

**INTEGRATED SAFEGUARDS DATA SHEET
APPRAISAL STAGE**

Report No.: ISDSA13476

Date ISDS Prepared/Updated: 13-May-2015

Date ISDS Approved/Disclosed: 10-Apr-2015, 13-May-2015

I. BASIC INFORMATION

1. Basic Project Data

Country:	Nicaragua	Project ID:	P152136
Project Name:	Nicaragua Strengthening the Public Health Care System (P152136)		
Task Team Leader(s):	Amparo Elena Gordillo-Tobar		
Estimated Appraisal Date:	13-Apr-2015	Estimated Board Date:	04-Jun-2015
Managing Unit:	GHNDR	Lending Instrument:	Investment Project Financing
Sector(s):	Health (100%)		
Theme(s):	Child health (10%), Health system performance (40%), Injuries and non-communicable diseases (40%), Population and reproductive health (10%)		
Is this project processed under OP 8.50 (Emergency Recovery) or OP 8.00 (Rapid Response to Crises and Emergencies)?			No
Financing (In USD Million)			
Total Project Cost:	60.00	Total Bank Financing:	60.00
Financing Gap:	0.00		
Financing Source			Amount
BORROWER/RECIPIENT			0.00
IDA Grant			60.00
Total			60.00
Environmental Category:	B - Partial Assessment		
Is this a Repeater project?	No		

2. Project Development Objective(s)

The Project Development Objectives (PDO) are to: (a) strengthen quality and access to health services; (b) contribute to adapting the public health system to the country's changing epidemiological profile; and (c) secure financial support in case of Public Health Alert or Public Health Emergency.

3. Project Description

This ISDS was originally disclosed on April 10, 2015. It is being revised to reflect changes following Project Appraisal.

Component 1: Strengthening the quality and access to health care services (US\$25.9 million). This component seeks to strengthen the quality and supply of the public health care services delivered nationwide through the following subcomponents: Subcomponent 1.1 Improvement of quality health care services in selected municipalities; and (b) Subcomponent 1.2 Strengthening and expanding the provision of basic health care services.

Component 2. Institutional Strengthening of MOH to respond to the country's changing epidemiological profile (US\$25.4 million). The purpose of this component is to contribute to adapting the public health system to the country's changing epidemiological profile. It consists of two sub-components supporting interventions to address the increased mortality and morbidity caused by chronic diseases and traumas, as follows: (a) Subcomponent 2.1 Strengthening the MOH capacity to prevent and respond to chronic diseases; and (b) Subcomponent 2.2 Strengthening the MOH capacity to prevent and respond to trauma injury cases.

Component 3. Contingency Financing of a Public Health Emergency or Public Health Alert and Capacity Building (US\$7.9 million). This component will provide funding to prevent and respond to a public health alert or a public health emergency. It also includes funding to prevent and control outbreaks, epidemics, and other potential risk factors involving the handling of general and medical waste. It has three subcomponents: (a) Sub-component 3.1 Provision of Contingency Financing in the case of an eligible Public Health Alert or a Public Health Emergency; (b) Sub-component 3.2 Strengthening Entomological Surveillance and Raising Awareness of Vector-Borne Diseases; and (c) Sub-component 3.3 Strengthening Hospital Waste Management in Selected Hospitals.

Component 4. Project Management (US\$0.73 million). This Component is financing the Strengthening of the Ministry of Health capacity to manage Project implementation and to fund the annual financial external audits.

4. Project location and salient physical characteristics relevant to the safeguard analysis (if known)

The institutional strengthening of MoH in components 2 and 3 is national in scope, including some indigenous territories in the RAAN (Región Autónoma del Atlántico Norte). The strengthening of access and improvement of the quality of preventive, promotional and curative health care services among poor and vulnerable populations in 66 municipalities in 10 selected Local SILAIS in component 1 as well as the strengthening of comprehensive health care for adolescents and young people in municipalities of prioritized SILAIS in component 2.1 (a) will particularly benefit the indigenous and ethnic communities present in those areas. As part of the Improving the Community and Family Health Care Services Project (P106870 and AF) the MoH had adapted the standard set of basic health and nutrition services as defined under the Community and Family Health Model (MOSAFC) to ensure that they are culturally appropriate to these communities, based on a study that described the traditional health practices and customs and how these could be integrated in the public health systems.

