

Dearadh agus Nuálaíocht Chliniciúil; Oifig an Príohoifigeach Cliniciúil Ospidéal Dr. Steevens, D08 W2A8 R: clinicaldesign@hse.ie T: 01 635 2000

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Deputy David Cullinane, TD Dáil Éireann Leinster House Kildare Street Dublin 2

RE: PQ 23393/20

To ask the Minister for Health when diabetes reviews of hospitals and primary care settings resume; and if he will make a statement on the matter

Dear Deputy Cullinane,

The Health Service Executive has been requested to reply directly to you in relation to the above parliamentary question, which you submitted to the Minister for Health for response. I have consulted with the National Clinical Programme for Diabetes on your question and have been informed that the following outlines the position.

An ageing population, rising prevalence of chronic disease, multimorbidity and complex care needs present significant challenges to the health system in Ireland. The COVID-19 pandemic has brought these challenges in to sharper focus with the implementation of social distancing measures; additional infection prevention and control measures; the redeployment of healthcare staff to the pandemic response; postponement of routine medical appointments to prioritise care for higher risk patients; and the curtailment of outpatient clinics (OPD) across the primary and secondary care sectors. These measures were necessary and proportionate and were especially important for vulnerable groups, including people with diabetes. Our objective is that all diabetes healthcare professionals who were redeployed should now return to their substantive post in diabetes care.

The majority of diabetes services in primary and secondary care continued during the pandemic, however, they were and continue to operate at reduced capacity due to the reasons outlined above. In a short period of time, many hospital and community services have transformed the way they are delivering diabetes care, to enhance engagement with all patients. Most diabetes services, including general practice, are offering telephone and virtual consultations as well as face-to-face appointments when required. In some areas, clinics that would have been delivered in the hospital OPD setting are now being delivered in the community, closer to the patient's home. Dietitians and nurses who deliver diabetes self-management education are preparing for this to be available virtually rather than in a face-to-face group setting. These measures have been employed to maintain diabetes service delivery and to protect the health of patients living with diabetes as well as healthcare professionals during this global pandemic.



It is recognised that delays in undertaking diabetes reviews may arise. In the interim period, it is vitally important that clinicians and patients work together to minimise the adverse impact of such delays. Patients should continue to maintain good self-management of their diabetes. Furthermore, it is important that people with diabetes do not ignore or delay seeking medical treatment when necessary. Patients should be encouraged to contact their GP, local pharmacy or diabetes specialist team as appropriate to discuss any issues, signs or symptoms that they may be concerned about.

I trust this information is of assistance to you but should you have any further queries please do not hesitate to contact me.

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Yours sincerely

Patricia Gilsenan O'Neill General Manager

General Manager