# Assam Secondary Healthcare Initiative for Service Delivery Transformation Project (P179337)

Labor Management Procedures (LMP)

January-February 2023

#### A. OVERVIEW OF LABOR USE ON THE PROJECT

The project will be implemented by the Assam Health Infrastructure Development and Management Society (AHIDMS) for coordination and implementation of externally aided projects in the health sector. Labour needs for the development of the ASSIST project will include the establishment of Project Management Unit (SPMU), consultants and firms to undertake professional services for the preparation, development and implementation of the technical components and contractors to undertake civil works.

The AHIDMS has been designated as the State Project Management Unit (SPMU). The SPMU will be headed by the Commissioner & Health Secretary, Department of Health and Family Welfare (DoHFW), GoA who will be designated as the Project Director.

### Type of Workers

The project is expected to involve Direct Workers, Contracted Workers, and Primary Suppliers.

**Direct Workers**: will comprise project staff hired by the AHIDMS and implementing agencies (NHM, DHS, DHS-FW and DME) as per requirement.

Contracted Workers: contracted workers will be employed as deemed appropriate by contractors and sub-contractors under the project as project activities involve construction, refurbishment and installation works. The civil work will be undertaken by the civil contractor/sub-contractor for revamping of infrastructure (minor civil works) in selected health facilities (about 25 facilities), civil works for upgradation of CHCs/SDHs to DH (up to 10 locations) (works) and infrastructure improvement in nursing institutions. Given the scale of civil works expected under the project, skilled, semi-skilled and unskilled workers will be hired by the contractors on a need basis/intermittently. For day-to-day operation of target district hospitals, contractual staff will also be engaged at the health facilities which may include doctors, nurses, paramedics, hygiene workers, technicians, etc.

**Primary Suppliers:** The project may require the use of primary suppliers for the equipment and materials needed for civil works. The primary supply worker related provisions of ESS2 would apply to those primary suppliers with whom the project will have a significant and ongoing relationship with. However, the relevance of primary supply workers will be known once the scope of the DPRs for the district hospitals is defined.

Where government civil servants are working in connection with the ASSIST project, whether full time or part time, they will remain subject to the terms and conditions of their existing public sector employment agreement or arrangement, unless there has been an effective legal transfer of their employment or engagement to the project. The project will invest in recruitment of a cadre of Hospital Managers for overall management and operations of targeted district hospitals. The project will finance operation of district hospitals for a period of two years. Health care

workers (such as Doctors, Nurses, Paramedics, Hygiene workers, Technicians, etc) may be hired at the targeted health facilities to bridge any gaps in human resources. They too will remain subject to the terms and conditions of their existing public sector employment agreement or arrangement. ESS2 will not apply to such workers, except for the provisions of Para 17 to 19 (Protecting the Work Force) and Para 24 to 30 (Occupational Health and Safety) under World Bank ESS-2 on Labor and Working Conditions.

#### **B. ASSESSMENT OF KEY POTENTIAL LABOR RISKS**

The labor risks of the project are mostly associated with the (a) repair, renovation and upgradation of district hospitals, nursing, and dental colleges. These risks comprise:

OHS risks of health care workers: The key occupational risk for the healthcare workers is due to exposure to pathogens in the workplace while carrying out treatment and diagnostic activities. The main activities being handling of sharps, care of infectious diseases cases and handling and disposal of infectious healthcare wastes generated during treatment. In addition, the other common OHS hazards and risks include sharps injuries, hazardous chemicals exposure e.g., Mercury, disinfectants etc., radiation exposure, ergonomic stress due to patient handling and material transfers and slip, trips and falls etc.

OHS Risks during construction works: The key OHS risks during construction works include injuries due to accidents arising out of poor work conditions and unsafe practices e.g., working at heights, fall into deep excavations, injuries due to heavy machinery impacts, transportation of materials and slip, trips and falls due to spills and poor housekeeping in workplaces etc. In addition, exposure to hazardous chemicals and gases e.g., diesel exhausts, silica dust, and paints, corrosives and solvents etc. may also happen. Safe work practices, usage of engineering controls e.g., exhaust ventilation, isolation of hazardous work areas and administrative controls (e.g., access control, barricading the dangerous areas and work permit systems etc.) are key measures required to be implemented at the sites. Monitoring of compliances, awareness raising and training on OHS also need to be provided to workers prior to commencement of work, consistent with the national/state laws and World Bank Health and Safety (EHS) Guidelines

Labor influx: The exact number of skilled, semi-skilled and unskilled laborers required for the construction works is not yet clear and can only be determined once the detailed design/DPRs are prepared. Preliminary assessment indicates that demand for skilled workforce is largely unmet locally and are thus brought in from outside the state. Whereas for small and unskilled work, labour is mobilized locally, and some labourers are anticipated from other districts of Assam. It is expected that priority will be to hire local labour; hence, risks associated with labour influx for this project are low-to-moderate. Labour influx may also pose infection risk from the community as well as to the community that also need to be managed through personal hygiene and workplace sanitation and hygienic practices during construction work.

