

Why do we include clinical indicators in the MEASUREMENT of a person in a Self-Help Wellness type program if we are not going to do any clinical therapeutics in the Wellness Risk Management Model?

Good Question

Although it cannot be denied that various diseases, pathologies and injuries do impact our Wellness, the reason for inclusion in the **Wellness Risk Management Measurement Program** is these important indicators were important in a musculoskeletal clinical practice that Dr. Ouellette ran for 5 decades. They gain important knowledge about a person that comes from the person themselves. They help close cracks in the professional medical system where things might be missed. They are easy to include in a Self-Help measurement questionnaire and have clinical relevance. People trained in professional level clinical needs will understand the scores, but the Report of Findings is written for the lay person in the general public domain.

Although these clinical indicators are too complex for the **Self-Help** field, in order to integrate Wellness into a more complete program that can give people a glimpse into their near future, they are included for clinicians do use **as they see fit**. Not all clinicians want outside help, but those who do have some Red flags and Yellow flags available, plus other flags some clinicians may wish to look at. These flags all come from the client themselves much like a professional level clinical history taking would proceed.

That would bring us to the choices of what clinical indicators we might want to include. We use those indicators in the Self-Help field that are also helpful in various clinical settings. Clinicians will be responsible for doing their own due diligence based on their professional training, and their licensing body rules.

WRM Instructors will not be using these indicators and will not be referring clients based on these indicators. WRM Instructors are intensely focussed on the **Action Plan List** and the client's compliance with those behaviours in the list. The **Wellness Risk Management Report of Findings** (35 pages) discusses the meaning of each score and explains the recommendation based on the score. Instructors will refer all questions a client has to their Report of Findings document.

This protocol policy strips away all personal opinions a WRM Instructor may have. That is the purpose of the **Instructor Mandate** and is very desirable. Clinicians who function in the field of helping people help themselves may very well want to look at the **WRM Progress Chart** of their patient. Well trained clinicians will know all about their own due diligence needs so, they will take it from there. Again, WRM Instructors **DO NOT** refer clients to any professionals or any external health agencies. They refer people instead to the Report of Findings from Measurement.