



## Coronavirus (COVID-19) guidance for Travellers

Version	Date	Changes from previous version
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**This guidance document gives general advice about preventing the spread of COVID-19 and dealing with cases of COVID-19 for Travellers. It is part of the overall HPSC Guidance for vulnerable groups.**



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## BACKGROUND

The total number of Travellers in Ireland is estimated at over 30,000 (<1% population). Travellers in Ireland are particularly disadvantaged in terms of health status and access to health services, with poor baseline health and disproportionate burden of chronic health conditions compared to the majority population. The particular influence of social determinants of health (SDH) on the poor health of Travellers is reflected in their living conditions. Travellers live in standard housing and Traveller-specific Group Housing Schemes and Halting sites, but many Travellers live in substandard accommodation with inadequate or minimum services, or live in overcrowded conditions, doubling up on sites. Others live on the roadside with minimum services. This creates challenges for the basic public health preventative measures for COVID-19 such as hand-washing (due to lack of access to safe clean hot running water), physical distancing (due to overcrowding), and cocooning (due to shared/communal facilities); and for managing symptoms and self-isolating if they become unwell. As well as being particularly vulnerable to COVID-19 because of their living conditions, Travellers are also more vulnerable to the health impact of COVID-19 if they catch it, because of their poor baseline health. COVID-19 is a new illness caused by a new coronavirus (SARS-CoV-2), which is spread mainly through droplets produced by coughing or sneezing, or shouting or singing loudly. Spread is most likely from a person who has symptoms, but can occur in the days before a person develops symptoms, or, in some cases from an infected person who has no symptoms. To infect you, the virus has to get from an infected person's nose or mouth into your eyes, nose or mouth. You could get the virus if you:

- come into **close contact** (<2 metres/6 feet) with someone who has the virus and is coughing or sneezing, or shouting or singing
- **touch** – with your hands - surfaces or objects that someone who has the virus has coughed or sneezed on, and then touch your mouth, nose or eyes without having washed or sanitised your hands thoroughly.

COVID-19 can be a mild or severe illness. It can take up to 14 days for symptoms of coronavirus to appear after catching it. Common [symptoms](#) include:

- a fever (a high temperature 38 degrees Celsius or above)
- a cough – this can be any kind of cough, not just dry
- a shortness of breath or breathing difficulties
- loss of, or change to your sense of smell or taste.

Coronavirus (COVID-19) can make anyone seriously ill. But for some people, the risk of complications or severe illness is higher, due to underlying health conditions or age. These people fall into two different [risk categories](#): people at [high risk](#) – who need to take extra care to protect themselves, e.g.



- people with long-term medical conditions such as chronic heart disease, high blood pressure, diabetes, lung disease (e.g. asthma, COPD, emphysema), chronic kidney disease, liver disease, cancer, cerebrovascular disease (e.g. a stroke)
- people at **very high risk** (also called *extremely medically vulnerable*) – who need to cocoon, e.g.
  - Travellers aged 60 years and older – even if fit and well
  - people with certain types of cancer or having treatment for cancer – see [list](#) on HSE website
  - people with conditions or on medication that affect the immune system or make them more vulnerable to infection
  - people who have had an organ transplant.

Further information on COVID-19 is available on the HSE website at:

<https://www2.hse.ie/conditions/coronavirus/coronavirus.html>

### **Government measures**

Government measures in force from 20<sup>th</sup> July 2020 continue to remind people to avoid non essential travel to other countries. If you have to go abroad for essential reasons, a list of countries (called the green list) that are safer to visit will be available shortly. This list will be reviewed every 2 weeks.

Anyone travelling to Ireland from a green list country will not have to restrict their movements. For people living in Ireland, the advice is to avoid all non-essential travel overseas until further notice.

Family and friends arriving from a green list country should be treated as visitors. This means you should follow social distancing and other public health guidelines. You should not interact with them in the same way as the people in your household that you live with every day.

