

Understanding and Engaging Stakeholders

Understanding the Importance of Stakeholder Engagement in Successful Commencement and Completion of Project

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1. Introduction

Bupa (British United Provident Association) is an elite global health care organization, founded and headquartered in the United Kingdom, and has been identified as a leader in health care insurance and health care delivery around the world. With more than 38 million customers spread across its various business lines, Bupa's reach and presence are diversified and represented by its operations in health care insurance, day care clinics, dental care facilities, and senior nursing homes. Organised in what is commonly referred to as its "company limited by guarantee" corporate model, Bupa is not owned by shareholders. This model ensures that all profits are reinvested back into its operations at all times and underlines improved efficiency and effectiveness in health care delivery and advanced medical technology and facilities. In an age and time when health care is becoming increasingly more expensive by the day and when an aging population is becoming an established reality, Bupa is and remains fundamental in its mission and objective towards helping its stakeholders realize and fulfill their aspirations of achieving "longer, healthier, happier lives."

2. Situational Analysis: PESTLE & TOWS

Nor will we gain sufficient academic depth by simply considering the list and critically evaluating how macro-environmental factors affect the strategy for the project for Bupa.

PESTLE Analysis

- **Political:** The "Life Sciences Vision" by the UK government promotes healthcare innovation. Bupa must position its device, Aura, as one that unloads the burden component, hence gaining political acceptability. This is because the NHS is under strain.
- **Economic:** As UK inflation is volatile, the pricing of the "Aura" must be competitive. The "Price Elasticity of Demand" in high-end health wearables needs to be evaluated. If pricing is high, it may deter the middle market consumer, but if pricing is too low, the connotation to health professionals may imply "cheap" sensors.
- **Social:** "There is a 'Social Shift' towards preventative medicine." In the UK, the growing elderly population means that there is a "huge opportunity for things like SpO2 monitoring" that can identify early indicators of respiratory distress among the elderly population.

- Technological: With the advent of “Edge Computing,” the Aura is now able to process information on the device itself.
- Legal: As PM, I will ensure that "Privacy by Design" considerations are integrated into the next 6-months' developments.
- Environmental: Bupa needs to take "The Circular Economy" into consideration. This includes recommendations to have a "recycling program for lithium-ion batteries" and to "use sustainable materials in the wearable strap."

The TOWS Matrix

Unlike SWOT analysis, in TOWS Matrix analysis, strategies are generated after matching internal factors with external factors.

- SO (Strengths-Opportunities): Leverage Bupa’s clinical standing (S) to exploit the expanding market for preventive healthcare.
- TS (Strengths-Threats): Leverage the existing massive set of data (S), thus outdoing competitors with tech alone like Apple (T), with health benchmarks specific to the UK (S).

3. Key Stakeholders' Identification

The identification of stakeholders for the Bupa Aura project has been done by means of the Salience Model proposed by Mitchell, Agle, and Wood (1997), taking into consideration the power that each individual or group has over the project, their legitimacy, and finally, the degree to which their demands for information and other things are urgent. In view of the critical nature of concerns within UK, stakeholders do not act merely as bystanders in a project, rather, some stakeholders may quicken or slow down the process of launching within six months, termed "veto players."

Internal Stakeholder Ecosystem

The internal landscape is driven by a matrix of clinical and commercial expertise that is organised into three key pillars: Clinical Governance, Product Engineering, and Commercial Operations.

- The Bupa Executive Board: As the key financiers, the Board exercises much power and legitimacy. They are concerned with top-level alignment and a strong ROI focus. They are 'Dominant Stakeholders,' who wield the ultimate power to 'kill' or 'green light' phases of the projects depending upon the quarterly performance and risk appetite.
- The Clinical Lead and Medical Directorate: These are the protectors of Bupa's healthcare reputation. Compared to common consumer electronic firms, Bupa has internal stakeholders within their circle who are clinicians and data scientists. These individuals are responsible for confirming whether or not their heart rate and SpO2 sensors are within clinical standards. Legitimacy is absolute because clinical inaccuracies may lead to legal disputes or devaluation.
- Product Development and IT Infrastructure: This category is concerned with the "backbone" aspect, where the wearable technology is able to interface perfectly with the Be.Me App. This is also where the data infrastructure and cybersecurity occur, making sure that the vast amounts of biometric data are stored in line with the digital policy of Bupa.
- Marketing, Sales, and PR: Their task is the integration of complex data into a consumption-oriented message. They are also involved in the transformation of the Bupa brand, changing it from a service-providing organization to a hardware innovator. Their priority is high, as they need to implement the "pre-awareness" phase of their campaign several months prior to the arrival of the hardware product in the UK.

