

**The Co-operative Republic of Guyana  
Ministry of Health**

**Guyana COVID-19 Emergency Response Project  
(P175268)**

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

**[October 29, 2020]**

## ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN

1. The Co-operative Republic of Guyana (hereafter, the “Recipient”) will implement the Guyana COVID-19 Emergency Response Project (the **Project**) through the Ministry of Health (MOH) and its Project Implementation Unit (PIU). The International Development Association, IDA (hereinafter, the “Association”) 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 or unit referenced in one above.
4. Implementation of the material measures and actions set out in this ESCP will be monitored and reported to the Association by the Recipient as required by the ESCP and the conditions of the legal agreement, and the Association will monitor and assess progress and completion of the material measures and actions throughout implementation of the Project.
5. As agreed by the Association 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 Recipient will agree to the changes with the Association 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 Association and the Recipient through the Minister of Health. The MOH will promptly disclose the updated ESCP.
6. Where there are Project changes, unforeseen circumstances, or Project performance results 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   |
|---|---|---|--|
| <b>MONITORING AND REPORTING</b>   |   |   |  |
| A   | <p><b>REGULAR REPORTING</b></p> <p>Prepare and submit to the Association, regular monitoring reports on the environmental, social, health and safety (ESHS) performance of the Project, including but not limited to stakeholder engagement activities and grievance log.</p>   | <p>Quarterly reporting throughout Project implementation submitted not later than 45 days after the end of each quarter.</p> <p>Mid-term and completion reports will also be submitted, as requested by the Association, during Project implementation.</p>   | Project Implementation Unit (PIU) within the Ministry of Health (MOH). |
| B   | <p>Incidents and Accidents. The project will promptly notify the Bank of any incident or accident related to the Project which has, or is likely to have, a significant adverse effect on the environment, the affected communities, the public or the workers.</p>   | <p>The Bank will be notified within 48 hours after learning of the incident or accident. The submission of the subsequent would be provided to the Bank in a timeframe acceptable to the Bank and or as requested.</p>  | PIU/MOH  |
| <b>ESS 1: ASSESSMENT AND MANAGEMENT OF ENVIRONMENTAL AND SOCIAL RISKS AND IMPACTS</b> |   |   |  |
| 1.1   | <p><b>ORGANIZATIONAL STRUCTURE</b></p> <p>a. The PIU already established under the Ministry of Health (MOH) will be responsible for the implementation of the Project.</p> <p>b. MOH will hire and maintain throughout Project implementation one environmental and social specialist (full-time) with qualifications and experience acceptable to the Association. In addition, the environment and social specialist will be assisted by two officers being released on a part-time basis as necessary. They will be the Principal Environmental Health Officer, from the MOH Environment Health Unit, and the Director of Standards and Technical Service (STS). Further to that, MOH has already designated and shall maintain an official as Environmental and Social Focal Point. MOH will ensure sufficient time and resources of the specialist, two technical officers and the Focal Point for the Project's environmental and social risk management.</p> | <p>a. Throughout Project implementation.</p> <p>b. One environmental and social specialist (full-time) will be contracted or assigned no later than 30 (thirty) days after the Project Effective Date based on the agreed Terms of Reference (ToR) of the Specialist. The specialist, technical officers and the focal points will be retained throughout Project implementation.</p> | PIU/ MOH   |

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|                               | <ul style="list-style-type: none"> <li>c. The Project Coordinator will be the ultimate responsible person to manage and coordinate all environmental and social matters with the support from the pertinent personnel.</li> <li>d. Adequate resources will be allocated to support management of ESHS risks of the Project.</li> </ul>  | <ul style="list-style-type: none"> <li>c. Throughout project implementation.</li> <li>d. Throughout project implementation.</li> </ul>                                       |                              |
| 1.2                           | <p><b>ENVIRONMENTAL AND SOCIAL ASSESSMENT AND ENVIRONMENTAL AND SOCIAL MANAGEMENT PLANS</b></p> <ul style="list-style-type: none"> <li>a. Ensure, document and certify that adequate waste management practices, appropriate laboratory facilities and completion of key staff training on the use of the supplies and equipment following Guyana’s “Hazardous Waste Regulation under the EPA 1996 (No 11 of 1996), Public Health Ordinance chapter 145, Section 64, Draft Medical Waste Management Guidelines”, “Health Facilities Licensing Act / Regulations 2007, GYS: 235,2003 Standard - National Certification and ISO:15190, 2019 Draft International Accreditation”, and the 2011 “Environmental Guidelines for Storage, Transportation, and Occupational Handling of Biomedical Waste”, as well as relevant WHO Guidelines for medical waste management, were in place in a manner consistent with the ESSs.</li> <li>b. Prepare, adopt and implement Interim Health and Safety Guidelines consistent with the ESSs.</li> </ul> | <ul style="list-style-type: none"> <li>a. Throughout the project implementation.</li> <li>b. Prepared by negotiations and implemented until approval of the ESMF.</li> </ul> | PIU/MOH                      |