Within Ireland the Government has removed the restrictions to travel within Ireland. The measures include advising the general public to continue to follow advice to protect our community. The Health Service Executive (HSE) has produced [Stay Safe Guidelines](#), including a booklet and posters with advice for various situations. In particular people are asked to only have gatherings that follow public health advice such as up to 50 people indoors or 200 people outdoors. In households this is limited to a maximum of 10 people and a maximum of 4 family groups.

#### **ARRIVING IN IRELAND FROM ANOTHER COUNTRY**

By law, if you arrive in Ireland from any other country you will need to fill in a form called the Covid-19 Passenger Locator Form. You'll also be asked to restrict your movements for 14 days.

#### **COVID-19 PASSENGER LOCATOR FORM**

[Covid-19 Passenger Locator Form \(PDF, 549 KB, 2 pages\)](#).

This form can be filled out before you travel. If you need help, let border personnel know when you arrive in Ireland.

#### **RESTRICTED MOVEMENTS**

You are also asked to restrict your movements for 14 days if you arrive in Ireland from any overseas country. This includes Irish citizens coming home.

[www.hpsc.ie](http://www.hpsc.ie)



Restricting your movements means **staying indoors and avoiding contact with other people and work and social situations as much as possible.**

Further advice for people who have [recently returned from abroad](#) is available from the HSE.

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### GENERAL MEASURES TO REDUCE THE SPREAD OF INFECTION IN SETTINGS FOR VULNERABLE GROUPS

The following are some general recommendations to reduce the spread of infection:

#### 1. RAISE AWARENESS:

- Promote good hand and respiratory hygiene as described below and distribute and display relevant posters and information leaflets (including for homes, if needed)
- Advise persons who are *at high or very high risk* of severe illness from COVID-19 infection including those over 60 years, to *stringently practice* hand hygiene, respiratory etiquette, physical distancing measures and wearing a face mask or face covering according to the [guidance](#)
- Advise on the symptoms of COVID-19 infection and ensure people understand what to do if they have symptoms– in terms of (a) taking care of self ([access to testing](#)/healthcare) (b) protecting others (self-isolation – this means staying indoors and completely avoiding contact with other people – including those in your own household)
- Advise how to manage and reduce the risk in day to day activities (e.g. [shopping safely](#), [getting prescriptions](#)) and to exercise a common sense approach to interaction with others, including other Travellers e.g. avoid shaking hands; avoid making close contact if possible, especially with those who are coughing and sneezing; reduce cash handling
- Advise what coronavirus means for [travelling](#) and for gatherings (e.g. [funerals](#), [visiting in hospitals](#), visiting others or having visitors at home)



### **Hand hygiene:**

Wash your hands regularly. **This is the most important thing you can do.** Wash your hands with soap and hot running water for at least 20 seconds when hands are visibly dirty. If your hands are not visibly dirty, wash them with soap and hot water for at least 20 seconds or use an alcohol-based (at least 60%) hand sanitiser if water is not available. Services to support these measures will be needed.

#### ***You should wash your hands:***

- after coughing or sneezing
- before, during and after you prepare food, including baby milk feeds
- before feeding a baby or young child
- after changing nappies
- after wiping children's noses and faces
- before eating
- after using the toilet
- before and after caring for sick individuals
- when hands are dirty
- after handling animals or animal waste

See HSE hand hygiene guidance at <https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html>

### **Respiratory hygiene:**

Cover your mouth and nose with a clean tissue when you cough and sneeze, and then promptly dispose of the tissue in a bin and wash your hands with soap and water or use an alcohol-based hand sanitiser. If you don't have a tissue, cough or sneeze into the bend of your flexed elbow instead, not into your hands.

[Posters](#) on preventing spread of infection are available on the HPSC website.