External Stakeholder Ecosystem

The external environment is also diverse and includes regulatory authorities that "possess the license to operate" and market users.

"Rationale:" This is the most important "Definitive Stakeholder." Because the Aura device monitors oxygen levels, it is a Class IIa device and must have strict legislation from the UKCA. They have unlimited powers, and without their approval, no one can legally sell the product in the entire UK."

- NHS Partners and General Practitioners (GPs): As a private organization operating in the UK's heavily integrated healthcare system, Bupa can benefit from the contribution of the Aura device. This will not make much sense for the device's purpose of achieving good health or

preventing illness if the NHS doctors do not accept the information provided by the Aura device. GPs need clinical white papers to accept the device's effectiveness. They fall into the category of “Expectant Stakeholders.”

- The End-Consumer (Patient/User): The end application target and beneficiary. Their end goals are the search for value, usability, but more importantly, the search for data privacy and security.

Their strength is collective and fails if consumer confidence in data privacy is lost.

- Supply Chain & Logistics Partners: Primarily located in Southeast Asia, this set of partners handles the production of sensors and microchips. In the post-pandemic world of business, this organization has high urgency because of disruptions in world-wide shipping, and thus it becomes "Dangerous Stakeholders" because of possible delays in their delivery schedule that might disrupt the six-month launch timeline.

4. Roles, Responsibilities, Benefits, and Challenges

Effective management of any project, within the health tech industry and beyond, entails much more than an awareness of stakeholder checklists; rather, there is a need to delve into the "hidden" agendas, departmental obstacles, and conflicts-of-function in which each key player is placed. As Project Manager, my job is to navigate this complex array of competing demands to keep the momentum going for six months.

The Product Development Team

- **Role:** This team is responsible for the leading technical R&D and firmware integration activities. This team is also responsible for ensuring the correct calibration of the hardware heart rate and SpO2 sensing with the Bupa Be.Me cloud application.
- **Advantages:** They offer the “Intellectual Property” (IP), which gives Bupa its uniqueness from generic fitness trackers. Their innovation is responsible for the positioning of the device as a high-end biomedical device, which is worth paying a high price for.
- **Challenges:** They are mainly faced with the challenges of the “Iron Triangle” of project management, which is finding a balance between scope, schedule, and cost. They have to balance all these factors within a short schedule of six months and may incur “Technical Debt” and “Bugs” in the system.
 - **Opportunities:** They have the chance of realising profits and gaining market share.
 - **Threats:** They face risks of missing their schedule deadline because of the “

Marketing and Sales Organisations

- **Tasks:** The roles involve the creation of the overall brand story and the pre-order sales funnels.
- **Benefits:** They act as the “Voice of the Customer” and provide an essential reality check for the engineers.
- **Challenges:** Their biggest challenge involves "Regulatory Constraint." Though Marketing would like to put across vigorous statements about 'life-saving qualities,' it has to be within

certain regulated constraints set by Marketing's Legal and Clinical departments to ensure conformity with the UK Advertising Standards Authority (ASA) standards.

This balancing act between "commercial excitement" and "medical accuracy" would be one of the key responsibilities of their Project Manager.

The MHRA and Regulatory Bodies

- Role: To oversee the clinical trials and confirm the safety and efficacy results obtained by the Bupa Aura.
- Advantages: They offer a critical "Seal of Approval." MHRA regulations serve as a "Moat" to protect the industry from entrants who are less regulated and more cost-effective regarding the use of wearables for medical purposes.
- Challenges: "Bureaucratic Bottleneck" is a clear challenge. UK regulatory timelines tend to be rigid. If the MHRA requires more longitudinal data, the six-month product launch becomes unrealistic. "Parallel Processing" is required by the Project Manager to address Bureaucratic Bottleneck.

The End User (Bupa Member)

- Role: "They serve as the final validators of the Product-Market Fit of the product being developed.
- Benefits: By conducting early beta-testing, they help in providing data for the improvement of the User Interface (UI). This is made possible by their input on the device being able to address actual concerns for the Bupa membership related to their well-being.

Supply Chain and Manufacturing Partners

- Role: Managing mass production as well as quality control processes for wearable devices.
- Benefits: They offer the tangible product and economies of scale necessary for a financially feasible project.

