Questions to be answered by close of business Friday, 20 March are listed below.
* Please be sure to include English translations of relevant text where possible.

1. **Is there coordination between state and non-state actors, e.g. through a national emergency response mechanism?**


In advance of publishing the National Action Plan, the Government established a Stakeholder Forum, chaired by the Department of the Taoiseach. This Stakeholder Forum, currently comprised of 120 members\(^1\) from a range of sectors (business, education, health, childcare and social services, sport, tourism, etc.), serves as a reciprocal mechanism through which the Government can disseminate public health information and the stakeholder members can inform the Government of the downstream social and economic impacts of COVID-19. Three such forums have been held thus far,\(^2\) and there are plans for future forums to be convened (via teleconference if necessary).\(^3\)

The operational parts of the National Action Plan are two-fold. Part 1, Delivering the multi-agency response to COVID-19, outlines actions members of the public can take for themselves and their families, offers guidance on reliable sources of information, and details measures that the Government is taking to ensure the provision of healthcare services. Many of these measures envisage coordination between state and non-state actors. For example, the National Action Plan outlines “Mobilis[ing] community coordination to collaborate in meeting the social care and other needs of ‘at risk’ and vulnerable groups” as an “action area”. The key organizations responsible for this action are the Health Service Executive, the Department of Health, and Local Authorities along with community and voluntary groups.\(^4\) As part of this action area, these organizations are to “[t]hrough a national approach, support voluntary and community groups including service providers to enhance the delivery of community supports for

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1. As at the time the National Action Plan was published (16 March 2020).
2. As at the time the National Action Plan was published (16 March 2020).
4. ibid, p. 25.
vulnerable people including transport, involving broad interaction with concerned people, psycho-social supports and support in regard to issues such as travel for on-going treatment for other conditions.\(^5\)

Part 2, Dealing with the downstream impact of COVID-19,\(^6\) details measures to be taken by various Government departments and bodies – and in collaboration with the private sector / other non-state actors for certain action areas – to ensure the continuous operation of services in a range of sectors (e.g. telecommunications, food supply, retail and manufacturing, education, homeless services, etc.).

2. Is there mention of the role of Red Cross (RC) or humanitarian actors? In what areas/sectors? What responsibilities are ascribed to RC?

There appears to be no express mention of the Red Cross or humanitarian actors in the National Action Plan. However, the RC would likely fall under the category of an organization involved in “[b]uild[ing] solidarity and community support networks” (see the response to question 4 below).

3. Are there exceptions to travel restrictions that will facilitate the movement of RC/humanitarian relief teams and/or aid across borders? What (if any) quarantine requirements or other conditions are attached?

As at the time of writing, there are no express travel restrictions in respect of entering Ireland. However, “all persons, including Irish residents, entering the country from overseas should restrict movements for 14 days, if showing no symptoms. This does not apply to Northern Ireland”.\(^7\) Further, anyone entering the country – particularly those who have been to an infected area in the last 14 days – who are experiencing symptoms should self-isolate and contact a medical professional.\(^8\)

There do not appear to be express exceptions for humanitarian relief teams in respect of the self-isolation guidance. Therefore, RC officials entering Ireland are advised to restrict their movements for 14 days.

With respect to outbound travel, the Government is advising against all non-essential travel to other countries until 29 March 2020.\(^9\) Again, there do not appear to be express exceptions for humanitarian relief teams; however, the view could be taken that the work of the RC may not be considered “non-essential”.

4. Are there exceptions to quarantines, curfews and other restrictions on movement that allow RC/humanitarian organizations access to vulnerable populations (including for psychosocial or non-medical aid)?

The National Action Plan encourages social distancing, and there do not appear to be express exceptions to the guidance on social distancing with respect to the RC/humanitarian organizations. However, the National Action Plan does also highlight, for example, “[b]uild[ing] solidarity and community support networks” as an action area. The following actions are included under this area:

- Get involved and support community solidarity campaigns and activities to care for the vulnerable

\(^5\) ibid, p. 25.
\(^6\) ibid, p. 40.
• Be aware of ways to look after your own and others' mental wellbeing and resilience, and access advice and supports from the Health Service Executive, Mental Health Ireland and other mental health service providers
• Support your essential healthcare workers and other essential workers in providing services within your community
• Engage with other Government Departments and sector to support and expand contact tracing, testing, public health capacity, through expertise and skills

It appears that the efforts of the RC/humanitarian organizations to access vulnerable populations for the purpose of providing psychosocial support and other non-medical aid are encouraged under the guidance. However, the principle of social distancing should be observed.

5. Have any special legal facilities or exemptions been put in place for the importation of medical aid or other relief items or personnel (International Disaster Response Law)? What (if any) quarantine requirements or other conditions are attached?

