WWW.IJRPR.COM

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

From Cold Calling to Partner Training Outreach: A Descriptive Case Study of B2B Prospecting and Channel Partner Engagement in a Healthcare Technology Vendor

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ABSTRACT—

Purpose. This paper examines how business-to-business (B2B) outreach progressed in two channels of a healthcare-technology vendor: direct customer prospecting by telephone and outreach to channel partners for webinars and training. Design. An exploratory, descriptive, cross-sectional case study drew on a self-maintained activity log of 70 documented interactions (48 customer cold calls; 22 partner contacts) recorded during a 25 May–25 August 2026 internship. The log itself was not available for audit; figures are taken from the author's internship report. Data were analysed with frequencies and percentages and interpreted with relationship-marketing, consultative-selling and channel-partner-training literature. Findings. Of 48 calls, 34 reached a relevant contact, 19 produced interest or a scheduled follow-up, and 9 produced a meeting or demonstration. In the partner channel, stage counts declined from 22 initial contacts to 18 invitations, 12 confirmed attendances and 11 expressions of training interest. Several reported measures were internally inconsistent and are excluded. Implications. The patterns are consistent with relationship-stage and partner-disengagement perspectives, but no causal or effectiveness claims are supported. Proposals on funnel definitions, follow-up tracking and CRM documentation are offered as untested. Contribution and limitations. The paper offers a transparent, conservative account of early-stage B2B outreach and a data-quality template. Limitations include a small, purposive, single-researcher sample and unverified records.

Keywords—B2B sales, cold calling, channel partner engagement, partner training, relationship marketing, consultative selling, healthcare technology

I. Introduction

In B2B technology markets, a first contact rarely produces a sale. Suppliers must move prospects from initial contact to interest, from interest to a scheduled interaction, and from there to a proposal, while also relying on channel partners who must understand the product well enough to sell it. Both tasks depend on follow-up, trust and credible communication of value. Yet early-stage outreach is seldom documented transparently, and managers often report activity totals or quotation values without clarifying what each count measures.

This problem is acute for vendors of complex healthcare-technology solutions, where buyers and partners may need product education before they can assess fit. The relationship-marketing tradition treats exchange as an evolving relationship rather than a single transaction [1]–[3], and the selling literature has moved toward customer orientation and relationship selling [4]. Research on channel-partner learning shows that supplier-sponsored training can support partner sales performance [5] but that partners often disengage from it [6].

Within the sources reviewed for this draft, evidence on channel-partner training concentrates on survey-based or longitudinal tests of engagement and performance. Descriptive, process-level accounts that place direct prospecting and partner outreach side by side were not found in that set. This is a limited observation, not a proof of a gap: a systematic literature search has not been conducted (see Section VII).

The study addresses four research questions.

- **RQ1.** What patterns are observable in documented customer cold-calling outcomes?
- **RQ2.** What patterns are observable across documented stages of partner engagement (initial contact, webinar invitation, attendance, follow-up, training interest)?
- **RQ3.** What operational challenges and improvement opportunities emerge from the documented activities?
- **RQ4.** How can relationship marketing, consultative selling and channel-partner-training theory help interpret the observed patterns?

The contribution is modest and intended as such: a conservative description, an explicit separation of verified from unverified data, and a set of testable propositions for future work.

II. Literature Review and Conceptual Framework

A. Relationships as staged and trust-dependent

Dwyer et al. [1] conceptualised buyer–seller relationships as evolving through phases (awareness, exploration, expansion, commitment and possible dissolution) rather than as discrete transactions. Morgan and Hunt's [2] commitment–trust theory positions trust and commitment as central mediators of

relationship success. Hunt et al. [3], drawing on resource-advantage theory, addressed why relationship marketing has become prominent and why some relationship efforts succeed more than others. Together these works imply that early outreach outcomes (contact, interest, meetings) are best read as steps in relationship formation, not as sales outcomes. They do not predict particular conversion rates at any step.

B. From selling orientation to consultative selling

Moncrief and Marshall [4] reviewed the traditional seven-step selling process and argued that an evolved process reflects customer orientation, with emphasis on securing, building and maintaining long-term relationships with profitable customers. Lim and Park [7], using structural equation analysis of B2B salespersons, reported that salesperson authenticity influences consultative-selling competence through customer orientation, and that trust in the buyer–seller exchange moderated the link between customer orientation and competence but not the link between authenticity and customer orientation. These findings concern salesperson attributes and self-reported competence; they do not show that consultative conversations raise cold-call meeting rates, and this paper does not test that.

