

Appraisal Environmental and Social Review Summary Appraisal Stage (ESRS Appraisal Stage)

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Moldova Emergency COVID-19 Response Project (P173776)

BASIC INFORMATION

A. Basic Project Data

Country	Region	Project ID	Parent Project ID (if any)	
Moldova	EUROPE AND CENTRAL ASIA	P173776		
Project Name	Moldova Emergency COVID-19 Response Project			
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date	
Health, Nutrition & Population	Investment Project Financing	4/1/2020	4/21/2020	
Borrower(s)	Implementing Agency(ies)			
Republic of Moldova	Ministry of Health, Labor and Social Protection.			

Proposed Development Objective(s)

The project development objective is to prevent, detect, and respond to the threat posed by the COVID-19 pandemic in Moldova.

Financing (in USD Million)

Total Project Cost

57.40

B. Is the project being prepared in a Situation of Urgent Need of Assistance or Capacity Constraints, as per Bank IPF Policy, para. 12?

No

C. Summary Description of Proposed Project [including overview of Country, Sectoral & Institutional Contexts and Relationship to CPF]

The proposed project will support the Government of Moldova in responding to a potential outbreak of COVID-19. Component 1 Emergency COVID-19 Response will provide immediate support to respond to the COVID-19 outbreak, with a focus on limiting community transmission, building capabilities to handle severe cases and mitigating the negative financial economic at the household level. It will also support the development of multisectoral response coordination and community preparedness. This will include a communication and outreach strategy, training for community health workers, national bodies and media outlets. The focus of communication activities will be to ensure that the population at risk will be better informed and engaged in prevention and treatment measures. In

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addition, the Component 1 will support social assistance efforts to mitigate the effect of containment measures on the poor. Finally, Component 2 will provide financing for a project management unit and monitoring activities.

D. Environmental and Social Overview

D.1. Project location(s) and salient characteristics relevant to the ES assessment [geographic, environmental, social] Moldova has a surface area of 33,850 square kilometers and is located in the south-eastern Europe, between Ukraine and Romania, with an estimated population of approximately 3.5 million people (WDI, 2018). The surface area is roughly divided in 91% rural and 9% urban. Agricultural land use covers about 75% of Moldova's total land area. Moldova is divided to 32 districts (rayon), 3 municipalities and 2 autonomous regions (Gagauzia and Transnistria). Moldova is vulnerable to changes in external demand and climate shocks due to its small size, open economy, and reliance on agriculture.

In the COVID-19 context, Moldova's poor systems for medical waste management and disposal and lack of adequate and appropriate water supply and sanitation conditions, especially in the rural areas, make the country highly vulnerable. This project will provide immediate support to respond to the COVID-19 outbreak, in particular to limit local transmission through containment strategies, appropriate infection prevention and control (IPC) and intensive care to patients suffering from severe acute respiratory infection. The project activities will take place nationwide, however, at this stage, the specific project locations have not yet been identified. COVID-19 response activities such as strengthening of laboratories and intensive care units, as well as quarantine and isolation centers may have considerable environmental and social impacts, such as those related to medical and general waste disposal.

The Government of Moldova (GoM) has limited funds to adequately prepare for the onset of the COVID-19 pandemic, as the health system is not sufficiently equipped to contain the spread of diseases and provide necessary and timely treatment. Despite good progress in the development of the system of multilateral epidemiological, environmental and infection control, the systemic gaps remain in the organization of public health, which keep up environmental, sanitary, health and occupational risks at all stages of the process of identifying and treating diseases.

On March 17, 2020, the Parliament of Republic of Moldova declared the state of emergency and announced measures to contain the crisis impact.

D. 2. Borrower's Institutional Capacity

The GoM has sufficient institutional capacity to mage this program. In addition, the GoM and the Ministry of Health, Labor and Social Protection (MoHLSP) have experience in managing environmental and social risks associated with World Bank projects, including the ongoing PforR project "Health Transformation Operation" (HTO) P144892. Though their experience is primarily with Bank's safeguards Operational Policies rather than the newer Environment and Social Framework (ESF). The country also has an appropriate legal framework and established institutions for environmental and social risk management.

MoHLSP has full responsibility for the organization and regulation of health services provided to individuals and the public, and for ensuring the state surveillance of population health; however, the financing of most health services is the responsibility of the Compania Naţională de Asigurări în Medicină/National Health Insurance Company (CNAM).

