Actively managed research panels? Direct marketing lists? Social networks? Web intercept (also known as river) samples?

Fieldwork International has an actively managed research panel of registered healthcare professionals. Registration to our panel is by invitation only, using a double opt-in process.

We encourage organic growth through referrals from existing community members and for additional recruitment we use a team of skilled panel recruitment specialists. On occasion, we purchase lists of verified healthcare professionals from carefully vetted vendors to invite for membership.

At Fieldwork International, we also utilise trustworthy and reliable sample partners from our preferred suppliers list. These suppliers specialise in the pharmaceutical market research sample and have access to high quality panels.

Sample sources and recruitment

Q3. If you provide more than one type of sample source: How are the different sample sources blended together to ensure validity? How can this be replicated over time to provide reliability? How do you deal with the possibility of duplication of respondents across sources?

All Fieldwork International community members are required to agree to data policies which allow us to share identification details with partners for de-duplication purposes. This significantly reduces the risk of respondent duplication, ensuring validity of data. This is a method that can and has been seamlessly replicated across studies and waves.

When commissioning an additional sample partner we provide a clear and accurate exclusion list to allow the sample partner to identify duplicates and exclude from the project sample.

To further reduce the risk of respondent duplication across sample sources, all sample is routed through our in-house system which uses cookies to block the same user completing the study multiple times.

We have vast experience with tracking studies and understand the need to keep consistency of sample, maintaining both the sample source and sample proportions throughout the study lifespan.

Q4. Are your sample source(s) used solely for market research? If not, what other purposes are they used for?

The Fieldwork International panel is used exclusively for market research.

Sample sources and recruitment

Q5. How do you source groups that may be hard to reach on the internet?

We understand that online may not be the best approach for every project and will always advise on the best approach at quoting stage. We take full advantage of the expertise of our 85 local offices regarding the best methodology to be utilised for each target group in their market.

To access challenging target groups we employ telephone and face-to-face recruitment methods. This is particularly useful in emerging markets which are of increasing interest for healthcare research.

We have an extensive qualitative team who have access to a wide network of KOLs, C-suites, Payers.

Q6. If, on a particular project, you need to supplement your samples with samples from other providers, how do you select those partners? Is it your policy to notify a client in advance when using a third party provider?

Fieldwork International only use suppliers listed as approved on our global suppliers' database. Suppliers not accredited to ISO 200252 standards will need to comply with the standard's requirements for the service they are to provide.

In order to become an approved supplier, vendors are rigorously screened by the Compliance and Information Security Team for quality compliance and information security standards. Where required, we also carry out a risk assessment including financial check and/or an onsite 2nd party audit.

Approved suppliers are reviewed periodically by the Compliance and Information Security Team.

Internally, we operate with complete transparency in which sample vendors we are working with and are happy to provide details of any third party providers we intend using for a project on request.

Sampling and project management

Q7. What steps do you take to achieve a representative sample of the target population?

We encourage quota questions to be included in the screener e.g. region, years in practice, job title, and include soft sub-quotas on these. This enables us to accurately track sample distribution and boost quota cells as required to ensure fair representation.

We also advise clients to include a range of appropriate medical specialties to allow different view points.

Q8. Do you employ a survey router?

We don't currently employ a survey router.

Q9. If you use a router: Please describe the allocation process within your router. How do you decide which surveys might be considered for a respondent? On what priority basis are respondents allocated to surveys?

Not relevant

Q10. If you use a router: What measures do you take to guard against, or mitigate, any bias arising from employing a router? How do you measure and report any bias?

Not relevant

Q11. If you use a router: Who in your company sets the parameters of the router? Is it a dedicated team or individual project managers?

Not relevant

Sampling and project management

Q12. What profiling data is held on respondents? How is it done? How does this differ across sample sources? How is it kept up-to-date? If no relevant profiling data is held, how are low incidence projects dealt with?

An invitation containing a provisional registration profile is sent to potential members from which we gather basic information: country, full name, email address, role and specialty. At the point of double opting, the member is asked for more detailed information about their employment such as work address, type of establishment, subspecialty, age and gender, years in practice, etc.

We ask our members to refresh all profile information every 6 months however, members can update their profile at any time. All panel and project communications contain a link to do so.

We prefer to have a draft version of screening criteria whilst quoting to provide feedback, IR estimation and suggestions based on our expertise and previous experience in the field. We also have the capacity to script a quick pre-screen survey to give better recommendations for difficult target groups.

