

BRANDING: THE PROMISE OF AN EXPERIENCE

You are your brand.

BY SHAREEF MAHDAVI



When we think about the term *branding* and what it means today, we first need to go back to its roots. Long before we had marketing terms like *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 formed in the name or symbol of the rancher and used to demarcate 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 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 TV offered a whopping 6 channels that you had to get up and go to the TV to change.

Today's marketplace is overbranded. 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 attempting brand dominance for their products, and 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. Not true.

The implications for today's physician are numerous, and in this article, I strive to list the most important principles to consider when determining a marketing strategy for your 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 practice, most physicians termed this as their reputation. Today, reputation is still



a critical component of the value of your brand (ie, brand equity). The key difference now is that many other elements influence your patients' perception of value (ie, brand value). Once upon a time, bedside manner and clinical skill were the key determinants. In the modern era, you have to 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 a target audience has allowed people 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 across YouTube, Facebook, Twitter, and Instagram. This popularity gave her a new form of power that recently brought Apple to its knees and caused the company to change its policy on royalty payments for the Apple Music streaming service less than 24 hours after Taylor's open letter titled, "Dear Apple," appeared on Twitter.

No. 2. EVERYTHING COMMUNICATES

Somehow, physicians have been led to believe that advertising equals marketing. Wrong. Advertising is one form of marketing. 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's 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, because nobody wants to wait in an era when they can instantly perform Google searches with the smartphone in

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the palm of his or her 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 by which to build patients’ perception of value.

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 patients and the community. Too often, a physician and the 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 comes from a fear of being too narrow in focus and/or a fear of being seen as exclusionary or elitist. Both of these fears are misguided.

Spend time figuring out what you are the “best,” “first,” or “only” at in terms of what you do on a daily basis. Ask your staff and patients for input on this area; they will tell you what they find unique and/or memorable 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 other hyperbole that did not separate it from other business schools in its competition for the best MBA candidates. Incoming dean Bob Dolan (a marketing professor at Harvard Business School both before and after his tenure at Michigan) narrowed the focus to “turning out leaders with a practical, can-do orientation.” Under Dolan’s watch, Michigan shot up to No. 1 on the *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 also that a far higher percentage of those accepted ended up enrolling. This is 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 with a

program that better matched their aspirations. You should aim for the same outcome when positioning your practice.

No. 4. EQUIP YOUR PATIENTS AND STAFF TO BE BRAND AMBASSADORS

The single 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 convert that into long-term ambassadorship for the practice. Most people who have told me they have had LASIK cannot recall the name of their surgeon a few years postoperatively. What a shame!

A large part of the shortfall is that practices tend to give a short-term reward in the form of a gift but skip the hard work necessary to cultivate the long-term relationship. 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 SWAG (“stuff we all get”) presented to patients as a way of thanking them for

their patronage. Personally, I think it is a bunch of crap that becomes low-value branding. Today’s consumer is more sophisticated, and the overbranded society has led to the “logoing” of just about everything, including those bins we put our stuff in at Transportation Security Administration checkpoints. I offer two alternatives that I think are well suited to the physician and practice seeking to distinguish themselves in the community.

First alternative: better SWAG. Because the use of physical objects as memorabilia of one’s experience in your practice can be effective, I do not discount the use

of novelty items altogether. (How many of you hold on to ticket stubs from rock concerts you saw years ago?) There are tons of catalogs and firms that will put your logo on anything. Spend time researching new items that not everybody has yet, and logo these rather than T-shirts and mugs. Yesterday, it was pens; today, it is thumb drives; and tomorrow's prized tchotchke is to be decided. Keep it fresh. Alternatively, perhaps have a selection of different items, and allow patients to pick the one that is 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 their time and money spent with you by making a donation to an important cause 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: all staff members should have their own business cards and be encouraged to give them out to patients and the community. This is the single most powerful form of brand building available, and I find it instills pride in employees like nothing else. It is well worth the \$50 that each box of 500 cards costs.

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. Although patient reviews are inherently limited by the fact that the patient's experience is limited to just a handful of doctors (ie, too small a sample size for the patient's experience to be generalizable), patient reviews can serve an important role in brand building for the practice.

Let's stop viewing negative reviews as an indictment and treat them as what they are, which is feedback on how to improve the practice's customer service protocols and processes. The enlightened practice is not threatened by the occasional low-star rating and instead seeks to understand the viewpoint of the reviewer, no matter how wacky or misguided. The data will be used to seek areas of improvement rather than blame employees.

Social media allows multiway communication among the practice and patients. You can and should use this to build and maintain relationships that extend beyond your current patient base, because patient reviews on review sites are viewed as more credible than patient testimonials that are controlled by the practice. What you want is people talking about your practice in their spheres of influence and sharing their experiences, not just shilling for new patient referrals.

In my opinion, one of the best role models in this area 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 across multiple social media platforms, which he uses to educate the community about eye health as well as to communicate effectively

with his patients. Even if the patient is elderly and does not carry a smartphone or use email, his or her adult child most certainly does and ensures that the 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 purchasing decision. In the early days of refractive surgery, this problem was exemplified by advertisements that promised patients could throw away their glasses forever. We know that is not true, but that expectation was set and brings to mind another saying, "Disappointment is the result of badly managed expectations."

Your role as a surgeon is, at its core, one of managing expectations. Your branding efforts should be reinforced by everything that happens when patients are interacting with you and/or your team. The customer service you provide is a part of how patients view their overall experience (ie, 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's experience from the patient's perspective, you will be in a better position to fulfill that brand promise and to make the patient's experience be truly transformational in nature. This means less reliance on the technology or outcome 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. ■

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