



Rialtas na hÉireann  
Government of Ireland

# Report on the National Traveller COVID-19 Accommodation Preparedness Checklist

July 2021

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# 1. Introduction

The National Traveller COVID-19 Accommodation Preparedness Checklist has been developed to strengthen COVID-19 preparedness and infection prevention and control in authorised and unauthorised Traveller halting sites and local authority Traveller-specific Group Housing Schemes. The checklist aims to be a toolkit for local action by identifying areas that may need additional supports during this pandemic, which may also remain relevant post-pandemic.

The National Traveller COVID-19 Accommodation Preparedness Checklist is a collaborative initiative between the Department of Housing, Local Government and Heritage (DHLGH), HSE Public Health (PH), HSE National Social Inclusion Office (NSIO), the County and City Management Association (CCMA), local authorities (LAs), Traveller Health Units (THUs) and Primary Healthcare for Traveller Projects (PHCTPs).

This report provides an overview of the background, outcomes, the measures put in place and some of the challenges encountered.

# 2. Background

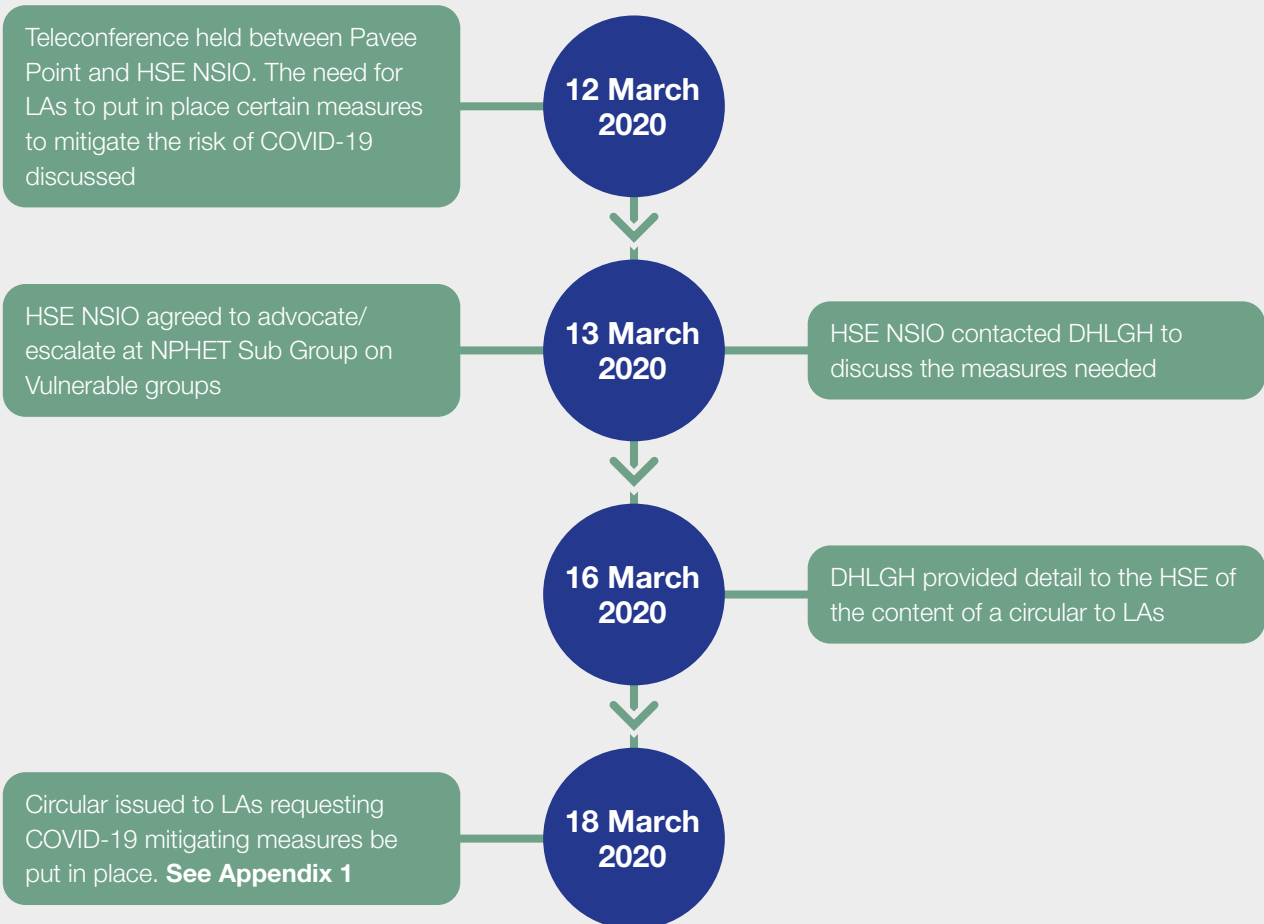
On 11<sup>th</sup> March 2020, Dr Tedros Adhanom Ghebreyesus, WHO's Director-General announced that COVID-19 can be characterised as a pandemic.

