GOVERNMENT OF SINDH

SINDH INTEGRATED HEALTH AND POPULATION PROJECT (SIHPP)

ENVIRONMENTAL AND SOCIAL MANAGEMENT FRAMEWORK (ESMF)

OCTOBER -2023

DEPARTMENT OF HEALTH

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ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immune deficiency Syndrome
ARAP	Abbreviated Resettlement Action Plan
BHUs	Basic Health Units
C & D	Construction and Demolition
CERC	Contingency Emergency Response Component
CHW	Community Health Workers
CMW	Community Midwives
CSOs	Civil Society Organizations
DHIS	District Health Information System
DHQ	District Headquarter Hospitals
DOH	Department of Health
EA	Environmental Assessment
EHS	Environment, Health and Safety
EHSG	Environment Health & Safety Guidelines
EIA	Environmental Impact Assessment
EPA	Environmental Protection Agency
EPI	Expended Program on Immunization
ES	Environmental Specialist
ESF	Environmental & Social Framework
ESIA	Environmental and Social Impact Assessment
ESMF	Environmental and Social Management Framework
ESMP	Environmental and Social Management Plan
ESS	Environmental and Social Safeguard
FP	Family Planning
GBV	Gender Based Violence
GDs	Government Dispensaries
GHG	Green House Gases
GoP	Government of Pakistan
GoS	Government of Sindh
GRC	Grievance Redressal Committees
GRM	Grievance Redress Mechanism
HCWMP/F	Health Care Waste Management Plan/ Framework
HF	Health facility
HIV	Human Immunodeficiency Virus Infection
IDP	Internally Displaced Persons
IEE	Initial Environment Examinations
KPI	Key performance Indicator
LAA	Land Acquisition Act
LMP	Labor Management Plan

M & R	Monitoring and Reporting
M&E	Monitoring and Evaluation
MSDS	Minimum Service Delivery Standard
NGO	Non-Governmental organization
NOC	No Objection Certificate
OHS	Occupational Health & Safety
PCEA	Prohibition of Child Employment Act
PCRMP	Physical Cultural Resource Management Plan
PD	Program Director
PMU	Project Management Unit
PPEs	Personal Protective Equipment's
PPHI	People's Primary Healthcare Initiative
PPP	Public Private Partnership
PSC	Project Steering Committee
PWDs	Population Welfare Department
RAP	Resettlement Action Plan
RHC	Rural Health Centers
RMNCAH+N	Reproductive, Maternal, Neonatal, Child, Adolescent Health and Nutrition
SBCC	Social and behavior change communication
SC	Sub-Contractor
SESA	Strategic Environmental & Social Assessment
SEPA	Sindh Environmental Protection Agency
SEP	Stack holder Engagement Plan
SEQS	Sindh Environmental Quality Standards
SIHPP	Sindh Integrated Health & Population Project
SH	Sexual harassment
SLGA	Sindh Local Government Act
STD	Sexually-Transmitted Disease
SSESMP	Site Specific construction Environmental and Social Management Plan
SOPs	Standard Operating Procedures
THQ	Taluka Head Quarters
TORs	Terms of Reference
UID	Unique Identity
UHC	Universal Health Coverage
VAC	Violence Against the Children
WBG	World Bank Guidelines
WMO	Woman Medical officers

EXECUTIVE SUMMARY

The Government of Sindh (GoS) is implementing "the Sindh Integrated Health and Population Project (SIHPP)"[1] with the support from the World Bank (WB). To address the generic environmental and social impacts of the proposed project this ESMF document has been prepared in compliance with relevant national and provincial laws and regulations, and World Bank's Environmental and Social Standards (ESSs) of the Environmental and Social Framework policy (ESF). This ESMF should be read together with other plans prepared for the project, including the Stakeholder Engagement Plan (SEP), the Environmental and Social Commitment Plan (ESCP), Labor Management Plan (LMP), Health Care Waste Management Plan.

The objective of the project is to improve utilization and quality of basic Reproductive, Maternal, Neonatal, Child, Adolescent Health and Nutrition (RMNCAH+N), for poor and vulnerable populations, especially women and children, in targeted areas of Sindh. The project will support the following activities. The project has the following four components.

Component 1 Improving RMNCAH+N services utilization and quality and support during public health emergencies. This component has following three (03) subcomponents: **Subcomponent 1:** Public Health Emergency Response to Combat Health Impact due to the Floods**. Subcomponent 2***:* Strengthening/Rehabilitating of the Health Facilities for Providing Preventive Care**. Subcomponent 3***:* Strengthening of Referral Hospitals for Effective Delivery and Neonatal Care**. Component 2 strengthening demand for RMNCAH+N services including women's empowerment for availing health services**. **Component 3 Project Management, Monitoring and Evaluation and Research**. **Component 4 Contingency Emergency Response Component (CERC).**

The direct beneficiaries of the project will be the catchment population of the selected Government Dispensaries (GDs), especially women, girls, and children and the IDP settlements due to floods in Sindh. Indirect beneficiaries include healthcare providers and managers who can influence policy makers for necessary reforms.

This ESMF has been prepared to address the requirements detailed in the WB ESF addressing environmental and social aspects and considerations. The Environmental and Social Standards (ESSs) relevant to the proposed Project are ***ESS-1: Assessment and Management of Environmental and Social Risks and Impacts, ESS-2: Labor and Working Conditions, ESS-3:*** Resource ***Efficiency and Pollution Prevention, ESS-4: Community Health and Safety, ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement and ESS-10: Stakeholder Engagement and Information Disclosure***. In addition, the ESMF addresses the requirements defined ***WB Group Environmental, Health and Safety Guidelines for Health Care Facilities*** and in the national and provincial regulations, most importantly, ***The Sindh Environmental Protection Act, 2014 and Sindh***

[1] *Named as proposed Project in this document.*

Hospital Waste Management Rules, 2014. In the same context a number of other relevant laws, guidelines and policies have been discussed in Chapter 3.

Overall environmental and social risk classification of the project is assessed to be Moderate Mostly the project impacts are positive - particularly for women and children –as the outcomes will contribute directly to improved human development and reduced vulnerability. Rehabilitation / refurbishment/reconstruction of BHUs / RHCs/GDs/THQs and DHQs will improve the overall environment of health facilities. The potential environmental and social risks for project activities are identified as low to moderate impact during the execution of project, including but not limited to: Technical Design and Layout planning, Soil Erosion and Contamination , deterioration of Air quality, Water Contamination, inappropriate disposal of Wastes, Flora and Fauna, Occupational Health and Safety, Community Health and Safety, Exclusion of Disadvantaged and vulnerable groups, Cold Chain Management for Vaccine Effectiveness, Chance Findings of Important Physical and Cultural Resources, Privacy and Gender Issues, Labor Management, Forced Labor and Child Labor, Gender Based Violence and Security related Issues. Most of the above-stated risks and impacts are anticipated at the implementation/operational phase and are temporary site-specific, reversible and manageable by adopting simple mitigation measures provided in this ESMF, in accordance with the mitigation hierarchy under the relevant ESSs.

ESMF Implementation and monitoring activities will be managed by PMU working under the jurisdiction of the department of Health Govt of Sindh. The Project Director will be overall responsible for effective implementation of ESMF, coordination with other departments and reporting for health sector ESMF compliance. The Project Director will be assisted on all E&S technical matters by a dedicated team of Environmental Specialist and a Social/Gender Specialist at PMU level. These specialists will be responsible for implementation and compliance of ESMF and other E&S instruments at PMU and District levels with the support of E&S Focal persons at district level and E&S staff of Supervision Consultant. Monitoring and reporting (M&R) system has been established with a continuous process of collecting, collating and analyzing information about the progress of ESMF and other E&S instruments implementation. The external monitoring system is also proposed through Third Party Validation firms (recruited by PMU) to act as a tool for identifying strengths and weaknesses of the process, though E&S Specialists. Periodic evaluation of the process and the outcomes will enable the PMU to identify deficiencies and implement corrective measures to achieve the desired goals and objectives of the ESMF and other E&S instruments. Contractors will be required to comply with the Project's E&S risk management documents and procedures including the ESMP, LMP, and local legislation. This provision will be specified in the Contractor's agreements.

Throughout the Project implementation stage, the PMU will continue to provide training and awareness raising to relevant stakeholders, such as staff, selected contractors, and communities, to support the implementation of the environmental and social risk management mitigation measures. The PMU, upon competition of project, will monitor activities with regard to site restoration and landscaping in the affected areas to ensure that the activities are done to an appropriate and acceptable standard before closing the contracts, in accordance with measures identified in the ESMPs and other plans.

The cost of ESMF implementation is PKR 24.7 million. This tentative cost will be included in the overall project cost. This cost will be reviewed and firmed up periodically to ensure realism. This includes the cost of trainings/capacity building programs, hiring of Environment and Social/Gender Specialists and information material provided at health care facility regarding E&SS, ESMP Preparation and third-party validation of the project.

The project has prepared a separate Stakeholder Engagement Plan (SEP) to describe objectives, process and outcome of the stakeholder engagement carried out during the project preparation and to be carried out during the project implementation – in accordance with the World Bank ESS 10 (Stakeholder Engagement and Information Disclosure). The SEP, being a live document is to be updated throughout the life of the project to ensure effective, robust and transparent stakeholder engagement. Stakeholder consultation sessions were carried out in October 2022 and subsequently in January, June, and August 2023 with (i) local communities who are the direct beneficiaries of the project interventions and (ii) institutions (Health Department and Environment Department Govt of Sind) that have an important role in enabling the realization of the project interventions. These consultations have revealed that the proposed SIHPP is expected to have a positive social impact by improving health facilities while upgrading all remaining viable normal health facilities to 24/7 over the course of the next 5 years. The main concerns raised during these consultations were related to the: design aspects particularly for persons with disabilities, procurement of ambulances, provision of drinking water and solar facility, health and safety aspects, employment of locals, Grievance Redress Mechanism (GRM), gender and privacy issues, cutting of trees, generation and management of waste, noise, air and water pollution. The PMU provided responses to the stakeholders during these consultation meetings and made part of this report.

The Grievance Redress Mechanism (GRM) for the SIHPP is designed as a multi-tier system with designated staff at the Project Management Unit (PMU) and district levels. The system aims to address complaints and grievances effectively. At each level, a Grievance Redress Committee (GRC) will be established. The composition of the GRC at the provincial level will include nine members, with the Project Director (Concerned) serving as the Chairperson. At the district level, the GRC will consist of six members, with the Deputy Commissioner (Concerned) acting as the Chairperson. The primary objective of the GRM is to resolve complaints at the GRC where they are initially registered. However, if a complaint registered at the District GRC is not resolved satisfactorily, the complainant has the option to escalate the complaint to the PMU level. Further, if the complainant is not satisfied with the resolution of their complaint PMU level, then she/he can go for district magistrate / Court.

The Environmental and Social management instruments including the ESMF, LMP, GBV/SEA SH Action Plan, GRM SEP and E&S screening checklists will be disclosed on the SIHPP website after necessary approvals. Hard copies of these documents will also be maintained at PMU and all project sites. The executive summary of the documents will be translated into regional languages i.e. Urdu and Sindhi. A copy of the GRM will be placed in the Project Management Unit (PMU) for public access. The GRM will be translated into regional languages i.e. Urdu and Sindhi.

1 INTRODUCTION

This Environmental and Social Management Framework (ESMF) is developed to support the environmental and social due diligence provisions for activities financed by the World Bank in the Sindh Integrated Health and Population Project. The project will support to improve utilization and quality of basic RMNCAH+N, for poor and vulnerable populations, especially women and children, in targeted areas of thirty districts of Sindh province. The department of Health Government of Sindh will be the implementing agency of the Project activities.

This ESMF follows the World Bank Environmental and Social Framework (ESF) as well as prevailing legislation in the country (National/Provincial), in particular Sindh Environmental Protection Act 2014. The objective of the ESMF is to assess and mitigate potential negative environmental and social risks and impacts of the Project consistent with the Environmental and Social Standards (ESSs) of the World Bank ESF and national requirements. More specifically, the ESMF aims to (a) assess the potential environmental and social risks and impacts of the proposed Project and propose mitigation measures; (b) establish procedures for the environmental and social screening, review, approval, and implementation of activities; (c) specify appropriate roles and responsibilities, and outline the necessary reporting procedures, for managing and monitoring environmental and social issues related to the activities; (d) identify the staffing requirements, as well as the training and capacity building needed to successfully implement the provisions of the ESMF; (e) address mechanisms for public consultation and disclosure of project documents as well as redress of possible grievances; and (f) establish the budget requirements for implementation of the ESMF.

This ESMF should be read together with other plans prepared for the project, including the Stakeholder Engagement Plan (SEP), the Environmental and Social Commitment Plan (ESCP), Labor Management Plan (LMP), Health Care Waste Management Plan.

1.1 ESMF Preparation Methodology

- Review of Project details and description to understand project activities likely to impact socio-economic environment.
- Review of relevant legislations, policies, standards and guidelines to determine the policy, legal and institutional environment for the Project based on World Bank ESF, national and provisional level.
- Review of secondary literature to understand project area, sample E &SS documents to guide this assessment; and different published development reports for taking stock of environmental and socioeconomic baseline conditions.
- Conducting consultation with key stakeholders and potential beneficiary communities.
- Scoping, screening and impact assessment while developing interaction between project activities and key environmental aspects to screen out the significance of adverse environmental and social impact and proposing generic mitigation measures.
- Procedures for environmental and social management, to manage and monitor the environmental and social aspects of the project.

2 Project Description

The proposed Project has four (04) components[2]; the brief description of each component is given below:

Component 1: Improving RMNCAH+N services utilization and quality and support during public health emergencies this component has following three (03) subcomponents:

Subcomponent 1.1: Public Health Emergency Response to Combat Health Impact due to the Floods. This sub-component will support integrated outreach healthcare and reproductive health services through existing mobile health teams and the provision of additional fixed and/or mobile health units, delivery vans and ambulance services for referral and surveillance system, including labs. It will finance procurement of lifesaving medicines and essential medical equipment and supplies, including reproductive health kits, midwifery kits, newborn baby kits, safe delivery kits, dignity kits, family planning commodities to prevent unintended pregnancies, insecticide treated bed nets for vector control and nutrition services (i.e. SBCC counselling, growth monitoring and promotion, micronutrient supplementation and referral of acutely malnourished child to therapeutic centers). Referral facilities will be equipped with trained human resources and supporting equipment and supplies. It will also strengthen surveillance systems for disease outbreak detection and response, especially in the worst affected districts.

Subcomponent 1.2: Strengthening/Rehabilitating of the Health Facilities for Providing Preventive Care. It will support provision of minimum service delivery standard (MSDS), including GBV responses, for RMNCAH+N through (a) revitalization of an identified set of government dispensaries (GDs) in the catchment areas of the underserved and unserved populations of Sindh and other health facilities, including basic health units (BHUs), rural health centers (RHCs), tehsil headquarter hospitals (THQs) and district headquarter hospitals (DHQs), affected by the floods by including refurbishment of the health facilities, purchase of equipment including medicines and supplies, and ambulance services for referral; (b) recruitment and/or deployment of female health workers, specifically woman medical officers (WMO), community midwives (CMW), and community health workers (CHW); (c) effective structural and functional integration of health facility-based FP services and community-based services; (d) training of the healthcare providers on MSDS, GBV prevention and management, climate-induced disaster and epidemic response including disease surveillance and tele-health services for RMNCAH+N at places with access to the internet; and (e) establishment of a dynamic, integrated electronic medical records system linked to the Sindh District Health Information System (DHIS) and other key health databases, to track patient related data. This component will also include prevention programs, including health education, screening for hypertension and blood sugar, and vaccinations.