C. Channel partners, training and disengagement

Keeling et al. [5], surveying 383 channel partners of a Financial Times 100 company, conceptualised deliberate sales learning (knowledge articulation, codification and certification) and showed that, with deliberate sales practice, it serially mediates the effect of learning on partner sales performance. Satornino et al. [6], in a longitudinal field study with a Fortune 100 firm, found that customer orientation and selling orientation among reseller salespeople had countervailing effects on disengagement from sponsored training, that role ambidexterity reduced disengagement, and that disengagement reduced perceived sales ability and relationship satisfaction. Their work establishes that disengagement is a managerial problem even when training is offered; it does not describe any particular attendance rate.

D. Push and pull in digital health

Keeling et al. [8] examined digital unengagement among health-service consumers (survey n = 486; 110 classified as digitally unengaged) and identified families of drivers including misalignment with need, personal vulnerabilities, preference for face-to-face interaction and scepticism. The setting is consumer health services, not B2B partner training, so the push-versus-pull idea is used here only as a loose analogy and is not applied as evidence about partners.

E. Evidence not used

The source OJT report cited industry research on cold-call receptivity (RAIN Group, "2019–2023"), healthcare technology adoption reports (KLAS Research; Sage Growth Partners), an unreferenced Finnish value-based-selling study, and an earlier consultative-selling study (Lim, 2016). Either the references could not be verified as cited, or full bibliographic details were not confirmed. They are excluded rather than reconstructed. As a result, peer-reviewed evidence on cold-calling conversion and on healthcare-technology adoption is absent from this draft and should be added before submission.

F. Conceptual framework

The framework below is an interpretive device built by the author, not an established model.

TABLE I. CONCEPTUAL FRAMEWORK BY CHANNEL (INTERPRETIVE DEVICE)

Channel	Observed sequence in the log	Theoretical lens	Construct not measured here
Direct customers	Call → relevant contact → interest/follow-up → meeting/demo → (quotation)	Relationship stages [1]; consultative selling [4], [7]	Trust, perceived value, buyer need
Channel partners	Contact → invitation → attendance → follow-up → training interest → session scheduled	Channel learning [5]; disengagement [6]	Partner orientation, learning outcomes, partner sales

III. Methodology

A. Design and setting

The study is an exploratory and descriptive single-case study with a cross-sectional logic: all observations were recorded in one period, 25 May to 25 August 2026, at the Pune office of InstaVC Technologies Private Limited (trading as PeopleLink Unified Communications) [legal entity naming to be confirmed]. The company supplies video-collaboration products, including healthcare solutions such as teleconsultation, remote patient monitoring and hybrid operating-theatre systems.

B. Data and sampling

The documented sample comprises 48 customer cold-call interactions and 22 partner-engagement interactions (n = 70), reported to have been recorded in the researcher's own activity log. Sampling was purposive and non-probability: contacts were those assigned by the reporting manager and team lead. The total number of calls and partner contacts was not tracked, so the sample cannot be called representative of the company's customers or partners. The source report in one place describes the sample as a "representative sub-set" and elsewhere as non-representative; this paper adopts the latter. The sample table in the source report labels the counts "illustrative"; whether any count is an estimate is unresolved.

The activity log was not available for audit. All figures are therefore report-reported. Secondary materials (company presentations, a role description) were used only for context.

C. Operational definitions (as used in the source report; unverified)

- Connected with relevant contact: a call reaching a person judged relevant by the caller (criteria not defined).
- Interested/follow-up scheduled: call ending in interest or a scheduled follow-up.
- Meeting or demo fixed: call ending in a booked meeting or demonstration.
- Webinar attendance confirmed: ambiguous (registration versus actual attendance).
- Training session scheduled: a session booked, not necessarily held.
- Quotation value: value of one quotation reported by the author; its status (issued, discussed or accepted) is undocumented.

D. Analysis

Only frequencies and percentages were computed, with the denominator stated for each. Percentages were recalculated and rounded half-up to one decimal place. No stage-to-stage conversion rates are calculated because the log is not shown to track the same contacts across stages. No inferential statistics were used. The source report also mentions thematic analysis of objections and manager feedback, but no coded excerpts, coding scheme or feedback records were provided, so no thematic findings are reported.

