# INTEGRATED SAFEGUARDS DATA SHEET CONCEPT STAGE

Report No.: ISDSC15240

### Date ISDS Prepared/Updated: 20-Nov-2015

### Date ISDS Approved/Disclosed: 20-Jan-2016

### I. BASIC INFORMATION

### A. Basic Project Data

<b>Country:</b>	Uganda		<b>Project ID:</b>	P1551	86	
Project Name:	Uganda Reproductive, Maternal and Child Health Services Improvement Project (P155186)					
Task Team	Peter Okwero					
Leader(s):						
Estimated	21-Mar-2016		Estimated	15-Jur	n-2016	
<b>Appraisal Date:</b>			<b>Board Date:</b>			
<b>Managing Unit:</b>	GHN01		Lending	Invest	ment Project Financing	
			Instrument:			
Sector(s):	Health (100%)					
Theme(s):	Population and reproductive health (60%), Health system performance (40%)					
Financing (In US	SD M	illion)				
Total Project Cost:		150.00	Fotal Bank Financing: 110.00		110.00	
Financing Gap:		0.00				
Financing Source				Amount		
BORROWER/RECIPIENT				0.00		
International Development Association (IDA)				110.00		
Health Results-based Financing				40.00		
Total				150.00		
Environmental	B - P	artial Assessment	L			
Category:						
Is this a	No					
Repeater						
project?						

## **B.** Project Objectives

The project development objective (PDO) is to improve delivery and utilization of quality essential health services with a focus on reproductive, maternal, newborn, child and adolescent health (RMNCAH) services in selected districts.

### **C.** Project Description

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The proposed project comprises three components: a) support implementation of facility based Results Based Financing (RBF) activities; b) support towards central level executed activities; and c) support towards civil registration and vital statistics (CRVS). The objective of Component 1 is to institutionalize and scale-up the implementation of facility based RBF activities with a view of improving the delivery of RMNCAH services through frontline health facilities from both the public and private sectors will be rewarded under performance contractual frameworks to increase the quantity and quality of RMNCAH services. Component 2 is to strengthen institutional capacity to deliver quality RMNCAH program activities and (ii) ensure RMNCAH service readiness of the frontline service providers. This will entail supporting complementary central level activities aimed at strengthening the capacity of the Ministry in implementing RMNCAH program activities, clinical care, and quality assurance. Component 3 will support the GoU to improve the civil registration and vital statistics system and activities supported by this component will be aligned to the Global Civil Registration and Vital Statistics Scaling Up Investment Plan 2015-2024.

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

The project will be implemented through existing health facilities and is not likely to require acquisition of land and restriction of access to legally designated protected areas. However, since the project may involve minor renovation works in health facilities whose exact location are not yet known, the project could lead to acquisition of additional land and or loss of livelihoods of some individuals or communities. Preliminary assessment therefore suggests that OP 4.12 will be triggered. The interventions under the proposed project involve handling of medical products and thus contribute to increased generation of medical waste in the health facilities, and therefore renders the project to trigger OP 4.01 on Environmental Assessment. During project preparation, mitigation measures shall be suggested as part of the project design. Furthermore, since specific project facilities and sites are not yet known, an Environmental and Social Management Framework (ESMF) and a Resettlement Policy Framework (RPF) shall be prepared to guide handling of project environmental and social issues.

#### E. Borrowers Institutional Capacity for Safeguard Policies

The Ministry of Health has substantial experience with World Bank safeguards gained from implementation of UHSSP (P115563). Environmental compliance is the responsibility of the Environmental Health Division (EHD) of the Ministry of Health which is charged with executing the National Health Care Waste Management Plan under the overall policy guidance of the National Environment Management Authority. The National Health Care Waste Management Plan for 2009/2010 - 2011/2012 prepared and disclosed under the UHSSP will apply to this project, and will therefore be updated and disclosed prior to Appraisal.

However, EHD has not fully participated in UHSSP. Their functionality and capacity to handle environmental and social safeguards issues and requirements will therefore be assessed during project preparation.