The project is not expecting the construction of new infrastructure that could affect the physical environment in sensitive or critical areas.

5. Environmental and Social Safeguards Specialists

Marco Antonio Zambrano Chavez (GENDR)

Peter F. B. A. Lafere (GSURR)

6. Safeguard Policies	Triggered?	Explanation (Optional)
Environmental Assessment OP/BP 4.01	Yes	<p>This policy is triggered because the Project will support minor pre-installment works for the medical and non-medical equipment to be purchased by the Project. These potential negative impacts are not significant and the mitigation measures are easy to know and to implement. Additionally, some activities during the operation will produce negative environmental and social impacts that should be prevented and mitigated. In this regards the project was classified as Category B according with the OP/BP 4.01</p> <p>An Environmental Management Framework (EMF) was prepared for the Improving Community and Family Quality Health Care Services Project (P106870). An Environmental Management Plan was prepared on March 6, 2015 and was disclosed in-country and in the World Bank's external website on April 10, 2015.</p> <p>Six Hospitals Dangerous Waste Management Plans (HDWMP) will be implemented in the new Project. These instruments will be disclosed as available according with the Bank's policy. These Plans will include the WBG EHS Guidelines for Medical Facilities; and procedure to manage radioactive waste associated to the medical equipment to be acquired under the project.</p> <p>Finally, the capacity building effort includes comprehensive occupational health and safety training, including exposure to diseases, medical waste and the use of certain equipment with radiation.</p>
Natural Habitats OP/BP 4.04	No	This policy is not triggered given that the project's interventions are not located within or in the proximity of natural habitats; hence no conversion or degradation of natural habitats is expected.
Forests OP/BP 4.36	No	This policy is not triggered since the project activities are not expected to impact forested areas, forest dependent communities or involve changes in management of forests.
Pest Management OP 4.09	No	This policy is not triggered given that the project's activities do not include the use of pesticide.

Physical Cultural Resources OP/BP 4.11	No	This policy is not triggered given that the projects activities do not affect any physical or cultural resources.
Indigenous Peoples OP/ BP 4.10	Yes	There are indigenous peoples as defined by the policy present in the Project area. For nine of the ten SILAIS, the activities in component 1 are a continuation of the activities in the on-going Nicaragua Community and Family Health Care Project (P106870) for which the IPP was consulted, disclosed and implemented. The IPP has been reviewed, updated, consulted and redisclosed to include the additional SILAI and ensure that there is continued broad community support for this project in the nine original SILAIS. The IPP ensures that the indigenous communities in the territories of Alto Wangki and Bocay also broadly supported by the project activities. The IPP has also been consulted at national level to ensure that the measures related to Maternal, Adolescent, Child and Reproductive Care take into account the cultural practices of Indigenous Groups. The IPP was disclosed prior to Project Appraisal on April 10, 2015.
Involuntary Resettlement OP/BP 4.12	No	This policy should not be triggered given that the project will focus on strengthening the access and improving the quality of health care services. The project will, however, finance minor pre-installment works for medical and non-medical equipment, for which no land acquisition will be required and for which no impacts covered under OP 4.12 are expected.
Safety of Dams OP/BP 4.37	No	This policy is not triggered given that the project will not support the construction or rehabilitation of dams.
Projects on International Waterways OP/BP 7.50	No	This policy is not triggered given that the project will not affect international waterways as defined under the policy.
Projects in Disputed Areas OP/BP 7.60	No	This policy is not triggered given that the project will not affect disputed areas as defined under the policy.