E. Ethics and declarations

No customer or partner identities are used. Permission from the host company, consent arrangements, institutional ethics review and conflict-of-interest statements are [to be confirmed by the author]; none is asserted here.

IV. Results

All figures below are as reported in the OJT report and have not been verified against the original log.

A. Sample composition

TABLE II. Documented sample (N = 70)

Category	Count	Percent (denominator)
Customer cold calls	48	68.6% (of 70)
Partner-engagement contacts	22	31.4% (of 70)
Healthcare-vertical prospects among calls	21	43.8% (of 48)
Other verticals among calls	27	56.3% (of 48)

Note. The report states 56.2% for 27/48; the recalculated value is 56.25%, shown as 56.3%. The report's split of the 22 partner contacts into 13 "invitation stage" and 9 "training-scheduling stage" conflicts with Table IV (18 invitations) and is excluded.

B. Customer cold-calling outcomes (RQ1)

TABLE III. Reported outcomes of 48 documented cold calls

Outcome	Count	Percent of 48
Connected with relevant contact	34	70.8%
Interested / follow-up scheduled	19	39.6%
Meeting or demo fixed	9	18.8%
Not interested	15	31.3%
No response / unreachable	14	29.2%

Note. Interested (19), not interested (15) and no response (14) sum to 48 and appear to be mutually exclusive. Connected (34) equals interested plus not interested. Meetings (9) are presumably a subset of the 19 interested calls, but the report does not state this. Percentages in this table are shares of all 48 calls, not stage-to-stage conversion rates.

In descriptive terms, about seven in ten calls reached a relevant contact, about four in ten ended in interest or a scheduled follow-up, and fewer than one in five ended in a meeting or demonstration. This is a sequence of counts, not a verified cohort funnel.

C. Partner engagement stages (RQ2)

TABLE IV. Reported partner-engagement stage counts (22 documented partner contacts)

Stage	Count	Percent of 22
Initial contact made	22	100.0%
Webinar invitation communicated	18	81.8%
Webinar attendance "confirmed"	12	54.5%
Post-webinar follow-up completed	15	68.2%
Training interest expressed	11	50.0%

Note. Stages overlap and are not shown to be sequential for the same partners. Follow-up (15) exceeds attendance (12), and the report says follow-up occurred "regardless of attendance", so some followed-up partners did not attend. The source report calls the invitation-to-attendance step "the single largest point of leakage"; this cannot be verified, because 12 attendances are not shown to be a subset of the 18 invited, and the meaning of "confirmed" is undefined. The report states that 21 training sessions were scheduled, which is a count of sessions, not of partners. How 21 sessions relate to 11 interested partners is unexplained.

D. Training scheduling timeline (excluded)

The report presents fortnightly counts of sessions scheduled (3, 4, 5, 5, 4; cumulative 21) for "Weeks 8–17". The stated internship, 25 May to 25 August 2026, spans 92 days (about 13 weeks), and the report's own methodology places training coordination in Weeks 8–12. Under the fortnightly table, 12 sessions fall in Weeks 8–13 and 9 in Weeks 14–17, after the stated end of the internship. This may reflect mislabelled weeks or sessions scheduled for later dates. Because the timeline is unresolved, no trend is reported or interpreted. The "gradual increase" and "narrowing pool" explanations offered in the source report are unsupported.

E. Target and quotation value (RQ1, RQ3)

TABLE V. Reported values (₹)

Item	Amount	Status as documented
Internship target	₹50,000	Nature undefined (revenue, quotation or other)
Quotation, individual	₹2,00,000	Single quotation; issued/discussed/accepted not documented
Indicative additional discussion	₹25,000	Discussed, not confirmed

The ratio of ₹2,00,000 to ₹50,000 is 4.0, but the two are not necessarily comparable, since the target's definition is unknown. No booked business or realised revenue is reported. Neither value can be linked to specific calls or to the nine meetings. One quotation cannot show "effectiveness" or that meetings are "higher-value" on average, and this paper does not make that claim.

F. Objections table (excluded)

The source report tabulates objections across the 70 interactions (for example 16 price and 14 product-complexity). The counts sum to 70, implying exactly one code per interaction, yet 66 interactions carry an objection while at most 56 interactions (34 connected calls plus 22 partner contacts) could plausibly have voiced one, and 14 unreachable calls cannot have. The coding rules are not documented, so the table is excluded and no objection themes are reported.

