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Travelling to Better Health

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Bibliography

This bibliography is not exhaustive. There is a significant range of other publications available online however the following documents proved invaluable in the preparation of this guidance. It is arranged in sections designed to aid practitioners understanding of Gypsies and Travellers and the health issues which pertain. Most of the following publications and articles can be found online. Otherwise you will need to seek an inter-library loan from your organisation's library services.

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Useful Contacts and Resources

All Wales Domestic Abuse and Sexual Violence Helpline

http://www.allwaleshelpline.org.uk/

The majority of callers are people with experience of domestic abuse or sexual violence, who are concerned about their safety, require access to advice or emergency support, or are simply seeking knowledge of their rights and options. We also welcome and receive calls from family members, friends and colleagues of people experiencing domestic abuse or sexual violence, requesting information.

Bridges Project (hosted by Safer Merthyr Tydfil, 89-90 High Street, Merthyr Tydfil, CF47 8UH, 01685 353999). There is also a Facebook page titled Bridges Project Merthyr Tydfil and a Twitter account @Bridges MT.

This is an engagement project with the Gypsy and Traveller community in Merthyr Tydfil to build confidence, skills and create opportunities for effective engagement with service providers. Cultural awareness training is also provided.

Cardiff Gypsy and Traveller Project

http://www.wcva.org.uk/members-partners/nvo-search/detail?id=930266

Dynamix

www.dynamix.coop / admin@dynamix.coop / 01792 466231

Dynamix are a Welsh not-for-profit training cooperative who have funding to deliver a limited number of training courses to health professionals across Wales covering cultural awareness when working with and planning services for Gypsies and Travellers. These courses are co-produced and co-delivered with community members. This work is funded by the Welsh Government Equalities and Inclusion Fund.

Equality and Human Rights Commission - Equality Training

http://www.equalityhumanrights.com/private-and-public-sector-guidance/employing-people/equality-policies-training-and-monitoring/workforce-monitoring

Friends, Families and Travellers

http://www.gypsy-traveller.org/your-family/health/

The overall objective of the organisation is to work towards a more equitable society where everyone has the right to travel and to stop without constant fear of persecution because of

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their lifestyle. Friends, Families and Travellers have the Information Standard and provide clinically accurate, trustworthy information targeted at the needs of Gypsies and Travellers.

Gypsy and Traveller Exchange

http://www.leedsgate.co.uk/

The social aim of Leeds Gypsy and Traveller Exchange is to improve the quality of life for people from the Gypsy and Irish Traveller community.

MECOPP Carers Project

http://www.mecopp.org.uk

This project supports minority ethnic carers including carers from the Gypsy and Traveller communities in rural and urban parts of Scotland.

Roma Support Group

http://romasupportgroup.org.uk

The mission of the Roma Support Group is to improve the quality of life for Roma refugees and migrants by helping them to overcome prejudice, isolation and vulnerability. It is also our objective to make the public aware of Roma culture, heritage and current situation of Roma refugees and migrants in the UK through cultural and informative events and publications.

Travelling Ahead

http://www.travellingahead.org.uk/oursite

This online resource provides support for young Gypsies and Travellers in Wales to have a voice and participate in decisions that affect them.

Travellers Health Partnership

http://www.grtleeds.co.uk/Health/index.html

This online resource provides a wide range of information and reports for the benefit of Gypsies and Travellers in the Leeds area. All resources are easily transferable for use in Wales.

Traveller Movement

http://www.travellermovement.org.uk

This organisation undertakes a number of activities in support of Travellers in the UK, from research and policy advice across a range of public policy areas to cultural awareness training and other projects and campaigns. It also provides a number of resources about Travellers and their way of life.

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Travellers Times

www.travellerstimes.org.uk

This online resource provides news, pictures, video, opinion and resources from the Gypsy, Traveller and Roma communities.

Unity Project – covering Carmarthenshire, Ceredigion and Pembrokeshire

Catherine Fortune RN, Health and Wellbeing Worker, Unity Project, Monkton Priory CP School, Pembroke, Pembrokeshire, SA71 4LS. catherine.fortune@pembrokeshire.gov.uk and 01646 680294

Annex 1 - Travelling to a Better Future - Health Objectives

Objective 13

Improve the health outcomes of the Gypsy and Traveller community in Wales, and raise awareness of the health needs of the community.