Q13. Please describe your survey invitation process. What is the proposition people are offered to take part in individual surveys? What information about the project itself is given in the process? Apart from direct invitations to specific surveys (or to a router), what other means of invitation to surveys are respondents exposed to? You should note that not all invitations to participate take the form of emails.

We use an invitation template which includes a minimum of the study topic, reference, survey length, honoraria and date of closure. There is a contact us link should they require more information or assistance. If interviews are to be completed face to face or on the telephone, we may invite members by phone but the information provided remains the same.

Those that complete the study receive the full honoraria amount as detailed on the invitation. Most often, no honoraria is given if the member doesn't qualify. If screening is complex and particularly time consuming we calculate a pro rata honoraria.

Members receive an appropriate honoraria depending on their role, country, survey length, complexity and methodology.

Sampling and project management

Q14. Please describe the (various) incentives that respondents are offered for taking part in your surveys. How does this differ by sample source, by interview length, by respondent characteristics?

The value of honoraria offered depends on the member's occupation, study length, universe size in a particular market, and the level of interest toward the main topic of the study. Longer interviews, smaller universe sizes and respondents holding a more senior occupation, usually attract higher honoraria.

Our standard honoraria offering is bank transfer, voucher, or charity donation however, as a member of EphMRA there are some country specific restrictions we adhere to.

Some Pharmaceutical clients we work with have their own incentive restrictions which our system is able to easily accommodate.

Q15. What information about a project do you need in order to give an accurate estimate of feasibility using your own resources?

When investigating feasibility, the most important factors are the topic of the survey and the screening criteria. For general studies we use desk research, analysis of past studies and the universe size to calculate sample feasibility. If involving overseas markets, we will reach out to our local teams.

With particularly complex study requirements we have two options to improve the accuracy of our feasibility: running a short quant survey via our panel to estimate IR, or approach a trusted community member by phone to seek their opinion.

If the study requires very specific experience or a higher professional qualification, we employ a conservative incidence rate and a lower response rate as the universe size of these respondents is smaller and they are less willing to participate in market research.

Sampling and project management

Q16. Do you measure respondent satisfaction? Is this made available to clients?

Members are able to share feedback on surveys by clicking the 'contact us' link included in our invites, on every page of the survey and on the final page when the survey status is displayed.

We have a dedicated community care team answering queries by email and phone. If there is a trend in feedback, it is fed back to the project manager and on to the client where relevant. At the client's request we can collate any feedback we have received.

For internal reference, we ask our members for their feedback via a survey every six months to ensure we are providing a service that fits their needs. We do not share this information with clients.

Q17. What information do you provide to debrief your client after the project has finished?

We provide our clients with the data and verbatim file at the end of each study.

On request we can complement this with a report covering the overall sample breakdown, response rates, incidence rates, drop-out rate, invitation copy.

Should a client request it, we can provide full research analysis and reporting services via the Ipsos Healthcare division of Ipsos Group.

Data quality and validation

Q18. Who is responsible for data quality checks? If it is you, do you have in place procedures to reduce or eliminate undesired within survey behaviours, such as (a) random responding, (b) Illogical or inconsistent responding, (c) overuse of item non-response (e.g. "Don't Know"), or (d) speeding (too rapid survey completion). Please describe these procedures.

All work carried out by Fieldwork International in the UK must adhere to the rigorous quality control standards required for compliance with the international standard for market research services, ISO 20252.

We perform rigorous checks to ensure that the data collected is valid and of the highest quality, such as:

- Reviewing the length of time taken to complete sections of the survey, as well as total length of the survey.
- Looking at patterned responses to grid questions.
- Looking at verbatim questions for nonsensical answers.

If a respondent is identified as failing one of these checks, they are taken out of the data before it is provided to the client. Community members that repeatedly fail data quality checks or do not adhere to panel membership rules and quality standards are permanently removed from our panels.

Q19. What limits, if any, do you place on solicitation for surveys? i.e. how often can any individual be contacted to take part in a survey whether they respond to the contact or not? How does this vary across your sample sources?

We don't limit the amount of survey solicitations sent to each member per month however, analysis shows that each specialty in each market rarely receives more than two invitations per month.

Our software automatically selects the members who have not received an invitation for the longest period, this ensures fair rotation of sample.

Our maximum solicitation per survey is one invitation and two reminders, with no less than two days in between.

Data quality and validation

Q20. What limits, if any, do you place on survey participation? i.e. how often can any individual take part in a survey? How does this vary across your sample sources? How do you manage this within categories and/or time periods?

At the client's request, we can include a screening question to extend this window for a particular topic. In general, each member can only complete one survey per month.