Sub-component 1.3: Strengthening of Referral Hospitals for Effective Delivery and Neonatal Care. It will support an identified set of THQ and DHQ hospitals to provide comprehensive obstetric and neonatal care through (a) purchase of equipment, medicines and

[2] Project Appraisal Document, 23 November 2022

supplies; (b) provision of blood storage units; and (c) training of the healthcare providers on MSDS and management of mothers and children referred by GDs.

Component 2: Strengthening Demand for RMNCAH+N Services, Including Women's Empowerment for Availing Health Services. This component will cover SBCC and related activities to encourage uptake of RMNCAH+N services using social marketing strategy and rebranding of GDs and their services package to create awareness. It will also include women's empowerment for exercising sexual and reproductive health rights. Social and behavior change activities will include extensive community outreach, involvement of community leaders to reach these GD catchment areas and the internally displaced population (IDP) due to flood. These activities will involve partnering with non-governmental organizations (NGOs), community-based organizations, and other private sector organizations.

Component 3: Project Management, Monitoring and Evaluation and Research. This component will support the strengthening of the DoH and its coordinating structures and agencies for the coordination and management of project activities, including financial management, procurement, Public Private Partnership (PPP) node and stakeholder engagement. This component would also support monitoring and evaluation (M&E) including third-party monitoring, rapid household surveys and surveys to measure quality of service delivery at health facilities.

Component 4: Contingency Emergency Response Component (CERC). In the event of an Eligible Crisis or Emergency, the project will contribute by providing immediate and effective response to said crisis or emergency.

2.1 Project Beneficiaries

The direct beneficiaries of the project will be the catchment population of the selected GDs, especially women, girls, and children and the IDP settlements due to floods in Sindh. Indirect beneficiaries include healthcare providers and managers who can influence policy makers for necessary reforms. The duration of the proposed Project is five (05) years.

2.2 Project Implementation Arrangements

The Department of Health, Government of Sindh will coordinate project activities, including day-to-day implementation, coordination, supervision, and overall management of project activities. A project management unit (PMU) will be established at the DoH, headed by a project director (PD) and supported by qualified managers; financial management and procurement staff; M&E team; environment and social and gender specialists.

A project steering committee (PSC), chaired by the Minister of Health and Population Welfare, with support from the Secretaries of the DoH, population welfare department (PWD) and Department of Finance, Government of Sindh, will provide guidance, project oversight and ensure accountability. The PSC shall review progress on a quarterly basis, review monitoring data and analytical reports, and take decisions for smooth implementation of the project.

3 ENVIRONMENTAL and Social Policies, Regulations and Laws

This section deals with the current legal and administrative framework required to prepare the ESMF of the proposed Project. Applicable WB Environmental and Social Standards (ESSs) and guidelines and Environmental and Social (E&S) Policies, laws, regulations laid out by the GoP, GoS have been duly discussed and the Project proponent will be required to adhere to these regulations throughout the course of the proposed Project. The project related guidelines, policies laws and regulations are mentioned in Table 3.1.

Table 3.1 National & Provincial Legal Framework and laws

National & Provincial Policies, Rules and Regulations	Description	Project Relevance
Pakistan Climate Change Act 2017	To monitor implementation of the international agreements relating to climate change, approve and monitor implementation of comprehensive adaptation and mitigation policies, strategies, plans, programs, projects and other measures formulated by the authority to meet Pakistan's international obligations, monitor the implementation of National Adaptation Plan and its constituent provincial and local adaptation action plans, approves guidelines for the protection and conservation of renewable and nonrenewable resources, species, habitats and biodiversity adversely affected or threatened by climate change.	The emissions from the proposed project are not likely to be significant. However, the proposed project will respect the provision of this act and ensure efficient use of resources through implementation of measures provided in this ESMF.
National Disaster Management Act, 2010	The Act was passed in backdrop of 2010 Floods in Pakistan and strengthens Disaster Management system in the country. Most pertinent sections of this Act include section 6 that explains the functions of local authorities in terms of disaster management, and section 9 that explains how the sources of funding the government use finance the new disaster management projects.	This Act is relevant. The project as it involves reconstruction and rehabilitation of those health facilities which were affected in Sindh by the 2022 floods.
Sindh Sanitation Policy, 2017	Provides a broad framework and policy guidance to the Sindh Government to enhance and support sanitation coverage in the country through the formulation of their sanitation strategies, plans, and programs, at all respective levels for improving the quality of life of the people of Pakistan and the physical environment necessary for a healthy life. The policy envisions creating an open defecation free environment with safe disposal of liquid and solid waste promoting health and hygiene practices in the country.	This policy is relevant as during the reconstruction and rehabilitation of health facilities and health services during operation will require mitigation of waste (solid/liquid) through proper disposal.
Sindh Environment Protection Act, 2014	A comprehensive legislation which provides legislative framework for protection, conservation, rehabilitation and improvement of the environment. It contains concrete action plans and programs for the prevention of pollution and promotes sustainable development.	The proposed Project is located in Sindh province, therefore, SEPA is primarily responsible for the enforcement of provisions. The proposed Project will comply with the requirements of Sindh Environmental Protection Act, 2014.
Sindh Environmental Protection Agency (Environmental	Defines the categories for different projects, where the type of study/ assessment required (checklist, IEE, EIA) against each category of project is defined to fulfill local legal requirements pertaining to the environment.	The provisions of these regulations are applicable for environmental screening of the project, which implies which type of environmental study is required for the

National & Provincial Policies, Rules and Regulations	Description	Project Relevance
Assessment) Regulations, 2021		proposed project
Sindh Solid Waste Management Act, 2021	The Sindh Solid Waste Management Act, 2021 for collection and disposal of all solid waste, to arrange effective delivery of sanitation services, to provide pollution free environment and to deal with other relevant matters.	These Rules are applicable to the proposed project, and the risk and non-risk wastes generated during the implementation of the project need to be handled and disposed of in accordance with these Rules. The rules describe the process as well as the roles and responsibilities at each level (from primary to tertiary level healthcare facilities) for segregation of the waste, its final disposal as well as monitoring mechanism for the entire process. This ESMF will respect the provision of this rules.
Sindh Cultural Heritage (Preservation) Act, 1994	The cultural heritage laws of Pakistan are uniformly applicable to all categories of sites regardless of their state of preservation and classification as monuments of national or world heritage.	The project is unlikely to have any impact on the physical cultural resources of the Sindh Province, since the proposed activities will be carried out within the existing boundaries of the health care facilities where no notified cultural heritage sites are present. However, the procedures for handling chance finds will be prepared and made part of the ESMF, to handle any such situation during project implementation.
Sindh Wildlife Protection, Preservation, Conservation and Management Act, 2020	The Sindh Wildlife Protection, Preservation, Conservation and Management Act was approved in August 2020. The Act was passed to make provisions for protection, conservation, preservation, and sustainable use of wildlife for establishment, management and maintenance of protected areas in the Province of Sindh. The Act introduces the establishment of a Council for the Conservation of Wildlife, and other measures which guarantee and protect the rights and ensure safety of wildlife in the province of Sindh.	This Act is not applicable, as direct impacts on the biodiversity and natural resources is not anticipated as construction and rehabilitation activities will be carried out within the existing boundaries of health facilities.
The Sindh Occupational Safety and Health Act, 2017	The act makes provisions for occupational safety and health conditions at all workplaces in the province for the protection of workers during work.	The proposed Project is expected to involve direct workers, contracted workers, primary supply workers and community workers. The project may create some labor related risks and impacts, which include lack of compliance with relevant laws and regulations, unsafe working conditions, OHS risks, and GBV/SEA/SH risks. Necessary mitigation measures have been provided in this ESMF to manage these risks. Moreover, a separate LMP has been prepared as a part of this Project.
The Sindh Occupational Health and Safety Rules 2019	Defines the need to make provisions for occupational safety and health conditions at all workplaces for the protection of persons at work against risk of injury arising out of the activities at work places and for the promotion of safe, healthy, and decent working environment adapted to the physical, physiological, and psychological needs of all persons at work and to provide for all matters connected therewith or ancillary thereto.	
Sindh Minimum Wages Act, 2015 (Sindh Act No. VIII of 2016)	To provide the regulation of minimum rates of wages and various allowances for different categories of workers employed in certain industrial and commercial undertakings and establishments.	This Act is applicable to the project to ensure that the minimum wages and allowances are given to the project labor (skill and unskilled employed for the construction and rehabilitation activities and other staff involved during

National & Provincial Policies, Rules and Regulations	Description	Project Relevance
		implementation of the proposed project.
The Sindh Prohibition of Employment of Children Act, 2017	Prohibition of Child Employment Act (PCEA) 2017 disallow child labor in Sindh. The PCEA defines a child as a person who has not completed his/her fourteenth years of age, and an adolescent means a person who has completed fourteenth year of age but has not completed eighteenth years of his age. No child shall be employed or permitted to work in any establishment including construction, but an adolescent can be employed or permitted to work under strict guidelines provided in the PCEA and rules. An adolescent shall not be employed in any hazardous work included in the schedule to the PCEA.	The relevance of this act to the project is to prohibit child employment as per conditions mentioned in this Act.
The Protection Against Harassment of Women at the Workplace Act, 2010	The Act provides legal protection to women against harassment at the workplace. It focuses on sexual harassment experienced at the workplace by employees and facilitates the transformation of the work environment, so that it is free of sexual harassment, intimidation, and abuse. The law makes it a special crime to use force against a woman, or even threaten to use force, if the intention is to “disturb her modesty”	The efforts will be made to ensure that the women are not harassed during their involvement as workers or during visit of health care facility.
The Sindh Local Government (Amendment) Act, 2021	Under the Sindh Local Government Act 2013 (SLGA), Chapter VI, land use planning; implementation of building by-laws; management of environmental and health hazards; food adulteration; provision and maintenance of water supply schemes and public sources of drinking water; and mobilization of communities for the upgrade of local infrastructure (transportation, landscaping, and removal of encroachments) are the responsibilities of municipal corporations/committees. The 2021 amendment served to define municipal corporations and committees, along with establishing a relationship between elected councils and provincial departments working in administrative boundaries.	This act is applicable and the proposed Project will respect the provision of this act during implementation stage.
Sindh Hospital Waste Management Rules,2014	HWM Rules 2014 envisage every hospital be responsible for both risk and non-risk waste’s management, including the generation, handling, storage and disposal of all forms of waste, in accordance to Sindh environmental protection Act 2014.	This act is applicable to the proposed project, and the risk and non-risk wastes generated during the implementation of the project need to be handled and disposed of in accordance with act. The rules describe the process as well as the roles and responsibilities at each level (from primary to tertiary level healthcare facilities) for segregation of the waste, its final disposal as well as monitoring mechanism for the entire process.
Sindh Empowerment of Persons with Disabilities Act 2018	Sindh Empowerment of Persons with Disabilities act 2018 provides legal protection to disable persons in terms of Equality and non-discrimination of ‘Persons with Disabilities”, right to privacy, Ease of access and mobility, Protection from torture or cruel, inhuman or degrading treatment, Freedom from Exploitation, violence and Abuse, Equity in health and rehabilitation services, Skills Development and Equity in Employment and in any other disability discrimination.	The relevance of this act to the project is to protect the rights of disabled persons by providing special services for them during the implementation of project.

3.1 World Bank Standards and Key Gaps with the National Framework

The project will follow the World Bank Environmental and Social Standards (ESSs), as well as the World Bank Group Environmental, Health and Safety Guidelines. Overall environmental and social risk classification of the project is assessed to be Moderate. The adverse environmental and social risk and impacts are anticipated due to proposed construction/rehabilitation activities and inappropriate practices are observed during provision of the health services and can potentially cause health and safety hazards for the health service providers as well as for the children, parents, and the nearby community. The risks and impacts[3] associated with soil and water contamination likely to occur due to inappropriate disposal of wastes (including solid, packaging material, construction waste, medical waste and related waste during ambulance maintenance services). Other risks[4] associated with the Project are related to the exclusion of disadvantaged and vulnerable groups, security and safety concerns for women, risk of counterfeit or expired medicines, data privacy, elite capture, GBV, forced labor, use of child labor.

The identified gaps between ESSs and national and provincial laws for E&S management and how these gaps are addressed in the ESMF are provided in **Table 3.2** Where gaps exist between local laws vis-a-vis ESF, the most stringent requirements will prevail and will be followed under the proposed subprojects.

Table 3.2 Relevant World Bank ESS and Key Gaps with the National Framework

Environmental and Social Standard	Description	Relevance to the Project	Identification of Gaps in the context of local laws
ESS1 – Assessment and Management of Environmental and Social Risks and Impacts	This standard sets out the Client's responsibilities for assessing, managing, and monitoring environmental and social risks and impacts associated with each stage of a project supported by the Bank through IPF, in order to achieve environmental and social outcomes consistent with the ESF.	Relevant. The adverse environmental and social risk and impacts[4] are anticipated due to proposed construction/ rehabilitation activities and inappropriate practices are observed during provision of the health services and can potentially cause health and safety hazards for the health service providers as well as for the children, parents, and the nearby community. The ESMF related site-specific instrument will be implemented throughout the project to comply with ESS1.	The criteria mentioned in the Acts for classifying environmental and social risk is different than in the ESF. Sindh Environmental Protection Act, 2014 and SEPA (Review of IEE and EIA) Regulations, 2014 mainly focus on environmental assessment and management through Environmental Impact Assessment (EIA) and Initial Environmental Examination (IEE). The different methods and tools (ESIA, environmental and social audit, commutative impact assessment, ESMP, ESMF, regional and sectoral ESIA, SESA etc.) for

[3] Including but not limited to: air emissions, noise, dust generation caused by repair and construction activities and excavations and running of project vehicles on unpaved roads/tracks, especially in the desert areas, generation of waste (including solid, packaging material, construction waste, medical waste and related waste during ambulance maintenance services), occupational health and safety risks, and use of chemicals/solvents such as paints and varnishes

[4] The risks and impacts associated with soil and water contamination likely to occur due to inappropriate disposal of wastes (including solid, packaging material, construction waste, medical waste and related waste during ambulance maintenance services). Other risks associated with the Project are related to the selection criteria of families, exclusion of disadvantaged and vulnerable groups, security and safety concerns for women, risk of counterfeit or expired medicines, data privacy, elite capture, GBV, forced labor, use of child labor etc.

