

## Terms of Reference - Consultant for *Keep Moving* - Strengthening Diabetic Foot Disease services in Kiribati

	<b>Subject</b>	<b>Details</b>
<b>1</b>	<b>Start Date</b>	August 2024
<b>2</b>	<b>End Date</b>	June 2027
<b>3</b>	<b>Project</b>	Keep Moving - Strengthening Diabetic Foot Disease services in Kiribati
<b>4</b>	<b>Jurisdiction</b>	Kiribati & Australia
<b>5</b>	<b>Interplast Project Manager</b>	Jess Hill (Director – International Programs)
<b>6</b>	<b>Interplast Project Coordinator</b>	Dakota Warren (Program Coordinator)
<b>7</b>	<b>Interplast Monitoring &amp; Evaluation</b>	Cara Stephenson (MEL Coordinator)

### Background

Interplast Australia and New Zealand (Interplast) is a non-government organisation (NGO) which sends teams of volunteer plastic and reconstructive surgeons, anaesthetists, nurses and allied health professionals to provide life-changing surgery and medical training in 17 countries across the Asia Pacific region.

Interplast's vision is: *Quality and accessible surgical care, for all*

and its mission is: *Enhancing quality of life through positive surgical and health outcomes*

Interplast does this through providing surgical services to those who could not otherwise afford or access these services; by building the capacity of local medical systems (including rehabilitation services) through training and mentoring programs, and through supporting the strengthening of hospitals and health systems.

Its work focuses on four key areas:

- *Provision of outstanding patient care*
- *Building a sustainable surgical workforce*
- *Strengthening hospitals and clinical institutions*
- *Delivery of systemic change.*

Interplast is accredited with Australia's Department of Foreign Affairs and Trade, is registered by the Australian Charities and Not for Profit Commission and is a signatory to the Australian Council for International Development Code of Conduct. Interplast works in partnership with local organisations in partner countries; including hospitals, universities and local NGOs, and international and domestic organisations and partners.

## Project background

The high prevalence of diabetes in the Pacific is increasing the demand on social and health systems, making the prevention and treatment of diabetes complications a priority. In 2017, the International Diabetes Federation reported that the Pacific Island countries accounted for eleven of the top twelve countries in the world for diabetes prevalence. Foot wounds (ulcers) are among the most common complication of diabetes. In many Pacific countries, untreated, infected foot ulcers often lead to multiple amputations and sometimes death. Preventing amputations is beneficial for the patient, their family and their community. It reduces health care costs by decreasing hospital admissions and ongoing amputee management costs, including prosthetic devices.

*Interplast has been engaged by the Australian Government, through the Australian High Commission in Tarawa, Kiribati, to deliver Keep Moving - Strengthening diabetic foot disease services in Kiribati, as a part of the broader Australian Government's Kiribati Australia Health Sector Program (KAHSP II), which is supporting Kiribati to help develop and manage an effective, inclusive and resilient health system. More on the KAHSP II can be found [here](#).*

The Keep Moving – Strengthening Diabetic Foot Disease Services in Kiribati project will be delivered across 3 years, including delivery of Interplast's 'Keep Moving' training package <sup>1</sup>to a multi-disciplinary (MDT) team from across Kiribati.

The training package will include twice-yearly in-country workshops, train-the-trainer (ToT) components to build a local faculty, and establishment and mentoring of a local multi-disciplinary leadership team who will take on local leadership of this training.

The project will also support the local leadership team to develop and update service protocols, tools, and processes for effective delivery of diabetic foot disease services in Kiribati. This will include working with the Government of Kiribati (GoK), through the Ministry of Health and Medical Services (MHMS) and other local key stakeholders to develop and launch Kiribati's first national diabetic foot disease strategy and provide ongoing mentoring and support for local personnel to improve the assessment, identification, and treatment of diabetic foot wounds, to reduce lower limb amputations, preventable disability and death in Kiribati.