- Challenges: These partners are at risk from geopolitical turbulence and "Lead Time" fluctuations. Unavailability of certain semi-conductor chips or logistics difficulties at UK ports can jeopardize the entire scheme. I need the application of Supplier Relationship Management (SRM) techniques so that whatever happens, "we are their preferred customer."

Assessment of the Stakeholder Dependencies

The interdependencies

However, "Tight Coupling" among these stakeholders is the key to the success of the Bupa Aura project. To illustrate, the Marketing stakeholder is not able to lock final retail packaging until the MHRA stipulates the required warnings and corresponding UKCA markings. Likewise, the Product stakeholder is not able to lock the "Sleep Score" business logic of the app until the Clinical Lead signs off the corresponding medical rationale. The level of these dependencies is extremely high and tends towards a "Domino Effect." Here, a problem with one stakeholder's workstream, such as a query from the regulatory or a shortage of a sensor, can have a knock-on effect of causing delays in every department.

5. The Communication and Engagement Plan

1. High-Priority Engagement (The “Key Players

As far as Bupa Executive Board/Clinical Leads are concerned, engagement is very high and on a constant basis. We adopt a "Push-Pull" communication model. "Push" communication takes place through formal, weekly progress review meetings within the steering committee. It is accompanied by a "Pull" process in terms of an engaging web-based dashboard. It has the ability to provide real-time milestone and risk log views as required.

This two-pronged strategy guarantees complete transparency and enables “Agile Pivot” decisions. For example, should a snag arise in the clinical validation process related to \$SpO_2\$ accuracy, the board is notified at the snap of a finger via the dashboard, enabling instantaneous resource shift regardless of when the next monthly board review is set. This frequent interaction ensures minimum “Negative Surprise” and maintains the key players in the project aligned on the 6-month target launch date.

2. Consultation Engagement

Legal, Regulatory (MHRA), and Compliance teams follow a very structured and documented process. Lawyers involved in a medical-related wearable device understand the "Gate-Stage" Process used. This is a quality control process where the project is broken down into five different stages (Prototype, Clinical Validation, Regulatory Submission, etc.). As the end of each stage is reached, "signoff" by the lawyers is required before embarking on the final stage.

This approach helps us avoid what is known as the “Sunk Cost Fallacy”, where substantial investment is made in a product feature that is, quite literally, discovered to not be compliant with the relevant laws. Through these consultations and not simple updates, we can ensure that our Bupa Aura product will meet all of the requirements of the UKCA mark well in advance of the launch deadline.

3. Informative Engagement (The “End-Users” and “Sales)

“For Bupa Employees, Potential Customers, and the Sales Force, the engagement strategy changes to awareness and technical literacy.” The objective, in this case, revolves around the categories "Social Proof" and "Educational Marketing." Here, we use webinars and newsletters to spread the internal buzz by leveraging the sales force to use the company’s own employees as “Brand Ambassadors.”

For the Sales Department, the process of communication is more technical in nature. We offer "Sales Enablement Kits" with complete manuals and FAQs, explaining the technical \$SpO_2\$ and Heart Rate specifications in simple, easy-to-understand English. Thus, disinformation is avoided, and when our product finally reaches the consumer after 6 months, the sales team will be able to communicate the clinical benefit of the device to the consumer accurately and honestly in the market as part of our "Informing" initiative to make the market ready for our commercial launch.

4. Feedback Engagement (The "Continuous Loop")

Lastly, we establish the "Bottom-Up" Feedback Cycle that includes beta testers and customer support personnel. Here, the project team is able to pick up subtle problems in the UI/UX using opinion analysis of initial responses from users. This is how the group that wields the least power (consumers) still has considerable voice in the final outcome.

6. Critical Engagement Process & Conflict Management: The 4C’s Model

As Project Manager for Bupa Aura, it is less about technical deliveries within the six-month launch window and much more about psychological and operational buy-in with stakeholders. To this end, I plan to operationalize the 4C’s Model of Communication, Coordination, Cooperation, and Collaboration—it offers a structured approach to engagement work and represents success as a hierarchy of integration that starts with information sharing and builds toward co-creative levels of partnership. When critically considering these four dimensions, it allows me to work with some of the natural resistances to success that exist within high-pressure clinical tech domains.

