TELER is the acronym for Treatment Evaluation by A LE Roux’s method

The Method:
Is a unique method for clinical note making

Requires two instruments
a data collection form (The TELER form)
a measuring scale (A TELER indicator)
The TELER Form:

Name
Address:

Phone: DoB:
Work:
No:

Bluebell NHS Trust
Western General Hospital
Physiotherapy Department

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<th>Treatment Plan</th>
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Performance Record
Indicators:

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<th>Performance Index</th>
<th>Change Index</th>
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<th>Health Status Index</th>
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A TELER Form is unlike the form for conventional clinical note making

The conventional Form:

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<tr>
<th>Name</th>
<th>DoB</th>
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<tr>
<td>Therapist</td>
<td>Unit No.</td>
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<td>Date</td>
<td>Signature</td>
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Physiotherapy Service

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<tr>
<th>Name</th>
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<tr>
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</tbody>
</table>

Unlike the conventional method of clinical note making, TELER provides clinical information which:
- Facilitates effective delivery of treatment
- Facilitates effective management of the service providing the treatment
- Facilitates effective clinical audit

This is illustrated by reference to a completed conventional clinical note making form.

Any clinical information included in the content of a completed conventional note making form is difficult to retrieve

The content of the completed form is a mixture of:
- Treatment Plan
- Assessment
- Comments

The mixture shows what was done:
- For the Patient
- With the patient
- To the patient

This mixture also shows how the patient responded to treatment.

To retrieve the clinical information included in the completed form requires a content analysis of the form.

A content analysis gives:
- A treatment plan
- A set of outcomes
Physiotherapy Treatment Plan

**ASSESSMENT**

A1 Walking:  weightbearing trauma R ‘slides’
A2 Walking:  foot placing, hip movement
A3 Walking: no proper foot placing (drops it)
B1 Ignoring L-arm
B2 Proprioceptive changes R hand
C1 Says she has some pain today
C2 Sore shoulder still
C3 Shoulder less painful
D  Still some limitation of elevation thro’ flexion

**ADVICE**

A  Shown how to lie on either side with arm supported

**WALKING**

A  Fine control/coordination excs
B  Fine ringer excs with games

**ARM FUNCTION**

A  Continue treatment esp positions arm with activities of L-hand

**SHOULDER MOBILISATION**

A  Responded well to sh mobs
B  Shoulder mobs - finds active shoulder
C  Continu sh mobs
D  Sh mobs

**TRUNK MOBILISATION**

A  Shoulder pain eased by trunk mobs
B  Girdle mvte very difficult

Physiotherapy Outcomes

**SHOULDER PAIN**

A1 Less pain
A2 Shoulder pain eased
A3 Says her pain was better for a short while after her last treatment
A4 Better after treatment
A5 Pain relieved
A6 Says her shoulder pain has been better
A7 Says her shoulder pain was better over weekend
A8 Says pain much relieved
A9 Says pain improving slowly

**HAND FUNCTION**

A1 Doesn’t feel anything with hand
A2 No feeling in hand

**SLEEP**

A  Finds it difficult to get comfortable at night

**SHOULDER FUNCTION**

A  Finds protraction difficult - but manages it if some assistance given over medial border of scapula
B  All movements less painful but movements severely limited esp ext rotation

**MENTAL HEALTH**

A  Very upset ➔ angry, lack of concentration, frustration level ↓
B  Mental much better today affects walking
Entering the treatment plan and outcomes on a TELER form immediately shows a paucity of information.

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<thead>
<tr>
<th>Name</th>
<th>Address:</th>
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Bluebell NHS Trust  
Western General Hospital  
Physiotherapy Department  
Feb/Mar 1990

<table>
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<tr>
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<td>A1</td>
<td>A2</td>
<td>B1</td>
<td>A3</td>
<td>C1</td>
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<td>Occupational therapy</td>
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<tr>
<th>Performance Record</th>
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<tr>
<td>Indicators: Shoulder Pain</td>
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<tr>
<td>Hand Function</td>
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<td>Sleep</td>
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<tr>
<td>Shoulder Function</td>
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<td>Mental Health</td>
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Performance Index  
Change Index  
Maintenance Index  
Effectiveness Index  
Health Status Index  
Health Grain Index