Q21. Do you maintain individual level data such as recent participation history, date of entry, source, etc., on your survey respondents? Are you able to supply your client with a per job analysis of such individual level data?

We have an integrated panel and project management system. The system captures a full invitation and participation history, honoraria credit and redemption history, profiling, etc all in one place.

We maintain such data for internal analysis of respondent activity and base our feasibility on numbers of active respondents. We don't provide this detail to clients as a matter of course but on request, we would be willing to do so.

Data quality and validation

Q22. Do you have a confirmation of respondent identity procedure? Do you have procedures to detect fraudulent respondents? Please describe these procedures as they are implemented at sample source registration or at the point of entry to a survey or router. If you offer B2B samples what are the procedures there, if any?

We're dedicated to maintaining a high quality panel and have put automated systems in place to ensure the quality of our respondents remain high.

When a UK physician registers they are asked to provide their GMC registration number which is cross referenced against the GMC database. In other markets where an official database is not available to cross check, we call the respondent's place of work to confirm their authenticity. This validation happens once a year for each member.

We have an automated de-duplication process at the point of registration. We ensure the community is checked by eye regularly as with minor spelling mistakes, we've not yet found an algorithm that is 100% reliable.

We monitor every survey for poor respondent data, as detailed in Q18. This ensures that community members who do not adhere to membership rules and quality standards are not able to participate in market research.

Policies and compliance

Q23. Please describe the 'opt-in for market research' processes for all your online sample sources.

When a physician is invited to register they take part in a registration survey. At this point, they are asked to read and accept our Privacy Policy and Terms and Conditions. This includes details on our Cookie Policy.

On completion of the registration survey, their details are recorded in the database and an email is sent to them, asking that they confirm their wish to join the community and complete a short profiling survey.

Until the physician clicks the emailed validation link they are inactive members and will not receive invitations to studies. If they do not double opt within 60 days, their details are deleted.

Q24. Please provide a link to your Privacy Policy. How is your Privacy Policy provided to your respondents?

https://www.hcscommunity.com/Info/PP_EN.html - It is included in the registration form, all email correspondence and all survey end pages.

Policies and compliance

Q25. Please describe the measures you take to ensure data protection and data security.

We take every care to ensure that we comply with our legal, regulatory and ethical obligations, including The Data Protection Act 1998 and the Market Research Society Code of Conduct.

As part of our commitment to the security of information, we have regular internal and external audits on information security, and are certified to the International Standard for Information Security, ISO 27001.

To minimize the risk of loss, theft or misuse we use secure photo id keycard entry to our offices, all laptops have BIOS level security, our database is only accessible from inside the network, we use secure Internet connections when collecting personal information and FTP sites and encryption to share information where required.

We have a dedicated Quality and Compliance Team to ensure that these standards and accreditations are met across the business. They also ensure all teams are up-to-date with the latest changes in regulations.

Q26. What practices do you follow to decide whether online research should be used to present commercially sensitive client data or materials to survey respondents?

There is currently no infallible method to prevent online visual materials being copied as a screenshot acts at a local level. If the situation changes, we would look to implement a technology to ensure the security of intellectual property.

We have strict confidentiality agreements with our members which acts as a deterrent.

Policies and compliance

Q27. Are you certified to any specific quality system? If so, which one(s)?

As part of Ipsos MORI UK Limited, Fieldwork International in the UK is certified to 3 international standards:

ISO 20252 - International market research specific standard that supersedes BS 7911 / MRQSA and incorporates IQCS (Interviewer Quality Control Scheme); it covers the five stages of a Market Research project.

ISO 9001- International general company standard with a focus on continual improvement through quality management systems.

ISO 27001 - International standard for information security designed to ensure the selection of adequate and proportionate security controls.

In addition to the above standards, we are members of the Market Research Society's Company Partner Scheme. By being an MRS Company Partner, Ipsos MORI endorse and support the core MRS brand values of professionalism, research excellence and business effectiveness, and commit to comply with the MRS Code of Conduct throughout the organisation.

We are also members of ESOMAR, EphMRA and BHBIA; all of which ensure high quality standards. As an ISO accredited agency, Fieldwork International ensures that all companies we engage with follow ISO standards ensuring a high level of quality will be guaranteed. All staff complete the BHBIA and EphMRA competency tests.

Q28. Do you conduct online surveys with children and young people? If so, do you adhere to the standards that ESOMAR provides? What other rules or standards, for example COPPA in the United States, do you comply with?

All studies are for healthcare professionals, we do not interview young people or children.

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