II. Key Safeguard Policy Issues and Their Management

A. Summary of Key Safeguard Issues

<p>1. Describe any safeguard issues and impacts associated with the proposed project. Identify and describe any potential large scale, significant and/or irreversible impacts:</p> <p>OP/BP 4.10 on Indigenous Peoples is triggered. There are indigenous peoples as defined by the policy present in the Project area. When preparing the Nicaragua Community and Family Health Care Project (P106870) currently under implementation, an Indigenous Peoples Framework and Indigenous Peoples Plan were prepared, consulted and disclosed. The implementation of the IPPF and IPP are being managed by the Directorate of Health, who is in charge of ensuring proper provision of health services (including compliance with safeguards and user satisfaction), and supervised by the National Coordination of Indigenous Peoples and Traditional Medicine (as part of the Ministry of Health). Among the activities implemented, two documents were prepared which are key for the effective implementation of the IPP. These are the "Diagnosis of traditional</p>
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ancestral medicine and the link among health systems" and the "Guide of articulation between the western and traditional ancestral health systems". These products have been reflected in the updated version of the IPP. The country is moving towards the integration of traditional ancestral medicine with the western health systems. The documents are in compliance with the requirements of the social assessment and indigenous plans under the World Bank Indigenous Peoples Policy (OP/BP 4.10). The Indigenous Peoples Plan for the Nicaragua Community and Family Health Care Project (P106870) is currently under implementation. Consultations and activities undertaken during Project implementation in response to indigenous peoples could be shared as models with other countries. In addition the Government has recently inaugurated the Institute for Alternative Therapy in Managua, and the first training session for health personnel was held in January 2015.

For nine of the ten SILAIS in the new Project, the activities in component 1 are a continuation of the activities in the Community and Family Health Care Project (P106870) for which the IPP was consulted, disclosed and implemented. The IPP has been reviewed, updated, consulted and redisclosed to include the additional SILAI and ensure that there is continued broad community support for this project. There is a project-level grievance redress mechanism that ensures that complaints received are promptly reviewed in order to address Project-related concerns included in the Plan.

OP/BP 4.01 on Environmental Assessment is also triggered. There will be minor rehabilitation works in health care facilities or minor pre-installment works for the medical and non- medical equipment to be purchased by the Project. While the effects of these activities are localized, minor and reversible, they still, nonetheless, warrant certain care and the appropriate mitigation measures will be put in place through the Environmental Management Plan (EMP) dated March 6, 2015 which was published in the country and the World Bank's external website prior to Project Appraisal on April 10, 2015.

Finally, as part of this project, the MoH will develop 6 Hospital Dangerous Waste Management Plans in the main national hospitals in Managua. As mandated by law, there is a country-level grievance redress mechanism in every hospital that ensures that complaints received are promptly reviewed in order to address Project-related concerns included in the Plan. Finally, the capacity building effort includes comprehensive occupational health and safety training, including exposure to diseases, medical waste and the use of certain equipment with radiation.

2. Describe any potential indirect and/or long term impacts due to anticipated future activities in the project area:

Not applicable.

3. Describe any project alternatives (if relevant) considered to help avoid or minimize adverse impacts.

Not relevant

4. Describe measures taken by the borrower to address safeguard policy issues. Provide an assessment of borrower capacity to plan and implement the measures described.

When preparing the on-going Project (Nicaragua Community and Family Health Care Project - P106870) an Indigenous Peoples Framework and Indigenous Peoples Plan were prepared, consulted and disclosed. The implementation of the IPPF and IPP are being managed successfully by the Directorate of Health, and supervised by the National Coordination of Indigenous Peoples and Traditional Medicine (as part of the Ministry of Health). The proposed Project will benefit from the same managerial structure which will also implement the IPP activities of the new Project

as detailed in the Project Appraisal Document (available in the Project files).

The Nicaragua Community and Family Health Care Project (P106870) is also successfully implementing measures to address OP/BP 4.01. Based on this, an Environmental Action Plan has been prepared as indicated above. In addition, a Diagnosis of the handling of dangerous waste management was done in the main 6 Hospitals in Managua. Six Hospital Waste Management Plans (HWMP) are under preparation and will be implemented with the new Project. The plans will include the World Bank Environmental, Health and Safety Guidelines (EHS) for Medical Facilities; and procedure to manage radioactive waste associated to the medical equipment to be acquired under the project. Finally, the capacity building effort includes comprehensive occupational health and safety training, including exposure to diseases, medical waste and the use of certain equipment with radiation.

