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eNews

## **Six Steps to Evaluating and Improving Branded Experiences through your StrokeSense Program**

*Highlights from our recent webinar featuring Robin Segbers and Anne Theis*

Consumers have shifted their expectations from "hearing" about your organization's features and benefits to "experiencing" your brand on an emotional and experiential level. How does your patient experience your brand; does the actual patient experience support your brand promise? The Strategy Group brand strategy experts Robin Segbers and Anne Theis discuss the importance of "Branded Experiences" during our last StrokeSense webinar. To implement the strategy recommended in the webinar, utilize one of your StrokeSense team meetings to work through the following six steps.

### **Step 1: Get the Patient Perspective**

A brand is not what you say you are; it's what your customers - your patients - believe about your organization. To determine what patients believe about your brand, put yourself in their shoes. As a group work together to answer the following questions:

- a. Who does your audience think you are?
- b. How do you want them to think of you?
- c. Why is this important to you?

### **Step 2: Evaluate your Service Line Brand Support**

What is your organization's "master brand?" Does your neuro service line and stroke program brand support the promise of your master brand and if so, how? Does it elevate the master brand? Does it provide a consistent experience to support the promise? Does it create a memorable and "talkable" experience that makes the brand promise more tangible?

### **Step 3: Investigate your Brand Delivery**

Does your patient experience live up to your brand promise? This portion will take some "out of meeting time" to complete. Identify those touchpoints that make up the cardiovascular service

line brand experience, such as:

- Encounters with staff
- Encounters with clinical staff
- ED visits
- Scheduling
- Technology used
- Facilities, amenities

#### **Step 4: Evaluate Touchpoints**

Create an evaluation process that measures the following for each "touchpoint" your group has identified that can, or should, support your brand promise. Use the "Quality Measurement Tool" located in Chapter 6 as well as the "Competitive Snapshot" and "Competitor Assessment Worksheet" located in Chapter 3 of your Implementation Guide and Tool Kit to assist you with this Process.

- How does this touchpoint impact the customer's overall perception of their brand experience?
- How likely will customers discuss this touchpoint with friends, family, co-workers and other prospective customers?
- How likely are your customers able to compare this touchpoint to that of your competitors?
- How many people are impacted by this touchpoint?

#### **Step 5: Prioritize Brand Experience Aspects**

Once the above steps have been completed, prioritize all aspects of the brand experience that need to be improved in order of importance. Which need to be addressed first?

#### **Step 6: Create a Plan**

Use the information you have gathered and create a plan to fine-tune and re-tool your stroke program brand experience at each patient touchpoint. Plan as a group how and when you will assess the impact of touchpoint improvements.

[Download a PDF copy of the webinar](#) and contact your StrokeSense consultant to discuss ways that you could implement Robin and Anne's suggestions to create a differentiated, branded experience for your patients.

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## **Upcoming Webinar in January**

*Save the Date: January 16th Webinar on "Organizing Regional Stroke Networks to Increase Acute Stroke Intervention"*

Learn from nationally-recognized stroke expert and StrokeSense Physician Champion Dr. Marilyn M. Rymer, M.D., medical director of Saint Luke's Hospital in Kansas City, Missouri about "Organizing Regional Stroke Networks to Increase Acute Stroke Intervention". Dr. Rymer will discuss the importance and the process of how to effectively engage hospitals, physicians and first-line stroke responders in your area to create a regional stroke network that provides more rapid, accurate diagnosis and care for stroke victims thereby improving stroke mortality and disability rates in your area.



Organizing an interventional stroke program is proving to be an effective way of substantially improving the tPA administration rate, and outcomes, for stroke victims. In Kansas City, Missouri the Mid America Brain and Stroke Institute at Saint Luke's Hospital has achieved a high level of success in acute stroke intervention by coordinating a Kansas City regional referral

network. The network links primary care hospitals and physicians to the certified stroke team at St. Luke's and educates emergency responders about stroke symptoms and diagnosis so that patients are appropriately directed to 'stroke ready' hospitals. [Click here to register.](#)

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## In the Know

- [Statins Can Increase Brain Hemorrhage Risk After Stroke](#)
- [Cholesterol Seen Tied to Heart Disease, Not Stroke](#)
- [Good Physical Function Halves Stroke Risk](#)
- [Stroke Patients Retain One-Arm Therapy Benefit for Two Years](#)
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