Applying the 4C's Model Critically

In a multi-disciplinary project such as the Bupa Aura, the 'Information Asymmetry' factor is a major consideration. There would always be conflicts due to the language barriers of the technical terminology used by different departments in the hospital. While the 'hardware engineers' discuss 'latency and firmware stability,' the Bupa team would discuss 'bradycardia detection and SpO2 saturation accuracy.' To eliminate any possibility of a language barrier, I put in practice the 'Common Language' technique. As the 'Project Manager' of this team, I am the 'Technical Translator' too, coordinating the 'Jargon Busting' sessions to translate 'Technical Specifications' to 'Clinical End Goals'. Thus, when the technical team talks about updating the 'sensing device,' I ensure the medical team understands how it affects the 'safety of the patient'.

"Coordination proceeds from speaking to action synchronization." Indeed, for dealing with "The Domino Effect of Project Delays," coordination is critical. For example, when a global shortage of semi-conductors causes a delay in hardware delivery by two weeks, a lack of coordination would mean that while television commercial advertisements for a non-existent product will be taken out by a marketing team that squanders Bupa money, nothing will be in place to synchronize "the marketing 'Spend' to 'the logistics' milestone."

Cooperation is the coordination of individual and department goals for the common goal. In most organizations, the KPI for departments is competing. For example, the Marketing department could be encouraged by "Launch Speed," and the Clinical department is encouraged by "Risk Mitigation." To gain cooperation, I use "Shared Incentives." When project bonuses for completion are linked with the completion triggered by the clinic validation of the device and not the actual date it is launched, I make sure the tech team does not "cut corners."

Collaboration is the highest form of engagement, in which specific stakeholders come together and generate value which cannot be generated by each one of them separately. I engage in "Co-Creation Workshops" in order to accomplish this. We take hardware engineers, software designers, Bupa insurance customers, and geriatric health specialists together in one setting. We test the hardware comfort of the wearable strap with real Bupa customers so as to ensure that they are not Myron or Ivory Tower projects, in which the device is technically brilliant but physically unfeasible for their target group (seniors with permanent mobility impairments). Collaboration turns stakeholders from "critics" to "co-authors" of Bupa Aura's success.

Conflict Evaluation and Management Techniques

However, conflict is bound to arise in a large-scale project, despite the presence of 4C's. Conflict Management is not about preventing conflict, which can result in "Group think." Rather, it is about constructive conflict management, where I would be using the Thomas-Kilmann Conflict Mode Instrument (TKI) and adopting the best methods of conflict resolution according to the type of conflict and using 'Collaborating,' 'Compromising,' or 'Accommodating' styles accordingly.

One of the main approaches I will use here is called "Interest-Based Negotiation" or the "Harvard Method." This means "separating the people from the problem." "Conflict may arise out of professional pride or fear of responsibility. A stalemate can occur between the Marketing Lead and the Clinical Lead on the app's UI: the Marketing Lead wants a "minimalist look" and "dense medical info" for the Clinical Lead." I will conduct a session focusing again on User Persona.

I pose both leads the question, "Which interface will make Margaret feel safer and more in control of her health," now that I have introduced "Margaret" as a 70-year-old Bupa member with heart-related issues. It is only when the stakeholders address the user that the stakeholders begin to work on solving the problem instead of fighting other stakeholders. They do not focus on "Positions" but on "Interests" of the stakeholders and thus the interfaces can provide a "Win-Win" option that will both satisfy aesthetic and motivating factors for stakeholders.

Additionally, I will create the Conflict Escalation Matrix. Conflicts that are smaller in nature are resolved at the "Functional Level" through the application of the 4C's, but if the conflict has the prospect of impacting the deadline of the 6-month deadline or the element of clinical safety, then the Project Steering Committee is called upon.

While the end result of Bupa Aura is more than the delivery of a product in the form of a wearable device, the delivery of business value as a result of aligning key stakeholders is also included within its scope. Assessing the effectiveness of the engagement activity has more to do than just measuring its effect in the form of increased sales.

Assessment of Impact on Business Performance

It is important to note that the effect of effective stakeholder management is best quantified using the Balanced Scorecard approach (Kaplan and Norton, 1992), which considers various aspects of the business enterprise from four different perspectives: Financial, Customer, Internal Process, and Learning and Growth.

Financially, being proactive significantly cuts down the "Cost of Quality". In medical equipment, finding an issue with the technical aspect or the non-compliance of regulations towards the end of the six-month cycle would result in disaster. With our 'Gate-Stage' interactions with the Product Development and Regulatory groups, we identify mistakes in the developmental stages, not manufacturing stages, thereby eliminating costly recall and re-tooling as Bupa's sustainably viable reinvestment model stays on track. Also, strategic interactions with the Bupa Executive Board translate to continuous resource allocation as our plan for Return on Investment (ROI) via premium retention and gaining new members stays clearly defined.