On 12<sup>th</sup> March 2020, Dr Hans Henri P. Kluge, WHO Regional Director for Europe, briefed on the rapid escalation of COVID-19 in the WHO European Region, now placing it at the centre of the pandemic. Dr Kluge urged countries to continue to implement a containment strategy while accelerating their efforts to control the disease.

That same day, March 12<sup>th</sup> 2020, the Taoiseach announced that a number of significant measures were being put in place, arising from the pandemic. The measures were designed to reduce the spread of COVID-19 and lessen the risk of infection, especially to vulnerable groups.

As a result of this both the HSE NSIO and DHLGH began engagement on COVID-19 mitigating measures for Travellers.

## 2.1 Timeline of engagement on initial COVID-19 mitigating measures between the HSE and DHLGH



## 2.2 Traveller Health and COVID-19

Travellers in Ireland are particularly disadvantaged in terms of health status and access to health services. The total number of Travellers in Ireland is estimated at just over 30,000 (<1% population)<sup>1</sup>. However, Travellers health inequalities are greater than almost any other group. Their poor health status is highlighted in the findings of the [All Ireland Traveller Health Study \(2010\)](#).

Travellers experience extreme poverty and often live in overcrowded accommodation. A combination of poor health and in some cases inadequate and overcrowded accommodation, has contributed to the increased vulnerability of Travellers to contracting and becoming ill with COVID-19. In some instances overcrowded accommodation makes it difficult for those testing positive with COVID-19 or those identified as a close contact, to follow the HSE self-isolation guidelines. Additionally, many Travellers live on temporary 'unauthorised sites' which make the provision of basic facilities, such as electricity and water difficult.

Irish Traveller culture includes extended family ties, social gatherings (frequently linked with religious events) and travel within and beyond Ireland.

Between March 1st 2020 and April 10th 2021, there were 5,226 COVID-19 notifications among Travellers (169/1000 population) and 235,710 in non-Travellers (50/1000 population). Cumulative incidence varied by county, and 40% of the Traveller population in one county was affected. 236 (4.5%) Traveller cases were hospitalised, 25 (0.5%) were admitted to ICU, and 15 (0.3%) died (compared to 5.8%, 0.6%, and 1.9%, respectively, of non-Traveller cases). Traveller cases were younger than non-Traveller cases (median age 23 versus 38 years;  $P < 0.0001$ ). Weekly case numbers among Travellers exceeded 4% of all cases reported in weeks 6-12, 2021, declining in weeks 13-14, 2021. 20% of outbreak-associated Traveller cases were linked to halting sites, and 5% to funerals or weddings.<sup>2</sup>

Travellers remain the highest at-risk group in terms of COVID-19 outbreak identification and management among vulnerable groups. Each outbreak is complex and requires a significant amount of resources and engagement to manage.<sup>3</sup>

1 Central Statistics Office (CSO), 2016, [www.cso.ie](http://www.cso.ie)

2 Epidemiology of COVID-19 among Irish Travellers, Ireland March 2020 to April 2021. Garvey, O'Connor, McKenna et al. April 2021.

3 National Social Inclusion Office: HSE vaccine approach for vulnerable groups in Ireland. Dr. Margaret Fitzgerald & Jane-Ann McKenna; 3rd March 2021

## 2.3 HSE Structures to support Traveller Health

The HSE via Social Inclusion (SI) nationally and at Community Health Organisation (CHO) level support a range of primary care projects and other initiatives for Travellers including THU and PHCTPs. In PHCTPs, Travellers work as community health workers, and this allows primary health care to be developed based on the Traveller community's own values and perceptions.

## 2.4 DHLGH

The Housing (Traveller Accommodation) Act, 1998 provides that LAs have statutory responsibility for the assessment of the accommodation needs of Travellers and the preparation, adoption and implementation of multi-annual Traveller Accommodation Programmes in their areas. DHLGH's role is to ensure that there are adequate structures and supports in place to assist the authorities in providing such accommodation, including a national framework of policy, legislation and funding.