5. Identify the key stakeholders and describe the mechanisms for consultation and disclosure on safeguard policies, with an emphasis on potentially affected people.

Consultations and implementation of activities carried out under the on-going Project and the IPP update involve the following actors: (a) the Ministry of Health, (b) Ministry of Environment and Natural Resources; (c) the Institute of Natural Medicine and alternative Therapy, (d) the 10 SILAIS, (e) 11 Municipalities where indigenous people live, (f) indigenous representatives, (g) traditional medicine staff at all levels, (h) local universities, and non-governmental organizations. For details please refer to the IPP and EMP.

B. Disclosure Requirements

Environmental Assessment/Audit/Management Plan/Other	
Date of receipt by the Bank	06-Mar-2015
Date of submission to InfoShop	10-Apr-2015
For category A projects, date of distributing the Executive Summary of the EA to the Executive Directors	00000000
"In country" Disclosure	
Nicaragua	10-Apr-2015
<i>Comments:</i> http://www.minsa.gob.ni/index.php/repository/Descargas-MINSA/Direcci%C3%B3n-General-Vigilancia-de-la-Salud-P%C3%B3blica/Consulta-P%C3%B3blica-Ambiental/Marco-de-Gesti%C3%B3n-Ambiental/	
Indigenous Peoples Development Plan/Framework	
Date of receipt by the Bank	08-Apr-2015
Date of submission to InfoShop	10-Apr-2015
"In country" Disclosure	
Nicaragua	10-Apr-2015
<i>Comments:</i> https://www.minsa.gob.ni/index.php/repository/Descargas-MINSA/Columna-Derecha/Marco-de-planificaci%C3%B3n-para-pueblos-ind%C3%ADgenas-y-comunidades-%C3%A9tnicas/ https://www.minsa.gob.ni/index.php/repository/Descargas-MINSA/Columna-Derecha/Segunda-Parte-Plan-para-Pueblos-Ind%C3%ADgenas-y-Comunidades-%C3%89tnicas/	
If the project triggers the Pest Management and/or Physical Cultural Resources policies, the	

respective issues are to be addressed and disclosed as part of the Environmental Assessment/Audit/or EMP.
If in-country disclosure of any of the above documents is not expected, please explain why:

C. Compliance Monitoring Indicators at the Corporate Level

OP/BP/GP 4.01 - Environment Assessment	
Does the project require a stand-alone EA (including EMP) report?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
If yes, then did the Regional Environment Unit or Practice Manager (PM) review and approve the EA report?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
Are the cost and the accountabilities for the EMP incorporated in the credit/loan?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
OP/BP 4.10 - Indigenous Peoples	
Has a separate Indigenous Peoples Plan/Planning Framework (as appropriate) been prepared in consultation with affected Indigenous Peoples?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
If yes, then did the Regional unit responsible for safeguards or Practice Manager review the plan?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
If the whole project is designed to benefit IP, has the design been reviewed and approved by the Regional Social Development Unit or Practice Manager?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
The World Bank Policy on Disclosure of Information	
Have relevant safeguard policies documents been sent to the World Bank's Infoshop?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
Have relevant documents been disclosed in-country in a public place in a form and language that are understandable and accessible to project-affected groups and local NGOs?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
All Safeguard Policies	
Have satisfactory calendar, budget and clear institutional responsibilities been prepared for the implementation of measures related to safeguard policies?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
Have costs related to safeguard policy measures been included in the project cost?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
Does the Monitoring and Evaluation system of the project include the monitoring of safeguard impacts and measures related to safeguard policies?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]
Have satisfactory implementation arrangements been agreed with the borrower and the same been adequately reflected in the project legal documents?	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] NA [<input type="checkbox"/>]

III. APPROVALS

Task Team Leader(s):	Name: Amparo Elena Gordillo-Tobar
<i>Approved By</i>	

Practice Manager/ Manager:	Name: Daniel Dulitzky (PMGR)	Date: 13-May-2015
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