

Yale Practice

Published by the Yale Medical Group

New Board of Governors Member Elected

Dr. Ronald Salem, Associate Professor and Chief, Section of Surgical Oncology, has been elected to the Yale Medical Group



Board of Governors to fill the position left vacant by the departure of Dr. Barbara Ward. Dr. Salem completed his medical school training at the University of Rhodesia, general surgery residencies at Hammersmith

Hospital in London and New England Deaconess Hospital, and fellowship in surgical oncology at the Dana Farber Cancer Center and New England Deaconess Hospital. Congratulations Dr. Salem!

ACD System Dramatically Decreases Drop Call Rates

The patient call abandonment rate for Patient Financial Service's Central Registration and Patient Services lines has decreased significantly in the last three years. Both departments use the Meridian ACD (automatic call distribution) System. This system tracks all phone productivity and calculates patient wait times. It also tracks the total number of patients that hang up after waiting in the queue for a representative to assist them.

In 1997, the call abandonment percentage for Patient Services was 42%. "That means almost half of the incoming patient calls were lost prior to being answered," explained **Sally Thibodeau**, Associate Director, Patient Financial Services. "We are very pleased to report that the call abandonment rate has decreased significantly each year and was a record low 3.5% in January 2001," said Thibodeau.

The Central Registration Department was

What's In A Name?

You may have noticed that the Yale Faculty Practice, the physician organization of full-time Yale School of Medicine faculty, has changed its name. The decision to rename the faculty organization reflects a variety of factors including a change in the function, governance and purpose of the organization. As the faculty practice has evolved to become a more organized academic medical group, the leadership felt it was necessary to ensure that our faculty could be properly recognized by patients and referring physicians. In extensive discussions for more than a year, a strong consensus developed that our name should clearly convey who and what we are, communicate our reputation as a unique physician practice organization, and express the breadth and depth of our medical expertise.

To explore our options with respect to changing our name, we engaged the services of market researcher **Jeffery T. Wack** of JT Wack & Company. Dr. Wack conducted several focus groups in the winter of 1999 and confirmed that there was little market recognition or familiarity with the "faculty practice." In fact, the name suggested to some people that care provided by this entity was delivered by interns, residents and other trainees, or people "in practice" to be physicians. Few understood that the Yale Faculty Practice represented direct patient care by university professors. In light of these findings, the consultant concluded that changing the name of the organization would be an important step towards communicating our purpose. As we stand poised to expand our clinical activity, the advantages of a better-understood identity are clear.

The identification and selection of a new name was achieved through the use of focus groups. Participants included current users and non-users of Yale medical services. Both groups were asked to consider a list of 11 new names. Their reactions to particular words were scrutinized, with special attention to their reasons for preferring one name to another. Connotations of words were explored. For example, the implications of the words "doctor" vs. "physician" and "practice" vs. "group" were considered. According to Wack, we began our name search with a major advantage: "There is vast equity in the word "Yale." Yale connotes quality and prestige." Any new name would have to build upon the established brand equity that already exists. Further, consumers already understand that a "medical group" is a collection of physicians, usually of different specialties, where patients can receive health care. According to input provided by the focus groups, marrying the equity in the Yale name with the existing understanding of what a medical group is, yielded the most powerful name. "But," he continued, "the word "university" is also useful in reinforcing the link between the medical group identity and the uniqueness of our practice." "University" elicited many positive images such as "leading edge," "new technology" and "experience."

Thus, "Yale Medical Group" (YMG) emerged as the preferred name for our group practice. "In conjunction with the descriptive tagline, *The Physicians of Yale University*, it sends a clear message about our academic medical group and the clinical care we provide," explained Mary Hu, Director of Strategic Development and Marketing, who spear-headed the identity project. In November, the Board of Governors formally approved "Yale Medical Group" as the new name of our organization.

Names Are Fine, But An Image is Worth a Thousand Words

After adoption of the new name, we then engaged the design company, Group C, Inc., to develop a unique graphical identity. **Brad Collins**, principal of Group C, Inc. explains: "A strong

Physicians Join Yale Perinatal Medicine

The Yale Medical Group is pleased to introduce new physicians in the Section of Perinatal Medicine:



France Galerneau, M.D.
France Galerneau, M.D. is a graduate of the University of Montreal School of Medicine. She completed her residency in obstetrics and gynecology at the University of Montreal and her fellowship in maternal-fetal medicine at the University of British Columbia. Before joining Yale, she practiced at the University of British Columbia for 11 years where she was also the Medical Director of the High-Risk Antepartum Program of the University of British Columbia Women's Hospital. To contact her, call 203-785-5376 or france.galerneau@yale.edu.



Keith Williams, M.D.
Keith Williams, M.D. graduated from the University of West Indies School of Medicine in Jamaica. He completed his residency in obstetrics and gynecology at the University of Alberta and fellowship in maternal-fetal medicine at the University of British Columbia. Before joining Yale, he practiced at the University of British Columbia for 15 years. To contact him, call 203-737-5166 or keith.williams@yale.edu.

What's In A Name? (continued)

corporate mark visually communicates a distinctive organizational identity." He saw the development of an overall identifying mark as an opportunity to communicate a united group practice identity. "Our challenge was to develop a mark that would make the practice recognizable as one group to various publics."

In describing the design process, Collins continued: "It quickly became apparent to us that the word "Yale" itself is the most powerful symbol. Any additional graphics detracted from the significant brand already embodied in that word." The two-color identity serves to reinforce and highlight the name. The shade of blue is one of seven "Yale blues." Both the color – blue, and the typography – Adobe Garamond, were selected to reinforce the connection to the University.

"We believe that the new name and identity will assist us in building our reputation as a strong, progressive physician practice organization with a unique clinical niche," said David J. Leffell, MD, Director of the Yale Medical Group, "Our goal is not to separate ourselves in the public mind from Yale-New Haven Hospital or any other health provider group that uses the word "Yale". Rather, we view the new name as a means of enhancing our opportunities for growth which will benefit the hospital, the School and the health system in a mutual fashion."

The logo will be incorporated in all YMG communications materials including publica-

tions, stationery, medical forms and invoice stuffers. We invite all clinical departments and sections to adopt the new name and identity in their communications materials. "Eventually the new logo will become identified in our region with clinical excellence. I think the departments and faculty will benefit from choosing to use the name and graphic," Hu suggested. The YMG will be pleased to assist in these efforts.

For more information about the new logo and how you might include it on your clinical materials, please contact Mary Hu at 737-4218 or at mary.hu@yale.edu.

ACD System (continued)

established in 1997. This department pre-registers all patients that have scheduled appointments at the Yale Medical Group. There are currently two ACD lines: the main registration line and the "Hot Phone" line which is a direct line from all of the clinics to Central Registration. Thibodeau reports, "In the first year of operation, the registration line and the "Hot Phone" line averaged an abandonment rate of 10% and 8% respectively. In January 2001, the percentage of lost calls for the main registration line was at 4%. For the "Hot Phones", only 1% of all incoming calls were lost."

To learn more about the Meridian ACD System, please contact Sally Thibodeau at 737-1876 or by email at sally.thibodeau@yale.edu.

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Yale Medical Group
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