Success for the overall **Keep Moving – Strengthening Diabetic Foot Disease Services in Kiribati Project** will include:

- 30 i-Kiribati health care professionals representing a range of clinical areas are trained in diabetic foot disease screening, identification, assessment, treatment to prevent amputation and rehabilitation pre and post limb amputation.
- A cohort of 6 of these professionals are provided with further training and mentoring (ToT) to become the local faculty to continue delivering this training to other personnel.
- A locally driven MDT leadership team is established and supported to lead the development and delivery of diabetic foot disease services in Kiribati.
- The Tungaru Central Hospital has a functioning and effective diabetic foot clinic, including required equipment and supplies (sourced through national procurement systems), required trained personnel and appropriate space, services guided by a diabetic foot disease service protocol and associated service forms, the ability to collect, analyse and manage data on people receiving diabetic foot disease services, and the ability to provide supported outreach services to the outer islands. This includes an improvement in referrals to and from the DFD Clinic to and from other diabetes and

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<sup>1</sup> See Appendix A for more details

NCD health professionals and clinics, to address the risk of treatment being done in isolation from the broader health system – reinforcing a one system approach.

- The MHMS has a range of public health material that can be used to promote prevention of diabetic foot disease and access to diabetic foot disease services.
- The outer islands of Kiribati with substantial population base have a locally based diabetic foot care trained nurse, with plans in place to train and support a nurse specialising in delivery of diabetic foot disease services in all population centres.
- Clinicians and clinical leadership involved in the prevention, screening and care of diabetic retinopathy and other diabetes-related complications will be engaged in training opportunities and in broader multi-disciplinary team discussions where possible, to reduce the risk of siloing of screening and treatment. This will include particular focus on the importance of cross-screening and referral for diabetes-related complications, and building of referral pathways where needed, as well as providing some basic training for those involved in DFD screening and care of diabetic retinopathy, and for those in screening and care of diabetic retinopathy in the screening and care of DFD.

## Project outcomes

Expected end of program outcomes is:

- a. People with diabetes in Kiribati have improved access to quality diabetic foot disease services

The intermediate program outcomes are:

- b. Multidisciplinary teams of clinicians are equipped and confident to screen, identify, assess and treat DFD
- c. The Keep Moving training program is being rolled out to other clinicians by local trainers
- d. Kiribati has a national DFD action plan in place to support DFD services nationally

## Duties

The overall objective of this consultancy is to provide technical oversight in the development and delivery of the Keep Moving training package to 30 health professionals, whilst supporting a cohort of six trainers (ToT) who are able to implement the training package locally.

Other duties include:

- Contribute to the development of a five-year National Diabetic Foot Care Strategic Plan for Kiribati
- Contribute to the set up and strengthening of the Tungaru Central Hospital diabetic foot clinic, including required equipment and supplies (sourced through national procurement systems), required trained personnel and appropriate space, services guided by a diabetic foot disease service protocol and associated service forms, the ability to collect, analyse and manage data on people receiving diabetic foot disease services, and the ability to provide supported outreach services to the outer islands.
- The Consultant is responsible for the quality of their work and agrees to make changes requested by Interplast without additional charge (within the agreed number of days).

- The Consultant agrees to provide the required documentation to Interplast to undertake the required due-diligence checks for this engagement – including a national criminal history check and counter terrorism checks.

## Person Specification

A podiatrist with high-risk clinical experience and experience teaching and working in low-resource settings is required for this assignment. Expertise and experience in strategic planning for health organisations is also considered highly beneficial.

The successful applicant for this position must be able to meet Interplast’s due diligence requirements, including a national criminal history check, Working with Children Check and counter-terrorism checks. They must also agree to comply with Interplast’s policies and procedures in relation to delivery of Interplast activities overseas.

The successful applicant must also cover their own insurances – including public liability and indemnity, as well as required travel and health insurance for overseas travel components. Evidence of this insurance must be provided to Interplast.

