

**The Government of Sri Lanka
Ministry of Health & Indigenous Medical Services**

**Sri Lanka COVID-19 Emergency Response and
Health Systems (P173867)**

**ENVIRONMENTAL and SOCIAL
COMMITMENT PLAN (ESCP)**

23 March 2020

ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN

1. The Democratic Socialist Republic of Sri Lanka (hereinafter the **Recipient**) will implement the Sri Lanka COVID-19 Emergency Response and Health Systems Project (the **Project**), with the involvement of the Ministry of Health and Indigenous Medical Services (**MoHIMS**). The International Development Association (hereinafter the Association) and the International Bank for Reconstruction and Development (hereinafter the Bank) (collectively the World Bank) has agreed to provide financing for the Project.
2. The Recipient will implement material measures and actions so that the Project is implemented in accordance with the Environmental and Social Standards (**ESSs**). This Environmental and Social Commitment Plan (**ESCP**) sets out material measures and actions, any specific documents or plans, as well as the timing for each of these.
3. The Recipient is responsible for compliance with all requirements of the ESCP even when implementation of specific measures and actions is conducted by the Ministry referenced in 1 above.
4. Implementation of the material measures and actions set out in this ESCP will be monitored and reported to the World Bank by the Recipient as required by the ESCP and the conditions of the legal agreement, and the World Bank will monitor and assess progress and completion of the material measures and actions throughout implementation of the Project.
5. As agreed by the World Bank and the Recipient, this ESCP may be revised from time to time during Project implementation, to reflect adaptive management of Project changes and unforeseen circumstances or in response to assessment of Project performance conducted under the ESCP itself. In such circumstances, the Ministry of Health on the Recipient's behalf will agree to the changes with the World Bank and will update the ESCP to reflect such changes. Agreement on changes to the ESCP will be documented through the exchange of letters signed between the World Bank and the [Recipient / or delegate(s)]. The [Recipient / or delegate(s)] will promptly re-disclose the updated ESCP.
6. Where Project changes, unforeseen circumstances, or Project performance result in changes to the risks and impacts during Project implementation, the Recipient shall provide additional funds, if needed, to implement actions and measures to address such risks and impacts.

MATERIAL MEASURES AND ACTIONS		TIMEFRAME	RESPONSIBLE ENTITY/AUTHORITY
MONITORING AND REPORTING			
A	REGULAR REPORTING: Prepare and submit to the World Bank regular monitoring reports on the environmental, social, health and safety (ESHS) performance of the Project, including but not limited to the implementation of the ESCP, status of preparation and implementation of E&S documents required under the ESCP, stakeholder engagement activities, functioning of the grievance mechanism(s).	Quarterly throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
B	INCIDENTS AND ACCIDENTS		
ESS 1: ASSESSMENT AND MANAGEMENT OF ENVIRONMENTAL AND SOCIAL RISKS AND IMPACTS			
1.1	ORGANIZATIONAL STRUCTURE: The MoHIMS will use the on-going World Bank funded Primary Health Care Systems Strengthening Project (PSSP) PMU to implement the Project. It will strengthen the existing PSSP PMU with additional cadre and resources, as required, including a Senior Environment, Health and Safety Specialist and a Social Development Specialist to support the management of ESHS risks and impacts of the Project and implement the ESCP, ESMF and SEP.	<p>A Senior Environment, Health and Safety Specialist and a Social Development Specialist will be assigned to the project within one month after the Project Effective Date.</p> <p>In the interim period, the MoHIMS will designate a specialist from</p> <ul style="list-style-type: none"> (i) The Directorate of Environment, Occupational Health and Food Safety to cover environmental management aspects of the Project (ii) The Health Promotion Bureau to cover social management aspects of the Project <p>PMU should be maintained throughout Project implementation.</p>	Ministry of Health & Indigenous Medical Services.