V. Discussion

A. Customer prospecting (RQ1, RQ4)

The reported step-down from contact to interest to meeting is consistent with the staged view of relationships [1], in which interaction deepens gradually and many contacts do not advance. It also fits the argument that selling now centres on customer orientation and relationship building [4]. The data cannot show whether better pitches, customer need, timing or assigned lead quality explain the numbers. Lim and Park [7] concern salesperson characteristics, and nothing here tests them. Plausible alternative explanations include lead quality, the author's inexperience, and the author's own classification of outcomes.

B. Partner engagement (RQ2, RQ4)

The reported counts show that fewer partners had confirmed attendance (12) than had been invited (18), and that fewer expressed training interest (11) than were contacted (22). Satornino et al. [6] establish that partner disengagement from sponsored training is a real phenomenon and that follow-up quality and partner orientations matter, so reporting stage attrition and tracking it is sensible. The present log does not identify why any partner did not attend, and no partner-orientation, satisfaction or learning measure exists. Claims about training effectiveness [5] cannot be evaluated, since the report records scheduling, not delivery, learning or partner sales.

C. Direct versus partner channels

The two channels were measured with different units (calls versus partner contacts and sessions), different stage definitions and different assigned periods, and each was handled by a single researcher. A comparison of rates across channels would therefore be unsound. What can be said is that the channels involve different objectives: a meeting or demonstration for customers, and attendance, follow-up and training scheduling for partners. This difference in objective supports tracking each channel with its own metrics.

D. Challenges and operational issues (RQ3)

The report's challenge chapter is experiential: confidence in calling, understanding technical products, developing relevant pitches, sustaining follow-up with partners with varying schedules and interest. These are the author's reflections, not measured findings. The most evidence-based operational issue is a recording one: stage definitions were ambiguous, denominators unclear, and quotation value was not distinguished from realised revenue, so interpretation was limited. This matters in practice because the figures most easily quoted (21 sessions; ₹2,00,000) are the ones least anchored to defined events.

E. Relation to prior research

The case is compatible with, but cannot support, the propositions that relationships develop in stages and that partner disengagement is a managerial issue. It extends prior work only in a descriptive sense, by illustrating the data-definition problems that arise when early-stage outreach is recorded informally.

VI. Managerial Implications (Proposals, Untested)

TABLE VI. Managerial proposals (untested)

#	Supporting observation	Proposed action	Suggested metric
1	"Relevant contact" and "interest" undefined	Define stage criteria in CRM with unique contact IDs	Share of records meeting definitions; audit agreement
2	Stage counts not linked to same contacts	Track each contact through stages as a cohort	Cohort stage-to-stage progression rates
3	"Attendance confirmed" ambiguous	Record registered and attended separately, with reminders	Registration-to-attendance rate per webinar
4	Sessions scheduled versus delivered unknown	Log scheduled, held, cancelled and rescheduled sessions per partner	Held-to-scheduled ratio; sessions per partner

#	Supporting observation	Proposed action	Suggested metric
5	Quotation versus target not comparable	Separate quotation, pipeline, booked business and realised revenue; define targets	Quotation-to-order conversion; revenue against defined target
6	Unreachable and not-interested calls undifferentiated	Capture reason codes for non-progression using a fixed code list	Distribution of reason codes (single/multi coded)
7	Follow-up quality depends on individuals	Standardise follow-up timing and templates	Time to first follow-up; follow-up completion rate

These are proposals derived from recording gaps. This study does not show that any of them would improve performance.

VII. Limitations and Future Research

The study rests on a small, purposive sample from one researcher and one company over about 13 weeks, with no comparison group. The activity log was unavailable for audit, so every number is report-reported. Several metrics are internally inconsistent (Appendix A). The report states that detailed revenue, customer databases and conversion ratios were unavailable, so outcomes beyond quotations cannot be assessed. The author was both participant and analyst, which creates the risk of subjective classification. The literature review is not systematic, has no verified peer-reviewed evidence on cold-calling conversion or healthcare-technology adoption, and relies on a small set of verified sources. Findings are not generalisable and are not causal.

Future studies could use larger, CRM-extracted datasets across several firms, cohort tracking of the same contacts, partner surveys on attendance barriers and perceived training value, longitudinal links between training delivery and partner sales, and controlled comparisons of follow-up protocols.

