



James Browne TD
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

23rd March 2021

PQ 13655/21

“To ask the Minister for Health the position regarding access for medical card holders to chiropody services; and if he will make a statement on the matter. -James Browne”

Dear Deputy Browne,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above Parliamentary Question (Reference 13655/21), which you submitted to the Minister for Health for response.

Chiropody and Podiatry are interchangeable terms and relate to the same profession. HSE community podiatry services offer services based on need rather than eligibility and medical card holders have access to these services. Referrals are triaged and are prioritised based on those most at risk of complications including for example those with Diabetes, Peripheral Vascular disease, neurological or development conditions. The range of services varies across CHO areas but in addition to HSE community podiatry services some CHO areas refer patients to private chiropody services. In these instances the patient can avail of an agreed number of treatments per year and is not charged for these services. In full year 2020 a total of 48,039 patients were seen by community podiatry services and in January to February 2021 a total of 5,287 patients were seen by community podiatry services.

To address the current third wave of Covid infections there was a requirement to prioritise the level of services delivered during this period. Building upon the experience from earlier waves of the pandemic, Community Services have developed a prioritisation framework to support local decisions to be made on service prioritisation. This approach will ensure that services will be focused on identifying and supporting patients who have the greatest need and enabling staff to be deployed where necessary to support these patients. Where services are curtailed or reduced, this will be in line with clinical approval, a shared national position and with an appropriate risk assessment and communication with providers, service users and families. It is the intention of Community Services that full services would return as soon as is safe and practicable.

I trust this information is of assistance to you.

Yours sincerely



TJ Dunford

Head of Operations; Primary Care.
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