Child & Forced labour: Based on expected project activities and the sector of work, the risk of child or forced labour is not significant. However, the project will put in place mitigation measures to prevent and prohibited child and forced labour in accordance with Indian laws. Workers below the age of 18 will not be hired to work in sub-projects. To confirm that workers are below the

age of 18 years, workers will need to provide legally recognized documents such as Aadhaar or Birth Certificate.

SEA/SH: Risks of SEA/SH may arise under three circumstances: (a) risks of SEA/SH to community members, particularly women and children by contractors' workers during construction period; (b) risks of workplace SH at all establishments by co-workers under the project; and (c) risks of SEA/SH to patients by healthcare workers at the health facilities. All employers including contractors will be required to ensure all workers (including those of sub-contractors) sign a code of conduct (CoC) to mitigate the risks of SEA/SH, and workers receive awareness training on SEA/SH relates issues. There are some risks associated with community health such as exposure of communities and beneficiaries to communicable diseases, and SEA/SH, however, these will be addressed through appropriate mitigation measures.

#### C. BRIEF OVERVIEW OF LABOR LEGISLATION: TERMS AND CONDITIONS

The guidance on the terms and conditions of employment/ engagement for all categories of workers is presented below:

Type of	Terms and Condition
Worker	
Direct Workers	The direct workers are governed by the employment terms and condition of existing norms, as defined by the SPMU in the Terms of Reference and Contracts of personnel hired from the market based. The project will ensure that all direct workers have clear contracts and conditions of work, including terms of employment, wages, and entitlements, working hours, leave and benefits, mechanisms for handling grievances based on requirements under ESS2 and national/state labour laws. <sup>1</sup>
Contracted workers	These will include (a) Construction and civil workers, their supervisors and managers hired by civil contractors; and (b) Consultancies hired for technical support such as infrastructure project management, pre-service education of nursing and dental, HRH, health care service and quality improvement and third-party verification of results, including baseline and end line surveys. These contracts will be governed by all ESS2 requirements and applicable labour and employment laws/regulations set out in their contracts.
Primary Supply Workers	The project will need procurement of equipment and materials from suppliers for civil works. The primary suppliers of construction material to the project will be oriented to ensure that they don't engage child, forced or

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<sup>&</sup>lt;sup>1</sup> The chapter on Legal and Policy Framework reviews all labour and employment laws relevant for this project. Further, central government recently enacted the four Labour Codes, namely, the Code on Wages, 2019; the Industrial Relations Code, 2020 (IR Code); the Code on Social Security, 2020 (SS Code) and the Occupational Safety, Health and Working Conditions Code, 2020 (OSH Code). The GoA has pre-published the draft Rules of the Codes, inviting comments of all stakeholders. Once comments are sought and the Rules finalized, it will be placed before the Cabinet for approval and then laid before the legislature for enactment. These codes will be applicable to this project once enacted.

	bonded labour and apply all measures to ensure workers safety, in line with provisions of ESS2.
Community Workers	The project is not expected to engage any community workers.

#### D. BRIEF OVERVIEW OF LABOR LEGISLATION: OCCUPATIONAL HEALTH AND SAFETY

The key occupational health and safety guidelines specific to dealing with construction workers is provided in the Building and Other Construction Workers (Regulation of Employment and Condition of Services) Central Rules, 1998 and the corresponding "Building and Other Construction Workers (Regulation of Employment and Conditions of Service) Assam Rules, 2007"<sup>2</sup>. Whereas occupational health and safety requirements for healthcare workers are embedded in Occupational Safety, Health and Working Conditions Code, 2020, an act of Central Government and Draft Notification on Occupational Safety Health & Working Conditions Assam Rules, 2022<sup>3</sup>.