## **2. THE GUIDELINES FOR GATHERINGS ARE:**

- Distance: Always try to stay 2 metres apart from anyone you do not live with
- Activity: Wash your hands regularly, wear a face covering on public transport, while shopping or in a crowded indoor space
- Time: The amount of time you spend with a person or group increases your risk of contracting the virus



- Environment: Always bear in mind that a closed, poorly ventilated indoor space is much riskier than being outdoors
- You can travel anywhere in Ireland, including to offshore islands.
- Advise how to keep well during this time and to link in with usual health, mental health and immunization services
- Specific resources are available at [Traveller COVID 19 sharing resources](#)
- National Traveller COVID-19 [Phone Line](#) supported by HSE THU Midlands

### 3. HYGIENE MEASURES AND CLEANING REGIMES:

- It is thought that the COVID-19 coronavirus can stay alive for hours to days on some surfaces – so take a pro-active approach in doing more cleaning of visibly dirty surfaces, followed by disinfection.
- Clean and disinfect regularly touched objects and surfaces using a household cleaning product/bleach/ Milton (follow label instructions)
  - especially all hard surfaces in common areas and locations that are touched frequently by people throughout the day, such as door handles, grab rails/hand rails in corridors/stairwells, plastic-coated or laminated worktops, access touchpads, telephones/keyboards in offices, and toilets/taps/sanitary fittings, wear rubber gloves when cleaning surfaces, wash the gloves while still wearing them, then wash your hands after you take them off
  - make sure you have good ventilation (windows open) while using the cleaning/ disinfecting product
  - make sure that you have enough bins available for easy disposal of tissues (preferably covered bins, lined with a bin bag, replace when three-quarters full).

### 4. PLAN

- Each regional Traveller Health Unit should have a COVID-19 Mitigation Plan, which should inform and support the development of Mitigation Plans for local Traveller Projects. Elements to consider in the plan include:
  - Consider how to support persons who become ill with symptoms of cold or flu as this might be COVID-19. Support a space for isolating them from other people when seeking medical advice (e.g. phone a GP/ Emergency Department). THU can also phone the local Public Health department if concerned about an outbreak.
  - On the Side of the Road, Halting Sites and Group Housing Schemes, the THU should work in conjunction with local Authority and HSE Public Health Dept if there is an outbreak and ensure correct facilities are in place.
  - for those in private rented accommodation but the accommodation is unsuitable, a plan will be made in conjunction with the HSE and Local Authority to move individuals to an isolation



facility with support from Traveller Health Units (THUs) /Primary Healthcare projects (PHCPs).

- Have a plan to assist older Travellers and those who are extremely medical vulnerable to cocoon including appropriate facilities and ongoing support. A list of those considered extremely medically vulnerable can be found [here](#).
- Have a plan for dealing with persons who are close contacts of a confirmed case of COVID-19.

## HOW CAN PERSONS PROTECT THEMSELVES

There are things EVERYONE can do to protect themselves, their families and communities from COVID-19.

- Avoid touching your eyes, nose and mouth; respiratory viruses need access to these body sites in order to cause infection.
- Clean your hands regularly using an alcohol-based (at least 60%) hand rub (if hands are not visibly soiled) or by washing with soap and water.
- Keep your distance when possible from those who are coughing, sneezing and/or have a fever by leaving a distance of at least 1 metre (3 feet), preferably 2 meters where possible, between yourself and others.
- Avoid making close contact with people (i.e. do not shake hands).
- Observe respiratory hygiene and cough etiquette; for example, when coughing and sneezing, cover your mouth and nose with a tissue. Discard the tissue immediately into a closed bin and clean your hands with alcohol-based hand rub or soap and water.
- If you do not have a tissue cough into your upper arm or the crook of your elbow -do not cough into your hand.
- Restrict visitors to all homes/halting sites
- Masks should be worn when staying 2 metres apart from people is difficult - for example, in shops, shopping centres or public transport

## SAFE USE OF FACE COVERINGS

The COVID-19 virus is spread mainly through droplets produced by coughing, sneezing or shouting/singing loudly, particularly in close (less than 2 metres/6 feet) contact. As COVID-19 can be spread by infected people who don't have symptoms and don't know that they have the virus, wearing cloth face coverings which cover the mouth and nose may help prevent people from unknowingly spreading COVID-19 to others. This is most important in close or confined settings or in situations where it is difficult to practise 2 metres (6 feet) physical distancing (social distancing), for example, in shops or on busy public transport.

