SUPERWORKER™

LIFE SCIENCES AND PHARMACEUTICAL

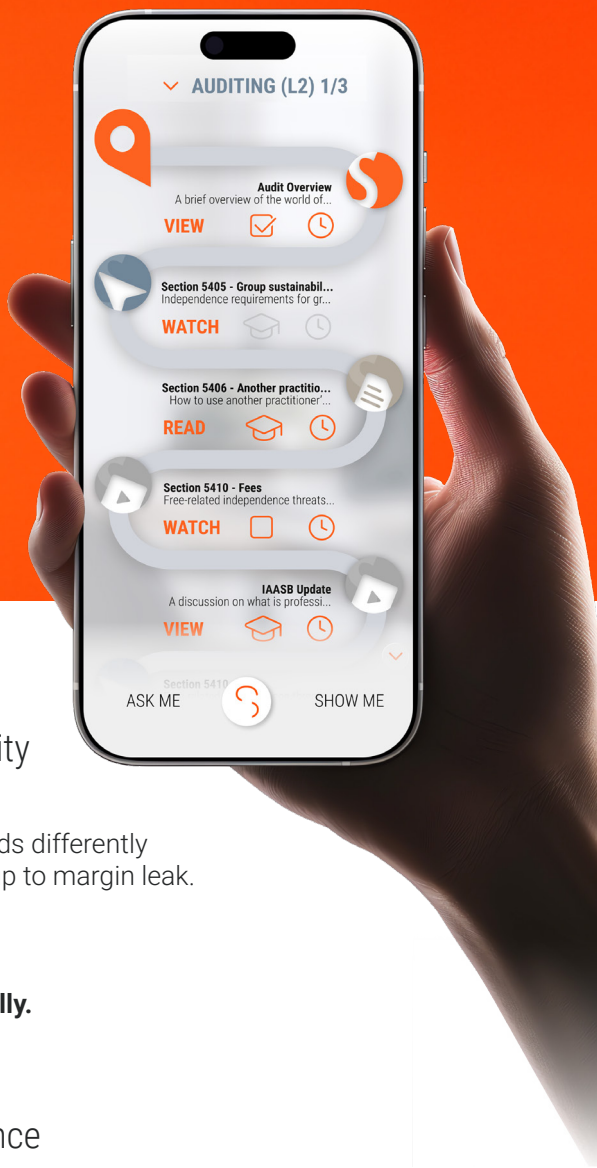
WHY YOUR PEOPLE, NOT YOUR AI IN CLINICAL OPERATIONS, DECIDE WHAT PHARMA'S 2026 INSPECTION AND INNOVATION ARE WORTH.

YOUR WORLD

GxP and inspection readiness as practice evidence

Auditors no longer ask whether people were trained. **They ask whether people do it differently.** You have defined GxP practice per role across R&D, manufacturing and quality. You have signed off the SOPs. Now auditors want **evidence** that people **actually work that way.**

Your training completion dashboard lands silently. The inspection readiness sponsor's credibility is on the line. The evidence the auditor wants is already in your work.



It just is not being captured in the flow.

Multi-site cGMP consistency across manufacturing and quality

Pharma operates across sites. Each site has its own **quality leadership**, its own **pace**, its own **standard** of what cGMP looks like. The same SOP lands differently in each plant. Small variations add up to big recall risk. Big recall risk adds up to margin leak. Quality auditors see it. Regulators see it.

Nothing connects practice across sites. What connects them is not another training cycle. **It is one definition of good, applied locally.**

AI in discovery, clinical operations and post-market surveillance

Pharma has deployed AI across discovery labs, clinical trial operations and pharmacovigilance. The **tools** work **fast.** Your people adopt them at **different speeds.** Some skip steps. Some bypass the SOP. AI tools move faster than the governance can follow. Your Chief Medical Officer and Safety team are watching. Real-world evidence and clinical data quality depend on **your people actually following the protocol.** The gap between deployment and adoption is closeable. It does not need new technology.

EU AI Act high-risk workforce capability in scope

The EU AI Act now classifies **clinical trial and pharmacovigilance** work as **high-risk.** Workforce capability is formally in the regulation. Your AI vendor audits you on training. Your regulator audits you on proof. You have built the training programme.

Now you need evidence that people can **actually do the work the AI Act asks.** Your procurement and compliance team are waiting. The evidence you need is buildable. Most pharma is closer than they think.

WHERE SUPERWORKER PAYS FOR ITSELF

You do not need another platform. We sit on top of what you already have. We pay for ourselves by making the budget you have already approved go further. There are three places that is true.

We refocus your L&D and quality-training budget. Same envelope. Different mix. Less classroom and content licence. More activation in real R&D, manufacturing and quality work. The line item is the same. What you bill against it is different.

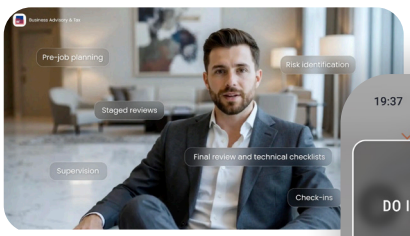
We replace the slowest part of your inspection-readiness activation. The pre-audit scrambles. The mock inspections. The training refreshes that do not change practice. Replaced with a four-week working rhythm at the bench, the line and the desk. This bills against quality and audit-readiness, not against L&D.

We unlock the value of the AI you have already deployed in discovery and clinical operations. Pharma now holds investment across discovery AI, clinical-operations AI and pharmacovigilance AI. Every percentage point of operator competence lift is real return the CFO can model. The systems are paid. We help your people actually use them inside SOP guardrails.

HOW THIS WORKS FOR EACH ONE

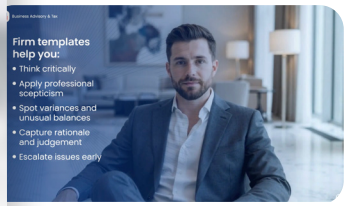
AI in discovery, clinical and post-market

Companion drives AI-tool adoption inside SOP guardrails. The Responsible AI Framework provides clinical-grade governance. The Reporting layer tracks operator competence.



Multi-site cGMP

One Builder for cGMP standards across sites. Companion delivers site-specific coaching with a central baseline.



EU AI Act high-risk

Builder defines workforce-capability requirements per the AI Act.

The Responsible AI Framework backs the procurement and audit story. The Reporting layer captures evidence.

GxP and inspection readiness

Builder defines GxP practice per role across R&D, manufacturing and quality. Companion captures application in the flow of work. The Reporting layer produces inspection-ready evidence as a by-product.

LET'S TALK

If any of these match your pharma business, your Quality, Medical or Compliance leader is already asking.

There is a gap between what you trained for and what you can prove. That gap decides the next inspection and AI investment return.

We work with Advisory Partners across South Africa, Australia, the Middle East and the United Kingdom. We will match you to the right partner for your region and your pharma business.

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Book a meeting

We will show you what your inspection and AI governance walk into next.

SUPERWORKER™

LET'S TALK

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The framework is correct

The architecture is correct

The pacing is the issue