Overall social and environmental risk of the proposed project is rated moderate.

### F. Environmental and Social Safeguards Specialists on the Team

Constance Nekessa-Ouma (GSU07) Mary C.K. Bitekerezo (GSU07)

Safeguard Policies	<b>Triggered</b> ?	Explanation (Optional)
Environmental Assessment OP/BP 4.01	Yes	The interventions under Component 1 of the proposed project involve handling of medical products and thus contributes to increased generation of medical waste in the health facilities, may involve minor civil works (repairs and minor renovation works) and relatedimpacts and therefore renders the project to trigger OP 4.01 on Environmental Assessment. Since the participating health facilities are not yet determined or known, Environmental and Social Management Framework shall be prepared to guide management environmental and social aspects. Once the specific sites and respective activities have been identified, ESIA shall be undertaken and ESMPs developed before start of any works. The ESMF shall be prepared in a consultative manner and disclosed both in-country by the client and at Infoshop by IDA before project appraisal. Similarly the existing National Health Care Waste Management Plan for 2009/2010 – 2011/2012 prepared and disclosed under the UHSSP will apply to this project, and will therefore be updated and disclosed prior to Appraisal.
Natural Habitats OP/BP 4.04	No	The project will not support any activities that may affect natural habitats.
Forests OP/BP 4.36	No	The project is not anticipated to affect any segment of forest/s and/or support activities associated with forests.
Pest Management OP 4.09	No	The project will not support procurement or use of pesticides.
Physical Cultural Resources OP/BP 4.11	Yes	Though the project will be undertaken in existing facilities and with no known PCRs, the civil works may affect unknown PCRs and a chance finds procedure shall be developed as part of the ESMF.
Indigenous Peoples OP/BP 4.10	No	Even though the participating health facilities in this project are not yet determined, none of the existing facilities would be located in the specific areas inhabited by indigenous peoples (Ik, Bennet and Batwa) in Uganda. However, under the social aspect of OP4.01 the inclusion of all project beneficiaries / service users would be addressed as part of the site specific ESIA and /or ESMP.
Involuntary Resettlement OP/ BP 4.12	Yes	The project interventions under Component 1 will be undertaken in existing health facilities and therefore

# II. SAFEGUARD POLICIES THAT MIGHT APPLY

		there is likely no land-take/acquisition or loss of livelihoods. However, since the specific facilities (hospitals and HC-IVs) and scope of activities are not known at this point, additional land may be required in cases where expansion of the health facility may be required, hence triggering OP 4.12 Involuntary Resettlement. Therefore a Resettlement Policy Framework shall be prepared to guide management of any arising land acquisition. The RPF shall be prepared in a consultative manner and disclosed both in-country by the client and at Infoshop by IDA before project appraisal.	
Safety of Dams OP/BP 4.37	No	The project will not finance any dams or abstract water from existing dams.	
Projects on International Waterways OP/BP 7.50	No	The project will not support any activities on international waterways.	
Projects in Disputed Areas OP/ BP 7.60	No	There are no known disputed areas in the likely project sites of the country.	

# **III. SAFEGUARD PREPARATION PLAN**

- A. Tentative target date for preparing the PAD Stage ISDS: 15-Feb-2016
- B. Time frame for launching and completing the safeguard-related studies that may be needed. The specific studies and their timing<sup>1</sup> should be specified in the PAD-stage ISDS: February 29, 2016.

## **IV. APPROVALS**

Task Team Leader(s):	Name: Peter Okwero				
Approved By:					
Safeguards Advisor:	Name: Johanna van Tilburg (SA)	Date: 10-Jan-2016			
Practice Manager/ Manager:	Name: Magnus Lindelow (PMGR)	Date: 20-Jan-2016			

<sup>1</sup> Reminder: The Bank's Disclosure Policy requires that safeguard-related documents be disclosed before appraisal (i) at the InfoShop and (ii) in country, at publicly accessible locations and in a form and language that are accessible to potentially affected persons.