



MedicalWorldPanel Answers ESOMAR's 28 Questions On Panel and Online Research Quality

To promote standards and best practices for online market research, ESOMAR (www.esomar.org), a worldwide organization dedicated to promoting better research, created a set of 28 of questions to help research buyers better understand and evaluate panel providers.

Here, MedicalWorldPanel provides detailed answers to ESOMAR's 28 questions.

COMPANY PROFILE

1. What experience does your company have with providing online samples for market research?

MedicalWorldPanel is in the business of online Panel services for more than 2 years servicing more than 20 clients across the globe.

We have a panel of over 450,000 members exclusively for healthcare panel across all the major markets across the globe. We have successfully delivered over 110 projects in 2011.

SAMPLE SOURCES AND RECRUITMENT

2. 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?

We buy database only from reliable partners focusing in healthcare industry. As broad recruiting reach provides access to a greater diversity of panelists, we engage with varied recruiting sources. Our panelists are recruited from various online sources such as banners, refer-a-friend programs, organic search-based growth etc.

We have actively managed research panels. Panelists are recruited based on opt-in to exclusively take part in Market Research. The panelists are verified via phone and email.

3. 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?

We have our internal panel source and each panelist has been assigned a unique code (internal). Panel data is verified regularly and de-duped to ensure unique respondents across the project.

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

The sample source is solely used for Market Research purpose.

5. How do you source groups that may be hard-to-reach on the Internet?

At MedicalWorldPanel we have an in-house calling team for groups or respondents difficult to reach. For certain geographies we also have field team which does face to face interviews where internet penetration is low or hard to reach.

6. 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?

We do not use external partners. Whilst bidding if we anticipate total sample required is higher than feasible, we proactively inform our clients on the achievable number.

We also use our internal team to call and recruit new panel members.

SAMPLING AND PROJECT MANAGEMENT

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

Our studies are governed by the quotas designed by client. We send out invites based on the sample requirement from the client. The quotas (provincial, gender, age, etc.) are predefined before the launch of the study to ensure that the data collected is representative of the target population.

8. Do you employ a survey router?

We do not employ survey router. We directly invite our respondents for each study separately.

9. 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?

We do not employ survey router.

10. 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?

We do not employ survey router.

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

We do not employ survey router.

12. 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?

We record more than 25 profiling questions for screening. Once a respondent shows interest in becoming a member of the panel, a link is sent with set of questions which are stored with us in a secured server. Respondents are requested to update their profiles biannually for any changes.

The few critical questions besides demographic details are

- Specialty
- Years in Practice
- Work Address
- Type of establishment
- Time spent in treating patients etc.

13. 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.

Survey invitations are sent in controlled batches. Invite includes details about the study, time required to complete the study, incentives if any and survey link.

About the study, briefs the topic about the study only. No information on the screener questions are mentioned in the invite. Incentives are paid relative to the market trends to respective specialty.

For certain studies where we have smaller panel size we use referral mode from our participants. But before an invite is sent to the referred respondent, they are asked to go through the panel recruitment process.

14. 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?

All the respondents are rewarded on successfully completing a study.

Incentives offered are based on the Length of the interview, Geography, Respondent type and complexity of survey.

We pay our respondents via Check.

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

There are few critical information before the start of the study which identifies the best feasibility of sample achievement. Few details required are,

- Total sample
- Quotas in detail
- Length of the Interview
- Fielding time
- Geography
- Client or Open sample etc.

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

Yes, we constantly measures respondent satisfaction globally. Respondents can leave their feedback after each study or on our panel website.

We do Adverse Effect reporting to our clients if that is requested before the launch of the study. We also do inform our clients if respondents find the study not related to their profession or geography.

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

Clients do not require a debrief on all the projects. We do have standard debrief document which can also include more information as desired by the client on a particular or all projects

The information shared in debrief consists of but not limited to

- Total sample invited
- Response rate
- Drop out rate
- Final IR
- Average LOI etc.

DATA QUALITY AND VALIDATION

18. Who is responsible for data quality checks? If it is you, do you have in place procedures to reduce or eliminate undesired within survey behaviors, 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

Data validation is done at MedicalWorldPanel. Our clients also have access to full data and hence can validate the data if desired.

We keep cleaning our panel for any bad respondent due to various reasons, but there are chances of getting a bad respondent during any study. The data is logically checked for all responses provided by a particular respondent and if found to have provided bad response, we eliminate that response from the study and replace it with a new response from a valid respondent. Validation of data is done at 25%, 50%, 75% and 100% of data collection.

19. 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?

Invites are sent up to 2 times a week and not more than 8 times a study. If an individual refuses or informs the date by when they will participate, reminders are stopped for those respondents.

20. 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?

Our panel members are restricted to 12 surveys per quarter and not more than 4 per 30 consecutive days.

For certain clients we restrict participation for a particular study depending on their requirement for up to no participation in any study for last 3 months on the given subject.

We keep a record of the respondent who participates in our studies. Invites are controlled by system and the above mentioned logic is appended to the system to ensure controlled participation.

21. 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 record all the information required and can be provided on request. However, personally identifiable information is strictly protected.

22. 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?

Yes, all the interested panelists are welcomed to the panel with a communication to confirm their identity.

We have a double opt-in methodology to recruit our panelists, hence eliminating fraudulent respondents during the screening process. All the interested panelists are verified via email and phone.

MedicalWorldPanel as a process keeps evaluating and deploying new technologies as needed to ensure respondent identity is validated at regular intervals.

POLICIES AND COMPLIANCE

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

All interested panel members are required to opt-in specifically to healthcare research studies conducted by MedicalWorldPanel. All interested panelists on their free will have chosen to become a member of MedicalWorldPanel Panel.

Interested Panelists after filling in the screening survey are sent an email verification and also verified over the phone to be sure of their interest.

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

We strictly ensure the privacy of all our panelists and never sell the details to any third party.

Our Privacy Policy Reads

MedicalWorldPanel is a Market Research organization which adheres to the code of conduct laid under CASRO and ESOMAR guidelines.

We respect your privacy and will never sell your data to any third party. Your answers will be used in aggregate and will remain anonymous.

Our Privacy Policy is available on our Panel website.

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

All respondent information is stored within secure password-protected data storage areas secured by industry standard firewalls and a stringent IT security policy framework. Staff who have access to panelist information are subject to confidentiality agreements.

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

For surveys where we need to present commercially sensitive data, all the participants have to agree to a privacy clause in the beginning of the study.

We also use best technological tools to ensure that while presenting the data, it has been protected from not being able to copy or save.

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

MedicalWorldPanel conducts research in accordance to CASRO and ESOMAR code of conduct. All the necessary check points are applied to ensure quality

Surveys are checked for duplication via :

Geo-IP tracking

Full name

Key demographics

Panelists who provide inconsistent answers, straight line answers, speeding surveys are removed from the panel permanently.

All the panelists are bound to a maximum number of surveys per month and quarter depending on geography.

28. 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?

At MedicalWorldPanel we do not conduct research among children or young people. Research is conducted among respondents who are of legal age to participate as described in ESOMAR guidelines for each geography.