Objective 14

Ensure the health needs of Gypsies and Travellers are addressed in the development of national and local strategic health policy, and that the community has an opportunity to contribute to health policies and initiatives that will have an impact on them.

Objective 15

To make health and social care services more accessible to the Gypsy and Traveller community.

Objective 16

Establish baseline information on the health status of the Gypsy and Traveller community in Wales, and establish a system for the continued collection of data on Gypsies and Travellers health.

Annex 2 – Work undertaken to prepare this draft Guidance

This Annex lists stakeholder engagement activity undertaken ahead of the issue of this formal consultation and planned to take place during and after it. It will be updated prior to final publication.

Site Visits

Visits have been made to nine 'authorised' sites (two in Cardiff, one in Blaenau Gwent, one in Gwynedd, one in Swansea, one in Wrexham, one in Carmarthenshire and two in Pembrokeshire). All of these sites apart from the Pembrokeshire sites are managed by the local authority and have dedicated site managers based on site. The Pembrokeshire sites have a site manager but they are not based on site. Visits have also been made to three unauthorised but tolerated sites (two in Newport and one in Swansea) and to one private site (in Newport). Prior to some of the visits, site managers asked that a note listing the purpose of the visit and a range of questions was circulated to residents. This was done. Residents of

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a local authority site at Rhondda Cynon Taff did not wish to meet but were happy to answer questions via the site manager.

The visits have confirmed much of the research: all of the residents that were spoken to on both the authorised and unauthorised sites are registered with GPs, dentists and opticians but that significant work needs to be done to encourage health improvement and understanding one's own health; to build confidence in communicating health needs to practitioners and to build confidence in the benefits of health services provision. Other messages of note relate to the racism and discrimination Gypsies and Travellers experience on a daily basis and not just in their health service interactions; the mindset of living from day to day, even when living in settled accommodation and how this affects choices in relation to food and smoking; and the importance of family in caring for anyone who is unwell or otherwise needs support.

The Pembrokeshire and Carmarthenshire residents benefit from having available to them a dedicated full time Health and Wellbeing Worker, one of four staff working for the Unity Project, funded by the Big Lottery and established to provide a range of services to the Gypsy and Traveller communities in this and the local authority areas of Carmarthenshire and Ceredigion. Similar support arrangements exist for Gypsies and Travellers in Cardiff and the Vale of Glamorgan but on a two days per week basis.

Meetings

Presentations have been made to meetings of the Welsh Dental Committee, Welsh Optometry Committee, the General Mental Health Managers, the All-Wales Health Visitors Group and the General Practice National Service Advisory Group.

Meetings have taken place with Optometry Wales, the Cardiff Gypsy and Traveller Project, Save the Children/Travelling Ahead, the Unity Project, the Bridges Project (which provides support to Gypsies and Travellers living in Merthyr Tydfil), the Gwent Aneurin Bevan Local Public Health Team Principal Public Health Practitioner working with vulnerable groups, the NHS CEHR, two Flying Start Health Visitors and a range of Welsh Government officials and health professional officers.

In contribution to the formal consultation and at the invitation of the Chair, Julie Morgan AM, a Cross Party Group on Gypsies and Travellers meeting was held with attendees drawn from the Gypsy and Traveller community, healthcare professions and support providers. The Deputy Minister for Health, Vaughan Gething AM was the main speaker.

Ethnicity Monitoring

Work undertaken in the preparation of this guidance revealed that the seven LHBs all collected ethnicity data but that there is no standardised system in place. There were wide variations in the ethnicity descriptions used both between and within each LHB area. For example, how patient records vary in LHBs inpatient settings and in general practice. It was also unclear if or how the data was used to inform service development. It was also revealed that the general practice temporary registration form does not include the ethnicity question.

Informal consultation

A paper outlining the project which sought responses to a range of questions about healthcare for Gypsies and Travellers, was circulated to a range of Welsh Government statutory Health Committees where it was not possible to present to their meetings. These

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are the Welsh Nursing and Midwifery Committee, Welsh Medical Committee and the Academy of Royal College in Wales. The paper was also sent to the Mental Health Promotion Network, General Practitioners Committee and the National Service Advisory Groups for Cancer, Mental Health, Paediatrics and Child Health, Ophthalmology, Public Health and Women's Health.

