# **How to Create a Successful Practice**

# by Ian Watson

#### Introduction

There are two minority groups for whom this article may be of little interest - those who study homœopathy for the pure pleasure of it and have no serious intention of practising professionally, and those who have had no problem at all in generating a successful practice.

The majority of trainee and graduate homœopaths that I encounter are in a third category, i.e. they are either unable to take the leap and establish a practice at all, or they are practising on a very part-time basis and are still having to continue with another job in order to survive financially. It is primarily to this group that I am addressing this article - those of you who would like to have a successful, thriving practice but are finding it difficult to achieve. My belief is that the transition from being a student of homœopathy to becoming a successful practitioner who is able to earn a living from practising should take place rather like the ideal cure - it should be rapid, gentle and permanent, whilst at the same time showing respect for the needs and wishes of the individual.

In conducting workshops and seminars with students and homœopaths at various levels of experience, one of the things I have discovered is that the reasons you might think are causing you difficulty in practice are hardly ever the real reasons. For example, I remember asking a group of homœopaths why they didn't have a practice that was as successful as they wanted. The answers varied widely, but I was struck by two contrasting opinions which were both held to be true by a sizeable number. One group said that because there were already a number of experienced homœopaths in their locality, it was hard for them to establish themselves and attract patients. The second group said that because they were attempting to set up practice in rural areas where there were no existing homœopaths, it was difficult for them to obtain the necessary supervision and support, and in addition there was very little awareness of homœopathy amongst the local population, consequently it was hard to attract patients.

What intrigued me is that different people attributed virtually opposite reasons for the same problem. It was only when we took this question further that we were able to find some common ground that was shared by both groups.

## **Co-operation or Competition?**

Most homeopaths in the U.K. seem to start out in practice on their own, often working from a spare room at home or perhaps renting a room from another therapist such as an osteopath. This has the advantage that it is cheap and readily available, but one major disadvantage is that a lot of people end up working in isolation and they have no idea of the benefits that working in a group practice can bring.

One thing that seems to encourage practitioners to work alone is the belief that there are a limited number of patients to go round, hence it is thought best to find yourself a quiet corner somewhere so that you don't steal anyone else's patients, and they don't steal yours either. This idea is quite prevalent in the U.K. and is a direct obstacle to the success of many practitioners.

The idea that there are only a limited number of potential homœopathic patients in the world is a primary delusion shared by many homœopaths! First, it is worthwhile doing a comparison with the number of orthodox medical practitioners in your area or in the country as a whole, bearing in mind that we homœopaths are in exactly the same 'market' as our orthodox colleagues. In the U.K., for example, there are well over a thousand general practitioners and consultants for every full-time professional homœopath.

Then compare the amount of time spent with the practitioner - average consultation time with a G.P. in the U.K. is around six minutes, compared with between thirty and sixty minutes with a homœopath. Soon you will start to realise that not only are there many thousands more orthodox doctors than homœopaths, but each one of those thousands is seeing a relatively huge volume of patients. Not only that, but we homœopaths have the advantage that we can treat people who think that they are healthy! That is, we can offer constitutional homœopathy to virtually the entire population, including those many thousands who have no diagnosable condition but are not 100 percent healthy either, for whom orthodox medicine has nothing of value to offer.

I have no doubt that if the general population suddenly woke up to the benefits that homœopathy offers over orthodox medicine, the existing number of homœopaths would be totally overwhelmed by the demand. So don't let anyone tell you there are too many homœopaths and not enough patients!

When I set up my practice in Cumbria I decided to work towards attracting other homœopaths and students to the area and bringing them together so that there was a mutual support system for everyone, myself included. The result after several years is that we now have a thriving group practice operating from a professional environment which I alone could not afford. In addition to standard homœopathic treatment we are collectively able to provide a wide range of services including reduced-fee clinics, training clinics for students, a reception/advice service five days a week, evening classes and day courses in homœopathy and related subjects. A further advantage is that I or any other practitioner can be away for a few weeks with total confidence that our patients will be looked after by the other homœopaths in the practice. We also share virtually all of the practice running costs such as pharmacy bills, literature, reception etc., and we are also now in a position to send homœopaths out into towns and villages to expand the network even further.

My experience has been that the more people there are practising and learning homœopathy in my locality who are willing to support and co-operate with one another, the more our patients spread the word and persuade their relatives and friends to come for treatment. Success definitely breeds success. The more you help other homœopaths to succeed, the more you will become successful yourself.

## Don't do - Delegate!

One thing I have had to learn the hard way was how to delegate work to other people. After a few years of running a reasonably busy practice I was still answering all the telephone calls myself, booking appointments, taking the money, making up prescriptions, responding to emergencies, doing home visits etc. One day I realised that I was limiting my own success because unconsciously I knew that the more patients I took on, the more hassle I would have to deal with! When I realised this, I decided to take on a receptionist who, being a student of homœopathy, could deal with virtually everything except seeing the patients. This allowed my practice to expand in a way that meant I was only doing more of what I actually wanted to do and hardly any of what I could no longer stand doing.

I went through a similar process after having established a successful group practice with other homœopaths - this expansion again created lots of extra administration for me which I eventually realised could be passed on to someone else. You should bear in mind that whatever you find yourself doing that you don't really want to do - there is someone out there who actually enjoys doing the same work! Finding someone to help you out is one of the best investments you can make in your own success, because it leaves you free to focus your energies on what you have actually trained to do, which is practising homœopathy. One of the biggest stumbling blocks for many practitioners is not that they are unwilling to take on more work as the practice builds up, but rather that they are unable to let go of some of the routine work at the same time.

