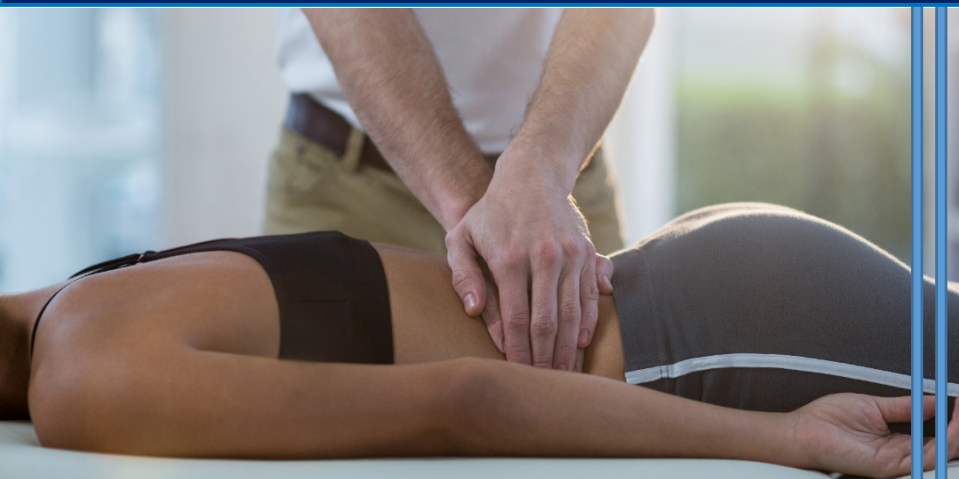


# TRAIN the ULTIMATE PHYSIO MASTER PLAN DOCUMENT



Nick Schuster

The Ultimate Physio

This is an outline of the work load for each module for both clinic owner and team member.

Train the Ultimate Physio Course Outline

	Clinic owner	Team	Work load Legend
	1	1	None
	2	2	Light
	3	3	Moderate
	4	4	Moderate
	5	5	Intense
	6	6	Moderate



## PRE-COURSE COMPLETION

Please complete the following things before starting on your course modules:

Get your team to fill in this survey - Employee Engagement Survey [CLICK HERE](#)

Watch this video on how to understand and administer the survey. [CLICK HERE](#)

Clinic Owner number of hours worked per week:

Clinic Owner number of CLINICAL hours worked per week:

Clinic Owner revenue as % of gross clinic income:

Clinician patient visit average for last full quarter (total number patients divided by total number new patients, for each clinician)

**PRE-COURSE GOALS**  
(Where do you hope to be one year from now)

Clinic Owner number of hours worked per week

Clinic Owner number of CLINICAL hours worked per week

Clinic Owner revenue as % of gross clinic income:

Clinician PVA in 1 year (for the relevant quarter)

## MODULE 1 - CLINIC OWNER

My Story:

My Values:

**My Why:**

**My DISC Profile:**

**My Motivators:**

**My Beliefs:**

**My Money Beliefs:**

INSERT CLINIC NAME HERE:

Our Vision:

Our Purpose:

Our Mission:

Our Culture:



Our Clinic Goals:

**MODULE 2 - OUR TEAM**

Team Member  
No.1's Name:

Values:

DISC Profile:

Motivators:

Language of  
Appreciation:

Beliefs:

Money Beliefs:

Team Member  
No.2's Name:

Values:

DISC Profile:

Motivators:

Language of  
Appreciation:

Beliefs:

Money Beliefs:

Team Member  
No.3's Name:

Values:

DISC Profile:

Motivators:

Language  
of Appreciation:

Beliefs:

Money Beliefs:

Team Member  
No.4's Name:

Values:

DISC Profile:

Motivators:

Language  
of Appreciation:

Beliefs:

Money Beliefs:

Team Member  
No.5's Name:

Values:

DISC Profile:

Motivators:

Language  
of Appreciation:

Beliefs:

Money Beliefs:

Team Member  
No.6's Name:

Values:

DISC Profile:

Motivators:

Language  
of Appreciation:

Beliefs:

Money Beliefs:

Team Member  
No.7's Name:

Values:

DISC Profile:

Motivators:

Language  
of Appreciation:

Beliefs:

Money Beliefs:



Team Member  
No.8's Name:

Values:

DISC Profile:

Motivators:

Language  
of Appreciation:

Beliefs:

Money Beliefs:

## MODULE 3 - THE CLINIC'S NUMBERS

**(You need to attach a copy of the following files to your return email)**

P and L - last financial year  
P and L - last 3 months  
P and L - last month  
Team stats - weekly numbers  
Last month's numbers  
Last 3 month's numbers  
New patient stats – referrals

## MODULE 4 - CLINIC OWNER'S GOALS

[Download the 90 Day Goals template from the resources page here](#)

## MODULE 5 - TEAM MEMBER GOAL

[Download the team goals template from our resources page here](#)

## MODULE 6 – WEEKLY LEADSHIP STRATEGY

Download and fill in the Time Audit [HERE](#)

Download and fill in the Team values template [HERE](#)