

BRANDING: THE PROMISE OF AN EXPERIENCE

Acknowledging five timeless principles can help a practice strengthen its brand.

BY SHAREEF MAHDAVI



When we think about the term *branding* and what it means today, we need to first go back to its roots. Long before we had marketing terms such as *brand equity*, *brand essence*, and *brand management*, we had cattle—lots and lots of cattle. It became increasingly difficult for ranchers to keep track of the cattle they owned. Thus, the *brand* was born in the

form of a molten-hot piece of iron shaped in the name or symbol of the rancher and used to denote ownership.

With the rise of business management in the early 1900s (think mass production) and the concurrent birth of marketing came a need to differentiate products within categories. *Branding* became a catchall phrase to encompass the activities used to support a manufacturer's version of a particular product. Dove soap became branded via a logo, packaging, and the functional claim of being "one-quarter pure cleansing cream." Rival brand Ivory achieved differentiation of its brand through a logo, packaging, and its claim of being "99 and 44/100% pure." As a kid in the early 1970s, I still remember seeing these and other iconic branding efforts through advertising when television offered a

whopping six channels and you had to get up and go to the TV set to change it.

Today's marketplace is over-branded, as consumers are saturated with numerous choices in any given category. I can count 19 different brands of mustard and nearly 30 types of vodka at my local grocery store. Marketers invest heavily in attempts to achieve brand dominance for their products. The advent of digital marketing has allowed increasingly interruptive forms of advertising to reach consumers, who, a few years ago, thought they were free of broadcast advertising with the advent of the DVR and satellite radio.

The implications for today's physician are numerous. This article lists the most important principles to consider when determining a marketing strategy for one's practice.

NO. 1: YOU ARE A BRAND

Whether you recognize it or not, and whether you work on it or not, you—as an individual—are a brand. Prior to marketing's influence on the medical profession, most physicians termed this their *reputation*. Today, reputation is still a crucial component of the value of your brand (*brand equity*). The key difference now is that there are many other elements that influence the perception of value (*brand value*) in the minds of your patients. Once upon a time, bedside manner and clinical skill were the key determinants of reputation. In the modern era, you must go far beyond bedside manner to effectively manage and build your brand as a physician.

Individuals have been brands forever, and today's ability to communicate seamlessly with target audiences has allowed individuals to build their brands in ways that were unthinkable just 10 years ago. Taylor Swift is an excellent example of someone who has leveraged her performance talent through social media to capture millions of friends and followers internationally across YouTube, Facebook, Twitter, and Instagram. This popularity gave her a new form of power that caused Apple to change its policy on royalty payments for the Apple Music streaming service less than 24 hours after Taylor's open letter entitled *Dear Apple* appeared on Twitter.

NO. 2: EVERYTHING COMMUNICATES

Physicians have been led to believe that advertising equals marketing. Wrong. Advertising is one form of marketing.

AT A GLANCE

- In the modern era, physicians must go far beyond bedside manner to effectively manage and build their brands.
- A practice's business cards, office layout, website, staff behavior, and community involvement are all integral components of its brand and should be intentionally thought out.
- If a practice takes the time and energy to design the customer experience from the patient's perspective, it will be in a better position to fulfill that brand promise and help the patient have an experience that is truly transformational in nature.

BRANDING PRINCIPLES

You are
a brand.

Everything
communicates.

Stand for
something,
rather than for
everything.

Equip your
patients and
staff to be brand
ambassadors.

Embrace
the *social* in
social media.

about your practice. Do not be afraid to have a narrow and focused positioning statement. This is not an easy task and is subject to refinement over time; defining your positioning is the single most important branding activity you can undertake.

A good example comes from the University of Michigan's Ross School of Business. A decade ago, its positioning was about "quality education" and producing "tomorrow's global business executives" and similar hyperbole that did not separate it from

This distinction is fundamental to your approach to branding, which includes not just promotional activities but everything that you do within and outside your practice. Your business cards, office layout, virtual layout (more commonly known as your website), staff behavior, and community involvement are all integral components of your brand and should be intentionally thought out.

For example, if you still call the area where patients gather after they arrive a *waiting room*, the phrase itself (and associated activities) likely detracts from your brand equity, as no one wants to wait in an era when near-instantaneous Google searches are accessible from the smartphone in the palm of your hand. A related tip: Change the name and the function of what happens between the patient's arrival and being taken back by your technician. Respecting people's time is a solid strategy to build perception of value in the mind of the patient.

NO. 3: STAND FOR SOMETHING, RATHER THAN EVERYTHING

Branding efforts are merely a reflection of your positioning statement and the value proposition your practice offers to your patients and community. Too often, a physician and his or her practice try to be too many things to too many people. The problem is that, if you try to appeal to everyone, you actually appeal to no one. It is a common mistake that can come from a fear of being too narrow in focus or a fear of being seen as exclusionary or elitist. Both of these fears are misguided.

Spend time to figure out what you are the best at, the first to offer, or the only one who offers the things you do on a daily basis. Ask your staff and patients for input in this area; they will tell you what they find unique or memorable

other business schools or from its competitors for the best MBA candidates. Incoming dean Bob Dolan, a marketing professor at Harvard Business School both before and after his tenure at Michigan, changed this to narrow the focus to "turning out leaders with a practical, can-do orientation." Under Dolan's watch, Michigan shot up to No. 1 on the *Wall Street Journal's* ranking of MBA programs. On campus, the net impact was that far fewer students applied to the University of Michigan's MBA program, but a far higher percentage of those accepted ended up enrolling. This was because the finely tuned positioning had greater appeal to a narrower range of applicants who enrolled and were happier knowing they were going to a school whose program matched their aspirations. You should aim for the same type of specificity in positioning your practice.