#### **E. RESPONSIBLE STAFF**

The overall responsibility of LMP implementation rests with the SPMU- AHIDMS. The SPMU will also be supported by the environmental and social experts appointed by the Project Management Consultants (PMC). Both the SPMU and PMC will be responsible for the following:

- Ensure that civil works contractors comply with these labor management procedures, and also adhere to occupational health and safety measures.
- Ensure the responsibilities of the contractors are developed in line with the provisions of this LMP and the project's ESMF for OHS and certain environmental protection provisions e.g., hazardous and other wastes and emissions management.
- Monitor to verify that contractors are meeting labour and OHS obligations toward contracted (and sub-contracted) workers, including implementation of LMP.
- Monitor health facilities to ensure that all occupational health and safety provisions at construction facilities are being implemented e.g., PPE availability, immunization status of functionaries and safe work practices etc.
- Monitor incidents and accidents including SEA/SH injuries, illnesses, and accidental spills etc, Monitor and implement training on LMP and OHS for all project workers direct and contracted.
- Ensure that the grievance redress mechanism for the project is established and implemented and workers are informed of its purpose and how to use it.

<sup>2</sup>https://labourcommissioner.assam.gov.in/sites/default/files/swf\_utility\_folder/departments/coi\_labour\_uneecop\_scloud\_com\_oid\_14/menu/document/the\_building\_other\_construction\_workers\_assam\_rules.pdf

<sup>&</sup>lt;sup>3</sup> https://labourcommissioner.assam.gov.in/resource/draft-notification-on-occupational-safety-health-working-conditions-assam-rules-2022

- Have a system for regular monitoring and reporting on labor and occupational health and safety performance.
- Monitor implementation of the Code of Conduct applicable to all workers.

The Contractors for civil works will be responsible for the following:

- Complying with the requirements of the national and state legislations, labor management procedures, including those by their sub-contractors.
- Maintaining records of recruitment and employment process of contracted workers.
- Clearly communicating the job description and employment conditions to the workers.
- Having a system for regular review and reporting on labor, and ESHS performance.

The standard clauses for inclusion in civil works contracts include (but not limited to):

- The general obligations of the contractor with respect to maintaining the health and safety of the workers.
- Preparation and implementation of a site-specific Action Plan for managing construction related workplace occupational health and safety
- Ensuring no child labour and/or forced-bonded labour for any works.
- Equal pay/wage for men and women labourers, including registration and insurance.
- All laborers engaged at construction site to be provided with the required Personal Protection Equipment (PPE) and regular health check-ups etc.
- The construction sites to be provided with adequate barricading and safety signages.
- Providing health and safety training/orientation on to all workers and staffs.
- Steps necessary to prevent worker harassment or discrimination, including sexual exploitation and abuse, sexual harassment SEA/SH), gender-based violence (GBV).
- Basic facilities at worksites segregated toilets, canteen, drinking water, creche facilities (if required), etc.
- Establishing Grievance Redress Mechanism (GRM) for workers for any complaint/grievance received from workers and ensuring workers' awareness about GRM.

#### F. POLICIES AND PROCEDURES

**Policy and Procedure for Direct Workers:** The following procedures would be applicable for direct workers e.g., SPMU staff:

#### In the office:

- For this project, the minimum age will be 18 years. This rule will apply for both national and international workers.
- A workstation with computer will be provided to all SPMU staff. All software's essential for functioning of the assigned tasks will be provided to all project staff.
- Separate male and female toilet facilities will be provided at all project offices.

- Drinking water will be available at all project offices.
- All project offices will be free of pests. Where pests are detected pest control measures will be taken immediately.
- Fire detection and firefighting equipment will be available at all project offices.
   Emergency evacuation plan will be established for all project offices and staff will be made aware of the plan and periodic training exercises that needs to be implemented.
- Equal training opportunity will be available to all staff working in the project without discrimination, based on gender or otherwise, as specified in the employment conditions.
- Orientation training on safety and health in Construction worksites including emergency procedures. Provision and training in the usage of Personal Protective Equipment during site visits. Safety of women from any sexual exploitation and abuse (SEA) and sexual harassment (SH) and mechanism to access redressal services.
- Equal remuneration, childcare, flexible work hours, creche facilities, segregated toilets and other amenities as mandated by law.

