

## A Hospital Brand Is A Terrible Thing To Waste

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A tidal wave of renaming activity has been taking place among healthcare organizations the past two years. Our research shows over 100 hospitals or healthcare systems have changed their names, and the list is still growing. The high number of new names, or retreads of old names, makes me wonder whether these institutions are so internally focused on change merely for change's sake that they've forgotten that people care deeply about a name, and what it means to them.

So why are so many hospital administrators changing their institutions' names (never a simple or inexpensive undertaking) and what are the real consequences, seen and unseen, that accompany these name changes?

### Common reasons to change a hospital's name

**Mergers and acquisitions:** One institution buys another, or goes bankrupt, or becomes part of a system of hospitals with an established common name—a clear and legitimate reason for changing the name. Or two or more hospitals, often with multiple services along the continuum of care, join together and require some nomenclature to unify them. The typical outcome of such scenarios? Once the name change takes place and the signage and business cards get redesigned, the branding efforts stop. Yet that's when branding should really begin in earnest.

**Institutional change:** The old name is out of alignment with the new scope of services, and a name change seems an appropriate response to this growth. Press copy usually reads like this: "Our new name reflects our health system's substantial growth throughout the past 40 years." Revealing nothing more than that, this reason leaves you thinking, "So what."

**Expansion:** Many hospitals now call themselves "regional" medical centers. As one hospital states: "The use of 'regional' reflects the addition of comprehensive services that make the hospital a destination facility rather than a jumping point for a higher level of care." Is this enough explanation for consumers to really believe this facility is now a destination, and that the old one was merely a transfer station to other hospitals with higher levels of care?

**Consumer comprehension:** “After 14 years trying to get people to use its name correctly, Bryan LGH is losing the name it adopted after a merger and is renaming itself Bryan Health. The new name reflects the system’s growth over the past 15 years.” Apparently, this Nebraska health system could not get people to say the old name right, so the new name comes along to lend a hand. name.

**A fresh start:** “To help the hospital’s branding and marketing, hospital officials have been saying for months that the facility needs a fresh start and a new name with a regional focus to improve its viability and reputation. Studies have shown a negative perception of the hospital, and that people in Palm Harbor believe Tarpon Springs sits on the lower end of the economic-social status.” Ever heard of lipstick on a pig?

**To clarify the community it serves:** A health center in Idaho changed its name “to communicate its openness to everyone in the community, regardless of health insurance. A common public perception was that the organization served only people who could not afford insurance.” There’s that lipstick again.

**To cut costs:** Although this seems like a noble gesture, it’s often a hollow one when you really study the numbers. “The privatization of these hospitals is part of a broader move to privatize nine hospitals under LSU Health Care Services Division in an attempt to cut costs. However, a report from the Louisiana Legislative Fiscal Office found the privatization will generate about \$38.8 million less in lease payments than the \$140.3 million projection in the state budget. In addition, while the legislature said the privatization plan will save the state \$100 million annually, a state audit said layoffs associated with the plan could cost more than \$40 million.”

**Broader goals/new vision:** “This new name embraces the spirit of our new networks of care, which focus not just on hospitals, but on the broader delivery of healthcare through our medical groups, outpatient services and other healthcare programs.” And similarly, “Our new organizational structure aims to facilitate a team approach as the physician practices move toward a patient-centered medical home model.”

**To differentiate from competition:** The Methodist system, now Houston Methodist, changed its name to differentiate its hospitals from approximately 80 other Methodist hospitals. “While there are many other Methodist hospitals across the country, this new name will establish, quickly and permanently, the fact that Houston Methodist is indeed the only one that is leading medicine, and the one that is becoming a national presence,” the president and CEO of Houston Methodist said.

**“Hospital” better word than “medical center”:** “Our research indicates a stronger association between higher levels of care and the word ‘hospital’ than with ‘medical center,’” said the president and CEO of a Dayton, Ohio children’s hospital.

## Changing a name is not at all the same as rebranding

Yes, names are critically important. But they only have impact if they mean something in the minds of the consumers you are trying to capture. And mind-share doesn't come along just because you refreshed your name, or chucked it altogether and came up with a new one. If anything, you are in danger of creating confusion, cynicism and commoditization. Then, price will become the only driver of choice.

So what *really* is a brand? Brands and their names should bring clarity and simplicity to a decision process so that, in the case of healthcare, people can choose one institution over another in their search for one that matches their values and needs. The name is extremely important, but only if it represents something.

