



Business Health Check

Business name: _____ **Date:** _____

Tick Yes, No or Not sure for each question. Write N/A where a question does not apply.

#	Area	Question	Yes	No	Not sure
1	Cash flow	Does my cash flow forecast show I can cover bills over the next 12 weeks?	☐	☐	☐
2	Cash flow	Do I invoice promptly and regularly follow up overdue customer payments?	☐	☐	☐
3	Cash flow	Have I planned how to cover essential costs during quiet periods or unexpected disruption?	☐	☐	☐
4	Debt	Are my tax, superannuation, supplier and loan payments up to date?	☐	☐	☐
5	Debt	Can the business afford its debt repayments while meeting everyday expenses?	☐	☐	☐
6	Pricing	Do my prices cover materials, stock, labour and overheads, with enough left for profit?	☐	☐	☐
7	Pricing	Do I review my prices when costs or customer demand change?	☐	☐	☐
8	Profitability	Does the business earn enough to cover costs, pay me fairly and leave a profit?	☐	☐	☐
9	Profitability	Do I know which products, services or jobs are profitable and which need attention?	☐	☐	☐
10	Staffing	Do I have the people, skills and capacity to meet demand without regularly overloading myself or staff?	☐	☐	☐
11	Staffing	Could essential work continue if I or a key team member were unavailable?	☐	☐	☐
12	Marketing	Do I know my target customers and how to reach them?	☐	☐	☐
13	Marketing	Do I track which marketing activities generate enquiries and sales?	☐	☐	☐
14	Business planning	Do I have clear priorities and a written action plan for the next three months?	☐	☐	☐
15	Business planning	Do I regularly review my results, risks and progress against that plan?	☐	☐	☐

Turn your answers into action

- **Yes:** Keep monitoring and maintaining this area.
- **No:** Identify what needs to change.

- **Not sure:** Check your records or seek advice to understand your position.

Choose your top three priorities and set a next step for each.

Priority	Next action	Who will do it?	By when?
1.			
2.			
3.			

Review your progress in one month.