It is therefore recommended that:

- where possible, when visiting persons on halting sites or in houses, meet or socialise outdoors, where it is easier to maintain 2 metres distance from each other





- those entering or visiting Traveller homes should wear a cloth face mask if they are going to be in close contact (less than 2 metres) for more than 15 minutes in an enclosed indoor space those visiting the homes of Travellers who are cocooning or are at more risk from COVID-19 because they are over 60 or medically vulnerable should wear a cloth face mask during the visit
- if wearing a cloth face covering, you should still do the other important things necessary to prevent the spread of the virus, such as frequent hand-washing, good cough hygiene etc.

A cloth face covering should cover the nose and go under the chin - *and*

- fit snugly but comfortably against the side of the face and on the nose
- be secured with ties or ear loops
- include at least 2 layers of fabric (cotton or silk)
- allow for breathing without restriction.

The HSE has advice on making cloth face coverings at [How to make one](#) on the HSE website.

**Do:**

- ✓ wash hands before and after using the mask/face covering
- ✓ cover your mouth and nose with it, and make sure that it fits comfortably and securely with no gaps between your cloth face covering
- ✓ tie it securely
- ✓ carry unused disposable masks or your clean cloth face covering in a sealable clean waterproof bag (for example, a ziplock bag)
- ✓ carry a second similar type bag to put used cloth face coverings in
- ✓ remove it from behind or using the loops – do not touch the front of the mask
- ✓ do not touch your eyes, nose and mouth while removing the mask
- ✓ clean your hands properly after removing the mask (with soap and water or hand sanitiser)
- ✓ put disposable masks in a bin straight away
- ✓ put a reusable cloth mask back in the ziplock bag and wash it in a hot wash over 60 degrees with detergent when you get home; you don't need to sterilise it

**Do NOT:**

- ✗ touch a mask or face covering while wearing it – if you do, clean your hands properly
- ✗ do not use a wet or soiled face mask or covering
- ✗ do not share your mask or face covering with others
- ✗ do not lower your mask to speak, eat or drink, and smoke or vape - if you need to uncover your nose or mouth take the face covering off and put it in the bag for used face coverings
- ✗ do not discard face coverings in public places – if you don't plan to wash and reuse it, dispose of it in a bin.



## HOW TO MANAGE A SYMPTOMATIC PERSON

If a person **feels unwell with symptoms of COVID-19** (e.g. cough, shortness of breath, difficulty breathing, high temperature >38C, loss of sense of taste or smell) then they should:

- **Isolate themselves** from others straight away (i.e. stay indoors and **completely avoid contact** with other people or stay at least **2 metres distance away from them**) – preferably in a single occupancy room with own bathroom
- If unable to self-isolate safely and effectively at home, there are options for self-isolation available nationally through the HSE and in many areas also local options via the Local Authority
- Phone the GP for an over-the-phone assessment – the GP can organise a test for COVID-19. If they do not have a GP, any GP can be contacted to refer the person for testing. . Both the COVID-19 phone consultation and the test are free of charge. The GP will need the name, DOB, address and a mobile phone number for the symptomatic person for the referral
- Do not go to your GP surgery in person – unless the GP asks you to
- After the GP completes the referral, the symptomatic person will get a text message with an appointment date and time for a COVID-19 swab at a specified COVID-19 community test centre. They will also get a reference number which they need to bring with them to the appointment.
- While waiting to have the test and after the test while waiting for the result, the person will need to continue to act as if they have the virus - and **remain in self-isolation** until the test results are back – this is to protect other people from getting the virus.
- They should not be visited by people outside the household while they are in self-isolation.
- If the person's symptoms worsen while waiting, they should call their GP again. If difficulty breathing or feeling very unwell, they should call 112 or 999 and tell them about the symptoms.