<p>1.2</p>	<p>ENVIRONMENTAL AND SOCIAL ASSESSMENT/MANAGEMENT PLANS AND INSTRUMENTS/ CONTRACTORS</p> <p>a. Assess the environmental and social risks and impacts of proposed Project activities including ensuring that individuals or groups who, because of their particular circumstances, may be disadvantaged or vulnerable, have access to the development benefits resulting from the Project in accordance with the ESSs and the Environmental and Social Management Framework (ESMF) to be prepared, disclosed and adopted for the Project. The ESMF will also include a Health Care Waste Management Plan (HCWMP), a template for an Environmental and Social Management Plan (ESMP) as necessary for low-medium scale civil construction works, as well as E&S arrangements and procedures related to the activation and implementation of the Contingent Emergency Response Component (CERC). The ESMF will also screen and identify the risks related to contracting and/or utilizing security forces to support construction of isolation units supported under the project. In doing so, the environmental and social assessment will be guided by the principles of proportionality and GIIP, and by applicable law, in relation to engaging security forces, rules of conduct, training, equipping, and monitoring of security forces.</p> <p>b. Prepare, disclose, adopt, and implement the HCWMP, ESMP and any other environmental and social management instruments required for the respective project activities as per the assessment process, in accordance with the ESSs, the ESMF, the EHSs, and other relevant Good International Industry Practice (GIIP) including relevant WHO Guidelines in a manner acceptable to the World Bank.</p> <p>c. Incorporate the relevant aspects of this ESCP, including, inter alia, any environmental and social management plans or other instruments, ESS2 requirements, and any other required ESHS measures, into the ESHS specifications of the procurement documents and contracts with contractors and supervising firms. Thereafter ensure that the contractors and supervising firms comply with the ESHS specifications of their respective contracts.</p> <p>d. Update environmental and social instruments based on updated guidance by WHO on COVID-19 and any applicable requirements under the relevant ESSs, the EHSs, and other relevant Good International Industry Practice (GIIP) and relevant WHO guidelines satisfactory to the World Bank.</p>	<p>a. The ESMF shall be prepared and disclosed within 30 days after the Effective Date. Activities which involve establishment of isolation centers, involving any type of construction work and all other activities requiring ESMF screening cannot start before the ESMF is consulted and disclosed and other environmental and social assessments (if required after screening) are in place.</p> <p>b. Plans or instruments prepared before carrying out of the relevant construction activities, and thereafter implemented throughout the carrying out of such activities.</p> <p>c. Before launching the procurement process for the relevant activities and thereafter ensure that contractors and supervising firms comply with the ESHS specifications in their contracts through their involvement in the respective Project activities.</p> <p>d. The most updated guidelines should be used while updating the ESMF and SEP within 30 days after the Effective Date, and the revisions in WHO guidelines, EHSs, GIIPs should be continuously followed and addressed in E&S instruments throughout Project implementation. Most updated versions of E&S instruments shall be used during Project</p>	<p>Ministry of Health & Indigenous Medical Services.</p>
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<p>e. Ensure that terms of reference for studies, capacity building, training and any outputs of technical assistance provided under the Project, are acceptable to the World Bank and duly incorporate and take into consideration the requirements of the ESSs.</p>	<p>implementation.</p> <p>e. Throughout Project implementation.</p>	
<p>1.3 EXCLUSIONS: The following type of activities shall not be eligible for financing under the Project:</p> <ul style="list-style-type: none"> • Activities that may cause long term, permanent and/or irreversible (e.g. loss of major natural habitat) adverse impacts on wetlands, protected terrestrial areas /marine protected areas within Sri Lanka. • Activities that have high probability of causing serious adverse effects to human health and/or the environment not related to treatment of COVID-19 cases, such as transport and disposal of highly infectious waste that have not been duly treated for the purpose. • Activities that may have significant adverse social impacts and may give rise to significant social conflict • Activities that may affect lands or rights of indigenous people or other vulnerable minorities • Activities that may involve permanent resettlement or land acquisition or adverse impacts on cultural heritage • All the other excluded activities set out in the ESMF of the Project. 	<p>These exclusions shall be applied as part of the screening process conducted under action 1.2.a. above.</p>	<p>Ministry of Health & Indigenous Medical Services.</p>
<p>ESS 2: LABOR AND WORKING CONDITIONS</p>		