# 3. COVID-19 Response for Travellers

## 3.1 HSE

At the onset of COVID-19, all CHO areas with SI resources prepared Traveller support plans. These plans included risk assessments, the identification of medically vulnerable potentially in need of support and the identification of those in need of cocooning support. HSE SI convened a regular tele-conference with THUs and NSIO / PH to develop guidance and support for Travellers. Some issues were highlighted in the preparatory phase:

- Stigma likely to feature as barrier to early testing and diagnosis
- Challenges in hygiene, sanitation and accommodation in official and unofficial sites
- Lack of access to GPs (due to mobility /missed medical cards etc.)
- Difficulties expected for self-isolation in sites.

In response to this, the HSE prioritised the following in order to manage and respond to outbreaks and cases of COVID-19 amongst the Travelling community:

- Infection prevention and control (IPC) measures through education awareness and information
- Working with THUs and Non Government Organisation (NGO) partners, to enhance information and awareness about hygiene, Government measures on social distancing, restricted movements etc.
- Cocooning for extreme medically at risk
- Public Health outbreak response, especially rapid cluster outbreak testing, tracing and support
- A tailored rapid testing, triage and tracing process, with priority agreed for testing
- Monitoring of patients with COVID-19
- Roll out of COVID-19 vaccine
- Advocacy in reduction of overcrowding where possible.

A range of Traveller specific support measures were put in place including:

- Regular inter-departmental meetings with key stakeholders
- A national [helpline](#)
- Website resource page: [Traveller COVID- 19 sharing resources](#) which features posters, videos and other communication materials. It also includes links to webinars on COVID-19 specific subjects and HPSC Traveller specific vulnerable group guidance <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/vulnerablegroupsguidance/>
- Specific local supports have been put in place in various CHOs to support Travellers, for example, the [Community Assessment Hub in the Mater Hospital](#) was accessible to Travellers.

### 3.2 DHLGH

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At the start of the pandemic, DHLGH recognised that extra measures may need to be put in place to protect Travellers living in Traveller-specific accommodation in each LA area and to reduce the risk of the spread of the virus.

Circular 06/2020 (see appendix 1) issued on 18<sup>th</sup> March 2020 and identified the following measures:

1. Extra toilets
2. Running water
3. Additional mobile accommodation / space where there is overcrowding

4. Extra refuse collection
5. Access and egress on sites
6. Additional units (either mobiles on site or houses elsewhere that will allow for self-isolation/ quarantine).

DHLGH requested that every effort be made to find prompt and practical solutions on existing sites. Where these additional measures were not possible, it requested that LAs work with the families involved, to move residents to alternative accommodation on a temporary basis. Funding was made available by DHLGH for any necessary measures.

Funding was approved for:

- The purchase of additional mobile homes, touring caravans and demountable accommodation units
- The setting up of additional temporary sites or reopening vacant bays to facilitate isolation and alleviate overcrowding
- Extra sanitation, water and electricity supplies have been provided
- Cleaning and disinfecting sites
- The removal of rubbish.

The majority of LAs put a number of arrangements and preventative measures in place to provide, among other things, services to previously un-serviced sites to facilitate better sanitation and social distancing. Where it was not possible to accommodate families in their current locations DHLGH worked with LAs and families to find alternative appropriate solutions.

DHLGH put in place a streamlined process for funding applications by LAs simplifying the process and issuing approvals for funding within 24 hours. DHLGH continues to provide funding for COVID-19 support measures identified by LAs and continues to liaise with LAs sharing examples of good practices with the focus on “life safety”.

Many LAs also work independently with local THUs and local Traveller representative groups to identify measures to prevent the spread of the virus.

# 4. The National Traveller COVID-19 Accommodation Preparedness Checklist

The National Traveller COVID-19 Accommodation Preparedness Checklist was developed to strengthen COVID-19 preparedness and infection prevention and control on authorised and unauthorised Traveller halting sites and LA Traveller-specific Group Housing Schemes. The Checklist aimed to be a toolkit for local action by identifying areas that may need additional supports during this pandemic and which may remain relevant post-pandemic. In certain circumstances illegal or unauthorised sites may be outside the control of the LAs. The Preparedness Checklist was used as a tool to identify where there is a risk to life and health due to COVID-19 rather than putting a legal responsibility on LAs in relation to sites that they have not sanctioned and may have been very recently developed.

