

Letters to the Editor

Business knowledge is for all physios

With the demise of the *Business in Practice* publication as part of the APA review, I am very pleased to see business articles appearing in *InMotion*. Business knowledge is obviously important for those owning a private practice, but it is also valuable for any member working with teams, budgets, service options, payers and employers.

The article by Mark Alexander ('Strategic thinking', February *InMotion*, p 28) is an excellent overview of strategic positioning and recognition of where your patients may choose to spend their disposable income (aka competitors). He mentioned the '4 Ps marketing strategy', which, unsurprisingly, in view of his entrepreneurial product development, cites those relating to marketing tangible products: price, product, promotion and place.

More recent literature looking at services has added three more Ps to the mix: people, processes and physical evidence. The first is your team and its skills; the second relates to efficient, client-focused systems; and the third is the look and feel of your business as experienced by the client (think uniforms, cleanliness, layout, decor, etc).

James Schomburgk ('Growing your practice', February *InMotion*, p 30) alludes to these service characteristics in his article on the Net Promoter Score (NPS), which is a useful quantitative measure of how likely your clients are to recommend your business. However, the NPS does not offer any information as to why you are, or are not, being recommended. It is a superficial scan to identify a need for improvement but doesn't tell you in what area(s). I salute his improvement in the NPS; all physio clinics should consider a score of 80 to be the minimum given the close relationship with our clients.

Under the headline 'Growing your practice', Schomburgk states that 'clinical excellence leads to great client outcomes'. No argument from me; however, this alone may not grow your practice in terms of business outcomes. Cash flow and profitability allow re-investment in the business and those that work in it, so pricing strategy, cost management, efficient systems, strategic hiring and training must be aligned with the clinical excellence standards and consistently applied.

I look forward to reading further contributions on the business and leadership elements of successful physiotherapy practice, whether it is in the private, public or community arenas, where the challenges of managing resources, time and people in the delivery of quality care have more similarities than differences.

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Balance and integration needed

I applaud the article by Sam Abbaszadah and the APA for publishing it ('A balancing act', February *InMotion*, p 14). It's a genuine concern: many of my clients have stated that I'm the first of the numerous physios they have seen who has applied hands-on techniques. Given the manual roots from which the profession has grown, I find that astounding.

Often, hands-off approaches do help where traditional manual therapies fail, particularly where chronic pain exists. Perhaps this failure relates more to how we are utilising the techniques—focusing on just treating where it hurts, addressing just the musculoskeletal system and applying techniques in a manner that attempts to force change upon the body.

Like Sam, I suggest therapists seek balance between the two styles of treatment. I also encourage physios to explore the emerging holistic and integrative manual therapy approaches which attempt to redress limitations in the traditional approach. After all, if we choose to ignore the very skills that helped establish physiotherapy, that niche may be gladly filled by other professions.

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