## **Policy and Procedure for Contract Workers for Civil Work:** The key procedure at the construction site includes as follows:

- Equal pay/wage for men and women labors.
- No child labor and/or forced labor at construction site for all works
- All laborers to be provided with photo ID cards for accessing the construction site.
- Personal Protection Equipment (PPE) safety helmet and shoes, secured harness when
  working at heights, electrical gloves, eye protection for welding etc., for all workers
  without which entry to the construction site shall not be allowed.
- Steps necessary to prevent SEA/SH and any discrimination based on religious, political and/or sexual orientation.
- Facilities to be provided at the labor camp (if setup):
  - Hygienic living conditions and safe drinking water
  - Segregated toilets for male and female workers
  - Creche facilities
  - Use of fireproof wiring and good quality electricals
  - Cooking gas and/or electric/induction plate for each labor household
  - Monthly/weekly health checkup to be organized at the camp for all labors/family.
  - Awareness campaign for social distancing and general health and hygiene
  - Posters and signages at/around the site, with images and text in local languages relating to personal safety, hygiene and on COVID-19 symptoms and guidelines.
  - Security measures to be provided at the camps which may include fencing, locks, alarms, pass card systems, badge and pass system, access points, safe transport of personnel as appropriate.
  - o Emergency response plan including availability of assembly points and mock drills.
- The measures proposed in a site-specific Action Plan for managing construction related workplace occupational health and safety

#### **Policy and Procedure for Health Workers in Targeted Hospitals:**

- Child labor and/or forced labor prohibited. Zero tolerance on any forms of GBV, SEA/SH.
- Working hours, leave, maternity benefits, wage parity, deductions etc. in adherence to regulations as stipulated in the national/state laws
- Application of OHS measures as outlined in MoHFW, WHO, and World Bank guidelines.
   This will encompass procedures for entry into health care facilities, including minimizing visitors and undergoing strict checks before entering; procedures for protection of workers in relation to infection control precautions; provision of immediate and ongoing training on the procedures to all categories of workers, and post signage in all public spaces mandating hand hygiene and personal protective equipment (PPE); ensuring adequate supplies of PPE etc.
- Separate male and female toilet facilities, potable drinking water & handwashing facilities as per the requirements of national/state laws
- Adequate waste management systems at targeted health facilities in accordance with General EHSGs and industry specific EHSGs and follow evolving international best practice.

The ESMF includes OHS management/ mitigation provisions. The OHS measures take into account the World Bank Group's General Environment, Health and Safety Guidelines (EHSGs), the EHSGs for Health Care Facilities and other Good International Industry Practices (GIIP). OHS specifications will also be included in the procurement documents and contracts with contractors and supervising firms. The ESMF factors OHS requirements for contract workers that will be involved in civil works such as codes of conduct, safety trainings, gender and SEA/SH sensitization.

Civil works contractors' workers will be managed by the contractors and their terms and conditions must be consistent with the WB ESF (ESS2), GoI laws and regulations. As a minimum standard for workers under civil works contracts (including subcontractors) the provisions and codes of conduct outlined in the Contractors Environmental and Social Management Plan will provide the minimum standards required. OHS, GBV/SEA and SH and general worker behaviour are managed through the CESMPs.

**Policy and Procedure in Covid-19 Situation:** Refer to Section 3.3 of the ESMF for details on guidance related to Covid-19.

Minor incidents will be reported directly to SPMU on monthly basis and will be reflected in quarterly reports, and serious accidents and incidents will be reported immediately and will be flagged to the World Bank within stipulated timeframe in the ESCP. Given that most labour related risks and impacts results from actions of contractors, mitigation measures will be largely implemented by contractors. The SPMU will incorporate General and Specific Conditions into bidding documents and contracts, including measures in relation to SEA/SH prevention and risk mitigation and on codes of conduct, so that contractors are aware of their obligations and are

contractually obligated to comply with them. The PMC will enforce compliance with these clauses.

#### Sexual exploitation and abuse and sexual harassment (SEA/SH)

A Code of Conduct (CoC) applicable to (a) staff at health facilities, (b) construction workers, and (c) other project employees will be adopted and adhered to. The CoC will commit all personnel to acceptable standards of behavior. The CoC will include sanctions for non-compliance, including termination or even revoking of the contract. It should be written in plain language and signed by each worker. A copy of the CoC will be displayed in a location (hospital premise or construction sites) easily accessible to the community in the local language. Personnel will also receive awareness training on GBV/SEA/SH. The project's GRM will also include a channel to allow SEA/SH-related grievances to be received and addressed. All establishments (employing more than 10 employees) are mandated by the Sexual Harassment at the Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH Act) to form an Internal Complaints Committee (ICC) to address workplace related SEA/SH complaints. Thus, all employers including contractors as per the Act must ensure that the contact information of ICC is displayed in the office and that regular trainings/orientation programs are organised for staff and ICC members. Please see SEP for details related to GRM. SEA/SH related processes will be overseen by the Social Development Specialist within the SPMU and monitored on the ground by the Environmental and Social experts within the PMC. (See Annex III of the ESMF for further details on SEA/SH prevention and response mechanism)

#### **G. AGE OF EMPLOYMENT**

In accordance with the Constitution of India, no child below the age of fourteen years shall be engaged in any hazardous employment. Employment of children under 18 years of age will be strictly prohibited. Contractors will be required to verify and identify the minimum age of all workers through government identification documents, like birth certificate, ration card, Aadhar card and other national identification cards, passport and if in doubt clinical, anthropometric measurements will be taken to ascertain their age.