### **Invest in yourself**

Most people who come to you for treatment will be referred by someone who has already been. I have often been surprised to find that a patient would sooner travel a hundred miles to see me because I had been recommended than go to a nearby practitioner whom they had never heard of. But thinking about it, I realised that I would also do the same!

Recognising the power of referral is very important, but remember that people are not just recommending a homœopath, they are recommending you as a person. Consequently, how you present yourself, and more importantly, how you conduct yourself, is vitally important. The psychiatrist R.D. Laing once said that the treatment is literally how you treat someone. In other words, whether you are courteous, respectful, honest and non-judgemental or whether your own opinions and feelings tend to get in the way when you are with a patient.

Another thing that has surprised me is that the people who make the most referrals are quite often the ones that I feel have benefitted very little from my prescriptions. Again, what you can learn from this is that most patients will recommend you personally, not the type of therapy that you happen to practise. With this in mind, I am conscious of the fact that the quality of my interactions with the people I see will have at least as great a bearing on whether or not they recommend me than the quality of the prescriptions I make. If you don't believe this to be true I suggest you read the books by Ellis Barker (New Lives for Old; Miracles of Healing and How they are Done). Whilst his prescribing was mostly polypharmacy and certainly non-classical, he had the ability to inspire hope and confidence in his patients such that they invariably left his consulting room feeling better than when they arrived. Consequently he had an incredibly successful practice and attracted patients from all over the country.

I am not suggesting that we should all be super-confident and charismatic figures, because we are not, but rather I wish to draw attention to the fact that succeeding as a homœopath has as much to do with who you are as a person as with how good you are at finding the indicated remedy. I think that if we were as willing to work on ourselves as conscientiously as we work on our cases, we would find that many of the reasons we struggle to succeed in practice have nothing at all to do with our ability to practice homœopathy.

## Trusting the process of homœopathy

My observation is that orthodox doctors often place an excessive amount of trust in a treatment that is not particularly effective, e.g. chemotherapy treatment for patients with cancer. Curiously, homœopaths seem to suffer from the opposite syndrome, that is, we often demonstrate a severe lack of trust in our medicine in spite of the fact that it is consistently safe, reliable and truly curative.

What this suggests to me is that my success or failure as a homoeopath has nothing at all to do with homoeopathy! We can all rest assured that homoeopathy works. That it is inherently safe. That it is consistently curative. Were this not true it would have dissappeared long ago, in the same way as hundreds of allopathic drugs and treatments dissappear every year.

Most of you will remember a time when you knew maybe five or six remedies and you had just one homœopathy book - perhaps a therapeutics book of some kind. Whilst your knowledge was minimal, your intentions were pure and it seemed like you could help just about anyone with one of those six remedies. Never mind that you only had a 6th potency, the remedies worked and the people that you helped told their friends about you, and pretty soon you were amazed at how much interest there was in homœopathy.

Sooner or later you decided to study homœopathy seriously so that you could practice properly. And what happened? Suddenly you learnt that there weren't only six remedies, there were more like six hundred, so the chances of you finding the correct one were pretty slim. Consequently you now had to repertorise every case, even when you could see a clear picture of one of the remedies you had learned. And then you were taught about the hazards of antidotes and the dangers of suppression and the necessity of prescribing on the very core of a person's being............... and gradually you learned that homœopathy is incredibly complex and difficult and that you can never know enough to be very good at it, so you had better carry on being a student for a few more years before you contemplate running a busy practice......!

I find increasingly in my teaching work that too many students and practitioners are getting lost in the technicalities of homœopathy, and are losing the faith they once had in the simple act of prescribing to the best of one's ability, and trusting that the outcome will be fine. Many practitioners I encounter are afraid of giving remedies that are inherently safe. Or they are so fearful of the patient having an aggravation that they dare not prescribe the remedy that they see as being indicated. My feeling is that practising from a place of fear is not healthy, either for the patient or the practitioner. We need to be willing to acknowledge our fears and to let go of them if we are to thrive as practitioners. We must learn to trust the healing process that each of our patients is involved in, and to recognise that we do not hold the power

over life and death even though we may think that we do sometimes.

Orthodox medicine has erroneously taken responsibility for the life or death of its patients, which is why doctors are now being sued at every opportunity and are finding themselves involved in court cases to decide whether a person should live or die. There is a crucial learning in all this for us, that a medical system that depends on fear will produce fearful outcomes. If we wish to avoid duplicating the mistakes that the medical profession have made we must empower our patients to take responsibility for their own healthcare, and we must be willing to trust their capacity to heal themselves in whatever way is appropriate.

So if I have trained in a successful system of medicine but I am not succeeding, where is the problem? With me, of course! What I need to study is probably not more homœopathy, but rather my relationship to homœopathy, and therefore to myself.

My hope is that we can each re-capture the trust we once had in homœopathy and that each of us will learn to practice in a way that is true to our own individual nature. Whether you use a computer or not, whether you repertorise or not, whether you know six remedies or six hundred - none of these things are really that crucial. What matters most I think is whether your heart is in your work, and whether you have sufficient trust in yourself, in homœopathy and in your patients to get on and practise in whatever way is most natural to you.

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