

This form is for high-risk foot services that are interested in participating in the NADC Collaborative Interdisciplinary Diabetes High-Risk Foot Service (HRFS) National Accreditation program.

<b>Name of HRFS</b>	
<b>Address of HRFS</b>	
<b>Applicant Contact Details</b>	<p>Name:</p> <p>Email address:</p> <p>Phone:</p> <p>Date of EOI Submission:</p>
<b>Others</b>	<p><b>1. Within your HRFS do you have the following staff?</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A senior consulting physician</li> <li><input type="checkbox"/> A senior podiatrist</li> <li><input type="checkbox"/> A credentialed diabetes nurse educator</li> <li><input type="checkbox"/> Do you have approval from both Director of Allied Health and Director of Endocrinology/ Vascular Surgery to undergo this Accreditation Process? (Signature of one of the Directors required below)</li> </ul> <p>Name: _____ Position: _____</p> <p>Signature: _____ Date: _____</p> <p><b>2. How frequently does your service run an interdisciplinary HRFS clinic, whereby the above health professionals have dedicated time allocated to the session?</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Once a month</li> <li><input type="checkbox"/> Once a fortnight</li> <li><input type="checkbox"/> Once a week</li> <li><input type="checkbox"/> Other (please specify) _____</li> </ul> <p><b>3. How many years has your HRFS been established for? _____ years</b> <i>(It is suggested that an HRFS applying for NADC Accreditation should be established for a minimum of at least 1 year if applying for Core Standard Accreditation and established for at least 2 years (Recommended guide of being established for 5 yrs) Centre Of Excellence Service.)</i></p> <p><b>4. Are you applying for:</b></p>

	<ul style="list-style-type: none"> <li><input type="checkbox"/> Core Standards Accreditation - Application Fee: \$95</li> <li><input type="checkbox"/> Centre of Excellence - Application Fee: \$185 (application fee due a minimum of 2 weeks prior to commencement of the accreditation round)</li> </ul> <p><b>5. Please indicate which Accreditation Round your service would like to participate in:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Round 1 – EOs close Friday, 31 February 2025 with <b>Commencement Accreditation Round 1</b> Monday 3 March 2025</li> <li><input type="checkbox"/> Round 2 – EOs close Friday, 25 July 2025 with <b>Commencement Accreditation Round 2</b> Monday, 4 August 2025</li> </ul>
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**Briefly explain why your HRFS would like to be an accredited interdisciplinary diabetes HRFS:**

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Completed Expression of Interests forms are to be submitted via email to: [admin@nadc.net.au](mailto:admin@nadc.net.au)

