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Deputy Cormac Devlin,
Dáil Éireann,
Leinster House,
Dublin 2.

12th March 2021

PQ Ref 5551/21 - To ask the Minister for Health the annual statistics in relation to the diabetes cycle of care since 2015. - Cormac Devlin

Dear Deputy Devlin,

I refer to your recent parliamentary question which was passed to the HSE for response.

In October 2015, the Diabetes Cycle of Care was introduced nationally by the HSE, with GPs having the option to take part in this Cycle of Care. The Diabetes Cycle of Care means that people with a diagnosis of Type 2 diabetes who have a Medical Card or GP Visit Card are eligible to be managed as part of the Cycle of Care by their GP. Once registered with the Primary Care Reimbursement Service (PCRS), they are eligible to two visits a year with their GP; an Annual Review Consultation and a Second Consultation. These should be organised at approximately 6 monthly intervals.

Since 2015, GPs have registered 132,508 persons with eligibility for the Diabetes Cycle of Care. The table below shows the number of patients registered each year from 2015-2021.

Table: No of patients with Type 2 diabetes registered for Diabetes Cycle of Care 2015-2021

2015	2016	2017	2018	2019	2020	2021	Total
63,682	22,217	11,173	12,739	15,289	6,843	565	132,508

The GP Agreement concluded in 2019 by the Department of Health, the Health Service Executive (HSE) and the Irish Medical Organisation (IMO) provides for a Structured Chronic Disease Management Programme for people with a medical card or a GP visit card and who have specific chronic disease(s) of which Diabetes is one. The Structured Chronic Disease Management Programme which commenced in General Practice in 2020 is being rolled out over four years (2020 to 2023). In

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2020 and 2021 the Chronic Disease Treatment programme has been rolled out to those aged 70 years and over and to those aged 65 years and over respectively, with further rollout to all remaining eligible adult patients from 2022. The Structured Chronic Disease Programme will encompass / replace the Diabetes Cycle of Care as it is rolled out. The Structured Chronic Disease Management Programme's data being collected and submitted by General Practice will help improve the HSE's understanding of chronic diseases. The information will improve the HSE's ability to detect, treat and prevent chronic diseases, as well as deliver an improved service to people with one of the specified chronic diseases encompassed in the Programme.

As envisaged, the numbers registering on the Diabetes Cycle of Care in 2020 and 2021 have decreased in line with the rollout of the Structured Chronic Disease Management Programme.

Yours sincerely,

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Geraldine Crowley,
Assistant National Director,
Primary Care Strategy and Planning