7 Steps to Creating a Treatment Plan Your Patient Will Follow: Using the Well-Formed Outcome from NLP

This document outlines a 7-step approach to developing patient-centred treatment plans using the Well-Formed Outcome model from Neuro-Linguistic Programming (NLP).

By employing these steps, clinicians can create plans that are clear, realistic, and tailored to individual patient needs, fostering motivation and improving adherence to treatment.

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Introduction: The Well-Formed Outcome Model in Goal Setting

The Well-Formed Outcome (WFO) model in NLP emphasizes setting clear, achievable, and positively framed goals. When creating treatment plans, the WFO model encourages clinicians to ensure that the goals are well-defined and understood by both the patient and the clinician. This shared understanding facilitates a collaborative and successful treatment journey.

Step 1: Define What is Wanted (Positive Framing)

This step involves asking the patient what they want in positive terms.

This means focusing on what they want to achieve, not what they want to avoid.

For example, instead of "I don't want to feel pain," a more effective approach is "I want to feel comfortable during my daily activities."

Positive framing helps patients visualise success, making goals more motivating and actionable.

It also shifts the focus from limitations to possibilities, empowering patients to actively participate in their recovery.

Step 2: Establish an Acceptable Outcome

The second step involves defining the desired future state in clear and measurable terms.

Both the clinician and the patient should understand what success looks like.

For example, "You will be able to walk for 30 minutes without pain" provides a clear, measurable goal.

This step ensures that both parties have a shared understanding of the treatment goal, minimising potential misunderstandings and fostering shared responsibility for achieving success.

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Step 3: Ensure the Goal is Under the Patient's Control

The third step emphasises that the goal should be within the patient's ability to achieve. It should depend on actions they can take themselves.

For example, instead of "I want my boss to be less demanding," a better goal might be "I want to manage my work stress more effectively."

Another example, instead of "I want to be able to play (insert sport) in 6 months time", a goal that is under the patient's control is "I want to be able to be in the best shape possible to be selected to play (insert sport) in 6 months time." The patient can control how much work the put in but not whether the coach will select them in the team.

By focusing on areas where the patient has control, this step empowers them in the process.

It acknowledges that true change often stems from within, rather than external influences.

Step 4: Gather Resources and Identify Challenges

This step involves identifying the resources the patient needs to achieve the goal and addressing any potential challenges.

This could include questions like "Do you have a support system at home to help you with these exercises?" or "How will this rehab plan work in terms of your family and work commitments?"

Openly discussing limitations and developing strategies together can empower patients to overcome obstacles.

This step ensures that the treatment plan is tailored to the patient's individual circumstances and resources.

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Step 5: Conduct an Ecology Check

The ecology check ensures that achieving the goal will have a positive impact on all areas of the patient's life.

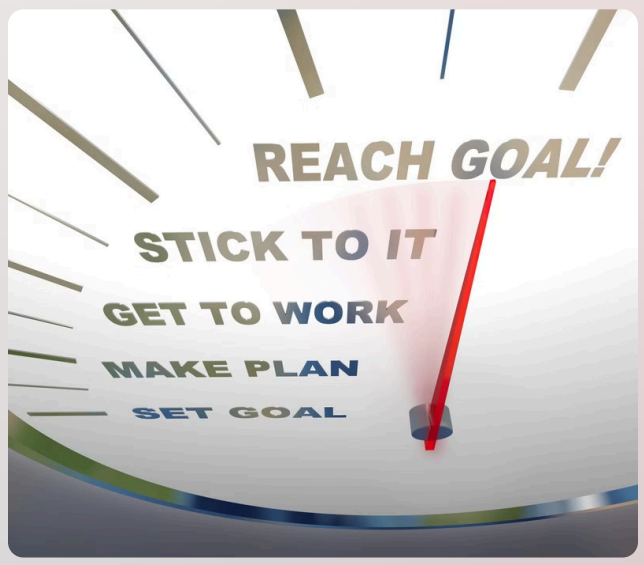
This step considers the broader implications, including family, work, and mental well-being.

For example, "If you start walking every morning, will that fit into your current schedule and balance with your family responsibilities?"

This step ensures that the goal is sustainable and fits the patient's lifestyle to prevent unintended negative impacts.

It emphasises a holistic approach to treatment, considering the patient's overall well-being.

Step 6: Define Evidence for Success



In this step, clear evidence is defined that will indicate the goal has been achieved.

This can be something both the clinician and the patient can observe and agree upon.

For example, "You'll know you've succeeded when you can lift your child without any back pain" provides a concrete marker of success.

Defining evidence for success provides tangible milestones for the patient, making progress clearer and more motivating.

It also creates a shared understanding of what constitutes success for both the clinician and the patient.

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