**Invitation to Tender for the Review of the Primary Healthcare for Traveller Projects (PHCTPs)**

**Summary**

The National Traveller Health Implementation Group (NTHIG) and the National Oversight Group for the Review of the PHCTP’s invite applications from suitably qualified and experienced consultants to undertake a review the of Primary Health Care for Traveller Projects (PCHTPs) in partnership with Traveller organisations using participatory research methods.

Goal 4 of the National Traveller Health Action Plan (2022-2027) focused on *‘Enhancing Travellers’ access to culturally appropriate primary health care through investment in Traveller Health Units (THUs) and Primary Health Care for Travellers Projects (PHCTPs)’.* This goal also included a strategic objective and key actions relating to the need for resourcing and expansion of these projects. These were adopted as key priorities by the NTHIG.

**Action 27 in NTRIS II (2024-28)** is: *Evaluate the impact of the Primary Healthcare for Traveller Project (PHCTP’s) to inform monitoring and need for future developments*.

***Deliverable****: Develop a framework to review the PHCTPs in partnership with Traveller organisations and consider the role and impact of the PHCTPs on an ongoing basis to inform monitoring and need for future developments.*

**The Aim of this review is to document the rationale, role, benefit, challenges and impact/responses to the work of the PHCTPs and to report on the application of the review framework designed to support ongoing monitoring and reporting.**

**Objectives of the review of the PHCTPs are to:**

* Document levels of participation, empowerment, progression, self-esteem and confidence of the Traveller Community Health workers.
* Document views of the role and benefit of the TCHWs/PHCTPs with Traveller Community members.
* Explore experience of HSE providers in engaging with the PHCTPs.
* Outline experience of voluntary organisations and academic institutions of engaging with the PHCTPs.
* Outline engagement with key stakeholder by the PHCTPs regarding impact on social determinants of health.
* Review of findings from the ongoing action research project (Genio).
* Review of the PHCTPs with regard to the PHCTPs standard framework to identify highlights as well as gaps and future support needs.
* Identify the strengths, challenges, gaps and future supports required for their development and sustainability.
* Report on the framework developed for the identification, collection and ongoing collation of core activity data from each of the PHCTPs to document the range of work that is undertaken by the projects. (this bullet point might need to be revised)
* Produce a final report on the analysis of these findings including an outline framework for the ongoing monitoring of the achievements, challenges, enablers, gaps and support needs for their strengthening, sustainability and future development of the PCTPs.

**Background**

According to the CSO Census 2022, Irish Travellers make up less than 1% of the population of Ireland (total 32,949), with 55% aged under 25 (compared to 32% of the general population), and 4% over 65 (15% of the general population) with high mortality across all ages and genders.

***Traveller Health Inequalities*** [(All-Ireland Traveller Health Study](https://www.ucd.ie/t4cms/AITHS_SUMMARY.pdf) (Department of Health, 2010) (AITHS))

* Traveller mortality rate is 3.5 times higher than the general population.
* The infant mortality rate for Travellers is 3.5 times the rate of the general population
* Life expectancy for Travellers is on average 13 years less than the general population (15.1 years less for Traveller men and 11.5 years less for Traveller women)
* The suicide rate among Traveller men is 6.6 times higher than the general population
* Approximately 50% of all Travellers experienced discrimination in a range of daily activities and levels of complete trust by Travellers in health professionals was 41% (82% for the general population)

***Primary Health Care for Traveller projects***

Successful ‘Primary Health Care Projects’ internationally emphasise processes that value empowerment, partnership and advocacy when designing and implementing health initiatives, enabling the partners to highlight inequity and jointly negotiate solutions. Community participation and intersectoral collaboration are key requisites for success.

In the context of the Primary Health Care for Travellers Project community participation is viewed as a process through which Travellers gain greater control over the social, political, economic and environmental factors that influence their health. The Traveller community participates in every stage of the project from the initial assessment of the situation; defining the main health problems/issues; setting priorities for the project; implementing the activities and monitoring and evaluating the results. The PHCTPs are a combination of PHC and community development models, using right based approaches. They seek to promote the empowerment of Travellers and challenge the root causes of health inequalities.