### For hospital administrators considering a name change for their organization:

**1. A name is a very important symbol** by which an organization can communicate the essence of what they are and project a snapshot of the promise they are making. A good, effective name should be well-conceptualized so that it captures and communicates the brand. Usually, however, it requires additional help making the brand promise come alive.

**2. A brand promise must be consistently delivered at every touch point**—as if it is Starbucks. The name must always communicate the anticipated experience.

**3. Names and their associated brands are a way to differentiate from the competition** by communicating your unique proposition, range of services, location, programs, affiliation, expert staff, latest technologies, cutting-edge research...fill in the blank.

**4. The complexity of the healthcare experience requires the brand to simplify the decision-making process.** The name and the brand story serve as a filter, an emotional bond, and a compass, orienting people toward your institution or away from it.

**5. A hospital's name and the brand it represents should set the platform for future growth.** In these changing times, the key question we all must ask is: Can we create and communicate a brand that makes your organization the place to work and the place to go for healthcare. If you don't tell your story, the public will tell it for you, and you may not like what you hear.

### Where's the strategy? I can't seem to find it anywhere.

From the marketing and anthropological work that I do out in the field, I continually see widespread name changes that are happening without a focus on the brand. And my biggest concern is, Where is the strategy? Name change is often not driven by a strategic process, but

in many case, is not much more than a logo, a new color palette and the celebration of having something new. The danger in that is that these are changing times. And I don't want the hospitals to be like the railroads. If you remember, railroads had a golden age for about 40 years until cars and airplanes took over. They did not transform themselves quickly and strongly enough, and got left behind as the dominant form of transportation in the U.S.

Hospitals are facing the same kind of changing times. They are no longer in just the hospital business—they're now in the "care coordination business." One way an organization can emphasize this renewed focus is through a name change, it's true, but the more important question is: What should that name mean and how do you make it come alive.

### Grow your brand share by instigating community involvement

Brands are really quite interesting since they're so experiential. The crucial question becomes: How do you get people to experience you when they don't need you, so that they know what to expect when they do.

One medical center I'm familiar with held a Men's Day recently. They had 70 men attend a session all about men's health, none of whom had been ever been to that hospital before, and all of whom left with a different impression, a positive experience of it. Such experiences are terrific ways of introducing yourself to your non-users—what you represent, your values, what you have to offer them—ahead of time. The trick is to engage your community in ways that make them feel like they are part of your flock before they have a healthcare need that will require them to choose which facility they'll go to.

### How often should a health system brand reinvent itself?

There's no cookie answer here. My advice to any healthcare organization contemplating a name change would be: Take a look at who you are today. Is it the essence of who you want to be, what you want to be known for? If it's resonating with consumers, it's a strong brand. Then take a poll, do some research. If you hear from people that they would never go anywhere else, there's no sense in changing. If, however, you get less than stellar reactions as to who you are and what you stand for, maybe it's time to take a look at a brand overhaul, including—but not only—a name change.

And on the other side of the fence, I'm seeing name reinvigoration: hospitals staying true to their names and building their brands internally and externally, using their names to really differentiate themselves from the rest by creating a story.

## Especially now, the power of brands is crucial during healthcare's evolution

Everything's changing these days, from the doctor-patient relationship to how people now go online to make decisions about their healthcare. Brands are now more important than ever as vehicles to build, or re-build, relationships with consumers in innovative ways.

Having said that, how do you inspire people to feel that you are the right solution for their healthcare needs? How can you tell your story so consumers see you as a highly valued friend? What stories should your employees tell? Remember, they are your brand ambassadors. Who are they telling about this wonderful place where they work, and what are they saying? And don't underestimate the importance of your senior leadership as brand builders. They need to be driving change and inspiring employees, physicians and patients. If they're not, your brand will be simply perceived as sizzle without the steak.

If you are going to thrive in these changing times, what really matters is who are you and why should I choose you. If you change your name, it may dilute the brand you have. So you must protect it very carefully and tell your story through your name just as carefully, inside as well as outside. If it's the same old story with a new name, why bother changing your name. And healthcare is not a place or thing but an experience. So if you are going to really matter to your community, you better figure out what that actually means. Then go tell your story, and tell it well.

## About the Author

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With over twenty years of experience as a senior executive with financial services and healthcare institutions and her academic research as an anthropologist studying change, Dr. Simon's helps companies discover new ways to see, feel and think about their businesses.



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