A letter outlining the project which sought a coordinated response to a range of questions about healthcare for Gypsies and Travellers, was circulated to the seven LHB Directors of Primary, Community and Mental Health.

Annex 3 – General Medical Services Contract

Part 12 of the GMS Contract is concerned with the registration of patients with GP Contractors and, in summary, provides:

- 1. Where a Contractor's patients list is open, the Contractor may accept an application for inclusion in its list made by or on behalf of a person whether or not they are resident in its practice area or included, at the time of their application, in the patients list of another contractor:
- 2. Where a Contractor's patients list is closed, the Contractor may only accept an application for inclusion in its list from a person who is an immediate family member of a registered patient, whether or not they are resident in its practice area or included, at the time of their application, in the patients list of another contractor;
- 3. An application for inclusion in a patients list is, subject to exceptions, made by delivering a medical card or a signed application form to the practice premises.
- 4. Where a Contractor's patients list is open, the Contractor may accept a person as a temporary resident provided that he is satisfied that the person is
 - (i) temporarily resident away from his normal place of residence and is not being provided with "essential services" under any other arrangement in the locality where he is temporarily residing; or
 - (ii) moving from place to place and not for the time being resident in any place.

"Essential service" are those services, delivered during core hours, required for the management of the Contractor's registered patients and temporary residents who are, or believe themselves to be –

- (i) ill, with conditions from which recovery is generally expected;
- (ii) terminally ill;
- (iii) suffering from chronic disease.

Additionally, 'essential services' includes ongoing treatment and care, and the immediate and necessary treatment of a person to whom the Contractor has been requested to provide treatment owing to an accident or an emergency at any place in its practice area.

5. There are reasonable grounds upon which a Contractor may refuse an application for inclusion in its patients list or by a temporary resident, such grounds include that the applicant does not live in the Contractor's practice area. An applicant's race, gender, social

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class, age, religion, sexual orientation, appearance, disability or medical condition, are not grounds for refusing an application.

6. In specific circumstances a LHB may assign a new patient to a Contractor's patients list if the Contractor's list is open, and in very limited specific circumstances may also assign a new patient to a Contractor's patients list if the Contractor's list is closed.

Annex 4 – Sample Protocol Health Section for Managing Unauthorised Encampments

XXXX LHB will:

- assess the health needs of the Gypsies and Travellers on the sites as soon as is practicable after being requested to do so by the local authority;
- provide a general summary report to the local authority no later than 3 working days after the date that the request is made. The report will only provide a general statement as to whether there are, or are not, any health needs that should prevent an eviction. Where health needs are identified which would prevent an eviction, the statement will include the details of which caravan(s)/families) are to be left in situ. This information will then be provided to the local authority by the LHB as a matter of course which would include obtaining the consent of individuals who are subject to health assessments. The statement provided will be in a form suitable to be presented in evidence to a court;
- monitor, update and share relevant information with other agencies;
- provide health services to the community members; and
- refer media enquires to the local authority, but respond to any questions that are within the health remit.

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Annex 5 – Sample Health Needs Assessment – for further information about the use of this form, please refer to the main guidance. So that the best possible range and quality of information can be collected, it will be important for the questions below to be asked by a practitioner who is known to and trusted by the community member.

Question	Characteristic/Measure	Answer
About you		1
Gender	Male	
	Female	
	Other	
	Prefer not to say	
Do you identify as the	Yes	
gender you were	No	
assigned at birth?	Prefer not to say	
Age Group	0-5	
	5-15	
	16-24	
	25-34	
	35-44	
	45-54	
	55-64	
	65+	
Ethnicity	Romani Gypsy (originally of Northern	
	Indian descent and also known as	
	English, Welsh and Scottish Gypsies,	
	Kale and Romanichal)	
	Irish Traveller	
	Welsh/Scottish Traveller	
	Roma/Sinti	
	Please identify country of origin if	
	Roma, e.g. Czech, Polish etc	
	New Traveller	
	Showman	
	Boater	
	Other - please specify	
Where do you live?	Authorised local authority site	
	Unauthorised site –	
	where you own the land and are	
	awaiting planning permission	
	Unauthorised site –	
	where you do not own the land, e.g	
	on the roadside	
	Privately owned land with planning	
	permission	
	Privately owned land (owned by self	
	or someone else) without planning	
	permission	
	'Bricks and mortar' accommodation –	