Environmental and Social Standard	Description	Relevance to the Project	Identification of Gaps in the context of local laws
			environmental and social impact assessments, referenced in the ESF, are not part of the National and Provincial legislation. The ESF highlight to consider the environmental and social risks and impacts associated with primary suppliers and disadvantaged or vulnerable groups while the local relevant laws do not.
ESS2 – Labor and Working Conditions	ESS2 recognizes the importance of employment creation and income generation in the pursuit of poverty reduction and inclusive economic growth. Borrowers can promote sound worker-management relationships and enhance the development benefits of a project by treating workers fairly and providing safe working conditions. This standard applies to project workers, including full-time, part-time, temporary, seasonal, and migrant workers.	Relevant. The proposed Project is expected to involve direct workers, contracted workers, primary supply workers and community workers. The project may create some labor related risks and impacts, which include lack of compliance with relevant laws and regulations, unsafe working conditions, OHS risks, and GBV/SEA/SH risks. A standalone Labor Management Procedures (LMP) has been prepared as per the requirements of ESS2. The LMP will be noted in the legal agreement and in the Environmental and Social Commitment Plan (ESCP). Necessary mitigation measures are included in this ESMF apart from observing the WBG EHSG.	National and Provincial laws address most of the requirements of the ESS-2. However, the implementation of these laws and the management of certain issues addressed under ESS-2, such as OHS, GBV/SEA and Violence Against Children (VAC), prohibition of children in hazardous work and child labor and fair treatment, non-discrimination and equal opportunity, are not done effectively as detailed coverage of certain requirements is partial.
ESS3 – Resource Efficiency and Pollution Prevention and Management	ESS3 establishes the requirements for resource efficiency and pollution management and prevention during the entire project lifecycle. The objectives of this standard are to enhance the sustainable use of resources, including energy, water, and raw materials. It also aims to promote favorable conditions for human health and the environment by minimizing pollution from project activities, and or minimize generation of waste.	Relevant. The adverse environmental and social risk and impacts are anticipated due to proposed construction and rehabilitation activities. It is expected that there would be an increased number of beneficiaries visiting and availing the services offered by project. This may result in the increased use of resources such as water, electricity, and fuel for generators (alternate energy source). The risks and impacts associated with soil and water contamination likely to occur due to inappropriate disposal wastes (including solid, packaging material, construction waste, medical waste and related waste	Local laws address most of the requirements of the ESS-3, particularly on pollution prevention

Environmental and Social Standard	Description	Relevance to the Project	Identification of Gaps in the context of local laws
		during ambulance maintenance services). Trainings and awareness session for efficient use of electricity, water and other resources and waste management will be included in the project. Accordingly, necessary mitigation measures and waste management plan are included in this ESMF.	
ESS4 – Community Health and Safety	This standard recognizes that project activities, equipment, and infrastructure can increase community exposure to adverse risks and impacts. The objectives of ESS4 are to avoid or mitigate these adverse impacts on project-affected communities.	Relevant. Planned civil works may cause temporary disturbances to local communities due to traffic disruption, waste, exposure to hazardous material, noise, dust, spread of different transmittable and communicable diseases (HIV/AID), conflicts with locals, fires risks at health care facilities, use of child labor and forced labor etc. Road safety risks may also be introduced by the construction and rehabilitation activities, in particular during transportation of patients and medical waste as well as GBV/SEA/SH risks in and around health centers and at the household level of beneficiaries, security issues.	Local laws address most of the requirements of the ESS-4. However, detailed coverage has not been provided in the local laws (national and provincial) in comparison to ESS-4.
ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement	This standard recognizes that project-related land acquisition and restrictions on land use can have adverse impacts on communities and persons. Project-related land acquisition or restrictions on land use may cause physical displacement (relocation, loss of residential land or loss of shelter), economic displacement (loss of land, assets or access to assets, leading to loss of income sources or other means of livelihood), or both. The term “involuntary resettlement” refers to these impacts. Resettlement is considered involuntary when affected persons or communities do not have the right to refuse land acquisition or restrictions on land use that result in displacement.	Relevant. Land acquisition is not expected for the project, as all civil works in Component 1 involve rehabilitation/upgrading of health facilities, which will take place within the existing boundaries of government healthcare facilities, on government owned land. However, there is a remote possibility of existence of informal settlers in the case if a previously abandoned or nonfunctional health facilities is selected for refurbishment. In such cases, a Resettlement Action Plan (either abbreviated or full) and / or Livelihood Restoration Plan will be developed, as	LAA 1894 There is no requirement for screening and scoping of project. No specific requirements for meaningful consultations with affected persons, other stakeholders and vulnerable groups. No specific requirements for participation of displaced persons in planning, implementation and monitoring of resettlement programs. Does not require establishment of a GRM. Silent in lieu of compensations related to restoration and improvement of livelihoods. Generally, it covers cash compensation policy for the acquisition of land and built-up property, and damage to other assets such as crops,

Environmental and Social Standard	Description	Relevance to the Project	Identification of Gaps in the context of local laws
		per the existing situation.	trees, and infrastructure. Does not provide additional support to the displaced poor or vulnerable groups and clear procedures for negotiated settlement. Does not include provisions for compensation of displaced persons without titles or recognizable rights to land. Does not require preparation of Resettlement Plans / Framework. Does not require for compensation or entitlements to be paid before physical or economic displacement. No provision for monitoring of resettlement activities.
ESS10 – Stakeholder Engagement and Disclosure	This standard recognizes the importance of open and transparent engagement between the Client and project stakeholders as an essential element of good international practice. The objectives of ESS10 are to establish a systematic approach to stakeholder engagement that will build and maintain constructive relationships, assess the level of stakeholder interest and support for the project, and to enable stakeholders' views to be taken into account in project design and E&S performance. It also provides guidance on promoting and providing means for effective and inclusive stakeholder engagement throughout the life of the project.	Relevant. Effective stakeholder engagement and information disclosure are crucial to the functioning of any project. As per ESS10 guidance, a separate Stakeholder Engagement Plan (SEP) will be prepared by the implementing agencies. The SEP will focus on identification of and engagement with directly affected parties, other interested parties and vulnerable groups. Procedures for engaging with them, topics and frequencies are described in the document, as well as institutional requirements, grievance re-dress mechanisms and budgets. The project has prepared a separate SEP to adequately address such risks. This ESMF also has a section on GRM and will also be referring to the World Bank information disclosure policies to engage the stakeholders both these systems will enable the affected parties to raise project related concerns and grievances for efficient and timely resolution.	Local laws address most of the requirements of the ESS-6. However, major identified gaps are as below: There is no provision for the preparation of Stakeholder Engagement Plan/Framework. Stakeholder identification and analysis in public sector development projects is not done effectively, especially the involvement of third party. There is no proper mechanism to record and handling of grievances as provided in EES-10.

4 Potential Environmental and Social Risk Impacts and Standard Mitigation Measures

This chapter identifies the potential environmental and social risks and impacts envisaged due to the implementation of proposed Project. The appropriate mitigation and remedial measures of each environmental and social impact are proposed in this chapter keeping in view the mitigation hierarchy, which will guide the preparation of site-specific ESMPs.

The following is the list of activities which may have adverse E & S impacts;

- Reconstruction/ rehabilitation of basic health units (BHUs), government dispensaries (GDs), rural health centers (RHCs), taluka headquarters (THQs), district headquarters (DHQs) and procurement of ambulances.
- Provision of health care and reproductive health services.
- Procurement of medicines, medical equipment and supplies.
- Recruitment and deployment of medical staff specifically women medical officer, community midwives and community health workers.
- Activities to encourage uptake of RMNCAH+N using social marketing strategy and rebranding of GDs and their services package to create awareness.

The impact assessment, most of the risks and impacts are anticipated at the implementation/operational phase and are temporary site-specific, reversible. Further, adopting simple mitigation measures, in accordance with the mitigation hierarchy under the relevant ESSs, these potential impacts will either be avoided altogether, or their likelihood of occurrence and severity will be reduced, thus making the proposed Project environmentally responsible and socially acceptable.

The anticipated environmental and social risks and mitigation measure are provided in Table 4.1.

Table 4.1 Environmental and Social Risks and Mitigation Measures

Environmental and Social Impact	Mitigation Measures
During Design Stage	
Technical Design and Layout planning: The improper design of the buildings with poor ventilation and lighting in the buildings could lead to health issues for the people visiting the health care facilities. If the buildings are not designed by adopting relevant building codes in flood prone and earthquake prone areas then it can cause a building to collapse. The non-provision of ramps and emergency exits in the design of health care facilities may lead to an adverse situation, particularly for disabled persons. Improper design without sanitation facilities can lead to health and hygiene problems.	• Relevant building codes will be followed in design of the buildings. • All health care facilities must be user-friendly regardless of the ages, races, gender especially to disabled persons. Ensure provision of facilities such as staircase, ramp (anti slip, free from obstructions, with handrails and gentle slope), appropriate signage, obstructions free entrance, parking with universal symbol, appropriate toilets at health care facilities. • All safety precautions will be taken to minimize the safety hazards and risk of accidental electrocution. The electric lines should be properly shielded /insulated. • Provision of emergency exits, safety equipment and ramps at an appropriate height and place can help safe evacuation of hospital staff and patients during an emergency. • Only shortlisted/pre-qualified suppliers shall be hired for the supply of construction materials and medical suppliers, ambulance services, waste management, solar panels etc. ensure compliance with the World Bank procurement guidelines. • The criteria for firm selection will include provisions for having sufficient capacity and experience to handle and safely dispose of hazardous waste.
During Construction Stage	
Soil Erosion and Contamination: Generation of contaminated waste such as left over concrete, used oil from the machinery, paints and other solid waste which could contaminate the soil. Similarly, the waste water from washing and cleaning operations, waste from machinery maintenance at site, oil and fuel spillages may also cause a contamination to the soil. If the cutting and filling of the areas were not properly designed it can cause slope destabilization and also can cause soil erosion.	• The excavation for the foundation will be carried out only in specified area, as per the engineering drawings and the excavated material will be used for filling and compaction to the maximum extent possible. • Left over construction materials, excavated soil and waste material produced as a result of construction/ rehabilitation works, many be properly disposed-off in designated areas to avoid soil contamination. Such sites will be selected after surveying the area and ensuring that soil deposition will not have any significant impacts, such as loss of productive land, blocked access, natural vegetation and disturbance to drainage. • The fill material will not be obtained from any cultivation fields or orchards, except where the land owner allows doing so. • Areas from where the fill material is obtained or surplus soil deposited, will be landscaped to minimize erosion and hazard for people and livestock. • Vehicular traffic on unpaved roads will be avoided as far as possible. Operation of vehicles and machinery close to the water channels, water reservoir will be minimized. • Vehicles and equipment will not be repaired in the field. If unavoidable, impervious covering will be used to avoid soil and water contamination. • Waste oils will be collected in drums and sold to the recycling contractors. • Domestic solid waste from the construction camp and sites will be disposed in a manner that does not cause soil contamination.

Environmental and Social Impact	Mitigation Measures
	• The inert recyclable waste from the site (such as card board, drums, broken/used parts, etc.) will be sold to recycling contractors. The hazardous waste will be kept separate and handled according to the nature of the waste.
Air quality deterioration due to dust emissions and excavation activities: Main sources of air quality pollution are emissions from construction related traffic and machinery, excavation activity, and structure demolitions. The storage and transportation of material will also generate airborne dust and particulate matter. Dust raised from the above activities will have impacts on the surrounding population.	• All dust raising locations shall be kept wet with water sprinkling. Fugitive dust emissions will be minimized by appropriate methods such as spraying water on material where required and appropriate. • Continuous air monitoring will be carried out near the sensitive receptors to ensure they do not exceed ambient levels and Sindh Environmental Quality Standards (SEQS). • Construction materials will be stored away from the residential areas and will be properly covered. • Construction machinery, generators and vehicles will be kept in good working condition and properly tuned, in order to minimize the exhaust emissions. • Ensure the compliance of Environmental code of conduct. As attached A**nnex- 1** • Construction vehicles carrying materials will be covered with tarpaulin sheets to avoid spilling. • Impose speed limits on all vehicle movement at the worksite to reduce dust emissions
Water Contamination: If the waste water generated from the construction activities, washing and cleaning operations and management of oil and fuel was not properly managed. Similarly, if the waste (solid waste and spoil) was not managed properly at site, it will also cause a contamination to the surface and ground water.	• Fuels and chemicals will be stored on concrete-floored, bunded facility, covered to provide shade and prevent the ingress of rain and should be located away from the open water sources. • The construction wastewater from the work site will be disposed through a settling tank of appropriate capacity, which will be levelled back after completion of construction work. • It will be ensured that the wastes are not released into any drinking water source, cultivation fields, or critical habitat. • The drainage facilities at the site will be properly designed and constructed after the approval of the Engineer. • Regular water quality monitoring will be taken up for waste water discharges to ensure discharge waters compliance with SEQS.
Noise: Noise will be generated from vehicular movement, excavation machinery, concrete mixing and construction activities during the construction phase. The noise generated from offloading of construction material will impact the people visiting health care facilities during the day time.	• The loading and unloading of material from trucks, and handling operations will be properly organized to minimize noise at the construction site. • The adjacent communities will be notified prior any typical noise events outside of daylight hours. • Vehicular traffic through the communities will be avoided as far as possible. The main roads will be used by the construction traffic to the maximum extent possible. • Vehicle speeds will be kept low, and horns will not be used while passing through or near the communities. • Vehicles will have exhaust silencers to minimize noise generation. • Movement of all project vehicles and personnel will be restricted to within work areas, to avoid noise disturbance. • Noise levels will be measured at the key locations near the construction site. If the noise levels are found to be more than the prescribed limits, appropriate measures will be undertaken by the construction team such as rescheduling the works, using quieter equipment and/or erecting barriers to protect the communities from excessive noise.

Environmental and Social Impact	Mitigation Measures
	• It will be ensured that the noise levels measured at the communities near the project sites are kept within the acceptable limits as mentioned in the SEQS.
Waste: waste material such as concrete, bricks, wood, glass, plastics and salvaged building components (doors, windows, and plumbing fixtures) will be generated. On the other hand, the waste (spoil) will be generated from the excavation activity which need to be disposed properly at sit	• To minimize the waste, the purchase of excess materials and packaging and their arrival at the construction site shall be prevented and it will be controlled. • Construction and Demolition (C&D) waste materials will be reused as far as possible in an effective way to save money while protecting natural resources. • Scrap wood will be chipped on site and used as mulch or groundcover. • Brick, concrete and masonry will be recycled on site as fill material. • Packaging materials will be returned to suppliers for reuse. • The excess material (spoils) that cannot be reused will be transported to the disposal site. It will be ensured that none of the excess material is dumped into the surface water source. • A suitable location for spoil disposal will be identified by the Contractor with the consent of the Engineer. • Burning of waste material will not be allowed. • All disposal sites will be sited in locations which are not affected by floods • Proper disposal of E-waste by following E-waste management procedures as attached **Annex- 2**
Traffic: Movement of construction vehicles and open storage of construction material during facility construction may cause congestion on local routes and pose great threat to the commuters and locals residing nearby	• The Contractor will restrict truck deliveries, where practicable, to day time working hours. • Storage of material outside the designated area will be prohibited. • Suitable signboards will be placed at strategic locations of the access road. • The Contractor will restrict the transport of oversize loads. • If community access is hindered, the option of alternate routes will be used. • Community liaison will be maintained.
Flora and Fauna: The excavation of foundation during the construction of facility may lead to removal of natural vegetative cover and trees cutting.	• Clearing of natural vegetation will be minimized as far as possible during the construction works. • If a tree is cut, compensatory tree plantation (five saplings for each lost tree) will be carried out to reduce the impacts. A complete record will be maintained for any tree cutting or trimming. The record will include: the number, species, type, size, age, condition and photograph of the trees to be cut/trimmed. • The construction crew will be provided with LPG as cooking (and heating, if required) fuel. Use of fuel wood will not be allowed. • Garbage will not be left in the open. • The project staff will not be allowed to indulge in any hunting or trapping activities
Land Acquisition and Resettlement The proposed construction and rehabilitation activities will be carried out at government owned land therefore, land acquisition is not expected. However, the sites for construction and rehabilitation activities may have the presence of encroachers or informal settlers at previously abandoned or non-functional health facilities causing	• Conduct a full assessment of resettlement impacts by involving all stakeholders, particularly the affected persons (encroachers/informal settlers) and establish a full inventory of all assets to be acquired or displaced. • Resettlement Plans (full or abbreviated) and/or a livelihood restoration plan will be developed proportionate to the site-specific impacts for displacement of formal or informal settlers in accordance with Land Acquisition Act, 1894 and WB ESS5. • Use the approved entitlement matrix to guide the planning and compensation for all losses incurred

