

The Board and the Brand: A Curious but Promising Pairing

By Ryan Donohue, Corporate Director, Program Development, NRC Health

Building any healthcare brand can be a difficult task. In an industry where some still believe advertising is self-serving and marketing is unnecessary, the idea of strategically creating a powerful reputation and connecting with consumers on all fronts often takes a back seat to a basic and prevalent axiom: provide a great patient experience and everything else will take care of itself. While that's true of current patients who have some level of familiarity with a brand through experience, it ignores wide swaths of the population who either lack an awareness of the brand or choose to go somewhere else. Therefore, branding becomes a necessary tool to spread awareness and instill value that transcends the physical limitations of the patient experience. It's why Southwest Airlines wants you to know it's great even if you're not currently sitting in one of its planes.

An especially difficult challenge for healthcare branding is the concept of a health system. Consumers struggle to connect the dots between disparate care settings. For many consumers, the idea of a system or its "systemness" is a foreign concept. According to NRC Health's Market Insights, the largest study of healthcare consumers in the U.S., when asked if they are familiar with any health systems in their area, 32 percent of consumers are unable to name one. Many revert

Key Board Takeaways

- Encourage the organization to look outside the traditional, episodic view of experience. This allows for a wholistic brand strategy and a better understanding of the long-term relationship between the brand and those it serves.
- Provide examples and ideas from other walks of life in order to round out a health system's brand strategy. Board members often possess an incredible advantage: direct business perspective from a non-healthcare vantage point.
- Push senior leadership to educate and translate their branding initiatives into consumer-friendly communications. Health systems, in particular, are new and often confusing concepts for consumers to understand.
- Ask system leadership essential brand questions like:
 - › What does our brand stand for?
 - › How should our brand make our patients feel?
 - › What's one thing a consumer should know about our brand before an experience?
 - › How are we supporting our ideas with evidence from consumers? How often do we gather the consumer point of view to ensure our ideas are working in the real world?

to naming a hospital, even when specifically goaded to name a health system. With so many consumers unaware of the very concept of a health system, building a meaningful system brand poses an incredible challenge.

Branding: Enter the Board(room)

The brand challenge itself typically rests firmly on the shoulders of the system's marketing and communications leaders. These professionals are tasked with managing the many brand assets

within a health system. They must allot shrinking resources in strategic ways to build awareness among consumers and drive them toward becoming patients. They must also endure strong personalities and competing stakeholders who all want their service or practice promoted the most. Marketing minds in healthcare often need allies at the top of the organization in order to keep their wits about them and actually build successful brands—including the system brand itself. Who better for marketing to seek refuge in than the members of

the board? But this alliance is rarer than one might guess.

Given my background in strategic branding and my frequent work with healthcare marketers, I see the relationship between branding and the board quite often. As it unfolds, it can be peculiar and even a bit awkward. I can no longer count the times I've entered the boardroom ready to present on brand strategy on behalf of a marketing leader only to be cut off by a board member or senior leader wondering what the new business cards might look like. Even when I'm attending in solidarity with other senior leaders who have been yoked with a rebrand or brand repositioning, if you look closely, you can see the pain on their faces as they field questions on the style of the project instead of the substance. Sure, all things brand lend themselves to the style-minded, but at the board level it is essential that the substance—truly the strategy—is discussed first. For

some reason, perhaps the human tendency to be drawn toward shiny things, style often trumps substance.

Even at the highest levels, it's easy to become distracted by the superficial elements of a brand (the logo, colors, shapes, tagline, etc.). These are all important details, but they stem from a larger brand strategy. The brand strategy must be first and its components are where the board's focus should be fixed. The visual details should be left to the trained professionals, such as the marketers, graphic designers, and other creative minds who go to school to learn how to most effectively connect with the consumer through word and picture.

However, some marketers pine away at the opportunity to veer off course in a boardroom, but they're never invited. Many health systems and hospitals refuse to seat marketing at the senior leadership table (or share the discipline with planning,

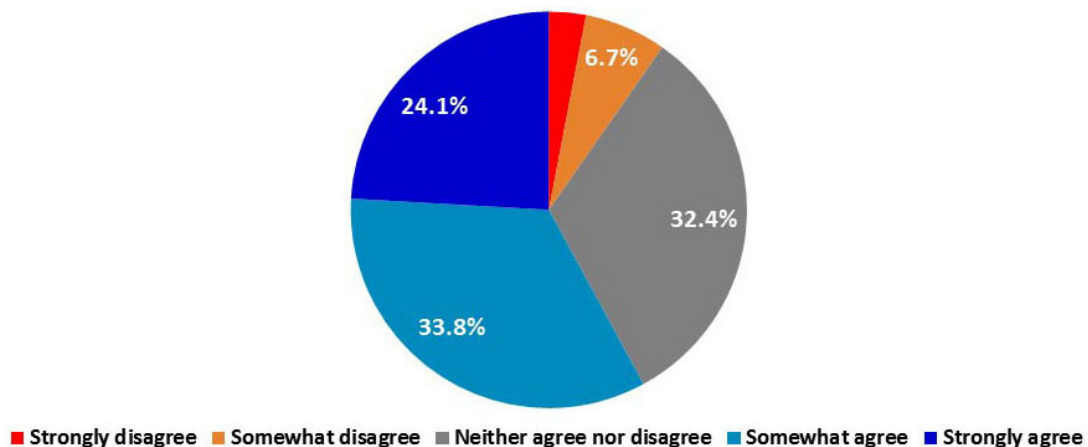
business development, etc.) and opportunities to present to the board are rare or nonexistent. I constantly hear from marketers who are working through a brand project and are told to stay in their lane (or essentially their silo) until the work is done. Then a corporate sponsor or consultant takes the information and delivers it to the board. This unnecessary compartmentalization and exclusion isolates the marketing staff and ensures a distance between how the brand strategy is forged and how it is executed. This division robs the board of the ability to provide essential feedback during the branding process.