| MATERIAL MEASURES AND ACTIONS  | TIMEFRAME  | RESPONSIBLE ENTITY/AUTHORITY |
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| <p>c. Assess the environmental and social risks and impacts of proposed Project activities, in accordance with ESS1 and the Environmental and Social Management Framework (ESMF) to be prepared for the Project in accordance with the Financing Agreement, including to 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. The ESMF should also build on a comprehensive review of the existing acts/rules related to medical waste management and an assessment/audit of relevant incinerator facilities to determine whether they currently meet Association/WHO standards. The ESMF should identify critical gaps (if any) and suggest appropriate measures to overcome the gaps. The ESMF needs to be prepared accordingly the Bank's ESMF-COVID Template</p> <p>d. Prepare, disclose, adopt, and implement Environmental and Social Management Plans (ESMPs), Infection Control and Waste Management Plan (ICWMP), Community Health and Safety Plan (CHSP), and any other environmental and social management plans or other instruments required for the respective Project activities based on the assessment process, in accordance with the ESSs, the ESMF, and other relevant Good International Industry Practice (GIIP) including relevant WHO Guidelines on COVID-19.</p> <p>e. 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 Environmental, Social, Health and Safety (ESHS) measures, into the ESHS specifications of the procurement documents and contracts with suppliers. Thereafter ensure that the suppliers comply with the ESHS specifications of their respective contracts.</p> <p>f. Gender Based Violence (GBV) risks will be assessed and necessary measures will be completed as part of project implementation through the ESMF and GRM.</p> | <p>c. ESMF, acceptable to the Association, to be adopted within 60 (Sixty) days of the Project Effective Date and followed throughout the project implementation. No activities that have any significant potential environmental and social risks and impacts will be initiated within this period. Activities prior to approval of the ESMF will follow the Interim Health and Safety Guidelines.</p> <p>d. Plans or instruments prepared after approval of the ESMF and before the carrying out of relevant activities and implemented throughout the carrying out of such activities.</p> <p>e. Before initiating the procurement process for the relevant activities and thereafter throughout the implementation of such Project activities.</p> <p>f. Within 60 (sixty) days of the Project Effective Date.</p> |                              |

| MATERIAL MEASURES AND ACTIONS |   | TIMEFRAME   | RESPONSIBLE ENTITY/AUTHORITY |
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| 1.3                           | <p><b>EXCLUSIONS:</b></p> <p>Exclude the following types of activities as ineligible for financing under the Project:</p> <ul style="list-style-type: none"> <li>• Activities that may cause long term, permanent and/or irreversible (e.g. loss of major natural habitat) adverse impacts.</li> <li>• Activities that have high probability of causing serious adverse effects to human health and/or the environment not related to COVID-19 treatment.</li> <li>• Activities that may have significant adverse social impacts and may give rise to significant social conflict.</li> <li>• Activities that may involve any resettlement or land acquisition/use restriction or adverse impacts on cultural heritage.</li> <li>• All the other excluded activities set out in the ESMF of the Project.</li> </ul> | <p>During the assessment process conducted under action 1.2.c. above.</p> | <p>PIU/MOH</p>               |

| MATERIAL MEASURES AND ACTIONS   | TIMEFRAME  | RESPONSIBLE ENTITY/AUTHORITY |
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| <b>ESS 2: LABOR AND WORKING CONDITIONS</b>  |  |                              |
| <p>2.1 <b>LABOR MANAGEMENT PROCEDURES</b></p> <p>The Project shall be carried out in accordance with the applicable requirements of ESS2, in a manner acceptable to the Association, including through, inter alia:</p> <ul style="list-style-type: none"> <li>• The Recipient shall adopt and implement Labor Management Procedures (LMP) incorporating the relevant requirements of ESS2. The LMP for the project will establish how project workers will be managed in accordance with the requirements of national laws and legislation. The LMP will contain terms and conditions of employment, nondiscrimination and equal opportunity. The LMP will include the appropriate considerations for COVID-19 situations.</li> <li>• Implement adequate occupational health and safety measures (including emergency preparedness and response measures) to ensure the health and safety of workers, especially women, are given adequate attention in line with the ESMF and LMP. World Health Organization (WHO) guidelines on COVID19 shall be established and complied with in all facilities, including laboratories, quarantine and isolation centers, and screening posts.</li> <li>• The LMP will include a Grievance Redress Mechanism (GRM) for health workers.</li> <li>• The LMP will incorporate labor requirements into the ESHS specifications of the procurement documents.</li> <li>• The Recipient will prepare and adopt a Code of Conduct for Health Workers. The Code of Conduct will include guidelines to ensure that all the patients regardless of their social, ethnic, preferences, or cultural characteristics receive health services. Likewise, the code of conduct will include guidelines for all project workers to ensure that ESS2 requirements are met, including measures to prevent GBV, as part of the LMP.</li> </ul> | <p>Throughout Project implementation. The LMP, GRM and Code of Conduct will be prepared as part of the ESMF which will be finalized 60 (sixty) days after the Effective Date; until then the recommendations referenced in the Interim Health and Safety Guidelines for workplace safety and infection control will apply.</p> | <p>PIU/MOH</p>               |