Environmental and Social Impact	Mitigation Measures
involuntary resettlement impacts.	due to the involuntary resettlement.
Occupational Health and Safety Occupational Health and Safety (OHS) related impacts may arise during construction and rehabilitation activities (such as work at height, deep excavations, steel fixing, concrete pouring), installation of Contractor camps (if required), movement of project vehicles, installation of solar panels, immunization (using sharps/injections), inappropriate collection, storage, transportation and disposal of hazardous waste. Installation of medical equipment, exposure to infectious blood at blood storage units.	• The Contractor will be required to strictly follow Sindh Occupational Safety and Health Act, 2017 and World Bank Group EHS Guidelines, 2007. The Contractor shall prepare the site-specific occupational health and safety plan and ensure the compliance; • Ensure that the site will be restricted for the entry of irrelevant people particularly children, disabled and elderly peoples. Ensure the use of safety signs at the construction site; • Ensure the provision of fire prevention and firefighting equipment; • Ensure the provision of PPEs to all workers, visitor and compliance with SEQS, 2016. • Training of workers in construction safety procedures, use of PPEs, defensive driving, provision of first aid, emergency prevention, preparedness and response arrangements by the Contractor; • Include procedures for documenting and reporting accidents, diseases, and incidents **as Annex-3**; • Labor Management Procedures (LMP) will be developed to mitigate the OHS risk; • Identify and minimize, so far as reasonably practicable, the causes of potential hazards to workers, including communicable diseases such as HIV/AIDs and vector borne diseases.
Community Health and Safety Community health and safety issues may arise implementation of project such as communicable disease, road side accidents due to movement of project vehicles, inappropriate practices related to waste management (particularly sharps and infectious), expired blood and accidental exposure in blood storage unit.	• Ensure the compliance with contactors' site-specific ESMP. • Ensure that the site will be restricted for the entry of irrelevant people. • Provision of proper safety signage and equipment. • Ensure the training and awareness session for the workers and community. • Ensure effective implementation of GRM to timely address the issues; • The communicable disease of most concern during construction phase, like Sexually-Transmitted Disease (STDs) such as HIV/AIDS, will be prevented by successful initiative typically involving health awareness; education initiatives; training heath workers in disease treatment; immunization program and providing health service; • Contractor will take due care of the local community and observe sanctity of local customs and traditions by his staff. Contractor will warn the staff strictly not to involve in any unethical activities and to obey the local norms and cultural restrictions.
Disadvantaged and vulnerable groups There is a risk that vulnerable groups, such as religious and ethnic minorities, seasonal migrants, and people with disabilities may be excluded from stakeholder consultations, particularly in remote and underserved areas limiting their ability to provide feedback on project design and impacts, and potentially preventing them from fully benefiting from the project.	• Mapping and engaging stakeholders, including vulnerable groups at the start of the design process and obtaining their feedback about project interventions; • PMU dedicated staff will be responsible for the implementation of the SEP and GRM. • Project staff will be trained on social inclusion and stakeholder engagement
Chance Findings of Important Physical and Cultural Resources During the course of construction and rehabilitation activities, the project may encounter the chance finding of important physical cultural resources.	• The project sites will be screened for the presence of physical cultural resources prior to commencement of construction and rehabilitation work. • Ensure the compliance with the chance find procedure provided in **Annex- 4**
Labor Management Conflicts may arise between the local community and project	• Ensure the compliance the labor management procedure prepared separately for this project. • Ensure the compliance of workers code of conduct. As attached **Annex- 5**

Environmental and Social Impact	Mitigation Measures
workers due to the implementation of the project.	• Effort will be made to hire local labor,
Forced Labor and Child Labor There is a risk that child labor and forced labor may be used during the implementation of the project.	• Contractors will be prohibited from hiring children below the age of 14 for any type of labor, and below the age of 18 for hazardous work. Contractor through contractual agreement will be bound to follow the labor standards, rules and regulations during hiring the labor force; • Project staff will monitor sites to check for child labor, and will hold regular consultations to keep a check on forced labor at project sites; • Awareness will be created among the local communities about the adverse impacts of child labor; and • Contractors will be required to follow the LMP with regard to contracts and terms of employment for labor.
Gender Based Violence GBV, including sexual exploitation and abuse (SEA) and sexual harassment (SH) risks, may arise for different community groups particularly children and women, project staff (skilled and unskilled) during implementation of proposed project activities.	• A separate Action Framework on GBV/SEA/SH will be prepared for the Project and same will be implemented; • GBV, SEA/SH related complaints received through the GRM will be redirected to dedicated staff who are trained on the GBV, SEA/SH related matters; • Extensive training will be provided on the awareness-raising strategy, which outlines how workers and local communities will be sensitized to SEA and SH risks, and their responsibilities; • Awareness will also be raised among the communities of the potential risks of GBV. Targeted communications and awareness to women regarding potential SEA / GBV risks, especially as literacy rates amongst women are lower. This could include organizing consultations during times when women are not busy with their household chores, holding consultations in areas accessible to women; • Project staff (skilled and unskilled) will sign the code of conduct before commencement of civil works; • The Contractor will make sure that no discrimination is made on the basis of gender while hiring of workers; • Service providers will be identified and mapped to address SEA/SH issues; and • Provision related to SEA/SH or GBV will be incorporated in the bidding document.
Security related Issues There may be a risk of security during the implementation of project, particularly in the 'Kaccha' areas. Since the law-and-order situation is not good and it is still not entirely normal. This may lead to security related issues including travel safety and premises safety.	• The Project will continue to rigorously engage with the local communities to ensure a positive image amongst the people in the project area • The contractor shall maintain communication through employer with local police and law enforcement agencies and inform about construction activities particularly for sensitive areas. • The contractor shall prepare emergency evacuation procedure and display emergency contact numbers. • The contractor shall not permit to unauthorized person to enter the working site or camp site. • A detailed Security Management Plan will be developed by the Contractor as part of Site specific ESMP. This plan will be strictly implemented, and also reviewed and updated periodically in view of the current security situation of the area. • Ensure the effective implementation of GRM.
During Operation Stage	
• Solid waste generated by health care facilities will be increased due to increased capacities and increased influx of patients. Without proper system of waste segregation and disposal, this may result in issues of health and safety of hospital staff and patients.	• Proper waste segregation, storage and disposal will be done at the facility level (Health and education facilities). • For health care waste management, a separate health care waste management plan (HCWMP) has been developed which guides on the handling of infectious waste. Format is attached as **Annex 6**.

Environmental and Social Impact	Mitigation Measures
• Dumping of hospital waste in open or near water body may pose a big health risk to local communities and also can contribute in polluting the water sources. • Open discharge of the wastewater from health facilities into a surface water resource (stream, river, canal, spring, etc. without treatment, during operation phase can deteriorate water quality of resource.	• The trainings will be provided to the staff of health care facilities to properly manage the solid waste and hospital waste. • The local community will be sensitized through health and hygiene sessions for proper waste disposal and avoiding solid waste dumps around the hospitals • Regular maintenance of the septic tank and sewer line will be carried out for safe disposal of toilet wastewater during operation. • In case of existing system, it will be ensured that toilets and associated systems are maintained in proper working conditions. In case of new constructions, the toilet facilities will be connected to the local sewerage system. Alternately, an appropriately sized septic tank will be constructed for sewage disposal
Privacy and Gender Issues Lack of separate waiting areas, washroom facilities, unavailability of female medical staff may discourage the females to access the health facilities and GBV/SEA/SH risks associated with communities visiting the health centers, women healthcare workers in and around health centers and at the household level of beneficiaries during implementation of proposed project activities.	• The Project ensures that, as far as possible under the circumstances, qualified female staff is present at all the health facilities in order to interact with females accompanying the children for health checkups; • Separate waiting areas and washroom facilities are designated for women; • Sensitization of health facilities and staff on privacy and gender issues; • GBV/SEA/SH trainings and awareness will be given to health service providers and local communities of the potential risks; especially where the literacy rates amongst women are lower. This could include organizing consultations during times when women are not busy with their household chores, holding consultations in areas accessible to women; • Ensure the compliance with the GRM.
Data Privacy The data of beneficiaries at health care facilities under the project activities may have a risk of misuse of sensitive personal data (e.g., medical histories).	• To guard against abuse of sensitive personal data, the project will incorporate good international practices for dealing with such data. Privacy-by-design features for digital privacy will also be considered; and • Sensitization and training of staff on data privacy will also be done throughout the project cycle.
Cold Chain Management for Vaccine Effectiveness Vaccines need to be stored at recommended temperatures to remain effective. The campaign might not achieve its targets of disease(s) elimination, as well as causing mistrust amongst the communities (occurrence of disease despite vaccination), if the cold chain breaks.	• Cold chain management, in accordance to the National Expanded Program on Immunization (EPI) Policy and Strategic Guidelines shall be ensured at all levels and ensuring that the cold chain does not contain Ozone Depleting substances; • Vaccines shall be stored at standard temperatures (+2C˚ to +8C˚); • All health care facilities shall backup electric supply to ensure the required standard temperature for vaccination storage; • Standard stock ledger with name of the vaccine, quantity in doses, vial size, manufacturer, expiry date, batch/lot number, date of receive and supply to be maintained at all level and updated regularly; • Reconstituted vaccine must be discarded six hours after reconstitution or at the end of immunization session, whichever comes first; • Ensure the provision of appropriate PPE to workers and other health staff; and • Provision of trainings on vaccine Administration & Management to be provided to health staff.
Health and Safety Health and Safety related impacts may arise for health service	• Ensure compliance with Sindh Occupational Safety and Health Act, 2017, Sindh Hospital Waste Management Rules, 2014, and compliance with SEQS, 2016.and World Bank Group Environmental, Health, and Safety Guidelines for Health Care Facilities;

Environmental and Social Impact	Mitigation Measures
providers and local communities during immunization (using sharps/injections), inappropriate collection, storage, transportation and disposal of hazardous waste, installation of medical equipment, fire risk within health facility, and exposure to infectious blood at blood storage units.	• Ensure the provision of fire prevention and firefighting equipment at health care facilities; • Ensure the provision of appropriate PPEs to health service providers and sanitary workers; • Training of workers in, use of PPEs, health care waste management, defensive driving, storage and handling of blood units, disease prevention, provision of first aid, emergency prevention, preparedness and response arrangements as well as appropriate training sessions for communities; • Provision of proper safety and awareness signage; and • Ensure effective implementation of GRM to timely address the issues.

5 Procedures and Implementation Arrangements

This chapter summarizes the mitigation, monitoring, and institutional measures to be taken during the implementation of proposed Project eliminate adverse environmental and social impacts.

5.1 Environmental and Social Risk Management Procedures

The environmental and social risk management procedures will be implemented through the Project's subproject selection process. The summary of E & S procedures is provided in table 5.1.

Table 5.1 Project Cycle and E&S Management Procedures

Project Stage	E&S Stage	E&S Management Procedures
a. Assessment and Analysis: Subproject identification	Screening	- During subproject identification, ensure no subproject will fall under the Exclusion List, provided in table 5.2 below. - For all activities, use the Environmental and Social Screening Checklist in **Annex 7** to identify and assess potential environmental and social risks and impacts, and identify the appropriate mitigation measures for the subproject.
b. Formulation and Planning: Planning for subproject activities, including human and budgetary resources and monitoring measures	Planning	- Based on Environmental and Social Screening Checklist to adopt and/or prepare relevant environmental and social procedures and plans. - For activities requiring Environmental and Social Management Plans (ESMPs), submit the ESMPs for prior review and no objection by the World Bank prior to initiating bidding processes - Ensure that the contents of the ESMPs are shared with relevant stakeholders in an accessible manner and consultations are held with the affected communities in accordance with the SEP. - The project will coordinate with Sindh Environmental Protection Agency to fulfil the legal requirements of the Sindh Environmental Protection Act 2014 for environmental approval - Ensure hiring of dedicated E &S staff. - Training of staff responsible for implementation and monitoring of E & S instruments prepared as part of the project .- Incorporate relevant environmental and social management plans into contractor bidding documents, - Sufficient budget should be allocated for the effective implementation of mitigation measures including third party monitoring.
c. Implementation and Monitoring: Implementation support and continuous monitoring for projects	Implementation	- Contractor will develop site specific construction ESMPs and ensure implementation through dedicated E & S staff. - Ensure implementation of E & S instruments through site visits and regular reporting from the field. - Track grievances/beneficiary feedback. - Continue awareness raising and/or training for relevant E & S staff including PMU, supervisory consultant, contractor and communities ,
d. Review and Evaluation: Qualitative, quantitative, and/or participatory data collection on a sample basis	Completion	- Assess whether plans have been effectively implemented. - Ensure that physical sites are properly restored.

5.1.1 Subproject Analysis- E & S screening

As a first step, all proposed activities should be screened to ensure that they are within the boundaries of the Project's eligible activities, and they are not considered as activities listed on the E&S Exclusion List in the table 5.2.

Table.5.2 Exclusion List

• Any construction in protected areas or priority areas for biodiversity conservation, as defined in national law • Activities that have the potential to cause any significant loss or degradation of critical natural habitats, whether directly or indirectly, or which would lead to adverse impacts on natural habitats • Activities that involve extensive harvest and sale/trade of forest resources (post, timber, bamboo, charcoal, wildlife, etc.) for large-scale commercial purposes. • Activities that involve the use of international waterways. • Any activity affecting physical cultural heritage such as graves, temples, churches, historical relics, archeological sites, or other cultural structures. • Activities that may cause or lead to forced labour or child abuse, child labour exploitation or human trafficking, or subprojects that employ or engage children, over the minimum age of 14 and under the age of 18, in connection with the project in a manner that is likely to be hazardous or interfere with the child's education or be harmful to the child's health or physical, mental, spiritual, moral, or social development. • Any activity that will cause physical relocation of households or will require the use of eminent domain. • Any activity with significant environmental and social risks and impacts that require an Environmental and Social Impact Assessment (ESIA).

All identified subprojects will be screened for E&S impacts using the E&S screening checklist given in **Annex-7**. Since exact extent and precise location/footprints of individual interventions (subprojects) to be implemented under the proposed Project are not known at this stage, therefore, a framework approach has been adopted for the present E&S assessment for this ESMF. This ESMF provides screening procedure following the ESF for the type of E&S instrument to be used before implementing a subproject.

The screening criterion is based on the nature of activities and potential E&S impacts as described below:

- ***High (H)*** -All those subprojects having negative environmental impacts and risks (sensitive, diverse, or unprecedented) will be categorized as High (H) Risk subprojects, though it is expected that no subprojects of SIHPP will fall under this category and for such subprojects. However, such type of subprojects will be avoided and not supported under SIHPP.
- ***Substantial (S)*** -All those subprojects having negative/adverse environmental impacts and risks and are less adverse than those of High-Risk subprojects will be categorized as Substantial (S) Risk Subprojects and for such projects, preparation and submission of ESMP will be necessary (Generic ToR for the preparation of ESMP is attached as **Annex- 8**).
- ***Moderate (M)*** -All those subprojects having low to moderate level adverse impacts and risks on environment and are less adverse than those of High and Substantial Risks subprojects, will be categorized as Moderate (M) Risk subprojects. Most of these environmental risks and impacts are however temporary, site specific and largely reversible in nature and can be managed and mitigated through appropriate mitigation measures to acceptable levels. For

these subprojects, the preparation and submission of a checklist with mitigation measures will be required. An ESMP/RAP/ARAP may also be prepared if needed.

- ***Low (L)*** -All those subprojects having negligible to no negative/adverse impacts and risks on environment, will be categorized as Low (L) Risk subprojects and for such subprojects, no further environmental assessment will be required following the initial E&S screening.

