

DISPATCHESTM

Insights On Brand Development From The Marketing Front

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COMMITTING TO MARKETING EXCELLENCE

The New Year is less than one month away. How quickly 2009 year has gone by. Many of us will be making resolutions for 2010. Undoubtedly, if we do, our resolutions will include what we hope to achieve in our work life. After all, we are all marketing professionals. One of the resolutions we hope you will make is to commit to achieving marketing excellence for yourself and your organization.

In past DISPATCHES we have expressed our concern with the vast majority of marketing excellence programs and initiatives. Why? Well they tend not to be about marketing excellence. Instead these programs have typically been about getting marketers to perform up to some norm. But the “norm” is not excellence. It’s far from it. The “norm” is merely an average pattern. “Excellence” is about “superior” or “outstanding” performance. The search for excellence is a never-ending quest because once achieved we need to take our performance to yet a higher level.

Dr. Atul Gawande, surgeon and author of BETTER: A Surgeon’s Notes on Performance, explores variations in performance of health care practitioners and their organizations in his book. Specifically he relates significant differences in performance of specialized centers for the treatment of cystic fibrosis. Those of us interested in achieving excellence, whether it is in marketing or some other area, can learn from his discoveries.

Cystic fibrosis is a genetic disease that strikes children. The disease is recessive – both parents must be carriers and pass on the defective gene. A mutant protein interferes with the cell’s ability to manage chloride in the body. The result is a thickening of secretions throughout the body. This leads to blocking the flow of digestive enzymes in the pancreas. This results in the child’s inability to absorb food and grow strong. More critical, however, mucous fills, thickens and hardens in the small airways of the child’s lungs. This significantly diminishes lung capacity and progresses until the lungs no longer function.

Dr. Gawande reports that 117 specialized treatment centers for cystic fibrosis, all having undergone and passed stringent certification, produce vastly different outcomes. Success in this case is not just another number but means a real difference in keeping patients alive and thriving, longer. Dr. Warren Warwick, a pediatrician, and his organization, Fairview-University Children’s Hospital, is the positive deviant (or as Malcolm Gladwell would call it “outlier”). He is keeping his patients alive and thriving for longer, significantly longer. And, no matter how well the other centers progress his center keeps getting better. They outperform the rest by a wide margin.

What makes Dr. Warwick and Fairview-University Children’s Hospital achieve excellence (vis-

à-vis all the others) in treating cystic fibrosis? His approach is uncompromising. He sets the bar exceedingly high and gets everyone (himself, the organization and his patients) to stretch for it. No exceptions. No excuses. If a patient's lung capacity diminishes from 109% to 90% Dr. Warwick seeks to determine the cause and remedy it. While 90% may appear excellent to most healthcare providers he is not satisfied. He wants more for his patients and he will work with his patients to achieve it.

Dr. Warwick explains to Dr. Gawande that what may appear to be an insignificant difference on a daily basis can be profound when one reconsiders it within the context of a year. He states that someone with CF (cystic fibrosis) has a daily risk of getting a bad lung illness of only 0.5%, which appears rather insignificant. That someone receiving treatment has a 0.05% daily risk of illness. In other words the patient has a 99.5% chance of staying well without treatment or 99.95% if s/he is undergoing treatment. Does that seem to be a terribly big difference to you? We doubt it. We would wager that the vast majority of people would conclude that these are both excellent and virtually the same. But not Dr. Warwick. When viewed from the perspective of a year it's the difference between a 16% chance of the patient getting through the year without getting sick or an 83% chance. Now that's something we can all agree is significant, particularly if you are the patient, or one who is committed to achieving excellence.

	<u>Daily Risk (%)</u>		<u>Annual (%)</u>
	<u>Getting Illness</u>	<u>Staying Well</u>	<u>Staying Well</u>
CF	0.5	99.5	16
CF Plus Treatment	0.05	99.95	83

Significant progress has been made in the treatment of cystic fibrosis thanks to the pioneering efforts of Dr. Warwick and his predecessor in this area, Dr. Leroy Mathews. According to Dr. Gawande the average life expectancy of a CF patient back in 1957 was only 3-years of age. Today a patient with cystic fibrosis has a life expectancy into her/his forties. CF patients can expect to live even longer under the care of Dr. Warwick. To him averages mean nothing. He is a doctor on a mission not just to treat but also to heal. He doesn't just measure patient performance but adapts and innovates treatment protocol to extend and enhance the quality of his patients' lives.

Resolve to achieve marketing excellence for 2010. If you do you are committing to being, like Dr. Warwick, a positive deviant or outlier.

BOATS & HELICOPTERS:

Here are some suggestions for achieving marketing excellence personally and for your organization:

1. ***Set the bar high, and don't compromise.*** Being average doesn't amount to much. Sure most people fall into the norm. But you are committing to excellence and the norm is not the same thing. As Leo Burnett, the founder of the advertising agency that bears his name stated, "When you reach for the stars you may not quite get one, but you won't come up with a handful of mud either."

But the second part is to be unyielding in your quest. Do not compromise. Staying well

on a given day of 99.5% if not enough for Dr. Warwick. He can do better and so can we. Accept no excuses. Make excellence happen.

2. **Measure everything and understand what the results mean.** Quantify what you expect or hope to achieve. Then measure the results. If no such measurements exist go out and innovate in getting relevant measures. Importantly, get beyond the numbers to understand the reasons for variances – positive and negative.

Even if you believe you cannot quantify or get the measurements you need then find a way to “objectify your subjective judgment.” Stick with best practices, processes and principles. Find a way to score whether you and your organization are following them. For example we have developed the Creative Brief Scorecard to measure the potential effectiveness of a given creative brief. Importantly, it helps serve to indicate where and what work is needed to make the creative brief strategically appropriate and single-minded.

3. **Adapt and innovate.** Use your creativity to adapt plans and work to meet your expectations. A key difference will be your ability to innovate, to go where others have not gone or even dream as possible, in achieving excellence. For example, Dr. Warwick created a mechanized chest-thumping vest for patients to wear. Thanks to his innovation some 45,000 patients today are able to comply and persist with essential therapy to keep their lungs free of breath depriving mucous.
4. **Work hard to execute perfectly.** Don’t forget execution. Pay attention to each and every detail to ensure your execution is perfect. Sometimes the difference between excellence and the norm is superior execution.
5. **Read BETTER: A Surgeon’s Notes on Performance.** Be an active reader and look for additional boats and helicopters found throughout the book on improving performance.

Commit to marketing excellence for 2010 and achieve it. Best wishes for success to you all.

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