

## Beyond Better – Phase II

### Notes from Call #4

#### **Introductory Phil-osophies on Fitness and Wellness Coaching**

Conventional Psychology allows for 90% of chronically afflicted addicts and law violators to relapse, and that's acceptable.

Coaching an unwell population must go beyond the conventional psychological intervention if it is to align with the success rate fitness professionals are capable of achieving with their clients.

If we are to excel as fitness professionals and we are going to integrate coaching strategies, we must find alternatives to transferring blame to our clients or their environments. We need tools and interventions that result in lasting measurable change.

#### **An Entry into the Pursuit of Wealth**

The word, “wealthy” is most often defined as a relative term, an adjective used to define those who have more than others.

Wealth as defined by Phil Kaplan:

*Wealth is when you no longer trade time for money as a need and your income exceeds your financial obligations allowing you to live the lifestyle you find thrilling and fulfilling.*

**A Key Growth Question:** How can we get paid in exchange for bettering the lives of others.

If we are to pursue moving toward wealth, toward a condition where money is not a limiting factor, we have to ask how we can find the compensation and allow it to increase as our time commitment decreases. The dynamic of wealth accumulation will come from establishing revenue streams in exchange for providing value, and then using leverage to grow the money stream and remove the time element.

### **The Kaplan Wealth Model for Fitness Professionals -**

1. Build a self-perpetuating business that you can sell
2. Spinoff profit centers and related businesses that are front end in terms of time / work
3. Establish a premium offering – thrilling people by doing what you do
4. Use replication to take existing elements of the core business or adjunct revenue streams and grow those elements into other self-perpetuating business (or use replication to increase the stock / dollar value of your core business)
5. Pursue Investments that bring an exponential return (retain a financial planner or a accountant with a success track record)

## **The Foundation of the Wealth Model**

1. We can deliver thrilling results and we deserve to get paid appropriately
2. If we prosper by bettering the lives of others, the money that passes to us evidences the good we're doing for people
3. We can only find wealth if we create revenue streams that can grow while we minimize our direct time investment
4. If we clearly identify and commit to our core business, it becomes the consistent link between our premium offerings, our revenue streams, and our saleable entity

In order to a trainer to find enough leverage to move toward wealth, there are three necessary levels:

### **Level 1 –**

The Self-Employed (you're limited by the number of hours in a day)

### **Level 2 –**

The Manager (you leverage your time, but still trade time for money)

### **Level 3 –**

The Owner (there is need for inspection and input, but no personal time requirement when the business is working optimally. Only then can you sell the business for a multiple of revenues (or profits))

## **Intertwining the concepts of wealth, influence, and curing disease**

1. By expanding upon our position into the gray area of curing disease we can increase revenue streams and develop a distinction for the premium offering
2. The medical element becomes measure, the exercise element becomes replicable
3. In order to maximize the potential of this new model, you'll have to influence your customer market, your medical market, and your media and outreach markets.

## **Coaching Strategy:**

### Identifying and remedying the “yahbut syndrome”

Aren't you supposed to be the one to lock the door?

*“Yeah but nobody reminded me.”*

Weren't you going to hire an assistant this week?

*“Yeah, but the kids threw up, the dog ran away, the toilet overflowed, and the goldfish died.”*

The yahbut syndrome uses the words “*yeah, but*” to reveal the existence of one of the four monsters. Using the words “yeah but” to justify a failed attempt or to prolong procrastination is a self-defeating and crippling practice often employed to avoid action.

The words, “yeah but” give the issue power and absolve the person dealing with the issue from any personal responsibility.

Replacing “yeah but” with a new sentence beginning with the words, “I Can” immediately shifts power to the individual

You can also instantly shift mindset away from the powerlessness created by the “yeah but” by offering possibility. Possibility uses the word, “if.” Begin a question with an option that suggests a different outcome using the words, “What would happen if . . .

## **EXERCISE**

Set up a 10-minute coaching prep session with each of two (2) clients or prospects. In that session, can you uncover, articulate, and effectively playback the desired outcome and the primary obstacle?

Can you elicit a “yeah, but?” Can you eliminate the yeah, but and instill a sense of new power?

## **Guidelines for Assessing and Programming the Unwell Clientele**

1. Complete health history, medications list, get any medical clearances and permissions, and establish relationship with physician
  
2. Collect pre-screen data
  - a. C-Reactive Protein
  - b. Triglycerides
  - c. Total Cholesterol, HDL, LDL
  - d. Stress Test / EKG for clearance
  - e. Establish method of client self-glucose testing fasting and postprandial (after last meal of day)
  
3. Be sure you begin the assessment by eliciting a clearly articulated goal, an identification of the “yeah but” revealing a false belief, emotional block, or obstacle.
  
4. Using the tools you’ve acquired, provide an injection of redirection or of open minded thinking.
  
5. Begin with the intention of creating a 6-day per week exercise habit, even if 3 of the days require nothing more than a 5-minute routine upon waking (with a guinea pig client or a barter arrangement you’ll ideally be able to do this with a once per week visit and once per phone follow up)

6. Interview and collect baseline data
  - a. Pain assessment
  - b. Outlook assessment
  - c. Measures of evidence (How will you know it's working?)
  
7. Complete a thorough prelim assessment
  - a. Assess push strength
  - b. Assess pull strength
  - c. Assess VO2 max
  - d. Assess resting BP
  - e. Assess % bodyfat / LBM / lbs fat
  - f. Assess hamstring flexibility (separate from spinal flexion)
  - g. Assess hip flexor elasticity
  - h. Assess shoulder adduction
  
8. Gather baseline support information
  - a. Front / rear photo
  - b. Side / postural photo (four curves of spine)
  - c. Waist measure
  - d. Hip measure
  - e. Thigh circumference (women)
  - f. Upper arm flexed (men)

9. Within the first four weeks, you want to get to a place where the client understands and is willing to pursue:
  - a. Four meals, protein, complex carb in each
  - b. Four different fruits or veggies per day
  - c. No Simple sugar
  - d. No Alcohol except red wine (limit: two glasses per week)
  - e. White flour
  - f. Butter
  - g. Caffeine
  - h. Minimal wheat
  - i. Minimal baked or mashed potato
  - j. Minimal white rice
  - k. Fresh caught salmon 2x per week
  - l. Sweet potato 2x per week
  - m. 3 pints water – minimum daily
  
10. Consider supplementation
  - a. B-complex
  - b. Vitamin C
  - c. Multi-mineral
  - d. Fish-oil
  - e. Alpha Lipoic Acid
  - f. CoQ10

Glucose should be monitored and recorded for one full week:

- Week #1
- Week #5
- Week #9

CRP will be re-measured post 12-weeks

Body composition will be reassessed post-12 weeks

**Weekly:**

Conduct a seated, speak-to-camera, 5-minute video interview:

- 1 sentence related to energy
- 1 sentence related to sense of potential
- 1 sentence related to mood
- 1 sentence (or more) overall / general feedback

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