MATERIAL MEASURES AND ACTIONS		TIMEFRAME	RESPONSIBLE ENTITY/AUTHORITY
2.1	LABOR MANAGEMENT: The Project shall be carried out in accordance with the applicable requirements of ESS2, in a manner acceptable to the World Bank, including through, inter alia, implementing adequate occupational health and safety measures (including emergency preparedness and response measures), setting out grievance arrangements for Project workers, and incorporating labor requirements into the ESHS specifications of the procurement documents and contracts with contractors and supervising firms.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
2.2	The Recipient shall prepare, adopt, and implement occupational health and safety measures (including emergency preparedness and response measures) in line with the ESMF, the applicable requirements of ESS2, the ESHGs and other relevant GIIP including the WHO guidelines on COVID-19 in all facilities, including laboratories, quarantine and isolation centers, and screening posts.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services, PMU E & S specialists
2.3	The Recipient shall ensure that all health workers adhere to the WHO Code of Ethics and Professional conduct.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
2.4	The Recipient shall establish a grievance mechanism and assignment of focal points to address workers' grievances within MoH.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
2.5	The Recipient will prohibit forced labor and child labor (any person under the age of 18) due to the hazardous work situation and implement relevant child protection protocols especially in quarantine facilities.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
2.6	The Recipient will ensure that specific prohibitions will be enacted in the deployment of security personnel for the construction activities, including no child labor and no forced labor	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
ESS 3: RESOURCE EFFICIENCY AND POLLUTION PREVENTION AND MANAGEMENT			
3.1	Relevant aspects of this standard shall be considered, as needed, under action 1.2 above, including, inter alia, measures to: manage health care wastes, and other types of hazardous and non-hazardous wastes as specified in the ESMF.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
ESS 4: COMMUNITY HEALTH AND SAFETY			
4.1	Relevant aspects of this standard shall be considered, as needed, under action 1.2 above, including, inter alia, measures to: minimize the potential for community exposure to communicable diseases; ensure that individuals or groups who, because of their particular circumstances, may be disadvantaged or vulnerable have access to the development benefits resulting from the Project; and prevent and respond to sexual exploitation and abuse (SEA) and sexual harassment (SH), especially at quarantine/isolation centers.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
4.2	The Recipient will put measures in place to prevent or minimize the spread of the COVID-19 disease to the community.	Throughout project implementation.	Ministry of Health & Indigenous Medical Services.

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4.3	The Recipient will implement emergency preparedness measures in case of laboratory accidents/ emergencies, e.g. a fire response or natural phenomena event.	Throughout project implementation.	Ministry of Health & Indigenous Medical Services.
4.4	The Recipient will operate quarantine and isolation centers in line with the applicable requirements of ESS3, the ESHGs and other relevant GIIP including the WHO guidelines on “Key considerations for repatriation and quarantine of travelers in relation to the outbreak of novel coronavirus 2019-nCoV”.	Throughout project implementation.	Ministry of Health & Indigenous Medical Services.
4.5	The Recipient will ensure the avoidance of any form of SEA by relying on the WHO Code of Ethics and Professional conduct for all workers in the quarantine facilities as well as the provision of gender-sensitive infrastructure such as segregated quarantine centers and toilets and adequate lighting in quarantine and isolation centers.	Throughout project implementation.	Ministry of Health & Indigenous Medical Services.
4.6	The Recipient will operate quarantine and isolation centers and screening posts in a conflict-sensitive manner, avoiding any aggravation of local communal conflicts.	Throughout project implementation.	Ministry of Health & Indigenous Medical Services.
4.7	The Recipient will ensure that any security personnel engaged in the construction activities associated with the project will follow strict rules of engagement, code of conduct, and avoid any escalation.	Throughout project implementation.	Ministry of Health & Indigenous Medical Services.
ESS 5: LAND ACQUISITION, RESTRICTIONS ON LAND USE AND INVOLUNTARY RESETTLEMENT			
5.1	Relevant aspects of this standard shall be considered, as needed, under action 1.2 above.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
5.2	All construction will be undertaken within existing facilities, and any Project activities likely to require land acquisition and resettlement, will not be supported under the project. Land belonging to the government or in the existing footprints of the facilities, will be documented as unencumbered before works can move forward	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
ESS 6: BIODIVERSITY CONSERVATION AND SUSTAINABLE MANAGEMENT OF LIVING NATURAL RESOURCES			
6.1	All eventual construction will be undertaken within existing facilities and thus at this point the relevance of ESS6 is considered minimal. Where relevant, such as in waste disposal sites, measures to effectively manage risks and impacts on biodiversity will be identified and included as part of the ESMF and subsequent instruments such as ESIA/ESMPs to be prepared under action 1.2.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
ESS 7: INDIGENOUS PEOPLES/SUB-SAHARAN AFRICAN HISTORICALLY UNDERSERVED TRADITIONAL LOCAL COMMUNITIES			
	This standard is not relevant for the Project.		
ESS 8: CULTURAL HERITAGE			
	Relevant aspects of this standard shall be considered, as needed, under action 1.2 above.	Throughout Project implementation.	Ministry of Health & Indigenous Medical Services.
ESS 9: FINANCIAL INTERMEDIARIES			