	(owned or local authority, housing	
	association or privately rented house	
	or flat)	
	Showman's Yard	
	Boat	
	Bender/temporary structure	
	Other - please specify e.g. family land	
	'lying low'	
Communication skills		
What would be the best	Can we send letters or is face to face	
way of communicating	communication or 'phone calls better?	
with you?		
How well are you able to	Good –	
speak English or Welsh?	You have no problem in	
	understanding and using English (or	
	Welsh) in everyday situations.	
	OK –	
	You understand some of what is	
	written and said but would need	
	assistance with some situations, e.g.	
	in a GP consultation.	
	Little/None –	
	You understand little or nothing of	
	what is said	
How well are you able to	Good –	
read English or Welsh?	You have no problem in	
What would a worker	understanding English (or Welsh) in	
need to do to help you	everyday situations OK –	
understand their writing better?	You understand some of what is	
Detter:	written and said but would need	
	assistance with some situations, e.g.	
	with letters from the hospital or GP.	
	Little/None –	
	You understand little or nothing of	
	what is written	
How well are you able to	Good –	
write English or Welsh?	You have no problem in	
	understanding and writing in everyday	
	situations	
	OK –	
	You are able to write basic letters or	
	fill in basic forms	
	Little/None –	
	You have little or no writing skills	
Accessing healthcare		
Are you registered with a GP?	Yes or No	
Are you registered with a dentist?	Yes or No	
Are you registered with	Yes or No	

an optician?		
Would you say you had	Yes or No	
any problems accessing		
healthcare?		
If Yes, please state why	Lack of privacy	
(tick all that apply)	Literacy issues – difficulties with form	
	filling	
	Racism – discrimination or prejudice	
	Lack of cultural knowledge of the	
	service provider	
	Can't get an appointment	
	Can't see a practitioner who is of my	
	gender	
	Unapproachable reception staff	
	Service opening hours	
	Transport issues	
	Childcare issues	
	Understanding of the appointment	
NA (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	procedure	
Which healthcare	GP	
services will come to visit	Health Visitor	
you?	Midwife	
	District Nurse	
	Third/voluntary sector, e.g. Marie	
A	Curie	
Are you able to get home	Yes or No	
easily from healthcare	If No places explain Would you like	
appointments?	If No, please explain. Would you like to tell me more?	
What do you know about		
How would you define	Very good	
your level of general	Good	
health?	Fair	
- I Gaille	Bad	
	Very bad	
Do you have any long	Yes or No	
term health problem,		
disability or illness		
(definition of long term	Examples include:	
health condition is a	Autism	
condition that limits	Asthma, Bronchitis, COPD	
access to work and puts	Arthritis	
limits on daily living	Diabetes	
activities for a period of	Epilepsy	
one year or more)	Hearing problems	
	Sight problems	
	Heart problems	
	Mobility problems	
	Stroke Other – please specify	

Do you take any	If Voc. places describe	
Do you take any prescription medication?	If Yes, please describe	
Mental well-being		
Wenter went being		
These questions are mea	nt to identify signs of stress, anxiety and depression	
Do things get on top of	Yes or No.	
you sometimes?		
	If yes, please explain. Would you like	
	to tell me more?	
Do you look forward to	Yes or No	
things?		
	If No, please explain. Would you like	
Are you generally henry?	to tell me more? Yes or No.	
Are you generally happy?	TES OF NO.	
	If No, please explain. Would you like	
	to tell me more?	
If you are diagnosed as	Yes or No.	
needing help with your		
mental well-being, do you	If No, please explain. Would you like	
receive the support	to tell me more?	
and/or medication that		
you need?		
Screening/diagnostic test		
Have you ever been	Cardiovascular (heart) disease	
offered tests or have you	Lung disease (i.e. emphysema,	
been tested for any of the	bronchitis and asthma)	
following conditions	Diabetes	
	Blood pressure	
	High cholesterol Bowel screening	
	Screening for any kind of cancer AAA Screening	
	Women only – cervical smear	
	Women only - mammogram	
	Men only – prostate exam	
Have you had a flu	Yes or No	
vaccination?		
Health promotion – taking care of yourself		
Do you smoke?	Yes or No	
If Yes, what do you	Cigarettes	
smoke and how many do	Roll-up cigarettes	
you smoke per day?	Cigars	
	Pipe	
	E-cigarettes	
Do you drink?	Yes or No	
If Yes, what do you drink	Beers and lagers	
and how drinks do you	Wines	
take per day?	Spirits	
Do you think that you eat	Yes or No	