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MoHLSP is responsible for providing the legal framework on the management and proper disposal of medical waste generated in the public and private health service sector. Therefore, MoHLSP develops and approves sanitary norms, rules, and hygienic specifications.

MoHLSP will be the implementing agency for the project. It is designated as the central operational body within the GoM and standing headquarters for COVID-19 prevention and response. The MOHLSP will receive professional implementation and project management support, including procurement and financial management, from the existing Project Implementation Unit (PIU) working for HTO. As per the Environmental and Social Commitment Plan (ESCP), MoHLSP will ensure that one environmental specialist and one social specialist are appointed. The PIU will be responsible for project delivery in accordance with the Environment and Social Management Framework (ESMF), which as reflected in the ESCP will be prepared no later than 30 days after the project effectiveness date. The ESMF will have particular focus on infectious disease control, medical waste management and disposal, occupational health and safety, and impacts from minor repair/refurbishment works. It will also cover issues regard to labor and working conditions, labor safety issues, and, community health and safety and related capacity building needs to support successful adherence to relevant Environment and Social Standards in the ESF.

Generally, Moldova's capacity to manage risks associated with COVID-19 is a major concern as the lab personnel may not have the detailed know-how on the bio-safety risk management in the labs to be used for COVID-19 diagnostic testing. Equally, the country has no experience in handling social concerns like COVID-19 as well as related measures, including quarantine. The project will provide funding to address these short-comings and it will be important that the Project will use international expertise to achieve international best practices on these matters in line with WHO guidelines.

II. SUMMARY OF ENVIRONMENTAL AND SOCIAL (ES) RISKS AND IMPACTS

A. Environmental and Social Risk Classification (ESRC)

Substantial

Environmental Risk Rating

Substantial

Although the main long-term impacts are likely to be positive, there is a number of short-term risks that need to be taken into account. The main environmental risks are related to include: (i) occupational health and safety for medical staff, laboratory staff and communities in due course of detection, transportation of patients/tests/chemicals and reagents, and treatment stages of the COVID-19 cycle; and (ii) occupational health and safety related to collection, transportation and disposal of medical waste management.

To mitigate these risks the MoHLSP will prepare an Environmental and Social Management Framework (ESMF) which will contain provisions for storing, transporting, and disposing of contaminated medical waste and outline guidance in line with international good practice and WHO standards on COVID-19 response on limiting viral contagion in healthcare facilities. The relevant parts of the WHO COVID-19 quarantine guidelines and COVID-19 bio-safety guidelines will be reviewed so that all relevant occupational and community health and safety risks and mitigation measures will be covered. In addition to the ESMF, the client will implement the activities listed in the ESCP. The Project will also support MoHLSP in coordination with WHO, UNICEF, CDC, and other partners in overcoming logistical constraints in the timely provision of technical expertise, supplies, equipment and systems across the country. The project will support minor rehabilitation works (repair) of intensive Care Unit (ICUs) in selected hospitals. The location of ICUs will be selected based on existing services and human resources capacities and expanding

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country. All works will be interior and implemented within the existing footprint of the target facilities; thus, the environmental impacts are expected to be low in magnitude, reversible, predictable and temporary.

geographical access to health care services in order to ensure equitable access to highly specialist care across the

Social Risk Rating Moderate

The main social risk is that vulnerable and disadvantaged groups (low-income, disabled, elderly, isolated communities, including potentially Roma communities) encountering obstacles to access facilities and services provided by the project activities. The project will have to ensure that the medical isolation of individuals does not increase their vulnerability (for example, to gender-based violence, GBV). Handling of quarantining interventions (including dignified treatment of patients; attention to specific, culturally determined concerns of vulnerable groups; and prevention of sexual exploitation and abuse and sexual harassment as well as meeting minimum accommodation and servicing requirements) can also be listed as issues that will require close attention while managing the social risks of the project. Social risks also include social tensions that could be exacerbated by the project and community health and safety-related outcomes (especially related to spread of disease and waste management) in addition to risks of social exclusion which is widespread in Moldova due to variance in communities' or individual's ability to pay. In addition to health components, the project will also finance social and financial support to households targeting specifically vulnerable populations. This measure will result in expanding the coverage of the poor who as a group will be disproportionately affected by to increased prices and loss of income associated with COVID-19. Employment status checks will be temporarily dropped, which will enable inclusion of returning migrant workers and families with members in informal employment, thus including these vulnerable categories. Proposed component would rely on the existing benefits payments system managed by the National Social Insurance House and the Government's budget management and reporting systems (also used under ongoing Strengthening the Effectiveness of the Social Safety Net Results-Based Financing Project) and ensuring transparency and equity will be one of the risks. Low income families, pension recipients, persons with disability, as well as those on maternity leave will also be eligible for support under this sub-component.