## TRANSPORT OF A SYMPTOMATIC PERSON, CLINICAL CARE OR TO A SELF ISOLATION FACILITY

- If it is an EMERGENCY, and the person is acutely unwell, please call 112 or 999 to arrange an ambulance for transport to hospital for clinical assessment and care – tell the call operator that the person has symptoms of COVID-19 so the ambulance team can be prepared
- If WELL, the symptomatic individual should travel to the testing centre by themselves for their appointment. If this isn't possible because the person doesn't have their own transport, the person can let the testing centre know and transport can be arranged by either a mobile team (SafetyNet in Dublin and the East) or through the National Ambulance Service (NAS). In some situations this may be an at-home test



- The symptomatic individual should wear a face mask for transport if tolerated and should engage in regular hand washing or cleaning with alcohol-based hand sanitiser and appropriate respiratory etiquette.
- The symptomatic individual should maintain a distance of at least 1 metre and where possible 2 metres throughout transport.
- If the person is unable to tolerate a face mask, the driver should wear one if available.
- If possible use a vehicle where the drivers compartment is separated from the symptomatic individual e.g. by perspex sheet
- If possible, windows should be kept open to ensure adequate ventilation of the vehicle.

### DECONTAMINATION OF TRANSPORT VEHICLE

- Gloves and plastic apron should be worn for cleaning and decontamination, if available.
- Clean and disinfect the environment and furniture after use with a household detergent containing bleach.
- Products with these specifications are available in different formats including wipes.
- Pay special attention to frequently touched sites e.g. door handles and to horizontal surfaces.
- Remove gloves and plastic aprons and place in a waste bag. Wash hands thoroughly after removal.
- Waste should be disposed with double plastic bags and bag sealed for disposal.
- Maintain open window if possible.

### AFTER THE TEST

- If the [test result](#) is NOT DETECTED, the person will get a text message to say so
- If the test result is POSITIVE for COVID-19, the person will be contacted by the HSE to inform them of the result and to proceed with [CONTACT TRACING](#). This will involve:
  - asking the person about people they have been in contact with since, and immediately before they became unwell
  - this information is needed so that close contacts can also be followed up to check if they could also have COVID-19 coronavirus, and to organise COVID-19 testing for them
  - close contacts will be asked to [restrict their movements](#) (quarantine) until their test results are known – in case they also have coronavirus
  - a person's contacts will NOT be told who the person is that now has COVID-19 - they will only be told that they have been in contact with a suspected or confirmed case of COVID-19. Personal details (name etc) of the case will not be shared by the HSE with any contacts
  - Travellers can self-identify their ethnicity when contacted by the HSE Contact Tracing Team.
- The person with COVID-19 will need to continue **self-isolation for 14 days** from when symptoms first started.



## HOW TO MANAGE A SYMPTOMATIC PERSON WHO IS TESTED AND COVID-19 IS NOT DETECTED

- Symptomatic persons who are tested for COVID-19 but where the virus is not detected should continue self-isolation up until 48 hours after their symptoms have resolved. This is to reduce the spread of infection because they may have another viral illness.
- Their close contacts can stop restricting their movements, and follow current government advice, straight away.

## HOW TO MANAGE A PERSON DIAGNOSED WITH COVID-19 WHO IS WELL ENOUGH TO BE CARED FOR OUTSIDE OF THE HOSPITAL SETTING

When an individual has been diagnosed with COVID-19 and their symptoms are mild, their doctor may agree to manage them in the community. This means they should self-isolate for **14 days** from symptom onset. [Self-isolation](#) means avoiding contact with other people, including those in the same accommodation/ household. There are a number of important instructions to follow in this case to limit the spread of infection to others:

- In general, if single occupancy rooms are available they should be used. If this is not feasible, multiple patients with laboratory confirmed COVID-19 can be cohorted or grouped into the same room or unit of accommodation (i.e. trailer). Contact your Local Authority Community Health Office Social Inclusion or Department of Public Health Link for advice.
- The person with COVID-19 should be advised to stay in their room as much as possible and avoid contact with others until they have had no temperature for five days AND it's been 14 days since they first developed symptoms.
- Their symptoms should be checked regularly by telephone. If they become more unwell their GP should be contacted by phone. If it is an emergency, an ambulance should be called and told of their COVID-19 diagnosis.
- If they have to go into the same room with other people they should try to be in the space for as short a time as possible, wear a face mask, keep at least a metre (3 ft) away from them and should clean or use hand sanitiser on their hands regularly.