Two hundred and forty-five site checklists were completed nationally to identify risk to life and health due to COVID-19. The THUs in conjunction with the PHCTPs and in some instances with the LAs identified 'at risk' sites. A number of sites had already had mitigating measures implemented prior to the instigation of the Checklist or were working closely with the LAs on measures identified prior to the Checklist, as a result these sites were not considered to require further action. Some sites had no issues to report and so also were not included.

## 4.1 Timeline of the Traveller COVID-19 Accommodation Preparedness Checklist

Following consultation between the HSE, the CCMA and DHLGH, a pilot COVID-19 Preparedness Checklist was prepared and rolled out in October 2020 in CHO 1 covering counties Sligo, Donegal and Leitrim. The nationwide rollout commencing at the end of October 2020. Between October 2020 and February 2021 the THUs and the PHCTPs worked with LAs to identify and put in place supports required.

## 4.2 Methodology

The questionnaire was developed following a review of similar assessments and checklists, including the risk framework developed by the Mental Health Commission for the Irish mental health services and the assessment developed by NSIO with Department of Justice and Equality for IPAS centres. Four areas were identified to evaluate the preparedness of Traveller specific accommodation and the ability of services to respond timely and effectively to COVID-19 case(s): communication, sanitation, physical distancing and capacity to self-isolate safely and effectively. Questions were developed for each of the areas of interest and answered with a "Yes" or "No" (see **Appendix 2**).

Questions in the Checklist were split by items falling within the responsibility of the HSE and items within the responsibility of the LAs (see **Appendix 2.2 and 2.3**).

The Checklist was used to identify areas where there was a need for further intervention to strengthen COVID-19 prevention and response and to identify the most appropriate interventions for responding to risks to public health within Halting Sites/Group Housing Schemes. It was not intended to reflect any broader accommodation issues outside of a COVID-19 context.

The HSE regional THU's identified sites within each area where a preparedness checklist was required. The Checklist was also intended as a tool for use by the HSE where clusters of positive cases have been identified on sites.

## 4.3 Implementation

The HSE regional THU Co-ordinators were tasked with completing the Checklist. The THUs were requested to consult with the Traveller accommodation unit in the LA and the PHCTPs in order to understand and reflect the individual circumstances in relation to each site.

DHLGH and the HSE co-ordinated the Checklist results, the HSE following up on HSE specific actions and DHLGH following up with LAs on actions specific to them.

DHLGH has made funding available to LAs to implement measures in Traveller specific accommodation to alleviate, where possible, the risk of the spread of COVID-19.

Monitoring of the implementation of these measures was carried out by:

- the Traveller Accommodation Support Unit in the DHLGH
- HSE PH and
- HSE NSIO.

## 5. Checklist Results

The Traveller COVID-19 Accommodation Preparedness Checklist pilot was launched in October 2020 in CHO1, results given below take into account work started before the instigation of the Checklist and outline the situation to end April 2021.

### Headline statistics

### COVID-19 mitigating measures





Two hundred and forty-five Checklists were completed nationally. Several meetings were held between DHLGH and the HSE to discuss progress and identify gaps, and a master spreadsheet was compiled to track the work.

HSE NSIO has followed up with all the THUs in relation to the HSE specific actions and is satisfied that where it was reasonable and practical to do so, measures to mitigate the risk of COVID-19 have been put in place.

DHLGH contacted each LA to confirm that identified mitigation measures were being actively addressed. As returns were received, DHLGH tracked progress and completions. DHLGH followed up with LAs on identified remediation works that remained outstanding, following up directly with each LA over several weeks by telephone and email. LAs made returns outlining measures taken and mitigation plans put in place.

To end April 2021, €4.5 million in funding was drawn down by LAs for the provision of additional facilities for Traveller-specific accommodation which included the provision of 111 accommodation units, additional water and sanitation facilities, electricity supply, additional site cleaning, additional waste removal, pest control and site improvement works. DHLGH continues close contact with LAs and continues to provide funding for measures identified as being needed to mitigate the risk of COVID-19.

The HSE ensured that all sites had relevant contacts for HSE/LA personnel and that there was a swift method of communication during outbreaks i.e. WhatsApp. The HSE via the THUs/PHCTPs and local SI ensured additional social supports were provided such as face to face outreach with information in relation to COVID-19 and information on available services. Additionally wraparound supports were organised during outbreaks or suspected outbreaks for example, organising transport, food and medication.