In regard to Customer and Social Perspective, engagement activities increase Bupa's Brand Equity. By portraying Bupa as an 'innovator' in the Internet of Medical Things (IoMT), Bupa transforms from a 'payer' into a 'partner' in wellness. This transition can only be achieved through 'Social License'—the social trust bestowed upon Bupa by both consumers and clinicians. By involving clinicians in the process of developing the heart rate and SpO2 algorithms, Bupa ensures that the Aura device is perceived as a 'credible' health tool rather than a 'consumer gadget' tool. This perception enables rapid market entry and the subsequent ability of Bupa to tap into B2B models such as the device's use in the NHS preventative healthcare schemes or corporate wellness packages.

With regards to the Internal Process Perspective, it is clear that the implementation of the 4C's Model promotes efficiency in the velocity of projects. It leads to less idle time spent working through internal conflicts by transitioning from "Siloed Working" to "Collaborative Sprints". A "Common Language" between the marketing, legal, and engineering teams leads to quicker decision-making, a precondition for completing the task within the six-month deadline.

Recommendations for Engagement with IRB

With the aim of ensuring the success story of Bupa Aura not remaining a phenomenon by itself, the following strategic recommendations will be put forward for any future projects:

1. Stakeholder Shadowing & Empathy Mapping:

To ensure the successful launch of new technology in the future, I propose that members of the Technical Product and Marketing Teams undertake the "Starter Stakeholder Shadowing Programme". This entails shadowing Bupa clinicians for a week in situ. By seeing how doctors work with healthcare data and being exposed to the day-to-day reality of health for Bupa members, the developers can more fully appreciate the needs of end-users. This will make sure that new developments of the Aura wearable device are created from the perspective of "Lived Experience" and not just from health data points.

2. Digital Twin Stakeholder Mapping & AI Analytics:

Bupa should employ the use of Digital Twin Stakeholder Mapping. This entails the use of artificial intelligence-based opinion analysis platforms to track social media, corporate forums, and news developments within the health industry in real-time. This "Dynamic Mapping" enables the Project Manager to pick up on "Emerging Stakeholders," in the form of fresh regulatory pressure groups or community attitudes concerning data protection, before they pose any danger to the project. In doing so, Bupa can prepare its communication strategy and keep its reputation as a clear and consumer-focused organization.

3. Post-Launch Knowledge Management and 'Lessons Learned'

A proper Knowledge Management (KM) system Repository needs to be set up to formalize "Lessons Learned" from Aura. The skill sets of engaging stakeholders would be a cycle, best documented through "Best Practice" case studies of actual conflicts worked through during this, a 6-month launch, for example, marketing imperatives versus MHRA requirements. Otherwise, projects will suffer from "Institutional Amnesia," and a new set of Bupa wearables will need to rediscover, on their own, how to successfully engage stakeholders.

At last, Bupa should set up a Stakeholder Advisory Panel with representation from its insurance members, ethical members in the field of Bupa's health-related activities, and its technological collaborators. Bupa could rely on this panel to provide it with continuous quarterly contributions

on all its projects, utilising this mechanism to ensure it retains its ‘Continuous Feedback Loop’ even after its initial product launch. Bupa would then be able to ensure it develops brand loyalty and becomes at all times ‘at the forefront of the digital health revolution in the UK.’

8. Conclusion

While achieving the delivery of the Bupa Aura wearable technology offering in only six months is highly indicative of an important shift in Bupa UK's operations from being a conventional provider of health care delivery services to being at the fore-front of Internet of Medical Things technology, it is clear from this report that while applying technology in monitoring heart rate, oxygen levels, and sleep is relatively easier, its profitability is dependent on making an effective use of stakeholder engagement approaches. By employing strategic methodologies such as SWOT and PESTLE analysis, Bupa is able to withstand the fluctuating economic circumstances in the UK and the tough regulatory framework set by the MHRA post-Brexit. Additionally, the use of the Salience Model and the Mendelow Matrix enables Bupa to efficiently maintain the power balance, while the application of the RACI Matrix gives Bupa the much-needed framework structure devoid of role conflict. Finally, the 4Cs Model with its elements such as Communication, Coordination, Cooperation, and Collaboration operates as the workhorse in effectuating harmony.

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