- If they can, they should use a toilet and bathroom that no one else uses. If this is not possible, the toilet and bathroom should be cleaned with bleach-containing household detergent after each time they use it (focusing on door handles, sanitary ware etc).
- They should clean or use hand sanitiser on their hands before entering, before they leave the room and after using the toilet.
- All the surfaces they have touched should be cleaned and disinfected.
- They should be advised to clean their hands regularly with soap and water or with an alcohol-based (at least 60%) hand sanitiser and follow respiratory hygiene practices as outlined previously.
- They should not share food, dishes, drinking glasses, cups, knives, forks and spoons, towels, bedding or other items with other people in the facility until they have been washed.
- The items should be washed in a dishwasher if one is available or with washing up liquid and hot water. Rubber gloves should be worn to wash the items.
- They should not share mobile phones, tablets, computers, games consoles or remote controls with others without them being first cleaned/wiped down with a disinfectant wipe.
- Try to identify a primary/ main carer within the family for the person who is ill, so that other family/household members can reduce their physical contact with that person.

### **ENVIRONMENTAL CLEANING/DISINFECTION OF SELF-ISOLATION FACILITIES**

- All surfaces that the person has come into contact with must be cleaned.
- The person assigned to clean the room should wear Personal Protective Equipment (PPE) - gloves (disposable single use nitrile or household gloves) and a disposable apron (if one is available) - and then physically clean the environment and furniture using a household detergent solution followed by a disinfectant or combined household detergent and disinfectant, for example one that contains a hypochlorite (bleach solution)
- Products with these specifications are available in different formats including wipes.
- No special cleaning of walls or floors is required
- Pay special attention to frequently touched flat surfaces, backs of chairs, couches, door handles or any surfaces that the affected person may have touched.
- Discard waste including used tissues and disposable cleaning cloths into a healthcare waste bag. If one is not available, a normal waste bag can be used, placed into a second bag (when three-quarters full) and tied.
- Remove the disposable plastic apron (if worn) and gloves and discard into a waste bag. Wash hands thoroughly after removal of gloves.
- Once this process has been completed and all surfaces are dry the room can be put back into use.

If a person with COVID-19 leaves the room where they were isolated – the room should not be used for one hour and the door to the room should remain shut.



### CLEANING OF COMMUNAL AREAS

If a person with COVID-19 spent time in a communal area such as shared taps, play area or used the toilet facilities or portaloo, then these areas should be cleaned with household detergent followed by a disinfectant (as outlined above) as soon as is practicably possible. Pay special attention to frequently touched sites including door handles, backs of chairs, taps of washbasins, toilet handles. Once cleaning and disinfection have been completed and all surfaces are completely dry, the area can be put back into use. No special cleaning of walls or floors is required.

### LAUNDRY

- Laundry should be washed at the highest temperature that the material can stand (preferably 60C).
- Items can be tumble-dried and ironed using a hot setting/ steam iron if required.
- Household/rubber gloves can be worn when handling dirty laundry and items should be held away from your clothing. The gloves can be washed prior to removal and dried for reuse. Hands should be washed thoroughly with soap and water after removing the gloves
- If gloves are not available, hands should be washed thoroughly after handling laundry.
- If laundry facilities are not available, close the laundry in a plastic bag for 72 hours (3 days) after use prior to sending to laundrette for washing.

### MANAGING RUBBISH

- All personal waste including used tissues and all cleaning waste should be placed in a plastic rubbish bag.
- The bag should be tied when it is three-quarters full and then place it into a second bin bag and tied.
- Once the bag has been tied securely it should be left somewhere safe for three days before collection by the waste company.