5.1.2 Subproject Formulation and Planning – E&S Planning

Based on the process above and the E & S Screening checklist, the PMU will adopt will adopt the necessary environmental and social management measures provided in this ESMF. or develop relevant site-specific environmental and social management plans and other applicable documents as needed.

The ESMPs will also be submitted to the World Bank for prior review and no objection. The PMU will coordinate with Sindh Environmental Protection Agency to fulfil the legal requirements of the Sindh Environmental Protection Act 2014 for environmental approval before any project activities begun.

The dedicated E & S staff of PMU will be trained in the environmental and social management aspects. The PMU will ensure that all selected contractors, subcontractors (if any), and vendors understand and incorporate environmental and social mitigation measures relevant to them as standard operating procedures for civil works. The PMU will provide training to selected contractors to ensure that they understand and incorporate environmental and social mitigation measures; and plan for cascading training to be delivered by contractors to subcontractors (if any) and vendors. The PMU will further ensure that the entities or communities responsible for ongoing operation and maintenance of the investment have received training on operations stage environmental and social management measures as applicable.

5.1.3 Implementation and Monitoring – E&S Implementation

During implementation, the PMU will conduct regular monitoring visits. Monitoring will be carried out to ensure that the mitigation plans are regularly and effectively implemented. It will be performed at PMU and field levels and by the Contractors. A separate E & S monitoring checklist will be developed by PMU based on the ESMPs, which will be used by field monitor. The contractor will be responsible for the implementation of mitigation measures provided in the ESMPs, through dedicated E & S staff, as well as comply with the requirement of Sindh environmental Protection Act 2014.

Prior to mobilization/start of civil works, the Contractors will develop Site Specific construction Environmental and Social Management Plan (SSESMP) (only for those subprojects which may require preparation of an ESMP) with the support/consent of E&S staff of PMU and the guidelines provided in the ESMP. The Contractor will also be responsible for training of its dedicated E & S staff on regular basis for effective implementation of E & S aspects.

At a minimum, the reporting will include (i) the overall implementation of E&S risk management instruments and measures, (ii) any environmental or social issues arising as a result of project activities and how these issues will be remedied or mitigated, including timelines, (iii) Occupational Health and Safety performance (including incidents and accidents), (iv) community health and safety, (v) stakeholder engagement updates, in line with the SEP, (vi) public notification and communications, (vii) progress on the implementation and completion of project works, and (viii)

summary of grievances/beneficiary feedback received, actions taken, and complaints closed out, in line with the SEP. Reports from the field levels will be submitted to the PMU, where they will be aggregated and submitted to the World Bank on a quarterly basis.

Throughout the Project implementation stage, the PMU will continue to provide training and awareness raising to relevant stakeholders, such as staff, selected contractors, and communities, to support the implementation of the environmental and social risk management mitigation measures. The PMU will also track grievances/beneficiary feedback (in line with the SEP) during project implementation to use as a monitoring tool for implementation of project activities and environmental and social mitigation measures. Third Party will be recruited by PMU to carry out independent monitoring regarding implementation of ESMP. The third party will have E & S Specialists to carryout intermittent monitoring of the project. This will be done on annual basis to evaluate the overall effectiveness of ESMP implementation.

The PMU becomes aware of a serious incident in connection with the project, which may have significant adverse effects on the environment, the affected communities, the public, or workers, it should notify the World Bank within 48 hours of becoming aware of such incident. A fatality is automatically classified as a serious incident, as are incidents of forced or child labor, abuses of community members by project workers (including gender-based violence incidents), violent community protests, or kidnappings.

5.1.4 Review and Evaluation – E&S Completion

Upon completion of Project activities, the PMU will review and evaluate progress and completion of project activities and all required environmental and social mitigation measures. Especially for civil works, the PMU will monitor activities with regard to site restoration and landscaping in the affected areas to ensure that the activities are done to an appropriate and acceptable standard before closing the contracts, in accordance with measures identified in the ESMPs and other plans. The sites must be restored to at least the same condition and standard that existed prior to commencement of works. Any pending issues must be resolved before a subproject is considered fully completed. The PMU will prepare the completion report describing the final status of compliance with the E&S risk management measures and submit it to the World Bank.

5.2 Contingency Emergency Response Component

The Contingency Emergency Response Components (CERC) Manual to be prepared for the Project will include a description of the environmental and social risk assessment and management arrangements if the CERC component becomes activated. This may include a CERC ESMF or an Addendum to this ESMF based on the subproject activities that will be funded under the CERC component. If such additional documentation or revision to documentation is needed, the PMU will prepare, consult, adopt, and disclose these in accordance with the CERC Manual, and implement the measures and actions necessary.

5.3 Implementation Arrangements

The Project Director-PMU, through E&S-PMU and Focal Persons at district levels, will be responsible for the overall implementation of ESMP as well as E&S performance of the proposed Project in accordance with the national, provincial and WB requirements.

The ESMP implementation arrangements have been suggested to keep it well aligned and synergetic with the overall Project implementation and institutional setup as described below:

a) ***PMU Level:*** The E&S Specialists will be responsible for top supervision of ESMP implementation through overall coordination and monitoring. The E&S staff will be responsible for implementing all E&S related requirements including planning, implementation, coordination, monitoring and reporting of all E&S related activities. The PMU will designate E&S FPs at district level and maintain liaison and coordination with the E&S FPs at district level for the implementation of ESMP.

b) ***District Level:*** The designated E&S FPs will supervise the actual implementation of the E&S related requirements including compliance during the project implementation at field level. E&S FPs will provide necessary support and assist the E&S staff of PMU to establish progress reports.

Contractors will be required to comply with the Project's E&S risk management documents and procedures including the ESMP, LMP, and local legislation. This provision will be specified in the contractor's agreements. Contractors will be expected to disseminate and create awareness within their workforce of environmental and social E&S risk management compliance for their effective implementation. The following **table 5.3** shows the implementation arrangements for the project activities.

Table 5.3 Implementation Arrangements

Level/Responsible Party	Roles and responsibilities
Project Management Unit (PMU)	- Provide support, oversight, and quality control to field staff working on environmental and social risk management. - Review, and provide quality assurance and approval to E & S Screening checklist and ESMPs as relevant. Keep documentation of all progress. - Oversee overall implementation and monitoring of environmental and social mitigation and management activities, compile progress reports from subprojects, and report to the World Bank on a quarterly basis. - Train field staff, contractors and communities who will be responsible for implementing the ESMF. - Ensure that all bidding and contract documents include all relevant E&S screening checklists and other E & S instruments. - Ensure project activities do not fall under the Exclusion List. - Maintain the close liaison with the World Bank, Government Departments (where applicable) and E & S FPs at field level for smooth and effective implementation of E&S aspects.

Supervision Consultant	- To oversee the performance of the Contractors to make sure that the Contractors are complying with ESMP requirements. - Ensuring that the day-to-day construction activities are carried out in an environmentally and socially sound and sustainable manner; - Strong coordination with the Contractors and E&S staff- PMU; - To supervise and monitor E & S activities being performed at site; - To organize periodic E & S training programs and workshops for the relevant E & S staff including PMU and contractor. - Ensure periodic reporting of ESMP to PMU. - Suggest any additional mitigation measures (if required)
Contractor	- Comply with the Project's environmental and social mitigation and management measures as specified in ESMPs and contract documents, as well as national and local legislation. - Take all necessary measures to protect the health and safety of workers and community members, and avoid, minimize, or mitigate any environmental harm resulting from project activities.
Third party Validation	- Monitor compliance including compliance of Environmental and Social aspects on annual basis throughout the project duration.

5.4 Proposed Training and Capacity Building

Strengthening capacity of PMU, Consultant, Contractors, Sub Contractor (SC) and project workers staff is essential to ensure the successful implementation and compliance of the E&S mitigation measures. This will be achieved through series of customized trainings and awareness sessions.

The objectives of the E&S trainings include providing basic knowledge and information on the key environmental and social issues associated with the Project. The training report must include the objectives and detailed content of the training, copy of the training materials and presentations, list of resource persons and list of participants. Below Table 5.4 provides proposed training and capacity building approach**.**

Table 5.4 Capacity Building Training

Sr. No.	Key Aspects to Cover	Potential Participants	Frequency of Training	Responsible Party
1	● General environmental and social awareness ● WB ESF and national/provincial requirements ● ESMP implementation requirements ● Community and occupational health and safety aspects ● Stakeholder Engagement and mapping ● Environmental and Social Screening Checklist ● Emergency Response Preparedness ● Disaster Risk Reduction, Response and Management	E&S FPs at Field Level, Project Workers, health department staff, health facility staff, other project staff (as a capacity building measures). Contractor staff,	Prior to initiation of project activities and then conducted periodically throughout project implementation.	E&S staff-PMU Supervision Consultant

Sr. No.	Key Aspects to Cover	Potential Participants	Frequency of Training	Responsible Party
	● Monitoring and Reporting ● Mitigation against Sexual Exploitation and Abuse (SEA), Sexual Harassment (SH) and Violence Against Children (VAC) ● Gender sensitivity ● Social Inclusion ● Waste Management ● Documentation and Reporting ● Labor Management Procedures Grievance Redress Mechanisms			
2	● Code of conduct/ Behavioral Standards ● Safe and defensive driving ● Management of hazardous substances ● Housekeeping, hygiene and waste disposal and pollution prevention and control ● Handling and management of E-Waste ● Healthcare waste management ● Labor Management Procedures ● Occupational Health and Safety ● Emergency Response Preparedness ● Community Health and Safety ● Grievance Redress Mechanisms	E&S FPs at Field Level, Project Workers, health department staff, and health facility staff other project staff (as a capacity building measures). Contractor staff,	Prior to initiation of project activities and then conducted periodically throughout project implementation. During Implementation, prior to operationalization of ambulance services/health care services and conducted periodically throughout project implementation During implementation for e-waste management.	E&S staff-PMU Supervision Consultant

5.5 Estimated Budget for Implementation

Sr. No.	Description	Frequency	Unit Rate (PKR)	Cost (PKR)	Remarks
1.	Training / Capacity Building Program at Provincial/Division/ District level	Bi-annually	12,22,500	12,225000	Trainings will be Provided to consultant, contractor and health care staff.
2.	Third Party Validation	Annual	700,000	3,500,000	
3.	ESMP Preparation	NA	2,070,000	2,070,000	
4.	IEC Material/ per facility	Yearly	(2000x690)x5	6,900,000	690 (no of health facilities in the project)
	Grand Total			24,695,000	

6 Stakeholder Engagement, Disclosure, and Consultations

The project has prepared a separate Stakeholder Engagement Plan (SEP) to describe objectives, process and outcome of the stakeholder engagement carried out during the project preparation and to be carried out during the project implementation – in accordance with the World Bank ESS 10 (Stakeholder Engagement and Information Disclosure). The SEP, being a live document is to be updated throughout the life of the project to ensure effective, robust and transparent stakeholder engagement.

Through the ESS 10, the ESF requires the timely, relevant, understandable, and accessible disclosure of project information in a way that is free of manipulation, interference, coercion, discrimination, and intimidation.

6.1 Summary of Stakeholder Consultations Conducted

Stakeholder consultation were carried out in October 2022 and subsequently in January, June, and August 2023 with various stakeholders including health department, environment department, health care commission and Sindh rural support organization (NGO) and potential beneficiary community and vulnerable groups in flood affected areas. These stakeholders were interviewed through face-to-face sessions.

This engagement aimed to ascertain institutional needs, inform stakeholders about planned activities, improve project design, create synergies, and enhance the socio-environmental sustainability of the project activities across different components. The key concerns/suggestions of stakeholders and PMU response are shown in Table 6.1 and a list of stakeholder engagement sessions is provided in **Annex 9**.

Table 6.1 Stakeholders' Concerns/ Feedback and Response

Sr. No.	Concerns of Participants	PMU Response
1.	Provision of safe drinking water in healthcare facilities should be considered.	The provision of the water treatment plant in the project has been considered to ensure the safe drinking water.
2.	The existing BHUs are not in good condition after the flood in 2022. Therefore, this aspect should be considered in the design. The new BHU buildings should be constructed at the same location with modern health facilities	The flooding aspect will be considered in the project design and new BHUs will be contracted at the same location with the provision of appropriate health facilities.
3.	Ambulances are not available in all BHUs for referral services, the project should ensure the provision of Ambulances in BHUs.	The project has the provision for the procurement of ambulances for referral and emergency response. The ambulances can be functional through Sindh Integrated Emergency Health Services (SIEHS)
4.	There are no filtration plants installed in any Health Facility.	The provision of the water treatment plant in the health facilities (BHUs) has been considered.
5.	Provision of Solar panel systems in healthcare facilities should be considered.	The provision of Solar Panel System of 10kw in this project has been considered.
6.	Ramps should be provided for persons with disabilities in health facilities	Appropriate measures for the persons with disabilities have been considered in the design such as ramps, proper signage etc.
7.	Fire Extinguishers should be provided in the health facilities.	The project will ensure the provision of Fire Extinguishers in each BHU.
8.	Windows in the existing damaged health facility	This aspect will be considered in the design to ensure

Sr. No.	Concerns of Participants	PMU Response
	buildings are too small, it should be of appropriate size for better ventilation.	proper ventilation in health facilities.
9.	The height of the health facility compound wall is short, it should be raised.	This aspect has been considered in the design by raising the height of the compound wall upto 10 feet from the existing floor level.
10.	The skilled and unskilled workforce should be hired from the local community.	The relevant clauses will be added in the Contractor's contract to ensure full compliance.
11.	Noise/and dust emissions may disturb the nearby dwellings/ community.	The relevant mitigation measures will be provided in the ESMP. The ESMP will be part of the Contractor's contract to ensure the E&S compliance.
12.	Is there any forum for the complaint registration?	A multi-tier GRM has been established for the project and will be notified at the district level, where a any person can submit his/her complaint using the electronic media and other tools. GRM will address all types of grievances related to project. Awareness raising of communities will be carried out as appropriate.
13.	The movement of commuters in the respective streets/ locations towards the Masjid, schools, and hospitals should not be disturbed.	Alternate routes will be provided to avoid disturbance to locals (where needed) before the start of civil works.
14.	In remotely located Health facilities, privacy and mobility issues may arise for the women and students and proper cordoning of the construction area to be ensured.	Social disturbance will be minimized. Relevant measures have been provided in the ESMF to ensure the privacy and mobility issues of locals.
15.	Health and safety issues may arise for the community particularly for children playing in streets as there are no parks and playgrounds in rural areas.	Appropriate measures have been provided in the ESMF regarding the community health and safety. The Contractor will prepare the site specific CESMP based on the ESMP and ensure compliance.
16.	The construction material should not be dumped in the streets or block sidewalks and pedestrian passages.	The construction material will be dumped and stored inside the HF premises. If space is not available in the HF an alternate arrangement will be made by the Contractor based on the measures provided by ESMP.
17.	Cutting of trees, Health and Safety, health care waste disposal, water pollution related issues may arise during the project implementation.	Relevant measures have been provided in the document to manage these aspects. Efforts will be made to minimize the tree cutting; however, compensatory tree plantation (five saplings for each lost tree) will be carried out to reduce the impacts. The Contractor will prepare a site specific CESMP and ensure compliance. A Health Care Waste Management Plan will be prepared as a part of the project and implemented.
18.	Fear of blockage of small gray water channels adjacent to HFs due to construction waste.	The construction and municipal wastes will be disposed of according to the Waste Management Plan during the project implementation.

