## **NDIS** diabetes care and education services



My name:	Date:
[ ] NDIS client [ ] Guardian/Nominee of NDIS client	
[ ] I am from a disability organisation/service called:	
State or territory: [ ] NSW [ ] Victoria [ ] Queensland [ ] WA [ ] NT	d [] SA [] Tas. [] ACT
I would like to find out more about EdHealth Aus	tralia's:
[ ] Diabetes training for disability support workers	
[ ] Diabetes Management Plans for NDIS participants	
[ ] Diabetes Manual for disability support workers	
[ ] Manual: Quality and Safety Framework for NDIS funded diab	betes care support
[ ] Low literacy diabetes support resources	
[ ] Check, Think and Act blood glucose monitoring resource	
[ ] Consultancy support to develop a Diabetes Quality and Safe	ty Framework in our organisation
Please contact me by: [ ] Phone using my phone number:	
[ ] Email using my email address:	
I would also like to know:	
	<del>-</del>
Office Use On	lv
Received: / / 20 Phoned/emailed on: / / 20	
Enquiry:	
Actions:	