NO. 4: EQUIP YOUR PATIENTS AND STAFF TO BE BRAND AMBASSADORS

The biggest marketing failure I have observed, beyond ridiculous low-pricing strategies, is the inability to harness the power of the *wow* factor created by refractive surgery and to convert it into long-term ambassadorship for the practice. Most people who tell me they have had LASIK cannot recall the name of their surgeon a few years after the fact. What a shame!

A large part of this failure is that practices tend to give patients short-term rewards in the form of gifts but do not do the hard work necessary to cultivate long-term relationships. Further, these gifts are often poorly conceived items that end up buried in a drawer or cabinet or in the trash. I have seen more than my fair share of logo-emblazoned T-shirts, mugs, and other stuff we all get (SWAG) presented to patients as ways of thanking them

for their patronage. Personally, I think it is a bunch of junk that becomes low-value branding. Today's consumer is more sophisticated, and the over-branded society has led to the logo-ing of just about everything. I offer two alternatives that I think are well-suited to the practice seeking to distinguish itself in the community.

First alternative: Better SWAG. Because the use of physical objects as memorabilia of the patient's experience in your practice can be effective, I do not discount the use of novelty items altogether. (How many of you have held on to ticket stubs from rock concerts you saw years ago?) There are tons of catalogues and firms that will put your logo on anything. Spend time researching items that not everybody has, and logo these rather than T-shirts and mugs. Yesterday it was pens, today it is thumb drives, and tomorrow's prized tchotchke is yet to be determined. Keep it fresh, or perhaps offer a selection of items and allow patients to pick one that would be most useful to them.

Second alternative: Ditch the SWAG and take on a social cause. You can create better resonance with patients if you connect the time and money they spend with you to an important cause to which you will donate on their behalf. This is less overtly self-serving and makes people feel good in a way that a T-shirt cannot.

When it comes to staff, the advice is simple: Every staff member should have his or her own business card and be encouraged to give these out to patients and in the community. This is the most powerful form of brand-building available, and it engenders pride in your employees like nothing else will. It is well worth the \$50 you might spend for each box of 500 cards.

NO. 5: EMBRACE THE SOCIAL IN SOCIAL MEDIA

The first time I discussed online reviews with a physician audience, many were taken aback that patients would actually post something negative about them online for the world to see. They hoped instead for a complaint letter that could be resolved and filed away. Patient reviews are inherently restricted by the fact that each patient's experience is limited to just a handful of doctors (ie, too small a sample size for his or her experience to be generalizable). Nevertheless, patient reviews can serve an important role in brand-building for your practice.

Physicians must stop viewing negative reviews as an indictment and treat them as what they are, which is feedback to help one's practice improve its customer service protocols and processes. The enlightened practice is not threatened by the occasional low-star rating. Rather, it seeks to understand the viewpoint of the reviewer, no matter how wacky or misguided. The data should be used to identify areas for improvement rather than assign employee blame.

Use of social media allows multidirectional communication among practice and patients. You can and should use

this to build and maintain relationships that extend beyond your current patient base, as patient reviews on review sites are heralded as more credible than patient testimonials that are controlled by a practice. You want people talking about your practice in their spheres of influence and sharing their experiences, not just shilling for new patient referrals.

One of the best role models for this is Alan Carlson, MD, Chief of Corneal and Refractive Surgery at the Duke Eye Center in Durham, North Carolina. Dr. Carlson has invested personal time building presences on multiple social media platforms, and he uses these forums to educate the community about eye health and as an effective mode of communication with his patients. Even if the patient is elderly and does not carry an iPhone or use e-mail, his or her adult child almost certainly does and can serve as a conduit to ensure that relevant information gets to the patient. As a result, Dr. Carlson's brand extends well beyond the Raleigh-Durham geography and his faculty role at Duke.

SUMMARY

Beyond these five timeless branding principles is one that summarizes everything about today's environment: A brand is a promise of an experience. The best illustration of this principle comes from the lament, "I wish I could check into the hotel room I saw in that magazine ad." All too often, what we experience with a product or service fails to meet what is implied or promised by the brand ahead of the purchase decision. In the earlier days of refractive surgery, this was exemplified by ads promising that patients could throw away their glasses forever. We know that was not true, but that expectation was set, and it brings to mind another saying: "Disappointment is the result of badly managed expectations."

Your role as a surgeon, at its core, is one of managing expectations. Your branding efforts should be reinforced by everything that happens when patients are interacting with you and your team. The customer service you provide is a subset of how patients view their overall experience—the one that has been promised from the beginning of their interaction with you, which long precedes their consultation or surgery.

If you take the time and energy to design the customer experience from the patient's perspective, you will be in a better position to fulfill that brand promise and help the patient have an experience that is truly transformational in nature. This means less reliance on technologies or outcomes and greater focus on everything else surrounding and supporting that outcome and its perceived value. In short, it means taking your brand-building as seriously as you do your clinical and surgical skill-building. ■

Shareef Mahdavi

- Founder and President, SM2 Strategic
- sm@strathspeycrown.com