Both the HSE and LAs provided COVID-19 site signage, welfare packs and personal protective equipment such as face coverings and hand sanitiser.

While assessing the needs of families, facilities could only be provided where it was considered safe to do so. LAs have to take into consideration fire safety issues, planning issues and provide supports within these boundaries.

## 6. Challenges

DHLGH and the HSE recognise that, in these challenging times, finding and implementing solutions is difficult and that in some cases it has required an enormous amount of flexibility by the HSE, the LAs and the residents of the sites. In the majority of cases the feedback has been positive pointing to good co-operation between the HSE and LAs, with certain areas operating multi-agency consultation on the project. All the stakeholders in the project worked well together to ensure that COVID-19 mitigating measures were implemented on sites nationally.

However, some challenges were identified. They include:

1. There was limited consultation with the THUs and LAs during the preparation phase due to time constraints. This led to some stakeholders not being clear about the process.
2. The need for a bilateral meeting between the PHCTPs on the ground and the LA at the point of completing the Checklist was a crucial step that was overlooked in some areas. The pilot of the project in CHO 1 did not include this step. In most areas all co-operated very effectively, this was particularly true for areas where a good working relationship between the THU and the LAs already existed. However, in other areas more effort could have been made to ensure that the LAs were properly consulted prior to the Checklist being completed.
3. The CHO areas do not align with LA areas.
4. Discrepancies were noted between what the THUs considered to be COVID-19 mitigating measures and what the LAs considered COVID-19 mitigating measures.
5. Access to sites by LA workers has been hampered where there have been COVID-19 outbreaks.
6. LAs have faced challenges in getting contractors to go on sites to conduct necessary works.
7. There were some practical and legal implementation considerations, for example when trying to implement measures on unofficial sites on private land.
8. Disinfecting sites was identified as a COVID-19 infection, prevention, control (IPC) measure in the Checklist. However, as the benefit or efficacy of this initiative could not be measured, it was decided to discontinue this.



## 7. Next Steps

Some of the actions identified are complex and solutions can take time to implement. HSE PH, HSE SI, THUs and LAs can continue to monitor the situation and work together to identify the solutions possible and best suited to the needs of Travellers during this COVID-19 emergency. The Checklist is a 'living document' that can be used by both the HSE and LAs to continue to improve conditions on Traveller accommodation sites both official and unofficial.

As the advice in relation to COVID-19 continues to evolve, actions required by both organisations can be reviewed and amended as necessary.

## 8. Recommendations

The Checklist offers a good example of cross government department, collaborative working. The breadth and complexities of factors, which determine health and inequalities in health for Travellers illustrate the multitude of sectors with whom it is necessary to work with if these issues are to be addressed<sup>4</sup>. This collaboration between DHLGH, LAs, THUs, HSE SI, HSE PH and PHCTPs has had a positive effect on the health outcomes of Travellers. This relationship should be encouraged and maintained beyond COVID-19.

## 9. Thanks and acknowledgements

The HSE and DHLGH would like to thank the THUs for leading out on the completion of the Checklists.

The HSE and DHLGH would like to thank and acknowledge the support of the CCMA and the LAs' swift response in implementing these measures.

The HSE and DHLGH would also like to thank and acknowledge the valuable assistance of the National Traveller organisations and the PHCTPs for their assistance with completing the Checklist of sites.

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<sup>4</sup> A Review of Travellers' Health using Primary Care as a Model of Good Practice (2005), Caoimhe McCabe and Fran Keyes

# Appendix 1: Department of Housing, Local Government and Heritage Circular 06-2020 18/03/2020

**To all Directors of Service- Housing**

**March 18th 2020**

## **Traveller Accommodation Unit – Electronic Correspondence**

Dear Colleagues,

As you are aware, on Thursday, March 12th 2020, the Taoiseach announced that a number of significant measures are being put in place, arising from the Coronavirus/COVID19 situation. The measures are designed to reduce the spread of COVID19 and lessen the risk of infection, especially to vulnerable groups.

Some members of the Traveller community, particularly those living on sites with limited facilities, may be particularly vulnerable and extra measures may need to be put in place to protect Travellers living in Traveller specific accommodation in each local authority.

