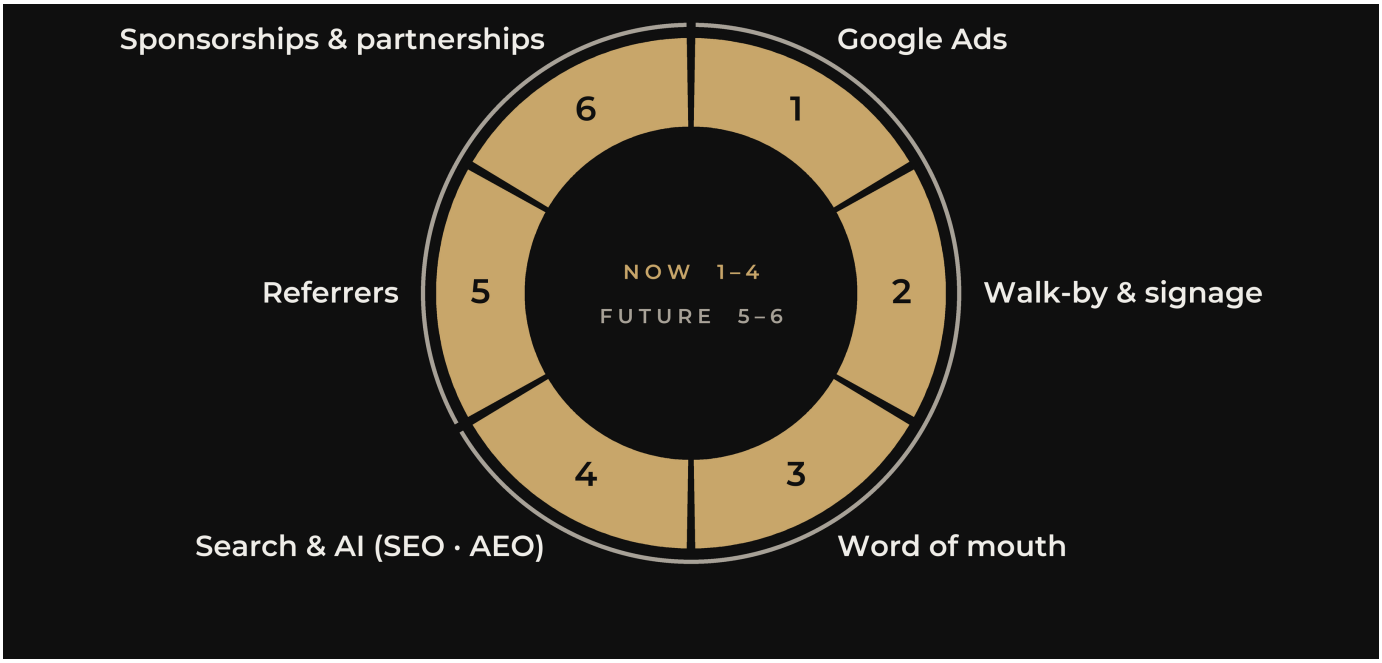
6 Ways to Get New Patients Into Your Diary

The companion guide to the video

This guide goes with the 12-minute video of the same name. It takes the six areas of marketing from the video one page at a time, with a few things to look at this week, and finishes with a two-minute score of your own clinic. The quotes and numbers come from Shane Gunaratnam in the video.

When the white space in the diary comes from too few new patients, the fix is an engine for acquiring them. Most marketing advice sells one piece of that engine. Each piece works for the purpose it was built for, and each one fades when nobody works it. There is no one lever.



Now and future

Now is what fills the diary soonest: Google Ads, walk-by traffic and signage, word of mouth, and search on Google and AI tools. It keeps the business alive and the clinicians engaged, and it is where most owners spend their time.

Future is demand that takes longer to build and keeps paying back: referrers, and sponsorships and partnerships. It is the work that most often gets neglected, and in the video it is the work that grows a practice the most. A clinic needs both: the now methods to feed it while the future ones are built.



Watch the video: youtube.com/watch?v=qxVdrfuFZas

1 · Google Ads

NOW · aimed at next week's diary



If you had to find a new patient today, Google is where to put the money. Someone in pain types "physio near me", clicks one of the first results and, if the page looks and feels right, books. People with acute pain do not spend long shopping around.

> "Your next new patient is most likely to come from Google search."

The catch is the agency. You pay once for the advertising and again for the agency. In the video, Shane's observation is that at the scale most small businesses run, the agency can take half of the total advertising budget, so only half reaches Google, and at that ratio a return on ad spend is very hard to reach.

> **This week**
>
> — Search "physio near me" (or your own profession) on your phone from outside the clinic, and note who comes up first.
>
> — If an agency runs your ads, put last month's agency fee next to last month's spend with Google.
>
> — Go from the search result to a booking the way a patient in pain would, and note anything that would make you give up.