## Remuneration

- Interplast will pay up to AUD\$65,000 inclusive of GST, to cover the duration of the project (a minimum of 65 days total), upon submission of detailed invoice with timesheet. This amount will include daily rate + funding for telecommunication and internet data required for deliverables<sup>2</sup>.
- Applicant should include in their proposal suggested terms of payment, but should include a payment on sign of contract, a mid-project payment and a payment upon completion of all deliverables.
- Travel is required to fulfil this contract (as detailed below), and Interplast will cover the cost of economy flights, accommodation, and daily per diem in line with process & rates provided to Interplast’s volunteer clinical workforce.

## Activity plan

### Year 1: July 2024 – Jun 2025 (30 days work)

Timeframe	Activity	Days	Comment
<b>Sept/Oct 2024</b>	Baseline data collection and inception visit	5	Travel Monday to Kiribati, return to Australia Thursday/Friday
<b>November 2024</b>	Keep Moving training 1	9 weekdays, 2 weekend days	Travel Monday, 4.5-day training, 3 days of meetings and working with hospital/partners, returning to Australia Thursday/Friday
<b>February 2025</b>	Keep Moving training 2	9 weekdays, 2 weekend days	Travel Monday, 4.5-day training, following week to include 3 days of meetings

<sup>2</sup> Interplast will consider reimbursement of reasonable additional costs related to project delivery, provided they are discussed and agreed to ahead of incurring costs & submission of reimbursement claim.

			and working with hospital/partners and training of ToTs, returning to Australia Thursday/Friday
<b>June 2025</b>	Yearly reporting	1	
<b>Ongoing</b>	Development of training curriculum, report writing and remote support	6	These 6 days are for use throughout the year. The weekend days when in-country can be used as part of these 6 days. However, if the consultant wishes to travel/explore, the 6 days can be used remotely.
<b>Total</b>		<b>30</b>	

**Year 2: July 2025 – Jun 2026 (20 days work)**

<b>Timeframe</b>	<b>Activity</b>	<b>Days</b>	<b>Comment</b>
<b>August 2025</b>	Keep Moving training 3	9 weekdays, 2 weekend days	Travel Monday, 4.5-day training, 3 days of meetings and working with hospital/partners, returning to Australia Thursday/Friday
<b>February 2026</b>	Keep Moving training 4	9 weekdays, 2 weekend days	Travel Monday, 4.5-day training, 3 days of meetings and working with hospital/partners to prepare for handover to local team, returning to Australia Thursday/Friday
<b>Ongoing</b>	Remote support, yearly reporting and remote support of National DFC Strategy development	2	These days are for use throughout the year. The weekend days when in-country can be used as part of these days. However, if the consultant wishes to travel/explore, the days can be used remotely. Interplast will lead the writing of the National DFC Strategy, but consultant is expected to provide technical input and review drafts.
<b>Total</b>		<b>20</b>	

**Year 3: July 2026 – Jun 2027 (15 days work)**

<b>Timeframe</b>	<b>Activity</b>	<b>Days</b>	<b>Comment</b>
<b>August 2026</b>	Keep Moving training 5	9 weekdays, 2 weekend days	Travel Monday, 4.5-day training, 3 days of handover training with ToTs, returning to Australia Thursday/Friday
<b>March 2027</b>	Keep Moving training 6	3	Remote support during the week

<b>Ongoing</b>	Final reporting, ongoing support and participating in final evaluation (we expect this will be a 1–2-hour interview)	3	
<b>Total</b>		<b>15</b>	

*Note: there are only two flights per week to Kiribati, which Interplast and the Consultant will need to work around. Therefore, the Consultant may be required to be in Kiribati on several weekends that are not considered 'work days' due to the budget and flight constraints. We will endeavour to work with the Consultant to ensure that they have minimal unpaid time in-country.*