The PHCTPs are essential partnership projects between Travellers and the HSE facilitating culturally appropriate communication and increasing levels of trust. They provide support for the roll out of the actions in the National Traveller Health Action plan (NTHAP) to address Traveller Health inequalities. The PHCTPs employment of trained Traveller Community Health workers (TCHWs) are improving Traveller’s access to health services through providing culturally appropriate information and signposting. They also advocate and support Travellers to address the social determinants of their health including racism, accommodation, education and employment.

In the AITHS 83% of Travellers reported that they received and responded to health information and advice from the PHCTPs and Traveller organisations.

**Methodology**

Proposals should clearly set out how the contractor plans to meet the stated objectives.

The proposal should outline approaches to the use of qualitative/ participatory methods to capture the work of the PHCTP’s in partnership with Travellers, for example observation studies/ community mapping, storytelling, poems, case studies, photos, videos or audio documentaries.

The key outputs will be the:

1. Final report on the analysis of the review findings
2. An outline framework for the ongoing monitoring of the achievements, challenges, enablers, gaps and support needs for the strengthening, sustainability and future development of the Primary Health Care for Traveller Projects.

The successful applicant(s) will also be invited to present their findings to NTHIG

**Timeline and Budget**

* The NTHIG is keen to commence the work as soon as is practicable and asks that tenderers specify how soon they could commence.
* Proposals should include anticipated timelines for activities and anticipated number of days work as part of this project and costs.
* The budget must include all expenses and VAT. 50% of the budget will be paid on project commencement and the remaining 50% will be paid on satisfactory completion of the project.
* The review should be carried out between the months of June to Sept 2025 with engagement of key stakeholders in the development of process and plan for the review.

**Coordination and Management**

The National Oversight group for the Review of the Primary Health Care for Traveller projects will oversee this research and will offering support advice and guidance to the researcher/s.

**Requirements for the proposal**

Quotations are required to be submitted by email in either Word or PDF format. Tender responses should adhere to the following format:

**Organisational / Consultant profile:** Full consultant/organisation name, address, phone number(s), email and registered organisation number. Any sub-contracting arrangements must be clearly indicated.

**Relevant experience and project team**: An overview of relevant experience in the research and/or consultation in the service area(s) of: Traveller Health, Health Inequalities, Primary Health Care, Participatory Action Research. Details of similar projects completed over the last 5 years should be provided here. Please include details of the proposed team with brief biographies of all team members. CVs of no more than 2 pages may be submitted as part of the tender response. The specified team in the tender response must be the personnel that will carry out the work, if successful.

**Methodology:** Details on the proposed participatory approaches to be used to address the review objectives and should include ethical considerations.

**Project plan**: A clear and detailed project plan presenting the timelines for work commencement to completion, with the responsibilities of team members clearly presented.

**Project budget**: A detailed budget for successfully completing the work, with the daily rate included.

**Queries**

*All queries relating to this tender* competition should be sent by email to [NationalHealthImprovement@hse.ie](mailto:NationalHealthImprovement@hse.ie) with the subject line: Tender for the Review of the Primary Health Care for Traveller Project.

**Submission Process**

Please submit completed Tender proposalsto [sara.hamdona@hse.ie](mailto:sara.hamdona@hse.ie) by 17.00 **on the 4th July by** email in PDF or Word format with the subject line: Tender for the Review of the Primary Health Care for Traveller Project.

**Shortlisting and evaluation of tenders and award of contract**

All tender submissions will be awarded scores based on the following criteria:

1. **Candidate profile** – including the strength and relevancy of the candidates’ background, experience of working collaboratively with Travellers / Traveller organisation or other minority communities preferably with experience of use of participatory research methods and culturally appropriate research methodologies (30%)
2. **Quality of proposal** - including level of details in the proposal and level of understanding of

assignment scope and feasibility of the methodological approach to the project (30%)

1. **Proposal meets the tender** brief consisting of the methods to meet the stated objectives and timelines (20%)
2. **Value for money** (20%).

The National Oversight group for the Review of the Primary Health Care for Traveller Projects does not bind itself to accepting the lowest price of any tender.