healthily?		
Describe your diet. What		
kinds of foods do you		
eat?		
Do you take any	Yes or No	
exercise?		
If Yes, what kind of		
exercise do you take, for		
how long and how often?		
Do you use any illegal	Yes or No	
drugs?	If Yes, please describe and indicate	
3	how often	
	Cannabis/Marijuana	
	Speed/Amphetamines	
	Cocaine	
	Heroin	
	LSD	
	Other	
Hospital / Emergency / Ou		
In the last 12 months did	Yes or No	
you attend A&E or the		
Casualty Department as a		
patient?		
Did you attend A&E or the	Yes or No	
Casualty Department		
because you were unable		
to see a GP?		
How many times		
altogether in the last 12		
months have you used		
A&E or the Casualty		
Department as a patient?		
During the last 12 months	Yes or No	
have you been in hospital		
as a day patient?		
How many times		
altogether in the last 12		
months have you been in		
hospital as a day patient?		
During the last 12 months	Yes or No	
have you been in hospital		
as an inpatient and		
stayed overnight or		
longer?		
If you need medical	Hospital A&E	
treatment in the evening	telephone NHS Direct	
or weekends, where do	Out of Hours GP service	
you go? For example,	Other – please specify	
where would you go if you		
had chest pains or		
	1	<u> </u>

broothing problems?	T	Г
breathing problems?	At your home?	
Where do you prefer to receive health services?	At a community facility?	
Teceive Health Services!	At a community facility? For example, on site.	
	At a GP surgery?	
	In a hospital?	
	Other – please specify	
Do you have any	Yes or No	
problems using Hospital	163 01 110	
A&E	If Yes, please explain Would you like	
AGE	to tell me more?	
Are you able to use NHS	Yes or No	
Direct?	100 01 110	
	If No, please explain. Would you like	
	to tell me more?	
	Cost of mobile telephone calls?	
	Don't know the telephone number?	
Do you ever call an	Yes or No	
ambulance in an		
emergency or of	If Yes, please explain. Would you like	
someone has had an	to tell me more?	
accident?		
Will ambulances come to	Yes or No	
your home?		
	If No, please explain. Would you like	
	to tell me more?	
Caring for others at home		
Are you or anyone you	Yes or No	
live with a carer?	If Van alaman dan sellen kankantin sellen	
(Opin of in all all a paralling of	If Yes, please describe including the	
'Caring' includes cooking,	approximate amount of time each day	
shopping, washing, giving lifts to someone who	devoted to caring tasks.	
could not manage without your support.		
your support.		
A 'carer' is someone of		
any age who provides		
unpaid care for an ill, frail		
or disabled relative, friend		
or neighbour		
Does anyone in your	Yes or No	
household depend on		
being cared for by		
another person?		
Accidents / Health and sa	fety at home	
Have you or anyone in	Yes or No	
your family experienced		
any accidents on this site	If Yes, please describe. Would you	
	like to tell me more? Are the	