6.2 Grievance Redress Mechanism

The Grievance Redressal Mechanism (GRM) is an institutional arrangement to provide an avenue to Project stakeholders to address grievances related to the Project. The GRM defines grievance as any formal communication that expresses dissatisfaction about an action or lack of action, about the standard of service, works or policy, deficiency of service, works or policy of the project management and its implementation mechanism. The GRM is directly linked to the transparent implementation of Environment, Social Management Framework (ESMF). A complainant can be a community member, a community organization, non-government organization or any other individual or body.

The overall objective of the grievance resolution procedure is to ensure that stakeholder grievances are handled systematically and transparently to promote mutual confidence and trust during all stages of the Project.

6.2.1 GRM Structure

The GRM will function as a multi-tier system with designated staff at the PMU and the district levels. At each level, the Project Director will designate a Grievance Redress Committee (GRC), that are as below;

(a)Provincial GRC: Project Director (Chairman), Monitoring and Evaluation Specialist (Member / Secretary) other members are; Civil Engineer (SIHPP), Environmental Specialist, (SIHPP), Social / Gender Specialist (SIHPP),Chief Operating Officer (PPHI), Representative from P&D Department, Representative from Civil Society Organization, Chief Women Medical Officer in Health Dept for GBV Issues and Any other co-opted member.

(b) District GRC: Deputy Commissioner (Concerned) (Chairman), District Health Officer (Secretary/Member), and other members are; Representative from Director General Health Services Sindh, Monitoring and Evaluation Specialist (SIHPP), Representative from District Environment Department, District Support Manager (PPHI) (Concerned), Representative from Civil Society Organization and any other co-opted member.

6.3 Grievance Redressal Process

6.3.1 Grievance Lodging

Grievances from stakeholders, citizens, staff members or their representatives may be submitted at any of the two levels specified committees mentioned above. Stakeholders will be able to raise their grievances in person, with local elders, through calls, email, WhatsApp and text messages on the designated number of the Deputy Commissioner Office or in written form at a health facility in the designated Drop Box at active sites. Once a grievance is recorded, the Unique Identity (UID) will be shared with the complainant and a tentative timeline for its resolution.

6.3.2 Grievance Review

The GRC member(s) of the relevant tier will conduct an inquiry into the grievance to identify its root cause, and subsequent resolution measures. The GRC Secretary will write a brief report (maximum three pages) in Urdu or Sindhi on a) the nature of the grievance and b) its possible resolution and submit this to the Chairperson of the relevant GRC tier.

Grievances related to GBV/ SEA/SH will always be escalated to the provincial GRC PMU and dealt with by the PMU's designated Social/Gender specialist (act as Focal Point) in compliance with the GBV/SEA/SH Action Plan of the project.

The PMU must establish a working relationship with the GBV Service Provider[5], so that GBV cases can safely be referred to them, where applicable. The GBV Service Provider will be identified by the PMU during project preparation. The GBV Service Provider will also provide support and guidance to the Social/Gender Specialist/provincial GRC, as necessary. The GRC is responsible for ensuring that GBV complaints are properly investigated and that appropriate sanctions are applied for any cases where sanctions are considered to be justified. All reports of GBV shall be handled in a confidential manner to protect the rights of all involved.

6.3.3 Resolution or Escalation of Grievances

The member(s) and the Chairperson will hold a meeting at least once in two weeks to review all registered grievance cases. If the member(s) and the Chairperson agree on a solution, their decision will be briefly transcribed by a member of the relevant GRC and duly signed by the Chairperson and all GRC members. This decision will then be communicated both verbally (through the phone or a face-to-face meeting) and in writing to the complainant. If the complainant agrees to the proposed solution, he/she will countersign the written decision, or place a thumb impression on it. This written decision shall be communicated to the complainant within 28 calendar days from the complaint registration date.

Note: If the complainant is not satisfied with the resolution of their complaint. She/he can go for district magistrate / Court.

6.3.4 Monitoring and Review

It is critical to monitor the effectiveness of the GRM. Appropriate measures/Key Performance Indicators (KPIs) for this include monthly reporting on the number of grievances received, resolved and outstanding. This exercise will be undertaken by the Monitoring and Evaluation Specialist at the PMU and record the details by secretary of District GRC.

6.3.5 Information Disclosure

The Environmental and Social management instruments including the ESMF, LMP, GBV/SEA SH Action Plan, GRM SEP and E&S screening checklists will be disclosed on the SIHPP website after necessary approvals. Hard copies of these documents will also be maintained at PMU and all project sites. The executive summary of the documents will be translated into regional languages i.e. Urdu and Sindhi. A copy of the GRM will be placed in the PMU for public access. The GRM will be translated into regional languages i.e., Urdu and Sindhi.

[5] *The GBV Service Provider is a local organization which has the trust of the local community, experience and ability to support survivors of GBV*

ANNEX 1: ENVIRONMENTAL AND SOCIAL CODES OF PRACTICE (ESCOP)

The objective of the preparation of the Environmental Code of Practices (ECoPs) is to address less significant environmental impacts and all general construction-related impacts for the proposed SIHPP project implementation. The ECoPs will provide guidelines for best operating practices and environmental management guidelines to be followed by the contractors for sustainable management of all environmental issues. These ECoPs will be annexed in the general conditions of all the contracts to be carried out under the SIHPP project. The list of ECoPs prepared for the SIHP is given below**:**

ECoP 1: Waste Management
ECoP 2: Fuels and Hazardous Substances Management
ECoP 3: Water Resources Management
ECoP 4: Air Quality Management
ECoP 5: Noise and Vibration Management
ECoP 6: Protection of Fauna
ECoP 7: Construction Camp Management
ECoP 8: Workers Health and Safety

ECoP 1: Waste Management

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
General Waste	Soil and water pollution from the improper management of wastes and excess materials from the construction sites.	• The Contractor shall: • Develop a waste management plan for various specific waste streams (e.g., reusable waste, flammable waste, construction debris, food waste.) prior to commencing construction and submit it to E& S team of PMU for approval. • Organize disposal of all wastes generated during construction in an environmentally acceptable manner. This will include consideration of the nature and location of the disposal site, to cause less environmental impact. • Minimize the production of waste materials by 3R (Reduce, Recycle and Reuse) approach. • Segregate and reuse or recycle all the wastes, wherever practical. • Collect and transport non-hazardous wastes to all the approved disposal sites. • Train and instruct all personnel in waste management practices and procedures as a component of the environmental induction process. • Provide refuse containers at each worksite. • Request suppliers to minimize packaging where practicable. o Place a high emphasis on good housekeeping practices. • Maintain all construction sites in a cleaner, tidy and safe condition and provide and maintain appropriate facilities as temporary storage of all wastes before transportation and final disposal.
Hazardous Waste	Health hazards and environmental impacts due to improper waste management practices	The Contractor shall: • Store, transport and handle all chemicals avoiding potential environmental pollution. • Store all hazardous wastes appropriately in bonded areas away from watercourses. • Make available Material Safety Data Sheets (MSDS) for hazardous materials on-site during construction. • Collect hydrocarbon wastes, including lube oils, for safe transport off-site for reuse, recycling, treatment, or disposal at approved locations. • Construct concrete or another impermeable flooring to prevent seepage in case of spills

ECOP 2: FUELS AND HAZARDOUS SUBSTANCE MANAGEMENT

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Fuels, oil, lubricants, paints and other hazardous substance.	Materials used in construction have the potential to be a source of contamination. Improper storage and handling of fuels, lubricants, chemicals and hazardous substances on-site, and potential spills from these goods may harm the environment or health of construction workers.	The Contractor shall: • Prepare spill control procedures and submit the plan for E & Steam of PMU for approval. • Train the relevant construction personnel in the handling of fuels and spill control procedures. • Store dangerous goods in bonded areas on top of a sealed plastic sheet away from the water course. Refueling should occur only within bonded areas. • Transport waste of dangerous goods, which cannot be recycled, to a designated disposal site approved by Sindh EPA. • Provide absorbent and containment material (e.g., absorbent matting) where hazardous material is used and stored and personnel trained in the correct use. • Provide protective clothing, safety boots, helmets, masks, gloves, goggles, to the construction personnel, appropriate to materials in use. • Make sure all containers, drums, and tanks that are used for storage are in good condition and are labelled with the expiry date. Any container, drum, or tank that is dented, cracked, or rusted might eventually leak. Check for leakage regularly to identify potential problems before they occur. • Store hazardous materials above flood plain level. • Put containers and drums in temporary storage in clearly marked areas, where they will not be run over by vehicles or heavy machinery. The area should preferably slope or drain to a safe collection area in the event of a spill. • Put containers and drums in permanent storage areas on an impermeable floor that slopes to a safe collection area in the event of a spill or leak. • Take all precautionary measures when handling and storing fuels and lubricants, avoiding environmental pollution. • Avoid the use of material with greater potential for contamination by substituting them with more environmentally friendly materials.

ECoP 3: Water Resources Management

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Hazardous Material and Waste	Water pollution from the storage, handling and disposal of hazardous materials and general construction waste, and accidental spillage	The Contractor shall: • Follow the management guidelines proposed in ECoPs 1 and 2. • Minimize the generation of sediment, oil and grease, excess nutrients, organic matter, litter, debris, and any form of waste (particularly petroleum and chemical wastes). These substances must not enter waterways, storm water systems, or underground water tables.
Discharge from construction sites	During construction both surface and groundwater quality may be deteriorated due to construction.	The Contractor shall: • Stockpile materials away from drainage lines • Prevent all solid and liquid wastes from entering waterways by collecting solid waste, oils, chemicals, bitumen spray waste and wastewaters from brick, concrete and asphalt cutting where possible and transport to an approved waste disposal site or recycling depot • Wash out transit mixture and concrete handling equipment at washing facilities off-site or into approved bunded areas on site. Ensure that tires of construction vehicles are cleaned in the washing bay (constructed at the entrance of the construction site) to remove the mud from the wheels. This should be done at every exit of each construction vehicle to ensure the local roads are kept clean.
Drinking water	Groundwater at shallow depths might be contaminated and hence not suitable for drinking purposes.	The Contractor shall: • Provide safe and suitable drinking water for the workers during construction time as well as at camp site as per SEQs and World Bank standards.

ECoP 4: Air Quality Management

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Construction vehicular traffic	Air quality can be affected by vehicle exhaust emissions and combustion of fuels.	The Contractor shall: • Operate the vehicles in a fuel-efficient manner • Cover haul vehicles carrying dusty materials moving outside the construction site • Impose speed limits on all vehicle movement at the worksite to reduce dust emissions • Control the movement of construction traffic • Water construction materials prior to loading and transport • Service all vehicles regularly to minimize emissions

Construction machinery	Air quality can be affected by emissions from machinery and the combustion of fuels.	The Contractor shall: • Fit machinery with appropriate exhaust. • Focus special attention on containing the emissions from generators • Machinery causing excess pollution (e.g. visible smoke) will be banned from construction sites • Carryout effects monitoring on monthly basis to control the emissions from construction machinery. • Service all equipment regularly to minimize emissions. • Engage all vehicles that are physically fit for the work.
Construction activities	Dust generation from construction sites, material stockpiles and access roads is a nuisance in the environment and can be a health hazard.	• Water the material stockpiles, access roads and bare soils on an as-required basis to minimize the potential for environmental nuisance due to dust. Increase the watering frequency during periods of high risk (e.g. high winds) • Reschedule earthwork activities or vegetation clearing activities, were practical, if necessary to avoid during periods of high wind and if visible dust is blowing off-site • Restore disturbed areas as soon as practicable by vegetation/grass-turfing • Store the cement in silos and minimize the emissions from silos by equipping them with filters.

ECoP 5: Noise and Vibration Management

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Construction vehicular traffic	Noise quality will be deteriorated due to vehicular traffic	The Contractor shall: • Maintain all vehicles to keep them in good working order under manufacturers maintenance procedures • Make sure all drivers will comply with the traffic codes concerning maximum speed limit, driving hours. • Make sure that all operators are trained and are having third-party operator certificates (driving license).
Construction machinery	Noise and vibration may have an impact on people, property, livestock and the natural environment.	The Contractor shall: • Appropriately site all noise-generating activities to avoid noise pollution to residents. • Use the quietest available plant and equipment • Maintain all equipment to keep it in good working order following manufactures maintenance procedures • Install acoustic enclosures around generators to reduce noise levels.
Construction activity	Noise and vibration may have an impact on people, property, livestock and the natural environment.	The Contractor shall: • Notify adjacent residents before any Typical noise event outside of daylight hours • Educate the operators of construction equipment on potential noise problems and the techniques to minimize noise emissions • Employ best available work practices on-site to minimize occupational noise levels

		• Plan activities on-site and deliveries to and from site to minimize the impact • Monitor and analyze noise and vibration results and adjust construction practices as required.

ECoP 6: PROTECTION OF FAUNA

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Vegetation Clearance	Clearance of vegetation may impact shelter, feeding and/or breeding and/or physical destruction and severing of habitat areas	The Contractor shall: • Restrict the tree removal to the minimum required. • Retain tree hollows on-site, or relocate hollows, where appropriate • Leave dead trees where possible as habitat for fauna • Fell the hollow-bearing trees in a manner that reduces the potential for fauna mortality. Felled trees will be inspected after felling for fauna and if identified and readily accessible will be removed and relocated or rendered assistance if injured.
Construction Camps	Illegal poaching	Provide adequate knowledge to the workers regarding the protection of flora and fauna, and relevant government regulations and punishments for illegal poaching.

ECOP 7: CONSTRUCTION CAMP MANAGEMENT

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Siting and Location of Construction Camps	Camp sites for construction workers are the important locations that have significant impacts such as health and safety hazards on local resources and infrastructure of nearby communities.	The Contractor shall: • Locate the construction camps in areas that are acceptable from the environmental, cultural or social point of view. • Consider the location of construction camps away from communities to avoid social conflict in using natural resources such as water or to avoid the possible adverse impacts of the construction camps on the surrounding communities. • Submit to the PMU for approval a detailed layout plan for the development of the construction camp showing the relative locations of all temporary buildings and facilities that are to be constructed together with the location of site roads, fuel storage areas (for use in power supply generators), solid waste management and dumping locations, and drainage facilities, before the development of the construction camps. • Local authorities responsible for health, religion and security shall be duly informed on the set up of camp facilities to maintain effective surveillance over public health, social, and security matters. • Code of Conduct to be prepared by the Contractor, signed by his workers and approved by the PMU of SIHPP.

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Construction Camp Facilities	Lack of proper infrastructure facilities, such as housing, water supply and sanitation facilities will increase pressure on the local services and generate substandard living standards and health hazards.	Contractor shall provide the following facilities in the campsites: • Adequate housing for all workers • Safe and reliable water supply. Water supply from tube wells that meets the national standards. • Drinking water should be checked monthly through monthly effects monitoring. • Hygienic sanitary facilities and sewerage systems. The toilets and domestic wastewater will be collected through common sewerage. Provide separate latrines and bathing places for males and females with total isolation by the wall or by location. Female toilets should be marked in the language understood by the persons using them to avoid miscommunication. The minimum number of toilet facilities required is one toilet for every ten persons.
Disposal of waste	Management of wastes is crucial to minimize impacts on the environment	The Contractor shall: • Ensure proper collection and disposal of solid wastes within the construction camps • Insist waste separation by source; organic wastes in one waste bin and inorganic wastes in another waste bin at the household level. • Store inorganic wastes in a safe place within the household and clear organic wastes daily to waste collectors. Establish waste collection, transportation and disposal systems with the manpower and equipment's/vehicles needed. • Dispose of organic wastes in a designated safe place on daily basis. At the end of the day cover the organic wastes with a thin layer of sand so that flies, mosquitoes, dogs, cats, rats, are not attracted. One may dig a large hole to put organic wastes in it; take care to protect groundwater from contamination by leachate formed due to decomposition. Cover the bed of the pit with an impervious layer of materials (clayey, thin concrete) to protect groundwater from contamination. • Do not establish site-specific landfill sites. All solid waste will be collected and removed from the work camps and disposed of in approved waste disposal sites.
Fuel supplies for cooking purposes	Illegal sourcing of fuelwood by construction workers will impact the natural flora and fauna	The Contractor shall: • Provide fuel to the construction camps for their domestic purpose, to discourage them to use fuelwood or other biomass. • Make available alternative fuels like natural gas or kerosene on ration to the workforce to prevent them from using biomass for cooking. • Conduct awareness campaigns to educate workers on preserving the protection of biodiversity in the project area, and relevant government regulations and punishments on wildlife protection.
Health and Hygiene	There will be a potential for diseases to be transmitted	The Contractor shall: • Provide adequate health care facilities within construction sites.