MoHLSP will use the preliminary Stakeholder Engagement Plan (SEP) prepared for the emergency project to engage citizens and for public information disclosure. MoHLSP will update the SEP during implementation to include more information on the environmental and social risks of project activities and new modalities that take into account the need for a comprehensive community engagement and participation plan, including improved hygiene, physical distancing and procedures describing access and eligibility for social protection activities of the project.

B. Environment and Social Standards (ESSs) that Apply to the Activities Being Considered

B.1. General Assessment

ESS1 Assessment and Management of Environmental and Social Risks and Impacts

Overview of the relevance of the Standard for the Project:

The project will have positive environmental and social impacts as it should improve COVID-19 surveillance, monitoring and containment as well as provide targeted support for the more vulnerable households. However, the project could also cause environmental, health and safety risks due to the dangerous nature of the pathogen and reagents and other materials to be used in the project-supported ICUs, laboratories, and quarantine facilities. Other risks, associated with site specific rehabilitation of health facilities, are identified/identifiable and easily to mitigate. The WHO's assessment of Republic of Moldova's operational readiness for preventing, detecting and responding to

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public health emergency records it rather low (scoring 3 out of 5), indicating high vulnerability to COVID-19. To manage these risks, the MoHLSP, with support from the PIU, will prepare two major instruments:

(i) An ESMF that will include templates for site specific Environmental and Social Management Plans (ESMP) and Infection Control and Medical Waste Management Plan (ICWMP) so that the ICUs, laboratories, and quarantine facilities to be supported by the Project will apply international best practices in COVID-19 diagnostic testing and other COVID-19 response activities; the ESMF will have an exclusion list for COVID-19 ICU and lab activities that may not be undertaken at the labs unless the appropriate capacity and infrastructure is in place); the ESMF will be prepared to a standard acceptable to the Association and disclosed both in country on the MoHLSP website and on the World Bank website within one month of project effectiveness (until then, the implementing entity should ensure that activities with potential E&S risks and impacts are assessed and addressed in line with ESS1 principles); and (ii) A Stakeholder Engagement Plan (SEP) for effective outreach and citizen participation; a preliminary SEP has been prepared and disclosed; the preliminary SEP shall be updated and disclosed in its final format no later than 30 days after the Effectiveness Date.

To achieve the above-mentioned positive environmental and social impacts, the aforementioned areas of risks must be addressed and mitigated as discussed below:

Minor Civil Works: the project will support minor rehabilitation works (repairs) of ICUs in selected hospitals. The ESMF will provide ESMP/ESMP Checklist templates for rehabilitation/repairs of facilities for ICUs. The physical works envisaged will be interior, of a small scale and implemented within the existing footprint of the target facilities and the associated environmental impacts are expected to be temporary, predictable, and easily to mitigate with risks including disposal of construction waste, dust, noise, and worker health and safety.

The envisaged minor works could also include improvement of basic hand-washing facilities, restrooms or other basic health and hygiene conditions at the Points of Entry (PoE), wastewater management (mini septic tanks, etc). The ESMF will also include exclusion criteria under this project for establishing ICUs in facilities containing asbestos insulation or pipe lagging, etc.

Medical Waste Management and Disposal: Moldova's Medical Waste Management System is negatively affected by socioeconomic status and by limitation in health services and has no clear organizational concept and the legal framework is still weak. Given that the medical waste generated by laboratories and health care facilities is a potential vector for the contagion, improper handling of medical waste runs the risk of further spread of the disease. Therefore, the ESMF will include an ICWMP specifically designed for COVID-19 identification, testing, and treatment.

Worker Health and Safety: Workers in healthcare facilities are particularly vulnerable to contagions like COVID-19. Healthcare-associated infections due to inadequate adherence to occupational health and safety standards can lead to illness and death among health and laboratory works as well as the wider spreading of the disease within communities. The ICWMP being developed will contain detailed procedures, based on WHO guidance, for protocols necessary for treating patients and handling medical waste as well as environmental health and safety guidelines for staff, including the necessary PPE. Proper disposal of sharps (see medical waste above), disinfectant protocols, and regular testing of healthcare workers will be included.