The Board Is a Brand's Best Friend

Why lament the disconnect between the board and those who build the brand? Perhaps surprisingly, the board is an excellent resource on the topic of brand strategy and a capable sounding board for ongoing

Exhibit 1: Receiving Care from One Healthcare Organization

“It is important for me to receive all my care and treatments from one overall care provider or healthcare organization instead of many different care providers or healthcare organizations.”



SOURCE: NRC Health's Market Insights study, 2017, average n size = 290,892.

Branding, like beauty, is firmly in the eye of the beholder, and that beholder is an increasingly connected and knowledgeable consumer.

brand campaigns and measurement. I'm constantly refreshed by the perspective of board members whose backgrounds are quite brand-centric. Retail, banking, consumer packaged goods, and many other areas actually deal with the challenges of branding much more often than healthcare. Health systems—often young brands themselves—operate in an industry that has not lauded those who advertise and promote. The belief that “healthcare is different” has been used to minimize some business functions with the idea that patients will show up on their own based solely on physician recommendation or past patient experience. We know that is categorically untrue.

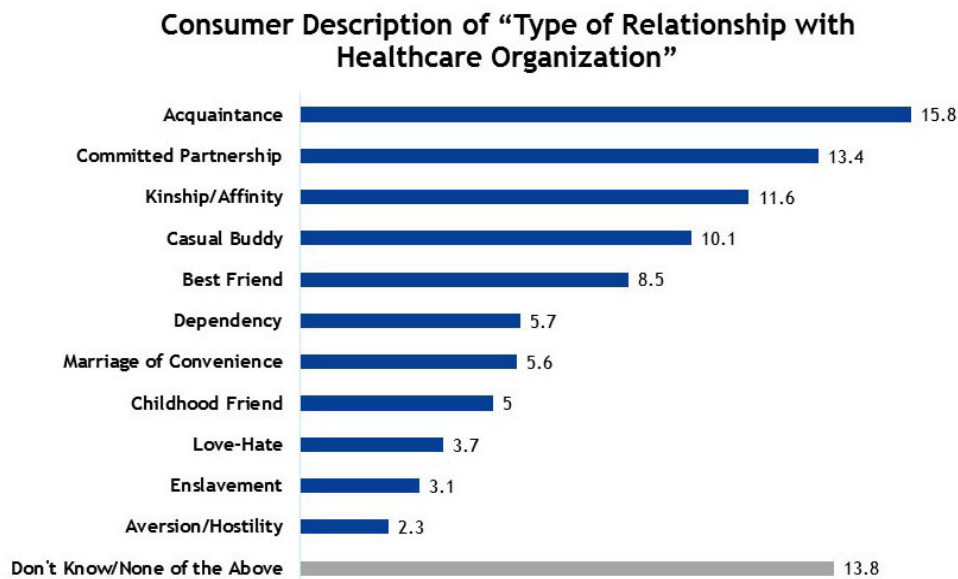
Branding, like beauty, is firmly in the eye of the beholder, and that beholder is an increasingly connected and knowledgeable consumer. They are a consumer who has grown frustrated by the limitations and inconsistencies of healthcare, faces increasing financial pressures to make the right decision(s) for themselves and/or their family, and wants to know they're choosing the right brand for their healthcare needs. In the case of systems, the stakes are even higher and consumers now must consider trusting one brand for many (if not all) their healthcare needs—a supremely important decision.

To appeal to the increasingly prudent and powerful healthcare consumer health systems need to

craft their brand with the consumer in mind. The system brand should convey openness, simplicity, and easy transitions between care settings. According to Market Insights, when introduced to the concept of systems and asked what they would value most, consumers overwhelmingly chose “coordinated care.” Now if only systems could prove they are coordinated.

On a broader scale, when consumers are asked what they truly want from healthcare, many have begun to describe some form of a “relationship” with a brand or provider. Whether they want consistent access to their provider(s), a feeling of connectedness during the experience, or simply someone in the organization they can turn to before, during, and after, consumers want a relationship with a health system. You may ask yourself: can consumers have relationships with brands? With companies instead of people? Look no further than the consumers hunting for Starbucks at

Exhibit 2: The Relationship between the Consumer and Health System



SOURCE: NRC Health's Market Insights study, 2017, average n size = 290,892.

6 a.m. or walking past taxis in the rain to meet their Uber.

The consumer is at the center of a health system's brand and their perception will ultimately determine the brand's success or failure, so healthcare organizations would

do well to value marketing for its proximity to the consumer and its ability to promote the brand. It can also be beneficial for marketing to connect with the board as needed. If systems hope to build a binding, successful relationship with consumers, then they first need to

build a relationship between those who build the brand and the board—an unlikely ally and surprisingly strong branding resource right under their nose.

The Governance Institute thanks Ryan Donohue, Corporate Director, Program Development, NRC Health, and Governance Institute Advisor, for contributing this article. He can be reached at rdonohue@nrchealth.com.