| MATERIAL MEASURES AND ACTIONS   | TIMEFRAME  | RESPONSIBLE ENTITY/AUTHORITY |
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| <b>ESS 3: RESOURCE EFFICIENCY AND POLLUTION PREVENTION AND MANAGEMENT</b>   |  |                              |
| <p>3.1 <b>MEDICAL AND HAZARDOUS WASTE MANAGEMENT:</b><br/> 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 including appropriate selection and safe usage and disposal of personal protective equipment (PPE), and relevant medical evaluation and health surveillance of PPE users. The PIU/MOH will implement accepted techniques and procedures on medical waste management including auditing for appropriate treatment and disposal. Given the potential resource scarcity in the face of an outbreak, the PIU/MOH will commit to the provision of services and supplies based on the urgency of the need, in line with the latest data related to the prevalence of the cases.</p>   | <p>Throughout Project implementation.</p>  | <p>PIU/MOH</p>               |
| <b>ESS 4: COMMUNITY HEALTH AND SAFETY</b>   |  |                              |
| <p>4.1 <b>COMMUNITY HEALTH AND SAFETY</b></p> <p>a. 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 the public is safe from potential wastes, especially disposed biohazardous materials and PPE; manage risk associated with visits to health centers; 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; manage the risks of the use of security personnel; manage the risks of labor influx; and, prevent and respond to sexual exploitation and abuse, and sexual harassment.</p> <p>b. Safety protocols will be prepared by the Recipient following the national standards, and the WHO recommendations and will be incorporated in the Community Health and Safety Plan (CHSP), which will be developed as part of the ESMF.</p> | <p>a. Throughout Project implementation</p> <p>b. Same timeframe as for the preparation and implementation of the ESMFs, under action 1.2.d.</p> | <p>PIU/MOH</p>               |



| MATERIAL MEASURES AND ACTIONS   | TIMEFRAME  | RESPONSIBLE ENTITY/AUTHORITY |
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| <p>4.2 <b>OTHER COMMUNITY HEALTH AND SAFETY ISSUES</b></p> <p>a. The Recipient will put measures in place to prevent or minimize the spread of the infectious disease/COVID-19 to the community, including inter alia:</p> <ul style="list-style-type: none"> <li>i. Ensure the isolation of patients as much as possible, separate from people presenting with COVID-19. People with COVID-19 should be separate from each other by curtains or in different rooms if possible. Only place together in the same room patients who are have all contracted COVID-19. People with COVID-19 must be separated at all times from other hospital patients, health workers, and other staff. This means there must be dedicated toilet facilities (or bedpans), hand washing facilities, and medical equipment (stethoscope, blood pressure machine, etc.) for patients with COVID-19 only.</li> <li>ii. The Recipient will maintain the dashboard and command center established to support COVID-19 surveillance activities and for enquiries and other COVID-19 related concerns as an important communications link to the public and a significant contact for public requests for information on the COVID-19 pandemic.</li> <li>iii. The Recipient will ensure that communities, COVID-19 patients and their families are treated with respect and dignity, in reference to infrastructure, accommodation and supplies, and communication in the quarantine and isolation centers.</li> </ul> <p>b. The Recipient will prepare an emergency response plan for laboratory operations and implement emergency preparedness measures in case of laboratory accidents/emergencies (e.g. a fire response or natural phenomena event).</p> <p>c. The Recipient will operate quarantine and isolation centers in line with the applicable requirements of ESS4, the World Bank Group Environmental, Health and Safety Guidelines (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”.</p> | <p>a. Throughout Project implementation.</p> <p>b. Same timeframe as for the preparation and implementation of the ESMPs, under action 1.2.d.</p> <p>c. Throughout the project implementation.</p> | <p>PIU/ MOH</p>              |
| <p><b>ESS 5: LAND ACQUISITION, RESTRICTIONS ON LAND USE AND INVOLUNTARY RESETTLEMENT</b></p>  |  |                              |
| <p>ESS5 is currently not relevant.</p>  |  |                              |