Community Health and Safety: The SEP will be a key instrument for outreach to the community at large on issues related to social distancing, higher risk demographics, self-quarantine, and quarantine. It is critical that these messages be widely disseminated, repeated often, and clearly understood. Each ICU, laboratory, and quarantine

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facility will apply infection control and waste management planning following the requirements of the ESMF and relevant guidelines (World Health Organization (WHO), Good International Industry Practice (GIIP), etc.). The ESMF will cover environmental and social infections control measures and procedures for the safe handling, storage, and processing of COVID-19 materials including the techniques for preventing, minimizing, and controlling environmental and social impacts during the operation of project supported laboratories and medical facilities. It will also clearly outline the implementation arrangement to be put in place by MOH for environmental and social risk management; training programs focused on COVID-19 laboratory bio-safety, operation of quarantine and isolation centers and screening posts, as well as compliance monitoring and reporting requirements, including on waste management based on the existing ICWMP prepared as part of the ESMF. The

relevant part of the COVID-19 Quarantine Guideline and WHO COVID-19 bio- safety guidelines will be applied while preparing the ESMF so that all relevant risks and mitigation measures will be covered.

This operation is being processed as an emergency response using condensed procedures under the Fast Track COVID-19 Facility.

ESS10 Stakeholder Engagement and Information Disclosure

The project recognizes the need for an effective and inclusive engagement with all of the relevant stakeholders and the population at large. Considering the serious challenges associated with COVID-19, dissemination of clear messages around social distancing, high risk demographics, self-quarantine, and, when necessary, mandatory quarantine is critical. Meaningful consultation, particularly when public meetings are counter to the aims of the SEP, and disclosure of appropriate information are important for ensuring public health and safety from all perspectives – social, environmental, economic, and medical/ health. In this backdrop, the project has prepared a SEP which serves the following purposes: (i) stakeholder identification and analysis; (ii) planning engagement modalities viz., effective communication tool for consultations and disclosure; and (iii) enabling platforms for influencing decisions; (iv) defining roles and responsibilities of different actors in implementing the Plan; and (iv) a grievance redress mechanism (GRM).

A detailed mapping of the stakeholders will be done during implementation. Individuals and groups likely to be affected (direct beneficiaries) have been identified. Risk-hot spots on the international borders as well as in-country have been delineated. Mapping of other interested parties such as government agencies/authorities, NGOs and CSOs, and other international agencies have also been completed. Drawing upon their expectations and concerns, a SEP has been prepared by the client and disclosed publicly (put in website where it has been disclosed). SEP will be updated during implementation. The client has also developed and put in place a GRM to enable stakeholders to air their concerns/ comments/ suggestions, if any. However, the existing GRM needs improved procedures (to be done 30 days after project effectiveness) to include possibility of anonymous grievances to be raised and addressed, appeal process for unsatisfactory complainants, and provide accessible grievance uptake channels (online and offline, including telephone, text message, email, grievance boxes etc.).

B.2. Specific Risks and Impacts

A brief description of the potential environmental and social risks and impacts relevant to the Project. ESS2 Labor and Working Conditions

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The project shall be carried out in accordance with the applicable requirements of ESS 2, in a manner acceptable to the 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.

The project is expected to encompass the following categories of workers: direct workers and contracted workers, Direct workers could be either government civil servants or those deployed as 'technical consultants' by the project. The former will include: health care providers and workers in health care facilities. The latter includes chiefly construction workers involved in the minor civil works. The civil servants will be governed by a set of civil services code and the 'technical consultants' by mutually agreed contracts. The project proposes some small scale civil works and the expectation is that the majority of labor will be locally hired and hence no large-scale labor influx is envisaged. The ESMF will include ESMP templates for the works and those templates will contain a section on worker health and safety requirements. The workers will not work in contaminated areas and will be safeguarded with protective measures as appropriate.

The ESMF will include Labor Management Procedures (LMP) and sections on Environment Health and Safety (EHS) including, inter alia, 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.

Civil works contracts will incorporate social and environmental mitigation measures based on the WBG EHS Guidelines and the ESMF; other referenced plans e.g. SEP. All civil works contracts will include industry standard Codes of Conduct that include measures to prevent Gender Based Violence/Sexual Exploitation and Abuse (GBN/SEA). A locally based GRMs specifically for direct and contracted workers will be provided.