Not as yet. Ireland is in the delay phase of the virus, which means that the Government is putting in place initiatives to slow the spread of the virus. However, some guidance on the general approach to quarantine is as follows:

• The Irish Health Authorities are requiring those returning to Ireland from another country (except Northern Ireland) to restrict their movements for 14 days. Those with symptoms are being instructed to self-isolate and phone a GP, who will arrange a test if they believe this is necessary. Those being tested at the moment are people at higher risk due to travel or close contact with a case and people with severe illness in hospital.
• **Exemptions are in place for providers of essential supply chain services such as hauliers, pilots and maritime staff.**
• Temperature screening at Irish airports has as yet been considered unnecessary.
• Ireland is advising against all non-essential travel to other countries until 29 March 2020. This includes all travel by cruise ship.

6. Is the RC (or humanitarian organizations) categorized as 'essential' or 'emergency' services, for the purposes of exemptions to restrictions on business operations and opening hours?

As of the time of writing, the government has advised all public houses and bars (including hotel bars) to close until 29 March 2020. Schools, colleges and childcare facilities have also closed until 20 March

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11 ibid, p. 17.
14 ibid.
2020, and the advice is that indoor gatherings of 100 or more people and outdoor gatherings of 500 or more people should be cancelled. Cultural institutions have also closed, however public transport remains open. Restaurants, cafes and other businesses have been permitted to remain open but advised that they should consider ways that they can implement the public health advice on social distancing. There are no further restrictions on business operations and opening hours.

No humanitarian organizations (including the RC) have been referred to currently in the National Action Plan or by the Health Service Executive. There is simply a continued re-emphasis on guidance from the WHO and the European Centre for Disease Control (ECDC).

7. What other measures are provided in the emergency decrees? (for governmental actors, for communities, for health workers, etc).

**Healthcare Workers**

In its National Action Plan, the Government outlines its short and long-term strategies for supporting and protecting public and private workers involved in the provision of essential services such as healthcare. It also outlines its strategy for recruitment and the expansion of the number of healthcare workers available.

The Government is taking steps to ensure that all hospitals have a COVID-19 plan in place. Furthermore, the Government plans to examine the feasibility of providing essential healthcare workers with accommodation, such as onsite or hotel accommodation to avoid the spread of infection, introduce prioritized transport protocols to facilitate critical care staff and deploy additional sources of staff as required.

As part of this, the Government will enable the reassignment of military, other governmental clinical personnel and of healthcare workers from the private sector, as well as other external staffing supports, on a needs basis. It has stated that it intends to provide cross-training to do this.

In addition, the Health Protection Surveillance Centre provides up-to-date guidance for healthcare workers who work in close or casual contact with those who may have been infected by COVID-19.

**Access to Medical Equipment**

The National Action Plan sets out the measures the Government plans to take in order to provide sufficient access to medical services and equipment; maximizing procurement arrangements in relation to sourcing, procuring and distributing essential health products and equipment. The Government has indicated that it plans to identify and access, if appropriate, non-health sector assets essential to the health response – this includes access to vehicles and craft, facilities, infrastructure, Defence Force resources, assets, medical equipment and consumables.

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22 ibid, p. 22.
23 ibid, p. 20.
24 ibid, p. 22.
25 ibid, p. 22.
Furthermore, the Government has indicated that it will identify and deploy available logistical expertise within the Defence Forces or other public and private service providers to support planning and operations, including deployment of resources. It will also take measures to secure access to, and acquire essential medicines, health products, equipment and vehicles from all available sources, both public and private, if necessary.\(^{29}\)

The Government has indicated that it is formulating measures in the event of hospital surges and will act to separate patients where possible to reduce the spread of infection, as well as transferring certain essential hospital activity to private hospitals, moving certain essential outpatient department activity to community settings where feasible.\(^{30}\) It also plans to source additional step-down beds in nursing homes and hotels. It will reprocess or recondition deactivated medical equipment, where possible and safe to do so.\(^{31}\)

Measures are also in place and further contemplated to deal with the downstream impact of COVID-19.\(^{32}\) This covers the following areas: business continuity planning across the public service, essential services and utilities, supply chains, security, defence & the courts, banking and financial services, sectoral services and employee & business supports.

8. **Have restrictions been adopted or put in place that ban the export of protective medical equipment?**

As at the time of writing, it would appear that there are no such restrictions. Nevertheless, the Government has emphasized it plans to take measures to minimize disruption to essential supply chains (although this does relate more specifically to food supply).\(^{33}\)

This includes developing protocol to ensure critical freight is identified and prioritized for quick onward distribution from ports and airports.\(^{34}\)

\(^{30}\) **ibid**, p. 20.
\(^{32}\) **ibid**, p. 29-56.
\(^{33}\) **ibid**, p. 39.
\(^{34}\) **ibid**, p. 40.