VIII. Conclusion

RQ1. As reported, 70.8% of 48 calls reached a relevant contact, 39.6% produced interest or a follow-up, and 18.8% produced a meeting or demonstration; these are shares of all calls, not verified stage conversion rates.

RQ2. The reported partner counts decline from 22 contacts to 18 invitations, 12 confirmed attendances and 11 training-interest expressions. Stage overlap, an ambiguous attendance measure and an unexplained sessions-to-partners relationship prevent firmer conclusions.

RQ3. The best-supported issue is data definition and recording, not selling technique. Experiential challenges (confidence, product understanding, follow-up consistency) are reflections.

RQ4. Relationship-stage, consultative-selling and channel-learning theories offer coherent lenses for reading the patterns, but the data neither test nor confirm them.

The empirical contribution is a conservative description with an explicit data-quality audit. The practical contribution is a set of tracking proposals. The paper should not be read as evidence of sales effectiveness or training impact.

APPENDIX A. DATA-QUALITY AUDIT

TABLE VII. DATA-QUALITY AUDIT

Item	Reported	Recalculated / finding	Treatment
Table 6.1 label	"Illustrative" sample sizes	Counts may be estimates	Flagged; confirm
Cold-call outcomes	34/19/9/15/14 of 48	Percentages correct; 19+15+14 = 48; 34 = 19+15	Reported as counts of 48; meetings-in-interested unverified
27/48	56.2%	56.25% → 56.3%	Corrected rounding
Partner split	13/9	59.1% / 40.9%; conflicts with 18 invitations	Excluded
Partner stages	22/18/12/15/11	Percentages correct; stages overlap; 15 follow-ups > 12 attendances	Parallel counts only
21 sessions vs 11 interested partners	Sessions vs partners	Unit mismatch	Reported; relationship unexplained
Training timeline	Weeks 8–17	Internship ≈ 13 weeks (92 days); 9 sessions in Weeks 14–17	Excluded
Target vs quotation	400%	Arithmetic correct; comparability unknown	Single reported data point
Objections table	n = 70, sums to 70	66 with objections vs ≤ 56 plausible	Excluded
"Representative sub-set" (6.3)	Contradicts 6.4/6.9	—	Treated as non-representative
Conversion data unavailable (9.2) vs funnels in Ch. 7	Tension	—	Noted

Item	Reported	Recalculated / finding	Treatment
Unsupported claims	Pitch improvement; value-led openings better; case examples raised engagement; manager feedback themes	No supporting data	Removed
Placeholder text	Editorial instructions in 6.5, 6.7, 7.1, 7.4–7.7	—	Fix in source report
Entity name	PeopleLink vs InstaVC	—	Confirm

APPENDIX B. ITEMS FOR THE AUTHOR TO CONFIRM

1. Provide the activity log (anonymised) and confirm every count; resolve "illustrative".
2. Define "relevant contact", "attendance confirmed" and "session scheduled".
3. Explain sessions per partner and the Weeks 14–17 timeline.
4. State the status of the ₹2,00,000 quotation and the definition of the ₹50,000 target.
5. Provide the objection-coding rules if the table is to be restored.
6. Obtain company permission and complete all declarations.
7. Correct the Hunt (2006) and Keeling et al. (2020) citations in the OJT report (the OJT's "Hunt (2006)" with volume 22 pages 1–2 and Keeling et al. (2020) volume 90 pages 496–507 do not match the verified records; Keeling et al. (2019) authors/pages differ as well).
8. Add verified peer-reviewed sources on cold-calling and healthcare-technology adoption, then run a systematic search.
9. Verify Dwyer et al. [1], Moncrief and Marshall [4] and Morgan and Hunt [2] DOIs and page ranges.
10. Check target journal scope, legitimacy and length before choosing one. Candidate categories: sales management, B2B marketing, practice-based case journals, or student/practitioner outlets.

Declarations (to be completed by the author)

Supervisor: Dr. Simarpreet Kaur [authorship/acknowledgement status to be confirmed].

Manuscript status: Draft manuscript for student and supervisor review. Not ready for submission. All case figures are report-reported and unverified against the original activity log.

Ethics approval: [to be confirmed]. Company permission to publish: [to be confirmed]. Funding: [to be confirmed]. Conflicts of interest: [to be confirmed]. Author contributions: [to be confirmed]. Use of AI assistance in drafting: [to be disclosed per target journal policy].

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