The necessary protocols for treating patients and handling medical waste, disinfectant protocols, regular testing of healthcare workers, requirements for proper disposal of sharps, along with the environmental health and safety guidelines for staff and necessary Personal Protective Equipment (PPE), will be included in Infection Control and Medical Waste Management Plan (ICWMP) to be adopted by and then implemented by ECs and laboratories participating in the project.

In line with ESS 2 and Moldavian law, the use of forced labor, child, or conscripted labor is prohibited in the project, including for construction and operation of health care facilities.

ESS3 Resource Efficiency and Pollution Prevention and Management

Medical wastes and chemical wastes (including water, reagents, infected materials, etc.) from the labs, quarantine, and screening posts to be supported (drugs, supplies and medical equipment) can have impact on the environment and human health. Wastes that may be generated from medical facilities and labs could include liquid contaminated waste, chemicals, and other hazardous materials, and other waste from labs and quarantine and isolation centers including sharps, used in diagnosis and treatment. Each beneficiary medical facility/lab, following the requirements of the ESMF to be prepared for the Project, WHO COVID-19 guidance documents, and other best international practices, will prepare and follow an ICWMP to prevent or minimize such adverse impacts. The ICWMP will mandate that any waste associated with COVID-19 testing or treatment will be incinerated on site whenever possible. It will also contain strict protocols for disinfecting and packing such waste for transportation to the nearest medical waste incinerator if on site destruction is not possible.

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The ESMF will also include guidance related to transportation and management of samples and medical goods or expired chemical products, as well as small scale rehabilitation activities.

The site specific ESMPs, to be prepared for rehabilitation of the ICUs in selected hospitals will include procedures for handling construction waste. Facilities with asbestos insulation, pipe lagging, etc. will be excluded from financing under the project.

In case of basic hand-washing facilities, restrooms or other basic health and hygiene conditions, these will be improved by taking into consideration safe wastewater management (mini septic tanks, etc.). Resources (water, air, etc.) used in health care and quarantine facilities and labs will follow standards and measures in line with State Sanitary Hygienic Service of MoHSP and WHO environmental infection control guidelines for medical facilities.

ESS4 Community Health and Safety

Medical wastes and general waste from the labs, health centers, and quarantine and isolation centers have a high potential of carrying micro-organisms that can infect the community at large if they are is not properly disposed of. There is a possibility for the infectious microorganism to be introduced into the environment if not well contained within the laboratory or due to accidents/ emergencies e.g. a fire response or natural phenomena event (e.g., seismic). Laboratories, quarantine and isolation centers, and screening posts, will thereby have to follow procedures detailed in the ESMF and ICWMP (see ESS 3 above).

The operation of quarantine and isolation centers needs to be implemented in a way that staff, patients, and the wider public follow and are treated in line with international best practice as outlined in WHO guidance for COVID-19 response as above under ESS 1 and ESS 2.

The SEP will also ensure widespread engagement with communities in order to disseminate information related to community health and safety, particularly around social distancing, high risk demographics, self-quarantine, and mandatory quarantine.

The project will mitigate the risk of Sexual Exploitation and Abuse by applying 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 toilets and enough light in quarantine and isolation centers.

The project will also ensure via the above-noted provisions, including stakeholder engagement, that quarantine and isolation centers and screening posts are operated effectively throughout the country, including in remote and border areas, without aggravating potential conflicts between different groups.

In case quarantine and isolation centers are to be protected by security personnel, it will be ensured that the security personnel follow strict rules of engagement and avoid any escalation of the situation, taking into consideration the above-noted needs of quarantined persons as well as the potential stress related to it.

However, hiring security personnel under the project is not envisioned.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement

This ESS is not relevant. There will be no new construction or reconstruction activities, except minor refurbishing activities. No physical or economic displacement is expected. There will be no restrictions on land use/land access.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources

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All works will be conducted within the existing footprint of selected facilities and the proposed project interventions will have no impacts to the biodiversity and habitats.

ESS7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities

This standard is not relevant to the proposed project. There are no distinct social and cultural groups as defined by ESS7 in Moldova.

ESS8 Cultural Heritage

All works will be conducted within the existing footprint of selected facilities.

ESS9 Financial Intermediaries

This project will not involve any FIs.