MATERIAL MEASURES AND ACTIONS	TIMEFRAME	RESPONSIBLE ENTITY/AUTHORITY
This standard is not relevant for the Project.		
ESS 10: STAKEHOLDER ENGAGEMENT AND INFORMATION DISCLOSURE		
10.1	STAKEHOLDER ENGAGEMENT PLAN: Prepare, disclose, adopt, and implement a Stakeholder Engagement Plan (SEP) consistent with ESS10, in a manner acceptable to the World Bank. The documents disclosed shall also include relevant information about the arrangements to the public about the use of security forces in the construction activities supported under the project.	The SEP will be updated within 30 days after the Effectiveness Date. The SEP will be continuously updated throughout the project implementation and implemented throughout the Project.
10.2	GRIEVANCE MECHANISM: Accessible grievance arrangements, utilizing the existing GRM established under the World Bank-financed PSSP, shall be made publicly available to receive and facilitate resolution of concerns and grievances in relation to the Project, consistent with ESS10, in a manner acceptable to the World Bank.	Throughout Project implementation.
10.3	The GRM shall be used to address GBV-related issues and mechanisms to ensure confidentiality and anonymity in reporting with safe and ethical documenting of GBV issues. Further, the GRM shall immediately notify both the MoH and the World Bank of any GBV complaints, with the consent of the survivor.	Throughout Project implementation.
10.4	The project-level GRM shall accept grievances related to security and the use of security personnel as is required for any other complaint, and worker and community concerns related to security personnel shall be addressed promptly.	Throughout Project implementation.
CAPACITY SUPPORT (TRAINING)		

MATERIAL MEASURES AND ACTIONS	TIMEFRAME	RESPONSIBLE ENTITY/AUTHORITY
<p>The ESMF prepared under action 1.2 will include a draft training plan that the project will deliver to all project workers. The training plan will cover key topics including the following in line with the ESMF;</p> <ul style="list-style-type: none"> • Introduction to ESF, processes and best practices as per the ESMF • Potential environmental and social impacts of Project activities • Environment and social monitoring and reporting • Training on stakeholder engagement and consultation (using ICT, social media tools given the need to adhere to social distancing policies and norms); engaging with women, people with disabilities, and other vulnerable groups. • Use of Personal Protective Equipment (PPE), including to security personnel • Emergency Preparedness and Response • Occupational health and safety including; <ul style="list-style-type: none"> • COVID-19 Infection Prevention and Control Recommendations • Laboratory biosafety guidance related to the COVID-19 • Standard precautions for managing confirmed/suspected COVID-19 cases • Infectious waste management within COVID-19 care facilities. • Infection control and safety measures for specimen collection and shipment • emergency prevention and preparedness and response arrangements to emergency situations. • Prevention of Gender Based Violence (GBV) and Sexual Exploitation and Abuse (SEA) and awareness on child protection protocols, on Sexually Transmitted Diseases (STDs) and other communicable diseases, including to security personnel • Operationalizing of the GRM and mechanism to handle GBV issues. • Risk communication and community engagement • Behavior Change Communication strategies. 	<p>The ESMF will be updated during Project implementation to include further detailed trainings which will be implemented throughout Project Implementation.</p>	<p>Ministry of Health & Indigenous Medical Services.</p>