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
	including malaria, exacerbated by inadequate health and safety practices.	• Provide a first-aid facility round the clock. Maintain stock of medicines in the facility and appoint a full-time designated first aider or nurse.
	There will be an increased risk of work crews spreading sexually transmitted infections and HIV/AIDS.	• Initial health screening of the labourers coming from outside areas • Train all construction workers in basic sanitation and health care issues and safety matters, and on the specific hazards of their work • Provide HIV awareness programming, including STI (sexually transmitted infections) and HIV information, education and communication for all workers regularly • Provide adequate drainage facilities throughout camps to ensure that disease vector's habitats (stagnant water bodies, puddles) do not form. Regular mosquito repellent sprays in monsoon. • Carryout short training sessions on best hygiene practices to be mandatorily participated in by all workers. Place display boards at strategic locations within the camps containing messages on best hygienic practices
Safety	Inadequate safety facilities to the construction camps may create security problems and fire hazards	The Contractor shall: • Provide appropriate security personnel (police/home guard or private security guards) and enclosures to prevent unauthorized entry into the camp area. • Maintain register to keep track of a headcount of persons present in the camp at any given time. • Encourage the use of flameproof material for the construction of labor housing/site office. Ensure that these houses/rooms are of sound construction and capable of withstanding storms. • Provide the appropriate type of firefighting equipment suitable for the construction camps • Display emergency contact numbers clearly and prominently at strategic places in camps. • Communicate the roles and responsibilities of laborers in case of emergency in the monthly meetings with contractors.
Site Restoration	Restoration of the construction camps to original condition requires demolition of construction camps.	The Contractor shall: • Dismantle and remove from the site all facilities established within the construction camp including the perimeter fence and lockable gates after the construction work. • Dismantle camps in phases as the work decreases (do not wait for the completion of the entire work. • Give prior notice to the labourers before demolishing their camps/units • Maintain the noise levels within the national standards during demolition activities • Different contractors should be hired to demolish different structures to promote recycling or reuse of demolished material. • Reuse the demolition debris to a maximum extent. Dispose of remaining debris at the designated waste disposal site.

ECoP 8: WORKER HEALTH AND SAFETY

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Best Practices	Construction works may pose health and safety risks to the construction workers and site visitors leading to severe injuries and deaths.	The Contractor shall: • An Occupational, Health and Safety Plan shall be prepared by the Contractor and submitted to E & S team of PMU for review and approval. The OHS shall include a job hazard analysis and safety precautions (like PPEs, barriers, change to a design) and make ensure the use of the PPEs and other measures during construction time. • The contractor will train his workers and project management staff in (not limited to) first aid and basic infection control at work, transportation and handling of hazardous wastes, use of PPEs, fire safety, etc. • Implement suitable safety standards for all workers and site visitors which should not be less than those laid down on the international standards (e.g. International Labour Office guideline on 'Safety and Health in Construction; World Bank Group's 'Environmental Health and Safety Guidelines') and contractor's national standards or statutory regulations, in addition to complying with the national acts and rules of the Government of Sindh • Provide the workers with a safe and healthy work environment, taking into account inherent risks in its particular construction activity and specific classes of hazards in the work areas, • Provide personal protection equipment (PPE) for workers, such as safety boots, helmets, masks, gloves, protective clothing, goggles, full-face eye shields, and ear protection. Maintain the PPE properly by cleaning dirty ones and replacing them with damaged ones. • Safety procedures include the provision of information, training and protective clothing to workers involved in hazardous operations and proper performance of their job • Appoint an environment, health and safety manager to look after the health and safety of the workers • Inform the local authorities responsible for health, religion and security duly informed before commencement of civil works and establishment of construction camps to maintain effective surveillance over public health, social and security matters.
	Child Labor	The Contractor shall: • Not hire children of less than 14 years of age in accordance with the Pakistani Labour Laws and Employment of Child Act (1977).
	Gender-Based Violence	The contractor shall: • Train the workers regarding (Gender-Based Violence GBV) and also train workers about sexual harassment, child abuse, human trafficking for reducing the risk of GBV. • The contractor will also raise awareness among workers regarding coordination with local law enforcement and the code of conduct.

Project Activity/ Impact Source	Environmental Impacts	Mitigation Measures/ Management Guidelines
Accidents	Lack of first aid facilities and health care facilities in the immediate vicinity will aggravate the health conditions of the victims	• The contractor will arrange first aid facilities at the site. A trained first-aider should be present at the site and arrangements made with a local doctor to be available on call. Appropriately equipped first-aid stations should be easily accessible throughout the place of work • Contact numbers and location of the nearest healthcare/emergency center should be displayed at the worksite. • Document and report occupational accidents, diseases, and incidents. • Prevent accidents, injury, and disease arising from, associated with, or occurring in the course of work by minimizing, so far as reasonably practicable, the causes of hazards. In a manner consistent with good international industry practice. • Identify potential hazards to workers, particularly those that may be life-threatening and provide necessary preventive and protective measures. • Provide awareness to the construction drivers to strictly follow the driving rules • Provide adequate lighting in the construction area and along the roads

Annex 2: E-Waste Management Procedure

- Dismantling of any previously installed ICT equipment to follow the proper dismantling procedure available with the IT staff of the health facility.
- Collect and store E-waste in the designated storage area.
- Secure dismantling and storage areas with tape or signs allowing everyone to stay away. No unauthorized entry in storage area.
- Daily cleaning and clearing of the dismantling sites are desirable.
- No stacking of dismantled equipment beyond 3 feet height.
- No open dumping or storage of waste. Identify storage area with markings for storing useful and discarded materials separately, within these 2 areas provide space for different types of materials and mark accordingly). Identify equipment that can be repaired/refurbished and reused to extend its useful life thus minimizing the e-waste.
- Provide container/box for collecting and storing different types of wastes. The waste containers should be labeled as a type of waste.
- Develop inventories of dismantled equipment and E-waste generated.
- Under no circumstances shall the workers dispose of any material in environmentally sensitive areas.
- All wastes having economic value produced by SIHPP have to be handed over to waste/scrap dealers through auction.
- Create awareness among people engaged in E-waste recycling/ disposal business.
- Develop guidelines and make them part of the contract with scrap purchasers to ensure safe disposal of E-waste.
- Purchaser of scrap (E-waste) to follow specific guidelines on E-waste recycling and disposal.
- The workers involved in the management of E-waste should use proper PPEs and the project team needs to provide them awareness regarding collection and disposal of E-waste.
- Continuous liaison with the Sindh Environmental Protection Agency.
- Follow E-waste National and Provincial legislations.

Annex 3: Incident/ Accident Reporting Format

B1: Incident Details			
Date of Incident:	**Time:**	**Date Reported to PMU:**	**Date Reported to WB:**
Reported to PMU by:	**Reported to WB by**:	**Notification Type**: Email/'phone call/media notice/other	
Trading Name of Main Contractor:		**Trading Name of Subcontractor**:	

B2: Type of incident (please check all that apply)[1]

Fatality ☐ Lost Time Injury ☐ Displacement Without Due Process ☐ Child Labor ☐ Acts of Violence/Protest ☐ Disease Outbreaks ☐ Forced Labor ☐ Unexpected impacts on heritage resources ☐ Unexpected impacts on biodiversity resources ☐ Environmental pollution incident ☐ Dam failure ☐ Other ☐

B3: Description/Narrative of Incident

Please replace text in italics with brief description, noting for example:

I. *What is the incident?*
II. *What were the conditions or circumstances under which the incident occurred (if known)?*
III. *Are the basic facts of the incident clear and uncontested, or are there conflicting versions? What are those versions?*
IV. *Is the incident still ongoing or is it contained?*
V. *Have any relevant authorities been informed?*

B4: Actions taken to contain the incident

Short Description of Action	Responsible Party	Expected Date	Status

For incidents involving a contractor:
Have the works been suspended (*for example, under Contract GCC7.6 or GCC8.9 of Works*)? Yes ☐**;** No ☐**; Please attach a copy of the instruction suspending the works.**

B5: What support has been provided to affected people?

C1: Investigation Findings

Please replace text in italics with findings, noting for example:

I. *where and when the incident took place*
II. *who was involved, and how many people/households were affected*
III. *what happened and what conditions and actions influenced the incident*
IV. *what were the expected working procedures and were they followed*
V. *did the organization or arrangement of the work influence the incident*
VI. *were there adequate training/competent persons for the job, and was necessary and suitable equipment available*
VII. *what were the underlying causes; where there any absent risk control measures or any system failures*

C2: Corrective Actions from the investigation to be implemented (to be fully described in Corrective Action Plan)

Action	Responsible Party	Expected Date

C3a: Fatality/Lost time Injury information

Cause of fatality/injury for worker or member of the public (please check all that apply):

1. Caught in or between objects ☐ 2. Struck by falling objects ☐ 3. Stepping on, striking against, or struck by objects ☐
4. Drowning ☐ 5. Chemical, biochemical, material exposure ☐ 6. Falls, trips, slips ☐ 7. Fire & explosion ☐
8. Electrocution ☐ 9. Homicide ☐ 10. Medical Issue ☐ 11. Suicide ☐ 12. Others ☐
***Vehicle Traffic:* 13. Project Vehicle Work Travel ☐ 14. Non-project Vehicle Work Travel ☐ 15. Project Vehicle Commuting ☐**
16. Non-project Vehicle Commuting ☐ 17.Vehicle Traffic Accident (Members of Public Only) ☐

Name	Age/DOB	Date of Death/Injury	Gender	Nationality	Cause of Fatality/Injury	Worker (Employer)/Public

C3b: Financial Support/Compensation Types (To be fully described in Corrective Action Plan template)

1. Contractor Direct ☐ 2. Contractor Insurance ☐ 3. Workman's Compensation/National Insurance ☐
4. Court Determined Judicial Process ☐ 5. Other ☐ 6. No Compensation Required ☐

Name	Compensation Type	Amount (US$)	Responsible Party

C4: Supplementary Narrative

Annex 4: Chance Find Procedure

Chance Find Procedures Project may involve excavations. Therefore, the possibility of chance find is not ignorable. In case of any chance find, the contractor will immediately report through Supervision Consultant to DG Directorate General of Archaeology, Sindh and Project Director PMU SIHP, to take further suitable action to preserve those antique or sensitive remains. Representative of the Director will visit the site and observe the significance of the antique, artefact and Cultural (religious) properties and significance of the project. The report will be prepared by representative and will be given to the Director. The documentation will be completed and if required suitable action will be taken to preserve those antiques and sensitive remains. In case any artefact, antiques and sensitive remains are discovered, chance find procedures should be adopted by contractor workers as follows:

- Stop the construction activities in the areas of chance find.
- After stopping work, the contractor must immediately report the discovery to the Supervision Consultant.
- The Director decides to take over the antiquity for purposes of custody, preservation and protection, the person discovering or finding it shall hand it over to the Director or a person authorized by him in writing.
- Delineate the discovered site or area.
- Consult with the local community and provincial Archaeological Department.
- The Director shall, constitute a team of archaeologists for undertaking preliminary investigation and will decide about further course of action in light of findings of the team.
- The suggestion of the local communities and the concerned authorities will be suitably incorporated during taking the preventive measures to conserve the antique, artefact and cultural (religious) properties; and Secure the site to prevent any damage or loss of removable objects. In case of removable antiquities or sensitive remain, a night guard shall be arranged until the responsible local authorities take over.
- Avoid the use of heavy construction machinery during the excavation process.
- The Contractor staff must have relevant qualification and experience of similar projects.
- Plaster and Painting Works: New Plaster, painting walls and other roof treatment should consider the original color scheme, layout and design to keep the aesthetic and visual impact of the site. Operational Phase: The authority responsible for the O & M of sub project activities will be responsible for housekeeping of the facilities and shall prepare and adopt SOPs for O & M of the subproject facilities. E&S experts/specialists will ensure that O&M plan is operationalized and will do monitoring visits for compliance of O & M plans.
- Training and Capacity Building: The civil work activities shall be carried out by Pre-qualified trained Contractor under supervision of technical staff. The Contractors shall contain team of skilled labors having past experience in similar works. Trainings of the work force should be conducted before start of civil works and during project implementation by the PMU safeguards specialists and Contractor's.
- Monitoring and Supervision: Strict Monitoring and supervision as per monitoring plan given in ESMP should be enforced during works.
- GRM: The record of any complaints as per GRM mechanism of the project should be implemented.

Annex 5: Workers' Code of Conduct

I, _____, acknowledge that that adhering to environmental, social, health and safety (ESHS) standards, following the project's environmental, social, health and safety (OHS) requirements, preventing GBV/SEA/SH and child abuse/exploitation is important. Any activity, which constitutes acts of gross misconduct is therefore grounds for sanctions, penalties, or even termination of employment. All forms of misconduct are unacceptable be it on the work site, the work site surroundings, or at worker's camps. Prosecution of those who commit any such misconduct will be pursued as appropriate. I agree that while working on this project, I will:

1. Consent to a security background check;
2. Treat women, children (persons under the age of 18), project staff including other workers, and persons with disability with respect regardless of race, color, language, religion, political or other opinions, national, ethnic, or social origin, property, birth, or another status;
3. Not use language or behavior towards men, women, or children/learners that are inappropriate, harassing, abusive, sexually provocative, demeaning, or culturally inappropriate;
4. Carry out his/her duties competently and diligently;
5. Comply with all applicable national/provincial laws, regulations, and World Bank requirements
6. Comply with the CESMP as approved by the Client to meets its ESHS and OHS objectives as well as preventing and/or mitigating the risks of GBV
7. Maintain a safe working environment including but not limited to:
    a. Ensuring that workplaces, machinery, equipment, and processes under each person's control are safe and without risk to health, preventing avoidable accidents, and reporting conditions or practices that pose a safety hazard or threaten the environment
    b. Wearing required personal protective equipment;
    c. Using appropriate measures relating to chemical, physical and biological substances, and agents; and
    d. Following applicable emergency operating procedures.
8. Not engage in any form of sexual harassment including unwelcome sexual advances, requests for sexual favors, and other unwanted verbal or physical conduct of a sexual nature at work site, the work site surroundings/nearby communities, or at worker's camps
9. Not participate in sexual activity with children/learners—including grooming or online grooming. Mistaken belief regarding the age of a child and consent from the child is not a defense;
10. Not exchange money, employment, goods, or services for sex, with community members including sexual favors or other forms of humiliating, degrading, or exploitative behavior;
11. Refrain from all forms of GBV, are unacceptable, regardless of whether they take place on the work site, the work site surroundings, at worker's camps or within the local community.
12. Attend training related to HIV and AIDS, SEA/SH, occupational health, and any other relevant courses/Trainings as a part of this project;
13. Report to the relevant committee any situation where I may have concerns or suspicions regarding acts of misconduct by a fellow worker, whether in my company or not, or any breaches of this code of conduct provided it is done in good faith;
14. Regarding children (under the age of 18):
    a. Refrain from hiring children for labor, which is inappropriate given their age, or developmental stage, which interferes with their time available for education and recreational activities, or which places them at significant risk of injury.
    b. Bring to the attention of my manager the presence of any children on the construction site or engaged in hazardous activities.
    c. Comply with all relevant local legislation including labor laws and World Bank requirements in relation to child labor and forced labor.