## Deliverables

<b>Deliverable</b>	<b>Date/s*</b>
<b>Attend baseline data collection visit + provide report</b>	Sept/Oct 2024
<b>Develop Keep Moving training package curriculum</b>	October 2024
<b>Deliver Keep Moving training 1 + post-visit report</b>	October 2024
<b>Deliver Keep Moving training 2 + post visit report</b>	February 2025
<b>6-monthly report (technical)</b>	February 2025
<b>Yearly report (contribution to broader annual project reporting)</b>	August 2025
<b>Deliver Keep Moving training 3 + post visit report</b>	August 2025
<b>Deliver Keep Moving training 4 + post visit report</b>	February 2026
<b>6-monthly report (technical)</b>	February 2026
<b>Yearly report (contribution to broader annual project reporting)</b>	August 2026
<b>Deliver Keep Moving training 5 + post visit report</b>	August 2026
<b>Remote support Keep Moving training 6 + post visit report</b>	March 2027
<b>Final Report (contribution to broader final project reporting)</b>	June 2027

\*Approximate – based on current workplan with DFAT but subject to change

Outside of these deliverables, there will be ongoing support to Interplast and the ToTs/partners, as per the activity plan.

Furthermore, after each in country visit, the consultant will be required to complete a report of their visit (using an Interplast template – which will include output data, training data, lessons learned, challenges and outcomes observed).

## To Apply

To apply for this consultancy, please provide a CV and a brief (no more than 3 pages) proposal to Interplast, outlining your suitability for this role, including a proposed budget and payment terms.

This application can be sent to [jess.hill@interplast.org.au](mailto:jess.hill@interplast.org.au) and must be received by 5pm, AEST, 9<sup>th</sup> August 2024.

# Keep Moving training package



Keep Moving is a training package for the prevention and management of lower limb amputation in the Pacific Region.



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Interplast is a member of the Australian Council for International Development and Registered Charity in Australia.



You can report a concern, raise an issue or get in touch with us by contacting:  
[contactus@interplast.org.au](mailto:contactus@interplast.org.au)

The Keep Moving training package was originally developed by Motivation Australia in response to the need to build knowledge and skills of personnel in the Asia Pacific Region who are working to:

- Prevent lower limb amputation as a result of diabetes, and;
- Support the return to mobility for men and women who have had an amputation.

## Keep Moving content

The training package was developed through consultation with personnel working in the region.

The range of activities required to prevent and manage amputations were identified through information gathered from health personnel, research and experience. In collaboration with partners, gaps in existing practice and priority training areas were identified. The training modules were developed based on the gaps and priorities identified. All modules were piloted and peer reviewed.

The Keep Moving modules include:

- The healthy and diabetic foot
- Screening for at risk feet
- Introduction to vascular health
- Assessment for diabetic foot care

- Vascular assessment with resources
- Overview of wound management and offloading with minimal resources
- Assessment for offloading
- Offloading with basic resources
- Offloading with orthotic resources
- Offloading with total contact cast (TCC)
- Offloading with a total contact cast shoe (TCS)
- Shoes for healthy feet
- Infection control
- Wound management
- Residual limb management
- Preparing for a prosthesis
- Prosthetic fitting considerations
- The importance of mobility
- Providing assistive devices
- Mobility with or without a prosthesis.

In addition to training modules, the Keep Moving training package also includes a range of template service forms and resources that are integrated throughout the training package.

These templates are designed to strengthen service systems and can be adapted to suit local context and requirements.

## Format of Keep Moving

The training resources are designed to complement

existing training tools available to personnel working in the Pacific Region.



The training resources include different types of modules, depending on the topic:

- **LEARN:** tools designed for personnel to increase their knowledge and skills.
- **TEACH:** tools designed for health personnel to teach their clients aspects of prevention and management.
- **ADVOCATE for and SHARE:** tools designed for personnel to use to advocate to decision makers for the provision or services.

## Use of Keep Moving

The Keep Moving training package has been used to provide formal training in diabetic foot care for nursing, medical and prosthetics and orthotics personnel throughout the Pacific region.

Health personnel have also used the training resources and tools to strengthen service systems and educate clients and decision makers.