

WHEN THE RIGHT GOES WRONG: IS PHARMA'S SFE KPI BROKEN?

Why counting calls may be distracting the industry from measuring real outcomes

For decades, pharmaceutical sales organizations have relied on a simple performance indicator: the daily call average. Across companies, the number may vary slightly 10 calls, 12 calls, sometimes even more. But the philosophy remains consistent: more calls equal better performance.

On paper, the logic appears sound. Frequent interactions with doctors should increase the probability of prescription generation. Sales Force Effectiveness (SFE) systems were designed precisely to track such activities.

Yet over time, something subtle and potentially problematic has happened. In many organisations, the KPI has quietly become the KRA.

The Conversation Outside Clinics

Spend time observing the daily life of medical representatives and a familiar pattern emerges. Outside clinics, in waiting areas, or during brief interactions between representatives of different companies, the most common question is remarkably consistent:

“Kitne calls ho gaye?”

The question is so deeply embedded in the culture of pharma sales that it rarely invites reflection. What is striking is not the question itself but what is rarely asked.



Questions such as:

- How many new prescribers were added today?
- How many retail orders were generated?
- Which doctor actually shifted prescription behaviour?

These questions appear far less frequently in everyday conversations between field representatives, line managers, and even head office teams.

When Activity Starts Looking Like Achievement

The original purpose of SFE metrics was clear: to ensure discipline in field activity and maintain consistent doctor engagement.

However, the unintended consequence of excessive focus on activity metrics is that activity itself begins to resemble achievement.

Call averages are reviewed daily. Coverage reports are analyzed carefully. Compliance dashboards are monitored closely. But the link between activity and outcome often becomes blurred.

“When individuals are evaluated primarily on call averages, the number slowly becomes the definition of success.”

As a result, organizations may find themselves celebrating impressive activity numbers while the underlying business outcomes remain largely unchanged.

This reflects a broader management principle: people optimise for what is measured. If the system measures calls, calls will increase.

If the system measures outcomes, behaviour will align differently.

The challenge arises when organisations begin to mistake movement for progress.

The Subtle Shift in Organizational Thinking

Field teams may be working harder than ever.

Managers may be reviewing dashboards more frequently than before.

Reports may be richer and more sophisticated.

Yet the central strategic question often remains unexplored:

Are we measuring performance—or simply counting activity?

This is not a criticism of field teams or SFE systems. It is a reflection on how measurement frameworks gradually shape organizational behavior.

When a single metric dominates conversations—from field representatives to senior leadership—the risk is that complex commercial outcomes get reduced to a simple numeric target.

When the Right Metric Starts Working Against the Goal

The paradox is that the call-average KPI is not inherently flawed. In fact, it was introduced for the right reasons—to drive discipline, consistency, and market coverage. But when the right metric becomes the dominant conversation, something unexpected can occur. What appears correct on paper may begin to quietly work against the real objective. This is the essence of a recurring pattern in management:

When the Right Goes Wrong.

A Question Worth Asking

The purpose of questioning the KPI is not to dismiss the importance of field activity. Doctor engagement and market coverage will always remain central to pharmaceutical sales.

However, as pharma companies increasingly adopt digital tools, CRM systems, and advanced analytics, there is an opportunity to rethink what truly defines sales effectiveness. Perhaps the more important question is not simply how many calls were completed

but what those calls ultimately changed.

Until that question becomes as common as “Kitne calls ho gaye?”, the industry may continue measuring activity with precision while leaving outcomes largely unexplored.

And perhaps the question leadership should reflect on is this:

If call averages disappeared from tomorrow's dashboards, what would pharma sales organisations measure instead?

About Growth Magnet Review (GMR)

The Growth Magnet Review (GMR) is an initiative by Growth Magnet Advisory (GMA) to decode inflection points shaping Indian pharmaceutical and healthcare industries. GMR publishes research-driven insights, practical frameworks and strategic reviews- aimed at helping pharma leaders anticipate change, challenge assumptions and act with foresight.

About the Author

Dr. Shailendra Tripathi is the Founder and Managing Partner of Growth Magnet Advisory LLP and Non-Executive Director at Novasis Healthcare Pvt. Ltd. He also serves on the Executive Committee of the Bombay Management Association and the Board of Studies at IES MCRC. An accomplished author of CRM in Pharmaceutical and Healthcare Marketing and Expanding Horizons: Market Strategy for Pharma SMEs, Dr. Tripathi brings over 25 years of experience in pharmaceutical and healthcare, blending academic research with consulting practice and industry thought leadership.

