

#### **NATIONAL SEMINAR**

#### "EMERGING TRENDS IN HOSPITAL ADMINISTRATION"



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## **TOPIC**

Do Hospitals need to build themselves as a "Brand"?

How to build a brand in Regional and Global

Healthcare?

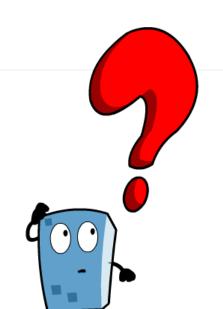


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# DO HOSPITALS NEED TO BUILD THEMSELVES AS A "BRAND"?





## WHAT IS A BRAND?

- Brand is a representation of Who You Are, What You Do, Whom You Serve
   & How You Serve
- 'Branding in Healthcare' is about configuring a 'Patient Experience' that is delivered consistently

Brand is an EMOTIONAL CONNECTION between the PRACTICE and the PEOPLE IT SERVES.



## **BRANDING IN HEALTHCARE**

- Healthcare has always been about 'Brands'
- Providers are diversified and segmented based Size, Specialization & Care
   Proficiency
- Brand Positioning therefore cannot be a MONOLITH, where one approach fits all
- Reputed Doctors & Hospitals have always played a key role in influencing the healthcare choices in their communities
- Some have grown to establish as National / International Brands



## TAMIL NADU'S HEALTHCARE BRANDS

#### **Individuals**

- Prof. Dr. B Ramamurthi –
   Neurosurgeon
- Dr. T J Cherian Cardiothoracic
   Surgeon
- Prof. Dr. K V Thiruvengadam Physician

#### **Institutions**

- Adyar Cancer Institute
- Apollo Hospitals
- Aravind Eye Hospitals
- CMC, Vellore
- M V Diabetes
- Perambur Railway Hospital
- Sankara Netralaya



# HOW TO BUILD A BRAND IN REGIONAL AND GLOBAL HEALTHCARE?





#### **BRAND BUILDING INVOLVES**

- The Fundamental building blocks Assets, Skills, & Processes
- The differentiation is the uniqueness of how they are Configured
- Brand building requires
  - A long term planning
  - Strategic thinking
  - Organizational commitment
  - Appropriate Ongoing Investments



## **CRITICAL ELEMENTS**

#### **GOALS**

Simple, Consistent & Long Term

#### **COMPETITIVE ENVIRONMENT**

Insightful Understanding

#### **STRATEGY**

#### **RESOURCES**

Objective Appraisal of Assets, Skills & Investments

#### **IMPLEMENTATION**

Effective Processes, Seamless workflow, & Responsive Team



## **BRAND IDENTITY LADDER**



**Bonding**: "It's my brand"

Advantage: "It does a better job"

Performance: "It does a good job"

Relevance: "It's for people like me"

Presence: "I tried it before, I am familiar with it"

No Presence: "I did not try it" or "I don't remember it"



WEAKEST

Where

does

your

hospital

stand?



Some Options in shaping the UNIQUENESS of your Brand

## **BRAND IDENTITY**



## 1. PRODUCT/ SERVICE LEADERSHIP

- Brand Focus Medical Technology, Doctor Skills/ Reputation,
   Infrastructure.....
- Scope of Services Specialities, Niches, Procedures...
- Geographic Presence Single location, Value chain....

Leadership positioning requires - Consolidation, Differentiation, Regular Updating & Adequate Resources



## **EXAMPLE: SERVICE NICHE**

- Founded in 1945
- Global leaders in Hernia Repairs
- 'Gold Standard' for medical professionals around the world.
- Case Study by Harvard Business School (2.6 lakh copies sold)



SHOLDICE HOSPITAL CANADA

- ~3.4 lakh hernia
   repairs in 65 years
- 7,500 procedures
   every year
- 2,000 operations scheduled online



## 2. OPERATIONAL EXCELLENCE

- Care givers Team Knowledgeable, Efficient, Professional
- Processes Simplified, Customer centric, Technology
   Empowered
- Communication Effective, Language & Literacy neutral
- Quality Clinical Outcomes / Success Rates, Certifications
- Experience Consumer Endorsements

Process driven, requires — Consistency, Improvisation,
Documentation, Quality Certifications...



## **EXAMPLE: EFFICIENCY & CONSISTENCY**

- Ranked 4<sup>th</sup> best hospital in the US.
- Ranking based on
  - Deaths
  - Reputation
  - Patient Safety



- No. 1 ranking for

  Heart program for 19

  consecutive years

  (Since 1994)
- 9 specialties ranked in the Top 5.



#### 3. CUSTOMER RELATIONSHIP FOCUSED

- Customer Selection Identification of core target groups
- Moderating Expectations Understand, Define & Reinforce key expectations
- Consumer Bonding Simple processes/ workflow,
   Consistency in service & Sensitivity to special needs

Consumers have varied needs, meeting the expectations of multiple diverse groups is not an easy task



## **EXAMPLE: CUSTOMER CENTRIC**



Mayo clinic ranked 3<sup>rd</sup> most trusted out of 1,151 brands across 42 categories for Consumer Trust.



## **FOCUS ON CARE EXPERIENCE**

- Care Providers are focusing on 'Patient Experience'
- 'Patient Experience Summit' organized in US since 2010
- Discussions focused on improving 'Patient Experience'.



- Participation from
  - 2,400 healthcareleaders
  - 45 states
  - 37 countries
  - 730 healthcare organizations



What is happening in the Healthcare Consumer Space

# **MARKET CHALLENGES**



## DISRUPTIVE MARKET DYNAMICS

- Secrecy/Myths in Healthcare EXPLODED by Internet, Social Awareness
- Doctor's Demigod Status CHALLENGED by Consumerism
- Consumer Expectations RAISED by Media, International Exposure
- Dissatisfied Consumers EMPOWERED by the Social Media
- Healthcare Decisions INFLUENCED by Insurance
- Corporatization increased OPTIONS to Consumers





## **CUSTOMER LOYALTY**



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## **CUSTOMER FEEDBACK**



Gaining Consumer Trust & Loyalty is difficult in today's time?



What You as a Healthcare Provider should Remember

# **IN SUMMARY**



## **TAKEAWAYS**

- Brands are more volatile and susceptible to external influences media,
   consumer voice etc.
- Brand building is an ongoing exercise involving continuous engagement
   with the consumers social media
- Brand visibility today can be achieved in a shorter timeframe multiple media platforms (mainline & social media)
- Ensure Connect between Communication and the actual Experience Avoid clichés and exaggeration



#### CONT...

#### Success depends on Institution's ability to manage -

- Core Strengths (Skills, Technology, Infrastructure)
- Boundary spanners (Reception, Nurses, Housekeeping)
- Standardization & Innovation (Processes)
- Customer Oriented Systems (Work Flow)
- Promoting Intrapreneurship (Commitment/ Ownership)

#### Brand Building is Important, Challenging & Fun



## WHERE TO START?

- 1. Don't Shoot for Grand Solutions/ Goals They become out-dated before implementation
- 2. Go for Quick Wins Start with small things/ areas and low tech; Expand when you have mastered your current level
- **3. Replicate the Best Practices –** Good things is already being practised somewhere in your organization, Challenge is to identify it.



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# **THANK YOU**