



Carin Smand, Managing Director
European Hematology Association (EHA)

Interview

with Carin Smand

The European Hematology Association (EHA) aims to promote excellence in clinical practice, research and education in European hematology. Headquartered in The Hague in The Netherlands, the organisation represents more than 3,000 members throughout Europe and beyond and organises an annual congress and several additional educational and scientific events.

The collaboration between EHA and MCI started in 2001 with the 6th Annual Congress in Frankfurt. During these years the EHA congress has grown from 2,100 participants in 2001 to almost 10,000 in 2012.

Carin Smand, Managing Director, talks to us about their strategic approach to grow the annual congress.

MCI: The EHA congress has seen dramatic growth in the last decade. What do you attribute this success to?

Carin Smand: The main thing, I think, is that EHA was and is still known as an independent organisation. Also, looking specifically at the congress and the way we organise it, our independent scientific programme committee plays an important role. Abstracts are reviewed and selected by the committee purely based on quality, which is key to organising a good congress.

In addition we always try to cover comprehensive hematology in our programme, which is the second strength of the congress. We offer a balanced programme that cover malignant and non-malignant hematology. And we do purely scientific sessions but also a lot of educational sessions. This way we offer an attractive programme to our delegates. I feel this contributes a lot to its success.

MCI: What strategic approach have you taken to ensure continuous growth of the congress?

CS: A distinction can be made between the general and specialised hematologists, the early career and the advanced hematologists; and clinicians and researchers. The general hematologists who work in a general hospital and see a lot of different patients would like to have an update on the latest developments in various topics. They can get this from the congress because we don't have too many parallel sessions. This enables them to make a good selection and to be updated on the different hematological

disorders they see in their practice. The very specialised hematologists who are focusing on a specific type of hematological disorder can also get specific updates. The same applies to hematologists who work in laboratories. The congress attracts different target groups through one programme, and it is important that delegates recognise themselves in the programme.

MCI: How is technology impacting on the congress' success?

CS: On the technical side we are, for example, working with the congress app and are now looking at e-posters. We do this in such a way that we are not the first to launch this, so when we do it we want to be sure that it is tested and that it works.

In addition we are constantly working on ways to disseminate the information and knowledge from the congress with the support of new technologies.

MCI: How would you describe the main opportunities and/or challenges in outsourcing your congress?

CS: A constant question on our agenda is that we always look at what is the core business of EHA. For example composing the scientific programme is our core business, therefore we do this ourselves. The same goes for the content of our medical education programme, which should cover comprehensive hematology incorporating online learning, blended learning and traditional learning.

Looking at the more technical aspects, for example, how to share the online tools with the outside world, then we do, of course,

depend on third parties. We prefer to use standard software that can be adjusted.

MCI: What are the 3 key elements for a successful long-term collaboration?

CS: The most important one is trust; both parties have to trust each other which allows a clear definition of responsibilities. Constant exchange of information is very important as is taking a step back every once in a while from the day-to-day business to exchange information, identify the opportunities and where they match. The implementation power of both organisations is a very important aspect of the collaboration.

MCI: What is EHA's ultimate goal in terms of growing its congress globally?

CS: We are thinking about that a lot; we are building on an outreach programme. The ultimate goal is that we share through collaboration with national and regional societies. We try to share as much as possible from the congress programme and from our educational tools. For example, we add an EHA highlights or a joint symposium to the annual meeting of a national society. In return some national societies come to the EHA congress and we host a joint symposium.

However, there are certain regions where we are now working on a more regional approach, because the national societies there are very small and for many reasons it is better to implement a regional approach - in the Middle East and Eastern Europe, for example. This means that it is not possible to add regular activities one-on-one to a national meeting, but to organise

a separate event that is part of the outreach strategy. This is the way we define EHA global activities, not only organising EHA Highlights outside of Europe, but more local and regional collaboration is very important.

MCI: What are EHA's top priorities for adapting educational products/projects to its global audience?

CS: We are in the middle of developing our medical education programme which has an integrated approach. That means that if you are a junior or senior hematologist you can use the different tools we are developing to update your knowledge. We do ask ourselves the question whether

the programme should be open access or not. We would like to reach out to as many different hematologists as possible. We also need to look at it from a business perspective; for certain tools we will probably ask a fee. So for basic tools it will be open access, more advanced tools and tools that we invested in will be charged for.

This could also be a way to look at membership. Currently members receive a hard copy of the journal. It will probably be a matter of years before this will disappear. Therefore, there may be other ways to look at membership in the future.

Like Skype, it is possible to use the very basic version for free, but for a slightly more

advanced version a small fee is charged and a higher fee for the extended version.

MCI: If you were to advise other organisations on critical success factors in growing a congress globally, what would they be?

CS: A summary of the above; an independent position, a high level programme and success through collaboration. ■

Insider's view

MCI: What are your main responsibilities for the EHA congress?

Mariette Helmann: MCI Amsterdam collaborates with EHA every step of the way to deliver a high quality congress taking into account EHA's budgetary considerations. As EHA's core PCO (full service) since 2001, MCI Amsterdam has developed a very clear understanding of the stakeholders' needs and expectations. Through a collaborative approach we strive for a high quality congress to safeguard EHA's reputation as the leading European congress in its field.

MCI: How does the long-term relationship with EHA make a difference in your day-to-day collaboration?

MH: A strong working relationship enabled MCI to support EHA to grow their annual congress from 2,100 participants in 2001 to over 10,000 in 2012. The commercial exhibition of the EHA congress increased from 1,000 square metres to 3,000 square metres and the number of satellite symposia grew to 28.

The very positive results achieved by working together over the past decade established a strong relationship based

on mutual trust. We know exactly what to expect from each other, what our responsibilities are and what the stakeholders expect. Through the joint drive for improvement and growth we share best practices, experiences and proven innovations to identify opportunities for the congress. This enables us to flawlessly execute the annual congress.

MCI: You have been involved in the mandate since 2001, in your view what are the critical success factors of the EHA congress and how did MCI Amsterdam support the growth?

MH: EHA takes a very strategic approach and by remaining an independent organisation the quality of the programme is guaranteed. By working with MCI Amsterdam as core PCO the wheel does not have to be reinvented every year when it comes to organising the annual congress. In close collaboration with the EHA Executive Office we are now responsible for the continuous improvement and a smooth execution of the growing congress.

The enormous growth of EHA congresses has resulted in a constantly changing scope of demands. Looking at, for example, the venue and host

city which initially had to accommodate 2,100 participants, now has totally different requirements for 10,000 participants. With our experience we can ensure that the changing requirements driven by the growth of the congress are anticipated and met. MCI Amsterdam has been facilitating and meeting these demands since 2001. In 1998 EHA and MCI Amsterdam had already started their cooperation, with the "one-off" combined EHA-ISH (International Society of Hematology) Congress in Amsterdam which attracted more than 4,000 participants. This was the basis for our long-term cooperation from 1998. ■

Mariette Helmann,
President, MCI Amsterdam