#### H. TERMS AND CONDITIONS OF EMPLOYMENT

The terms of employment of the direct project workers will be as per prevailing market rates based on expertise and experience. It would be ensured that all direct workers are provided clear terms of reference and contracts outlining their roles, responsibilities, and conditions of work and in all cases the principles of non-discrimination and equal opportunity apply.

The terms of employment of the contracted workers at construction sites will be based on the terms of contract governed by 'The Building and Other Constructions Workers (Regulation of Employment and Conditions of Service) Act, 1996' and other labour laws and provisions of ESS2 for contracted workers.

#### I. GRIEVANCE MECHANISM FOR LABOR ENGAGED IN CONSTRUCTION WORK

The main objective of a Grievance Redress Mechanism (GRM) is to assist to resolve complaints and grievances in a timely, effective, and efficient manner that satisfies all parties involved. Construction-site specific Grievance Mechanism to be setup by the contractor/ sub-contractor. It shall include site specific grievance focal person assigned by the Contractor who will file the grievances and appeals of contracted workers and will be responsible to facilitate addressing them. If the issue cannot be resolved at contractor's level within 7 working days, then it will be escalated to the Principal Employer. The work of the grievance focal person will be closely monitored by the PMC and periodically reviewed by the social development specialist in the SPMU.

The grievance focal person will register the grievances in a formal manner in register or in electronic format to be easily tracked for its resolution. The GRM will include the process of screening, investigation, resolution of grievances, documentation, and reporting of grievances as the steps mentioned below.

**Step 0:** Raising and registering the grievances using various mechanism including through written or verbal complaints and registered in grievance logbook at the construction site.

**Step 1**: Grievance raised is screened by the grievance focal person and based on its severity/jurisdiction forwarded to respective contractor/sub-contractor for redressing

**Step 2:** Grievance discussed at the grievance focal person / respective contractor/ sub-contractor level, and addressed

Step 3: If not addressed in stipulated period it is escalated to Principal Employer.

**Step 4:** Once addressed, feedback is given/ sent to the complainant and complaint closed upon verification from the complainant

Step 5: If not satisfied, appeal to the other public authorities

Once all possible redress has been proposed and if the complainant is still not satisfied then they should be advised of their right to legal recourse. Monthly report on the grievances received at each of the subproject is submitted to the SPMU.

All contractors (employing more than 10 employees) are mandated under the POSH Act to set up an Internal Complaints Committee (ICC) in their organisation to address complaints of sexual harassment. A complainant facing sexual harassment working in an organization that has less than 10 employees, can file a complaint to the Local Complaints Committee (LCC) setup in each district by the district administration.

For healthcare workers and SPMU staff, the grievance mechanism detailed in Section 5 of the Stakeholder Engagement Plan (SEP) will be applicable.

#### J. CONTRACTOR MANAGEMENT OF CIVIL WORKS

The Principal Employer (SPMU) will oversee the implementation of contract as per the terms and clauses mentioned in the contract. The Environmental Specialist and Social Development Specialist at the SPMU along with the E&S experts at the PMC will manage and monitor the E&S performance of contractors in relation to contracted workers, focusing on compliance by contractors with their contractual agreements (obligations, representations, and warranties) including the labor management procedures. This may include periodic ESHS audits, inspections, and/or spot checks of the sub-project locations and camp sites (if created) as well as of labor management records and reports compiled by the contractors.

Contractors' labor management records and reports that may be reviewed would include representative samples of employment contracts or arrangements between third-parties and contracted workers, records relating to grievances received and their resolution, reports relating to safety inspections, including fatalities and incidents and implementation of corrective actions, records relating to incidents of non-compliance with national law and the LMP, and records of drills/ training provided for contracted workers to explain occupational health and safety risks and preventive measures. The works contracts will also ensure that all civil works are completed in a timebound manner and are closely monitored by the PMC.