| MATERIAL MEASURES AND ACTIONS   |  | TIMEFRAME  | RESPONSIBLE ENTITY/AUTHORITY |
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| <b>ESS 6: BIODIVERSITY CONSERVATION AND SUSTAINABLE MANAGEMENT OF LIVING NATURAL RESOURCES</b>              |  |  |                              |
|   | ESS6 is currently not relevant.  |  |                              |
| <b>ESS 7: INDIGENOUS PEOPLES/SUB-SAHARAN AFRICAN HISTORICALLY UNDERSERVED TRADITIONAL LOCAL COMMUNITIES</b> |  |  |                              |
| 7.1   | <p><b>Indigenous Peoples Plan (IPP)</b></p> <p>a. The Recipient will develop, consult, update, adopt and disclose relevant IPPs consistent with ESS7 and in a manner satisfactory to the Association.</p> <p>b. The Recipient will implement and monitor the implementation of the IPPs.</p>   | Within 60 (Sixty) days of Project effectiveness. The IPPs should be implemented in an effective way prior to disbursing/initiating any activities that present potential E&S risks or impacts. | PIU/ MOH                     |
| 7.2   | <p><b>Grievance Redress Mechanism (GRM)</b></p> <p>a. Prepare and adopt the relevant modalities for the GRM for indigenous peoples in the IPPs.</p> <p>b. Describe in more detail these modalities in the respective IPP (in case the GRM is different from the established under ESS10).</p> <p>c. Implement the modalities for the GRM for indigenous peoples.</p> | <p>a. Within 60 (Sixty) days of the Project Effective Date.</p> <p>b. Throughout the preparation of the IPPs.</p> <p>c. Throughout project implementation.</p>                                 | PIU/ MOH                     |
| <b>ESS 8: CULTURAL HERITAGE</b>   |  |  |                              |
| 8.1   | <p><b>HEALTH PRACTICES OF IPS</b></p> <p>Consider the distinct health practices of IPs and include appropriate measures in IPPs.</p>   | Within 60 (Sixty) days of Project effectiveness.   | PIU/MOH                      |
| 8.2   | <p><b>SCREENING</b></p> <p>Include cultural heritage screening tool in the ESMF and screen out activities that will negatively impact cultural heritage or will require the development of the Cultural Heritage Plan.</p>   | Preparation of screening tools within 60 (Sixty) days of project effectiveness as part of ESMF. Apply the screening tools throughout project implementation.                                   | PIU/MOH                      |
| <b>ESS 9: FINANCIAL INTERMEDIARIES</b>  |  |  |                              |
|   | ESS 9 is currently not relevant  |  |                              |

| ESS 10: STAKEHOLDER ENGAGEMENT AND INFORMATION DISCLOSURE |  |   |         |
|---|--|---|---------|
| 10.1  | <p><b>STAKEHOLDER ENGAGEMENT PLAN PREPARATION AND IMPLEMENTATION</b></p> <p>Prepare, disclose, consult, update, adopt and implement a Stakeholder Engagement Plan (SEP), in a manner acceptable to the Association, and in a culturally appropriate manner to establish measures to allow for a continuous engagement and adequate communication strategies with relevant stakeholders throughout Project implementation.</p>                              | <p>A draft SEP was prepared during project preparation and will be disclosed prior to project negotiations, with an annex report of a first round of consultations.</p> <p>The Draft shall be finalized and publicly disclosed no later than 60 (Sixty) days after the Effective Date, and after the second round of public consultations have been held. The SEP shall be implemented throughout Project implementation.</p> | PIU/MOH |
| 10.2  | <p><b>PROJECT GRIEVANCE MECHANISM</b></p> <p>a. Implement the GRM described in the SEP. The Ministry of Health will maintain the existing grievance redress mechanism (GRM) to be made publicly available to receive and facilitate resolution of concerns and grievances in relation to the Project, consistent with ESS10 as described in the SEP.</p> <p>b. The Recipient will share reports of the GRM implementation with the Association.</p>        | <p>a. The GRM described in the SEP will be adopted no later than 60 (Sixty) days after the Project Effective Date. The GRM will be implemented throughout Project implementation.</p> <p>b. Quarterly reports together with the project reports.</p>  | PIU/MOH |
| CAPACITY SUPPORT (TRAINING)                               |  |   |         |
| CS1   | <p>a. The Recipient will continue to train all categories of workers (lab technicians, doctors, nurses, cleaning/waste disposal staff, etc.) on the medical waste disposal mechanisms and procedures.</p> <p>b. The Recipient will train the key personnel such as contact tracers and provide capacity support including training for MOH and PIU staff based on identified needs to support the management of ESHS risks and impacts of the Project.</p> | Throughout Project implementation.  | PIU/MOH |