

## How upskilling is moulding pharma workforce of the future?

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The unprecedented pace and scale of technological disruption brought on by the fourth industrial revolution (IR4) has revolutionized productivity and impacted operations across multiple industries with pharma manufacturing at the forefront. Pharma manufacturers have implemented advanced technologies, automating and digitizing processes, and applying advanced analytics to data.

The pharma sector itself is facing its own disruptions—new business models (such as direct-to-customer sales and personalized medicine) and new product modalities (for instance, cell and gene therapy), with impetus on expertise and skills that not only understand and apply this knowledge, but thrive – excel – innovate. The need for upskilling in the pharma sector has never been higher than now.

A framework developed by McKinsey & Company provides a three-phase approach that most HR heads in pharma companies are using to identify and fill skill gaps: I) Scout, II) Shape, and III) Shift.

## Scout

In this initial phase, the HR function identifies key roles that generate the most value, evaluating the gaps between the demand for and the supply of talent, and deciding how to fill those gaps – by hiring or by upskilling. Pharma manufacturing and quality roles are the ones that warrant focus in pharma operations. The priority skills and mindsets identified include advanced data analysis; comfort with change, adaptability, and continuous learning; and critical thinking and decision making.

## Shape

Instead of conducting upskilling or reskilling programs in a vacuum, pharma companies tie them to their overall business and digital strategies. Historically in pharma, the global upskilling plus reskilling rate was approximately 1.4 percent of employees

a year. In the current and immediate future, it is expected to nearly double to 2.7 percent. Pharma HR executives expect to increase the number of workers upskilled or reskilled in 2021 by two or three times from the previous year.

Shift

Pharma companies have found creative ways to deploy a workforce in transition. One good practice being followed is establishing a central unit (called a talent-transition hub/ HR Innovation Hub) to manage the workforce transformation. Their main role is to identify the highest-priority critical skills for the future and closing organizational skill gaps by matching people with formal learning journeys and on-the-job training. In pharma, 'new product' launches often take priority (in attention and investment) over operational improvements. That of course adds to the challenge of making the necessary investments in upskilling and reskilling.

Pharma organisations have been focusing on first preparing the leadership and senior management to undergo upskilling before they cascade it down to prepare the workforce for this transition. This ensures that the upskilling helps not only workers but the overall organisation, since a shortage of skills is the most frequent barrier that prevents the scaling up of technologies.

To remain competitive, pharma companies in the current year have been addressing their workforce skill gaps by ensuring that their employees have the skills required to operate and benefit from digital technologies and increased automation.

This imperative has in some part been funded by the funds available for CSR (corporate social responsibility) as mandated under India's laws. If the degree of automation in pharma operations reaches projected levels, and the workforce upskilling programs achieve their objectives, then there are distinct advantages in being able to use the trained (upskilled) workforce instead of allowing the current workforce to become obsolete.

Addressing the gaps by upskilling employees has been making it possible to retain most of them and empower them to take advantage of the new digital world. Pharma companies that succeed will be rewarded with a win–win outcome: maintaining their business advantage while also fulfilling their obligations to current and future employees.

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