

Office of the Head of Operations Primary Care, Community Operations Dr. Steevens Hospital, Dublin 8, DO8 W2A8 Tel: 01-6352682 Email: community.primarycare@hse.ie

Oifig Ceann na n-Oibríochtaí, Cúraim Phríomhúil,Oibríochtaí Pobail Ospidéal Dr. Steevens' Baile Atha Cliath 8, DO8 W2A8 T 01 6352682 R: community.primarycare@hse.ie

13th December 2021

Deputy Bríd Smith, Dáil Éireann, Leinster House, Kildare Street, Dublin 2.

PQ 58834/21 - To ask the Minister for Health his views on the current practice of chiropodists charging up to €37 for treatment of patients who have a chiropodist card which entitles them to a treatment for €10; and if he will make a statement on the matter.

- Bríd Smith

Dear Deputy Smith,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above Parliamentary Question (PQ 58834/21) which you submitted to the Minister for Health for response.

Chiropodists/podiatrists assess, diagnose and treat conditions and abnormalities of the foot and lower limb. Podiatry services can significantly improve peoples' quality of life by alleviating painful symptoms, and promoting and maintaining mobility. At present in Ireland, if a person has a foot problem they can:

- Attend their GP for a foot assessment and be referred to a HSE Podiatrist (free of charge no matter what their age or General Medical Services (GMS) status).
- Attend and pay for the services of a private podiatrist.

In County Dublin and County Wicklow primarily, there has been a long standing Chiropody Card Scheme, where qualified podiatrists can apply to be on a register as a HSE approved chiropodist/podiatrist. Once approved, patients can request to attend the private podiatrist clinic or request a domiciliary visit from a private podiatrist. Each person under this scheme, Medical Card or long term illness number (in certain areas), can avail of 3-6 treatments per year, but it is not free. The HSE pays the private podiatrist €33.41 for a domiciliary visit and €22.88 for clinical visit. The patients then top up the payment themselves and the fee is determined by the podiatrist.

The HSE has been working on developing a national standardised podiatry service across the country. This is being developed with the recruitment of podiatrist positions in the community health networks as well as specialist podiatrists to provide care to the persons diagnosed with diabetes. The HSE are also aware of and committed to developing appropriate governance structures throughout the country within the podiatry service, to meet the needs of the population.

I trust this information is of assistance to you.

Yours sincerely,

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Seán McArt General Manager Primary Care National Community Operations