2 · Walk-by traffic and signage

NOW · aimed at next week's diary



The people walking past your clinic are your locals. A clinic without adequate signage, without someone on the front desk, or that is simply hard to find, loses them before they know it exists. Physical marketing is among the cheapest forms of marketing: a sign goes up once and stays there for a long time.

In the video, Shane tells of the posters he put up in the toilets at the local shopping centre: one cost $20 and brought in five patients, who came in saying they had seen it there. The point is to create activity in your area, rather than wait for someone to come to the desk.

> "You've got to get out of the room, you've got to go and spread that message."

This week

— Walk past your clinic from both directions as a stranger would. Can you see it, find the door and tell what it does?

— Check the hours when the front desk is empty and people are walking past.

— List three places nearby where locals would see a sign, a poster or a flyer.

3 · Word of mouth

NOW · aimed at next week's diary



The patients already coming to your clinic are a ready source of the next ones, and this is a now method: it can start at the first visit, not only after six weeks of treatment. It starts at the initial appointment: the partner sitting in the room during the treatment, and the patient who turns to them and says "this could really help your neck as well".

When you are doing an excellent job for a new patient, you can ask them directly to refer others to you.

> "It's an opportunity to get that patient into your diary."

This week

— Notice who comes to appointments with a partner, a parent or a friend, and whether that person ever gets mentioned.

— Pick one patient this week who is clearly doing well, and ask them directly whether they know someone you could help.

— Ask your team when they last asked a patient for a referral.

4 · Search and AI search

NOW · grouped with the now methods in the video, and the slowest of them to build



Search engine optimisation (SEO) and AI search optimisation (AEO) are how a clinic gets found without paying for each click. The articles on your website help it rank, and up-to-date web pages and social media all feed what patients find. If someone asks ChatGPT for a local clinic, you want it to suggest yours.

> "This is the meat in the sandwich. This is the stuff nobody wants to do because it's effortful."

Most clinics skip it because it takes effort or technical skill. Of the now methods it is the slowest to show results, and the work needs keeping up, but it builds on itself.

This week

— Search your service and suburb on Google, then ask ChatGPT to suggest a clinic like yours nearby. Note whether you appear in either.

— Check when your website pages and your social media were last updated.

5 · Referrers

FUTURE · builds demand that keeps paying back



Building referral relationships feels hard because most owners were never taught the process. In practice it is one of the easiest things you can do, and it keeps paying well beyond the first conversation. Reach out to high-quality referrers who match what you do, then nurture the relationship.

> "That's future demand being created."

Relationships fade when nothing goes back to the referrer, or when your correspondence is not good. They find someone else to send to.

In the video, Shane's example is a referrer who sends two high-value patients a month, patients who tend to stay long term, unlike the short-term patients that often come off Google Ads: as they stay on, that might be adding ten grand a month. It is an illustration, not a forecast: the figure for your clinic depends on your fees, visit numbers and how long patients stay.

> **This week**
>
> — List who referred patients to you in the last three months.
>
> — Next to each name, note what you last sent back to them, and when.
>
> — Pick one high-quality referrer who matches what you do, and put a time in the diary to reconnect.

6 · Sponsorships and partnerships

FUTURE · builds demand that keeps paying back



The usual advice is not to give money to the local club, and it is right in one sense: throwing money at a sponsorship and never turning up rarely gets it back. What works is giving something of value to a local organisation, keeping it close in your network and showing up every week.

> "Showing up every week, doing the grind work, that is what grows those kind of arrangements."

The contrast in the video: $5,000 to a football club for its signage, with no one ever around, is a perfect way to blow five grand; a physio at training every week, for the value of $5,000, is a different proposition. At Shane's own practice, the physio at training came back with referrals for reception to call and book the next day. It is work, and that is the point: most clinics will not do it.

This week

— List the local clubs and organisations within reach of your clinic.

— If you already sponsor something, write down whether you show up or only pay.

— Find out which of them has a regular session where someone from your clinic could be there every week.

Score your engine



Two minutes, no data needed. It scores how much of the engine is running, not how full your diary is. Give each area a score: **0** not running · **1** running but neglected · **2** running and worked.

#	Area	Now or future	Score (0–2)
1	Google Ads	Now	
2	Walk-by traffic and signage	Now	
3	Word of mouth	Now	
4	Search and AI search	Now	
5	Referrers	Future	
6	Sponsorships and partnerships	Future	
	Now total (areas 1–4)		**/ 8**
	Future total (areas 5–6)		**/ 4**

Reading your score

- **Now total of 4 or less:** half or more of the now work is idle or neglected, so next week's diary rests on fewer channels. The now methods keep the business alive; start there.
- **Future total of 0 or 1:** the work that takes the longest to build has barely started.
- **Any area scored 1:** every area fades when nobody works it. A 1 is a 2 that has gone quiet.

> Every area takes work to keep running. The New Patient Accelerator works through each of them in your own clinic, alongside other clinic owners. If you want to build all six with the group, the details are here: co1-npa.pages.dev