C. Legal Operational Policies that Apply

OP 7.50 Projects on International Waterways

No

OP 7.60 Projects in Disputed Areas

No

III. BORROWER'S ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN (ESCP)

DELIVERABLES against MEASURES AND ACTIONS IDENTIFIED	TIMELINE
ESS 1 Assessment and Management of Environmental and Social Risks and Impacts	
ORGANIZATIONAL STRUCTURE: MoHLSP shall maintain the existing PIU with qualified staff and resources to support the management of ESHS risks and impacts of the Project including the appointment of environmental and social risk management specialists.	05/2020
ENVIRONMENTAL AND SOCIAL ASSESSMENT/MANAGEMENT PLANS AND INSTRUMENTS/ CONTRACTORS: a. 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, disclosed and adopted for the Project.	05/2020
b. Prepare, disclose, adopt, and implement any ESMPs or other instruments required for the respective Project activities as per the assessment process, in accordance with the ESSs, the ESMF, and other relevant Good International Industry Practice (GIIP) including the relevant WHO COVID-19 guidelines, in a manner acceptable to the Bank.	04/2022

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c. Incorporate the relevant aspects of this ESCP, including ICWMP, 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.	04/2022
 EXCLUSIONS: The following types of activities shall not be eligible for finance under the Project: Activities that may cause long term, permanent and/or irreversible (e.g. loss of major natural habitat) adverse impacts Activities that have a high probability of causing serious adverse effects to human health and/or the environment not related to treatment of COVID-19 cases Activities that may have significant adverse social impacts and may give rise to significant social conflict 	04/2022
 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. 	04/2022
ESS 10 Stakeholder Engagement and Information Disclosure	
STAKEHOLDER ENGAGEMENT PLAN: Prepare, disclose, adopt, and implement a Stakeholder Engagement Plan (SEP) consistent with ESS 10, in a manner acceptable to the Bank.	05/2020
GRM. Accessible grievance arrangements shall be made publicly available to receive and facilitate resolution of concerns and grievances in relation to the Project, consistent with ESS 10, in a manner acceptable to the Bank.	05/2020
ESS 2 Labor and Working Conditions	
LABOR MANAGEMENT: a. The Project shall be carried out in accordance with the applicable requirements of ESS2, in a manner acceptable to the Bank; Labor Management Procedures and sections on Environment Health and Safety shall be included in the ESMF.	05/2020
An Infection Control and Medical Waste Management Plan (ICWMP) to be adopted by and then implemented by ECs and laboratories participating in the project.	05/2020
ESS 3 Resource Efficiency and Pollution Prevention and Management	
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.	
ESS 4 Community Health and Safety	

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ESS 4 falls under action 1.2, including: minimizing exposure to disease; ensuring vulnerable parties access to benefits; managing risks of security personnel and labor influx; and preventing/responding to sexual exploitation, abuse, or harassment.	04/2022			
ESS 5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement				
Relevant aspects of this standard shall be considered, as needed, under action 1.2 above.	04/2022			
ESS 6 Biodiversity Conservation and Sustainable Management of Living Natural Resources				
ESS 7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities				
ESS 8 Cultural Heritage				
ESS 9 Financial Intermediaries				

B.3. Reliance on Borrower's policy, legal and institutional framework, relevant to the Project risks and impacts

Is this project being prepared for use of Borrower Framework?

No

Areas where "Use of Borrower Framework" is being considered:

N/A

IV. CONTACT POINTS

World Bank

Contact: Volkan Cetinkaya Title: Senior Economist

Telephone No: +1-202-473-5084 Email: vcetinkaya@worldbank.org

Contact: Roman Zhukovskyi Title: Strategy Officer

Telephone No: +1-202-458-8579 Email: rzhukovskyi@worldbank.org

Borrower/Client/Recipient

Borrower: Republic of Moldova

Implementing Agency(ies)

Implementing Agency: Ministry of Health, Labor and Social Protection.

V. FOR MORE INFORMATION CONTACT

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The World Bank 1818 H Street, NW Washington, D.C. 20433 Telephone: (202) 473-1000

Web: http://www.worldbank.org/projects

VI. APPROVAL

Task Team Leader(s): Volkan Cetinkaya, Roman Zhukovskyi

Practice Manager (ENR/Social) Kevin A Tomlinson Cleared on 14-Apr-2020 at 09:52:31 EDT

Safeguards Advisor ESSA Nina Chee (SAESSA) Concurred on 14-Apr-2020 at 16:26:57 EDT

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