Use network theory to develop services

In the first of two articles on networking, Darrin Baines and Catherine Hale introduce the concept of networks and apply it to pharmacy

In recent years, scientists and social scientists have become excited about a new way of understanding the world, which they call “network theory”. A network is a circuit through which information, ideas and favours can flow. For instance, you might learn about a new product or a good film from people you know (your social network) rather than from advertising. This innovative theoretical approach tries to explain how things link with each other in order to grow. For example, medical researchers have used network diagrams to trace the spread of contagious diseases, like severe acute respiratory syndrome.

When applying this framework to humans the approach is often referred to as “social network theory”. Marketers use this approach to identify potential customers. Individuals create ties with each other and share information and opinions that consequently shape their decisions.

Networking is essential for professions, facilitating communication among people in related activities (e.g., primary care, research or education). According to network theory, personal success is directly linked to the networks you join. If this is the case, the growth of your professional and business life could depend upon your ability to network productively within pharmacy and the NHS.

Identify pharmacy networks

Basic social networks can be illustrated using diagrams, such as the one shown in Figure 1. In the diagram, we can see that Hayley has direct social ties (a good relationship) with all the people shown, except Hugo, who only knows Robin. Mark, on the other hand, knows Dominic and Ben, but has no direct ties with Angel, whose only acquaintance is Hayley. There could be many other links and associations in this diagram. Hayley is an important “node” in this network, because she has so many links. In marketing language, Hayley could be described as an “opinion leader”, given her core position in the network.

Mapping out relations between people can be useful. For instance, pharmacists who wish to help local GPs implement their new contract could outline the relationships between them. GPs have ties with other GPs in their practice, but also with those outside their practices. In Figure 2, GP4 has direct links with GP5 and GP6 within her own practice, and associations with GP1 and GP7 outside. However, GP2 and GP4 have fallen out with each other and some of the other doctors in their practice, and no direct links exist between them.

Identify knowledge gaps

1. What is network theory?
2. What networks are significant to pharmacy?
3. How can network theory be used to market a new service?

Before reading on, think about how this article may help you to do your job better. The Royal Pharmaceutical Society’s areas of competence for pharmacists are listed in “Plan and record”, (available at: www.rpsgb.org/education). This article relates to “interpersonal skills” (see appendix 4 of “Plan and record”).

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For pharmacist wishing to market their services, knowing whether their target networks are open or closed will determine the degree of spread and reinforcement of your message. This will help you to choose your communication strategy. With closed networks you may have to do little in terms of consolidating what you have to say, although not many people may hear you. On the other hand, open networks spread the word further, but you have to work hard to reinforce what you say. Reach versus reinforcement is an important concept when marketing your services to local networks.

**Organisations versus networks**

Primary care organisations are relatively new. Pharmacists need to influence PCOs in order to win new business. Given their structure as legally formed, public-sector bodies, to date most pharmacists have approached these bodies as “organisations”, that is, entities with a chief executive and an identifiable management structure. When marketing to an organisation, logic suggests that pharmacists should first find the person with the relevant job, for instance, the pharmaceutical adviser, and then approach that person.

Practice suggests that attempts by pharmacists to win business through negotiations with individual PCO staff — whatever their role — frequently lead to little fruit. Network theory might reduce the frustration that marketing efforts create. PCOs should no longer be viewed as organisations employing staff to perform specific roles. Instead, they should be seen in terms of the networks their staff inhabit.

In the hypothetical primary care trust shown in Figure 4, the chief executive has direct ties with the lead GPs in the three local practices, but has no direct links with any pharmacist. On the other hand, the core of local pharmacists are strongly linked with each other, but only have one link to the PCT in the form of the pharmaceutical adviser. Standard marketing theory would suggest that the LPC should approach the PCT using a “business-to-business” approach, which views the pharmaceutical adviser as the front person for the organisation’s buying process. However, contrary to this traditional approach, network theory suggests that the PCT consists of individuals with strong internal and external ties that could be developed and used. In response, the LPC should promote a strategy of creating direct ties between local pharmacists and key PCT staff other than the pharmaceutical advisers in order to influence the buying process.

Indeed, the formal route of making business presentations to the appropriate PCT staff may be less effective than identifying and building links with the true players in the local health service.

**Small world theory**

According to Duncan Watts, associate professor of sociology at Columbia University, New York, most people in the world can be linked to each other by approximately six steps. For example, the actor Kevin Bacon can be linked with any Hollywood film via no more than four people in the industry. This theory suggests that we already know people with links to those who can help us get the business or personal contacts we need. All we need to do is find out who we need to meet and make contact. Our next CPD article will discuss how to put networking into practice.

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**Action: practice points**

Reading is only one way to undertake CPD and the Society will expect to see various approaches in a pharmacist’s CPD portfolio.

1. Map out a network starting with yourself or take part in the Small World Project at: http://smallworld.columbia.edu/
2. Think about how you could open up your network.
3. Find out who is on your local pharmaceutical committee and what they think about the proposed pharmacy contract.

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**Evaluate**

For your work to be presented as CPD, you need to evaluate your reading and any other activities. Answer the following questions. What have you learnt? How has it added value to your practice? (Have you applied this learning or had any feedback?) What will you do now and how will this be achieved?