The following areas have been identified to date, where additional measures may be required in Traveller accommodation facilities in order to reduce the risk of the spread of the virus:

1. Extra toilets;
2. Running water;
3. Additional mobile accommodation / space where there is overcrowding;
4. Extra refuse collection;
5. Access and egress on sites; and
6. Additional units (either mobiles on site or houses elsewhere that will allow for self-isolation/ quarantine).

It should be noted that every effort should be made to find prompt and practical solutions on existing sites. Where these additional measures prove not possible, it may be necessary for local authorities, to work with the families involved, to move residents to alternative accommodation on a temporary basis.

In addition to the above, you may also have identified other measures that are of value that could be employed in other local authority areas to prevent the spread of the virus. If this is the case, please advise the Traveller Accommodation Unit so that we can share with other local authorities.

If local authorities, consider that the above additional measures are required in relation to any site they should contact the Department to discuss. The Traveller Accommodation Unit has some funding available for essential mitigation works and any such requests will be prioritised within 24 hours.

I refer you to Circular 46/2016, which outlines the availability of funding for the purchase of mobile homes in cases of emergencies. Consideration of any proposals under this circular will also be prioritised by the Traveller Accommodation Unit and we will respond within 24 hours.

Please ensure that lines of communication are open with the Traveller Community and Traveller Organisations in your area and they are referred to the HSE Guidelines as appropriate. We would be grateful if you keep us informed of all developments and issues arising on sites including instances where testing is required.

Any queries in relation to this Circular should be addressed [TAU@housing.gov.ie](mailto:TAU@housing.gov.ie)

Yours sincerely,

Rosemarie Tobin  
Principal Officer  
Traveller Accommodation Support Unit

# Appendix 2: The headings of the National Traveller Accommodation COVID-19 Preparedness Checklist

## Appendix 2.1: General Information

Areas marked in green are HSE specific					Site Profile		Pre Survey Information				R	
Areas marked in blue are LA specific												
Name of site/group housing scheme	Local Authority	Traveller Health Unit	CHO	NGO/Project supporting the site	Name of respondent	Type of accommodation	Location	From Local Authority	From local Traveller Group	No. of residents	No. of families	

## Appendix 2.2: Headings specific to the HSE

Resident cohort				Communication									
No. of children U5	No. of residents over 60	No. of residents under 60 with underlying health conditions (if known)	Is there a nominated COVID19 lead on the site/scheme either directly or via NGO?	Is there a method of communicating with all residents e.g via an NGO or community group in a swift and effective fashion (i.e. whatsapp)?	The site or associated NGO has contacts for relevant HSE personnel in the event of a suspect COVID19 outbreak?	The site or associated NGO has contacts for relevant Local Authority personnel in the event of a confirmed case of COVID19?	Is there an up to date list of telephone numbers in the event of an outbreak via an NGO/THU?	There are additional social supports provided to residents (e.g. NGO services)?	Do residents have access to updated information re national COVID19 guidance e.g. via an NGO				

### Appendix 2.3: Headings specific to the local authorities

Sanitation on site/hand hygiene												Physical distancing			Self Isolation	
Site specific signage and COVID19 posters are prominently displayed?	Do all residents have access to running water?	If all do not have access to running water, has the site been supplied with adequate hand sanitisers/hand gel?	Has the site been supplied with sanitation packs either directly or via NGO?	Has the frequency of (scheduled) cleaning of the site increased since the onset of Covid-19 (i.e. March 2020)?	Does each household/unit have access to a toilet?	Does each household/unit have access to a shower or bath?	Does each household/unit have access to electricity?	Is there scheduled refuse collection at least once per week?	Is there evidence of waste left around on the site?	Is there evidence on site of rodent infestation?	The personnel going on site (i.e. LA workers) have a supply of PPE (face covering, hand gel)?	Has additional mobile accommodation / additional housing been provided to reduce overcrowding where required? If yes, please say for how many households in the comments section? (If overcrowding is not an issue please leave blank).	There is adequate access onto the site?	There is adequate access out of the site?	Is there adequate signage to alert residents and visitors to keep a distance of at least 2 meters (6.5 feet) from others?	There is allocated space/facility to isolate residents should the need arise? Or a plan in place to provide off-site accommodation should the need arise?

### Appendix 2.4: Remedial action

Escalations / comments		Post survey information		Remediation
Issues for escalation	General Comment	Additional information (HSE)	Additional Information (LA)	Proposed LA measures to mitigate risk



**Rialtas na hÉireann**  
Government of Ireland

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