### HOW TO MANAGE A CLOSE CONTACT OF A CONFIRMED CASE OF COVID-19

A close contact of a case of COVID-19 is someone who has had direct contact with them for >15 minutes and < 2 metres away from them. Examples of this are household contacts or people who share the same sleeping space.

If an individual has been identified as a close contact of a confirmed case of COVID-19, a Public Health doctor or HSE Social Inclusion Specialist in conjunction with the THU/PHCP will advise them to **restrict their movements for 14 days** from their last contact with the person who has COVID-19 and will actively monitor them for symptoms.

This means:

- They should restrict their movements and stay in their home as much as possible
- They should not have visitors.

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- They should avoid social gatherings, group events and crowded settings.
- They should not go to work.
- They should not use public transport.
- They should avoid contact with the elderly, those with chronic health conditions and pregnant women.

## TRAVELLER COVID 19 TESTING AND OUTBREAK MANAGEMENT

Close communication between the relevant local Department of Public Health, Community Health Organisation, THU, Traveller representative organisations and Social Inclusion personnel is vital in supporting a cohesive response to testing and outbreak management.

### HOW TO MANAGE AN OUTBREAK OF COVID-19 IN A CONGREGATE, RESIDENTIAL SETTING SUCH AS OVERCROWDED HOUSING OR ON A HALTING SITE

HSE Public Health and HSE Social Inclusion in conjunction with the Traveller Health Units have been working closely with the Local Authorities in prevention and response to outbreaks.

An outbreak of COVID-19 is defined as two or more cases of confirmed COVID-19 acquired within the same residential or congregate setting.

Under the Infectious Diseases legislation, all cases and outbreaks of COVID-19 must be reported to the Medical Officer of Health (MOH) at the regional Department of Public Health at the earliest opportunity. As part of MOH responsibilities, Public Health may convene an outbreak control team (OCT) to support the investigation and to agree control measures as decided by the team. National Social inclusion-Public Health support Departments of Public health in the outbreak response.

The members of the OCT should be decided at local level and will depend on available expertise. Membership may include (depending on available expertise):

- Specialist (Consultant) in Public Health Medicine/Director of Public Health (OCT lead)
- Traveller Nurse Specialist or Public Health Nurse from CHO (where available)
- THU Regional Coordinator
- THU member /Primary Healthcare Project worker (local Traveller Support Group)
- Community Infection Prevention and Control Nurse (CIPCN) where available
- HSE Public Health / Social Inclusion staff
- Local Authority



An outbreak of COVID-19 in a vulnerable groups congregate setting (e.g. halting site) can be declared over when there have been no new cases of infection which meet the case definition for a period of 28 days (two incubation periods).

### **RISK ASSESSMENT OF TRAVELLER HALTING SITES AND GROUP HOUSING SCHEMES**

It is considered important to prepare for cases and outbreaks in halting sites and group housing schemes which may be harder to manage. It will be important to identify priority settings through local networks and to pro actively visit and assess each such site.

### **ENHANCED (MASS) TESTING**

In an outbreak within a congregate setting, where there is evidence of spread of disease or uncontrolled transmission, a Public Health Risk Assessment may recommend pro-active testing of all people in that setting, e.g. on a halting site. This will give a clear indication of the percentage of asymptomatic (well) cases.

The rationale for mass or bulk testing includes

- Risk rating of site
- Number already ill
- Age and disease profile of residents
- Environment /sanitation
- Level of over-crowding

### **COMMUNICATION**

Close communication between the relevant Department of Public Health, THU, Traveller representative organisations, Social Inclusion personnel and Local Authority is vital in supporting a cohesive response to testing and outbreak management.

### **FURTHER SOURCES OF INFORMATION:**

Further information on COVID-19 on the HSE website at: <https://www2.hse.ie/conditions/coronavirus/coronavirus.html>

and the HPSC website at: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/>

<https://www2.hse.ie/conditions/coronavirus-and-pregnancy.html>

[DSGBV COVID 19 Sharing Resources http://www.drugs.ie/resources/covid/](http://www.drugs.ie/resources/covid/)

[Traveller COVID 19 sharing resources](#)