Welcome Clinician Founder

Find the One Business Bottleneck

A 30-minute, incident-led guide to stop improving everything at once and choose the one constraint worth addressing over the next seven days.

PRACTICAL FOUNDER RESOURCE

THE DECISION

Which single business constraint should I improve next?

Time: 10 minutes to collect five recent incidents · 10 minutes to identify the repeated constraint · 10 minutes to plan one seven-day change.

STEP 1

Start with incidents, not categories

A bottleneck is the repeated constraint that limits useful movement now. It is not automatically the task you dislike, the biggest strategic topic, or the loudest downstream symptom.

DEMAND	Relevant people are not entering enough real conversations.
OFFER	Interest exists, but the next useful choice is unclear.
DELIVERY	The promise is hard to deliver reliably or within scope.
OPERATIONS	Next actions, decisions or handoffs depend on memory and rescue.
PROOF + FOLLOW-UP	Learning, outcomes, permission or next steps are not captured.

BOUNDARY BEFORE YOU DIAGNOSE

If you still cannot name a reachable person and real problem, return to Find. If no real person has acted, replied, booked, tried or paid, return to Test. Use this card when real activity exists but progress is being constrained.

- [ ] I can point to real activity from the last 14 days—or one important blocked commitment—and I am willing to inspect what happened rather than score my whole business.

Record where movement stopped.

Use the last 14 days where possible. Capture five concrete moments. Short phrases are enough; do not include patient-identifiable or unnecessary sensitive information.

#	MOMENT + DATE	WHAT SHOULD MOVE?	WHAT STOPPED / WORKAROUND?	CONSEQUENCE
1				
2				
3				
4				
5				

CONSEQUENCES TO NOTICE

Delay · repeated questions · missed follow-up · rework · manual rescue · unused capacity · avoidable cost · scope or quality risk

STEP 2

Name the repeated constraint

Group incidents by what actually stopped movement. Do not group them only by the task or platform where you noticed them.

MY CANDIDATE BOTTLENECK

Movement from _____ to _____ is repeatedly limited by:

_____

_____

☐ REPEATED

The same constraint explains at least 3 of the 5 incidents.

☐ CONSEQUENTIAL

It created delay, rework, missed movement, cost or material risk.

☐ UPSTREAM

Changing it could reduce at least one later symptom—not just hide it.

☐ INFLUENCE

I can run one safe, bounded change within the next seven days.

INTERPRETATION

ACT NOW

3 of 5 incidents share the constraint and all four checks pass. Plan one seven-day change.

INVESTIGATE

The incidents split, the cause is unclear, or only three checks pass. Collect another week of incident evidence before redesigning.

PARK / ESCALATE

The pattern is one-off, low-consequence, outside your influence, or needs governance / specialist review.

This 3-of-5 rule and four-check screen are practical editorial decision aids—not a validated business diagnostic or guarantee of improved results.

Change the constraint—not everything.

Choose the lightest action that changes how the next real incident is handled. Do not rebuild your whole business, buy a platform or create a large SOP for an unproven pattern.

1. BOTTLENECK	The repeated constraint in one sentence
2. CHANGE	One prompt, rule, checklist, message, field, calendar step or handoff
3. NEXT REAL USE	The next person, project or moment where it will be used
4. SIGNAL	Observable behaviour: what should move with less delay, rescue or rework?
5. THRESHOLD	What result means keep, adapt or remove the change?
6. REVIEW	Date within seven days and named decision

PRE-DECIDE THE FOLLOW-UP

KEEP if the signal meets the threshold without disproportionate burden. ADAPT if it helps but creates a new friction. REMOVE if behaviour does not improve. INVESTIGATE if the incident pattern changes.

- [ ] My change is small enough to use in the next real incident, and my review date is booked.

From “I need a CRM” to the real constraint.

Illustrative pattern: a clinician founder runs workshops and has interested people in DMs, email and notes. This demonstrates the worksheet; it is not a named client case or proof of business outcomes.

#	INCIDENT	WHAT SHOULD MOVE?	CONSTRAINT / WORKAROUND	CONSEQUENCE
1	Mon: workshop reply	Send promised link	Action left in DM	2-day delay
2	Tue: intro email	Book discovery call	No next-action field	Follow-up missed
3	Thu: participant Q	Answer + record theme	Relies on memory	Question repeated
4	Fri: warm referral	Send overview	Drafted from scratch	35 min rework
5	Sun: feedback note	Ask permission	Buried in notebook	Proof not usable

INTERPRETATION

Three incidents clearly share one operating constraint: next actions are not captured in one reliable place. The repeated bottleneck is not “need a CRM”; it is capture at the end of a real conversation.

Seven-day change: record person/context, next action, owner and due date in one simple table within two minutes of each relevant exchange. Signal: at least 4 of the next 5 actions are completed or deliberately rescheduled by the due date. Then keep, adapt or remove the capture step.

COMPLETE WHEN

You have five recent incidents, one candidate constraint, an Act now / Investigate / Park or escalate decision, and one safe seven-day change with a signal, threshold and review date.

- [ ] I can explain why this bottleneck—not the loudest symptom—deserves my next week of improvement.

Keep this page as your evidence trail for the constraint and seven-day change you test next.

YOUR NEXT STEP

Keep moving with support

A useful resource should lead to a real decision or system change — not another open tab. Take what you completed into the next real situation.

Need help implementing this? Join the Clinician Founder Actionship at just £297/yr.

Core Membership provides the community, pathway and practical resources.
Actionship includes Core and adds direct live implementation support from Shub.

CLINICIANFOUNDER.COM/ACTIONSHIP

The next responsible move is the smallest one that creates clearer evidence in the real world.