A contrast is provided by a TELER form completed by a physiotherapist.
### Treatment Plan

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<td>Vaginal Cones</td>
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#### Compliance

| Pelvic Floor Exercises          | ---   | 40%   | 40%   | 60%   |
| NMS                             |       |       |       |       |
| Vaginal Cones                   | Given | 100%  | ---   | ---   |

#### Performance Record

| Indicator: Perineometer         | ---   | 2     | 4     | 5     |
| Urgency                         | 2     | 4     | 5     | 5     |
| Social Life                     | 1     | 3     | 4     | 5     |

| Performance Index               | 30    | 60    | 87    | 100   |
| Change Index                    | 0     | 43    | 80    | 100   |
| Maintenance Index               | 0     | 100   | 100   | 100   |
| Effectiveness Index             | 0     | 100   | 100   | 100   |
| Health Status Index             | 28    | 76    | 92    | 100   |
| Health Gain Index               | 0     | 13    | 48    | 100   |

The TELER form at a glance

- Shows improvement

The TELER form at a glance

- Also shows a lack of improvement
A TELER function indicator is not prescriptive
the indicator must be fitted to the patient/client
the patient/client must not be fitted to the indicator

A TELER function is used to trace progress towards a
treatment/care aim
desired by the clinician
desired by the patient/client/carer

Examples
Transfer from sit to stand
0  Unable to transfer from sit to stand
1  Able to move bottom forwards on chair or bed
2  Able to transfer weight over feet
3  Able to lift bottom off chair
4  Able to extend (knees, hips, trunk)
5  Able to transfer from sit to stand

The definition of each code
has a specific meaning
is based on clinical knowledge
denotes a clinically significant outcome

The difference between two successive codes
denotes a clinically significant change

Perform activity X pain free
0  Pain prevents all activities
1  Pain prevents Activity X
2  Pain interrupts Activity X and cannot resume
3  Pain interrupts Activity X but can resume
4  Pain during Activity X but can complete without interruption
5  Pain free during Activity X

Activity X
Ironing
Dressing
Hanging out washing
Write a letter

The definition of each code
has a specific meaning
is based on clinical knowledge
denotes a clinically significant outcome

The difference between two successive codes
denotes a clinically significant change

Shoulder - internal rotation
While standing
0  Unable to let arm hang freely by side
1  Able to let arm hang freely by side
2  Able to place back of wrist on buttock
3  Able to place back of wrist on sacrum
4  Able to place back of wrist on small of back
5  Able to place back of wrist between shoulder blades

The definition of each code
has a specific meaning
is based on clinical knowledge
denotes a clinically significant outcome

The difference between two successive codes
denotes a clinically significant change

Example of a measuring scale that is not
a TELER indicator
a valid measuring scale

Transfer independently
0  Unable to transfer
1  Able to transfer with help of 2
2  Able to transfer with help of 1
3  Able to transfer with verbal instruction
4  Able to transfer under supervision
5  Able to transfer independently

The definition of Code 1 and Code 2
does not have a specific meaning
has one of several meanings not specified

The alternative meanings of “help” include
manual support
manual assistance
manual facilitation

The definition of Code 3
does not have a specific meaning
has one of several meanings
which has not been specified

The alternative meanings of “verbal instruction” include
demonstration
talk through
key word prompt
The definition of Code 4
do not have a specific meaning
has one of several meanings
which has not been specified

The alternative meanings of “supervision” include
with patient/client the whole time
within sight of patient/client the whole time
within sight of patient/client some of the time
presence not necessary, check completion as required

Revised version of the measuring scale:

Transfer independently
0 Unable to transfer
1 Able to transfer with manual assistance of 2
2 Able to transfer with manual assistance of 1
3 Able to transfer with verbal key word prompt
4 Able to transfer with patient/client within sight some of the time
5 Able to transfer independently

Validity test for the revised version of the measuring scale:

Does the definition of each code
have a specific meaning?

Is the definition of each code
based on clinical knowledge?

Does the definition of each code
denote a clinically significant outcome?

Does the difference between two successive codes
denote a clinically significant change?

Is the revised version of the measuring scale
a valid measuring scale?
a TELER indicator