15. Refrain from any form of theft for assets and facilities including from surrounding communities.
16. Remain in the designated working area during working hours;
17. Refrain from possession of alcohol and illegal drugs and other controlled substances in the workplace and being under the influence of these substances on the job and during workings hours;
18. Follow prescribed environmental occupation health and safety standards;
19. Channel grievances through the established grievance redress mechanism.

I do hereby acknowledge that I have read the foregoing Code of Conduct, do agree to comply with the standards contained therein and understand my roles and responsibilities to prevent and respond to ESHS, OHS, and GBV issues. I understand that any action inconsistent with this Code of Conduct or failure to act mandated by this Code of Conduct may result in disciplinary action which could include:

1. Informal warning.
2. Formal warning.
3. Additional Training.
4. Loss of up to one week's salary.
5. Suspension of employment (without payment of salary), for a minimum period of 1 month up to a maximum of 6 months.
6. Termination of employment.
7. Report to the Police if warranted.

Signed by: _____

Signature: _____

Date: _____

For the Employer/Contractor

Signed by: _____

Signature: _____

Date: _____

Annex 6: Healthcare Waste Management Plan

The following outline will be followed to prepare health care waste management plan.

1. Introduction
2. Types of health care Waste
   - 1.1 General waste
   - 1.2 Pathological waste
   - 1.3 Sharps
   - 1.4 Infectious waste
   - 1.5 Chemical waste
   - 1.6 Radio waste
3. Potential Impacts and Mitigation Measures
4. Health Care waste Management Plan
   - 4.1 Waste Generation
   - 4.2 Waste Segregation
   - 4.3 Waste collection and Transportation
   - 4.4 Waste storage and Safety
   - 4.5 Waste disposal
5. Implementation Arrangements
6. Monitoring Plan
7. Training and Capacity Building
8. Documentation and Reporting
   - 8.1 Facility Level Documentation and Reporting
   - 8.2 District Level Documentation and Reporting
   - 8.3 Provincial Level Documentation and Reporting
9. Health Care Waste Management Plan Disclosure
10. Estimated Budget for Implementation

Annex 7: E & S Screening Checklist

A: General Information

1	Project Location (District, Taluka, Deh, Goth)	
2	Project Activities	
3	Proposed Date of Commencement of Work	
4	Important geographic / topographic feature (if any)	
5	Important biological feature (if any)	

B: Environmental Issues

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
1	Will the subproject involve significant land disturbance or site clearance?						
2	Will the subproject require the setting up of ancillary facilities?						
3	Will the subproject require large amount of raw material or construction materials, energy and/or water?						
4	Will the subproject generate large amounts of residual wastes, construction material waste?						
5	Is the sub-project expected to result in soil erosion?						
6	Is the sub project expected to create borrow pits for construction material?						
7	Will the subproject result in potential soil or water contamination (e.g., from oil,						

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
	grease and fuel from equipment yards)?						
8	Will the subproject involve the storage, handling or transport of hazardous substances?						
9	Will the sub project disturb the ambient air quality and/or increase the level of harmful air emissions (due to generation of dust from construction activity, vehicular/ machinery exhaust emissions, etc.)						
10	Will the subproject increase ambient noise levels?						
11	Are there any protected areas on or around the locations which could be affected by the project?						
12	Will there be any adverse impact on the flora due to project activities?						
13	Will there be any adverse impact on the fauna due to project activities?						

C: Social Issues

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
1	Will there be any social conflicts arising from the interaction of laborers with locals, particularly by the induction of outside labor and establishment of construction camps (if any)?						

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
2	Will there be a risk of using Child and forced labor in subproject activities?						
3	Will the subproject result in an increase in noise levels, vibrations and a decline in ambient air quality due to the operation of construction machinery/vehicles? In particular on the nearby community or sensitive receptors (mosque, temple, church, graveyard, hospital, school/college/university), if any?						
4	Risks related to Occupational Health and Safety (OHS) caused due to construction and rehabilitation activities, generation of waste (hazardous and non-hazardous) and spread of diseases such as waterborne, vector-borne, communicable infections (HIV/STDs), during subproject implementation and operation.						
5	Risks related to community health and safety due to the transport, storage and/or disposal of hazardous, nonhazardous or dangerous materials (such as fuels and other chemicals, construction waste, and health care waste) and spread of						

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
	diseases during construction, rehabilitation and operation?						
6	Risks of Sexual Exploitation and Abuse (SEA), Sexual Harassment (SH) and Violence Against the Children (VAC) during subproject implementation and operation?						
7	Risk of increase in traffic and pedestrian safety due to the construction vehicle movement, particularly near sensitive receptors.						
8	Will there be land acquisition? If yes, is the site for land acquisition and ownership status and current usage of land to be acquired known?						
9	Will there be a loss of shelter and the residential land due to the land acquisition or clearance of the existing site?						
10	Are any informal settlers or flood-affected persons present on the subproject site where construction and rehabilitation activities will be carried out?						
11	Has there been any Anti-Encroachment Drive to forcefully evict/move people at the site where						

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
	the works are planned to be carried out?						
12	Will there be a loss of agricultural land, crops, trees and fixed assets due to land acquisition?						
13	Will people lose access to natural resources, communal facilities and services due to involuntary land use restrictions or access to legally designated parks/protected areas?						
14	Any estimate of the likely number of persons that will be affected by the subproject? If yes, approximately how many? Are any of them falling into disadvantaged/vulnerable groups such as Female/child headed households, Internally Displaced Persons (IDPs), Refugees, Ethnic and religious minorities, Persons with disabilities, Transgender communities, Senior citizens, or Economically marginalized groups)?						
15	Have there been any past security related issues at the subproject site?						
16	Has stakeholder engagement taken place with relevant stakeholders (Provincial/District						

Sr. No	Issues	No/Yes	Risk Level				Remarks/Mitigation Measures
			Low	Moderate	Substantial	High	
	level Government Departments/Communities/NGOs/ CSOs) for the proposed subproject?						
17	Is the proposed subproject being implemented in an area with natural hazard risk? (e.g., floods, earthquakes, cyclones etc.).						
18	Will there be any impact on women that may hinder their mobility during reconstruction and rehabilitation activities?						
19	Will the proposed subproject potentially involve shifting of public utilities?						
20	Are any indigenous peoples (as per World Bank ESS7) present in the subproject area?						
21	Will the construction and rehabilitation activities cause socio-cultural issues and damage to any cultural heritage site?						

No Objection Certificate (NOC)	
Sindh Environmental Protection Agency (SEPA) NOC / Environmental Approval Required	[ ] Yes [ ] No, if Yes, select the required study from below
Type of Environmental and Social Study	EIA [ ], IEE [ ], Environmental Checklist [ ]
Any other NOC from Government of Sindh (GoS)/ Government of Pakistan (GoP) Required	[ ] Yes, [ ] No, if Yes, please specify
For World Bank Approval	
Further assessment required	[ ] Yes [ ] No, if Yes, select the required study from below
Type of Environmental and Social Assessment	ESIA [ ],ESMP [ ], E&S Checklist shall suffice [ ], RAP [ ], PCRMP [ ], Water Balance Study [ ], GHG Estimation [ ], BAP [ ], E&S Audit [ ]

Conducted by:

Name:_____Designation:_____Signature:_____Date:___

Reviewed and Approved by:

Name:_____Designation:_____Signature:_____Date:_____

E&S Screening Checklist for Vehicles (Ambulances/Mobile Clinic/Mobile Medical Laboratory)

Project Name: Sindh Integrated Health & Population Program

Sr. No.	E&S Risks & Issues	Yes	No	Remarks/Mitigation Measures
1	Will the vehicle be environmentally friendly and operates with high fuel efficiency?			
2	Will non-slippery flooring surfaces /materials inside the vehicle be available?			
3	Will the proper partition be provided in the vehicle between the driver cabin and patient compartment to ensure privacy, particularly for female patients?			
4	Will there provision for electrical safety measures in the vehicle?			
5	Will there provision for Noise Abatement in the vehicle?			
6	Will the vehicle incorporate measures which will be helpful to reduce emissions?			
7	Will there provision for fire extinguisher in the vehicle?			
8	Will there provision of autoload stretcher with base in the vehicle with safety policy?			
9	Will there provision of safety features (mirror hammer, power-assisted steering system, efficient braking system, fog lamps, tool kit, basic PPEs, airbags, seat belts, backup cameras, metallic safeguard on front and back bumpers) in the vehicle ?			
10	Will there provision of roof and side lights, megaphones, emergency siren, front and reverse hornand indication stickers/ tapes in the vehicle?			
11	Will there provision for healthcare waste storage in the vehicle?			
12	Will First Aid Kit be available in designed vehicle?			
13	Is there provision of oxygen Kit in the designed vehicle?			
14	Will there provision of ample storage space for medical equipment and supplies in the vehicle?			
15	Will there be provision of portable ventilator in the			

Sr. No.	E&S Risks & Issues	Yes	No	Remarks/Mitigation Measures
	designed Vehicle?			
16	Will there be provision of disinfection system in the vehicle?			
17	Will there provision of fridge for storing medicines/samples in designed vehicle?			
18	Will there be any manufacturer instructions and applicable regulations for the vehicle?			
19	Will the vehicle have a valid guarantee/warranty from the manufacturer?			
21	Will the vehicle equip with 4x4 gear option?			
22	Will the procurement of these vehicles result in the disposal/ scraping of existing ambulances/ vehicles?			
23	Will the procurement of vehicle create any parking space issue in the health facility?			
24	Will the proper washing and cleaning arrangements available for the vehicle in the facility?			
25	Will the proper arrangement available in the facility to dispose health care waste from the vehicle?			
26	Will the sufficient trained drivers (with valid license) available to drive the vehicles?			

Conducted by:

Name:_____**Designation:**_____**Signature:**_____**Date**:_____

Reviewed and Approved by:

Name:_____**Designation:**_____**Signature:**_____**Date**:_____

Annex 8: Template of ESMP

ABBREVIATIONS AND GLOSSARY

Executive Summary
concisely discusses significant findings and recommended actions including summary Table of ESMP.

1. Introduction

1.1 Overview

1.2 Background of the project

1.3 Objective of ESMP

1.4 Approach to work

1.5 Project Impact Area and Corridor of Influence

1.6 Composition of study team

2. Legal and administrative framework

2.1 GoP/ Sindh requirements (legislation; guidelines and rules; policies; international treaties signed by Pakistan; national and provincial authorities; environmental procedures), their applicability, and compliance status for the Project.

2.2 World Bank requirements (ESF and ESS; and WBG Environmental Health and Safety guidelines) and their relevancy and compliance status for the Project.

3. Project description

3.1 Need and purpose of project

3.2 Project location

3.3 Salient features

3.4 The project description that includes a technical description and schedule of the planned development stages, typically:

- Layout, equipment details
- Details of project components
- Construction activities
- O&M activities
- OHS system and practices

3.5 The project description should include details of both the construction stages and the operation mode of the subproject.

3.6 Construction machinery, materials and other supplies (including estimated numbers/quantities)

3.7 Waste generation and disposal (including estimated quantities)

3.8 Manpower requirements

3.9 Operation and maintenance (supplies; waste generation and management; manpower requirements; others).

4. Baseline description/analysis

4.1 Brief description of the area of influence and environmental and social baseline conditions derived from ESIA.

4.2 Identification of environmental and social hotspots based on the baseline analysis.

5. Public Consultation and Information Disclosure

5.1 Scoping sessions

5.2 Focused group discussions

5.3 Public consultations

5.4 Information disclosure

6. Assessment of Potential Adverse Environmental and Social Impacts

6.1 Methods and techniques used in assessing and analyzing the environmental and social impacts of the proposed sub-project.

6.2 Discussion of the potentially significant adverse environmental and social impacts of the proposed sub-project.

7. Environmental and Social Management Plan (ESMP)

The plan will include the measures to mitigate the adverse social impacts and to enhance project benefits through modifying the project design. This can include but not limited to the following:

7.1 Mitigation
7.1.1 Measures to enhance benefits and positive impacts.
7.1.2 Measures to mitigate negative impacts.
7.1.3 Arrangements for managing potential social risks.
7.1.4 Suggestions to improve the project design.
7.2 Institutional Arrangement including roles and responsibilities and capacity available.
7.3 Gender and Vulnerability Management plan
7.4 Labour influx management plan
7.5 SEA/SH Action Plan
7.6 Consultation and Information Disclosure Plan in project implementation and operation.
7.7 Health and Safety Plan
7.8 Monitoring Plan including documentation and reporting
7.9 Project level grievance redress mechanism.
7.10 ESMP Cost Estimates.

Annex 9: List of Stakeholder Engagement

Consultations with communities					
#	**Name of the district**	**Name of community**	**Number of participants**	**Tehsil**	**Date of consultations**
1.	Hyderabad	Memon	8	Qasimabad	13th Oct 2022
2.	Thatta	Sherazi	6	Makli	14th Oct 2022
3.	Jamshoro	Shoro	7	Kotri	15th Oct 2022
4.	Larkana	Bhutto	9	Nodero	17th Oct 2022
5.	Karachi East	Bhori	15	Gulshan	20th Oct 2022
6.	Jamshoro	Palari, Esrani and Khaskeli	3	Thano Bola Khan	12th June 2023
7.	Sujawal	Jat. Malah	7	Jati	14th June 2023
8.	Dadu	Jamali, Leghari	5	Johi	12th June 2023
9.	Kamber	Chandio, Soho and Bhatti	4	Warah	13th June 2023
10.	Tharparkar	Rahimoon, Samejo	5	Chachro	15th June 2023
11.	Nasuhero Feroze	Rajpar, Solangi	5	Kandiaro	17th June 2023

Consultations with Stakeholders			
	Designation	**Department**	**Date of consultations**
12.	(Epidemiologist) Covid Provincial Focal Person	Health Department	13th Jan 2023
13.	Deputy Director	Health Department	14th Jan 2023
14.	Deputy Director Monitoring and evaluation	Health Department	15th Jan 2023
15.	Deputy Director	Department of Environment protection agency (Provincial head office)	17th Jan 2023
16.	Director	Sindh Healthcare Commission	13th Jan 2023
17.	Data Analyst	Health Department	14th Jan 2023
18.	District health officer Hyderabad	Health department	15th Jan 2023
19.	District health officer Karachi Malir	Health department	17th Jan 2023
20.	District Manager SRSO	NGO	15th Jan 2023

Consultation with Stakeholders and Communities of 40 BHUs				
	Stakeholder interviewed/ consulted	**No. of Participants**		**Date of consultations**
		Male	**Female**	
21.	30 BHUs, consultation with Facilities In charge MO, FMO, LHW, and Local Communities, Elder, Local Landowners, Social Organizers, Teachers and Disabled Persons	12 males each BHUs *360	7 females each BHUs *210	07-08-2023 to 12-08-2023
22.	10 BHUs, consultation with Facilities In-charge MO, FMO, LHW, and Local Communities, Elder, Local Land Owners, Social Organizers, Teachers, Disable Persons and Trans genders.	10 males each BHUs*100	7 females each BHUs*70	17-08-2023