	accidents because of problems with	
	the environment?	
Are you concerned about		
any health hazards on the		
site where you live?		
Work		
This question is meant to	identify any risks to health caused by	work.
What kind of work do the		
men and boys in your		
family do?		
Family life and safety in the	ne home	
These questions are mea	nt to identify signs of domestic abuse.	. Obviously, great
sensitivity is called for in	asking these questions.	
How are the relationships	Yes or No	
in your family? Does		
everyone get on?	If No, please explain. Would you like	
	to tell me more?	
Do you feel safe?	Yes or No	
	If No, please explain. Would you like	
	to tell me more?	
How do you feel about		
your life and your family?		
Pregnancy, antenatal and		
When you have been	Yes or No	
pregnant, have you		
received all the support	If No, please explain. Would you like	
you need from your	to tell me more?	
Doctor, Midwife or		
anyone else?		
When you have had your	Yes or No	
baby, have you received		
all the support you need	If No, please explain. Would you like	
from your Doctor,	to tell me more?	
Midwife, Health Visitor or		
anyone else?		
Have there been any peri-	Yes or No	
natal deaths in the		
family?		
Children and Young Peop	ole	
	ly to children and young people as mu	
	specific questions for children and ye	oung people below
Have you/your children	Yes or No	
received all of your/their		
vaccinations/		
immunisations? These		
are the injections listed in		
the red book or the		

handheld record.		
If not, which vaccinations/	5 in 1 vaccine –	
immunisations remain	Protects against diphtheria, tetanus,	
outstanding?	whooping cough, polio and hib	
	(haemophilius influenza type B)	
	Given at 2, 3 and 4 months	
	Pneumococcal or pneumo jab (PCV)	
	Protects against some types of	
	pneumococcal infection	
	Given at 2, 4 and 12-13 months	
	Rotavirus vaccine -	
	Protects against rotavirus infection, a	
	common cause of childhood	
	diarrhoea and sickness	
	Given at 2 and 3 months	
	Meningitis C (Men C) –	
	Protects against Meningitis C	
	(Meningococcal type C)	
	Given at 3 months and as a teenage	
	booster age 13-15 (from September	
	2013)	
	Hib/Men C (booster)	
	Protects against haemophilus	
	influenza type b (Hib) and Meningitis	
	C	
	Given at 12-13 months of age	
	MMR –	
	Protects against measles, mumps	
	and rubella	
	Given at 12-13 months and at 3 years	
	and 4 months of age or sometime	
	thereafter	
	Flu vaccine –	
	Protects against flu	
	Given at 2, 3 and 4 years annually as	
	a nasal spray in September/October	
	This is also offered via a National	
	Enhanced Service from a GP Practice	
	to Year 7 (age 11 and 12) children	
	who do not attend school	
	4 in 1 pre-school booster -	
	Protects against diphtheria, tetanus,	
	whooping cough and polio	
	Given at 3 years and 4 months or	
	shortly thereafter	
	HPV vaccine (girls only) -	
	Protects against cervical cancer	
	Given at 12-13 years	
	3 in 1 teenage booster	

Protects against tetanus, diphtheria	
and polio	
Given at 13-18 years of age	

Annex 6 – Service development questions for LHBs

This Annex provides advice on the kinds of questions and issues to consider when developing health services for Gypsies and Travellers.

Population

- What do you know about the Gypsies and Travellers in your local area? Include those who live in 'bricks and mortar' (housing) accommodation and those living on the roadside as well as those living on authorised local authority sites and on land owned by Gypsies and Travellers.
- What links do you have with existing national and local Gypsy and Traveller organisations?

Wider social and economic determinants of health

- What do you know about the sort of work they do?
- How does being from a Gypsy or Traveller community impact on health and wellbeing?
- How do the conditions in which they live impact on their health, both physical and mental?
- What is the impact of their experiences of racism?

Lifestyles and health promotion

- How do lifestyles and behaviours impact on the health of Gypsies and Travellers?
- Which services are helping to prevent ill health e.g. Third sector support services?

Health and wellbeing status

- What mental and physical health and social care needs do Gypsies and Travellers in your area have?
- Is there any information about the causes of mortality among this local population?

Service utilisation

- Which services do Gypsies and Travellers access? Include wide support services which address health and social care needs.
- · What makes these services accessible?
- Are there any barriers to using services?
- What are the current service gaps and likely future needs of this population?
- Do the Gypsies and Travellers in the area move frequently? Consider how services can be aligned with other agencies, locally and across counties.

Priorities for action

- How effective is current health service provision for Gypsies and Travellers?
- Consider whether the services are meeting the needs that Gypsies and Travellers have and how well the existing services are being utilised.
- What are the main causes of poor health that need to be addressed?
- How can future investment be better targeted to meet health and wellbeing needs?
- How have Gypsies and Travellers and any local agencies which support them assisted in shaping these future priorities?