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## Q&A: Multidisciplinary Approach to Diabetes Care (MADC) (PAC116) – Allied Health

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### 1. Does the allied health provider need to be selected from one provider?

If the applicant is an organisation that offers multidisciplinary allied health services i.e., dietetics, podiatry, exercise physiology and/or physiotherapy, they can send a single application and indicate in the EOI form which disciplines they are applying for. Similarly, if there are solo practitioners that would like to apply, e.g. physiotherapists, or allied health businesses that offer combined services, e.g. dietetics and exercise physiology, they would need to indicate which discipline they are applying for.

The selected allied health practitioners (AHPs) may come from an individual organisation or multiple organisations. This will be based on the Request for Proposal, the next stage of the Tender process.

### 2. The EOI form only allows very brief information. Are we encouraged to send in further information via email?

The Expression of Interest (EOI) form is meant to determine the number, type of discipline, and eligibility of allied health providers applying for the MADC program funding. There will be an opportunity to provide information about your practice, services, or organisation in the Request for Proposal (RFP) from Capital Health Network. Eligible applicants may receive a RFP.

Please send any queries to [tenders@chnact.org.au](mailto:tenders@chnact.org.au).

### 3. Would it need to be the same therapist throughout the length of the program?

There is no requirement for the same AHP to be involved throughout the program. The Services Order (contract) is between Capital Health Network (CHN) and the allied health provider (organisation or solo business).

The provider and any practitioners directly involved with the MADC program will be part of the co-design review. This will allow the commissioned multidisciplinary team (MDT) to get acquainted with the practices and allow smooth transitions in the event of sudden changes, e.g. AHP going on leave, etc.

If there is more than one named practitioner delivering a particular service, i.e. dietetics, podiatry, exercise physiology or physiotherapy, please state this in the Request for Proposal (RFP).

As an example, if a provider typically has 5 podiatrists working in their team, and their usual podiatrist is unavailable on the selected Diabetes Clinic Day, another podiatrist from the same team may attend the session. Changes to service delivery should be communicated with the program team and MDT.

### 4. If we have an EP and dietitian but no podiatrist, could we submit an application for the EP and dietitian only?

Certainly. We invite EOIs from solo practitioners and multidisciplinary teams offering a combination of disciplines.

**5. Will CHN help facilitate discussions with Podiatrists that are interested in the grant?**

CHN will be able to facilitate discussions and collaboration among providers – both in allied health and primary care - when Service Orders (contracts) are completed.

Once we have completed applications for the EOI, a Request for Proposal (RFP) will be sent out to all eligible applicants. The allied health providers will then be selected and offered a contract based on the RFP.

**6. Will you be commissioning both Exercise Physiologist (EP) and Physiotherapist or either one?**

Stakeholder consultations suggest that there is a need for both EP and Physiotherapy in Diabetes MDT care.

Without duplicating funding sources, the program will be utilising MBS items where possible. Group MBS items only allow for EP group services.

Hence, CHN would like to see how allied health providers will deliver services that will contribute to early prevention of diabetes complications to populations at-risk of poor outcomes. This can be exercise-interventions delivered by either of the disciplines, or it could be a combination of both disciplines. Please include your ideas on service delivery in the Request for Proposal (RFP) stage following this EOI.

How the model develops will be determined in the co-design review and early implementation phase of the program.