

Integrated Safeguards Data Sheet (ISDS)	
Section I – Basic Information	
Date ISDS Prepared/Updated: January 27, 2005	Report No.: AC1251
A. Basic Project Data	
A.1. Project Statistics	
Country: Nicaragua	Project ID: P078991
Project: Health Services Extension and Modernization (2nd APL)	TTL: Jesus Maria Fernandez Diaz
Total project cost (by component):	
Appraisal Date: February 9, 2005	Loan/Credit amount(\$m): IDA: 11
Board Date: April 5, 2005	
Other financing amounts by source:	(\$m.)
Managing Unit: LCSHH	Sector: Health (100%)
Lending Instruments: Adaptable Program Loan	
Is this project processed under OP 8.50 (Emergency recovery? Yes? <input type="checkbox"/> No? <input checked="" type="checkbox"/>	
Environmental Category: B	
A.2. Project Objectives	
<p>The overall APL program development objective, as approved by the IDA Board in 1998, is to improve health outcomes in Nicaragua, particularly among the poor, by raising the efficiency, effectiveness, equity and sustainability of the Nicaraguan health system. In this second phase of the APL, IDA financing will contribute, alongside funds from the MOH and other SWAp partners, to improve maternal and child health in the poorest municipalities of Nicaragua, concentrating roughly half of the Nicaragua's poor. By improving the health status of this population, health inequities should reduce, as shown by disparities in maternal and infant mortality indicators across geographical areas and income groups. These goals will be achieved through the operationalization of three strategic objectives, as set up in the sector Five-Year Implementation Plan, namely: (i) the extension of coverage of a package of basic health and nutrition services to the poorest areas of the country, via the new integrated model of health care; (ii) the physical and functional strengthening of the health service facilities network, focusing on maternal-infant care, so as to provide a seamless path of essential services in the target areas; and (iii) institutional strengthening and capacity-building, concentrated specifically on developing the purchasing, monitoring and evaluation capacities of the MOH, its leadership role to enhancing donors' alignment and harmonization, and the management capacity of MOH decentralized units and Autonomous Governments of the Atlantic Coast.</p>	
A.3. Project Description	
<p>Strategic Objective 1: Extension of health care coverage to the poorest population (US\$36.5 million. Extension of the Basic Package of Health Services to vulnerable rural populations at the community-level.</p> <p>Strategic Objective 2: Strengthening the network of services in targeted areas to support the implementation of the BPHS (US\$27,8 million). This component of the SWAp is designed to support the extension of coverage, and to complement its MCH-related activities.</p> <p>Strategic Objective 3: Improving Stewardship, Institutional Strengthening and Decentralization (US\$ 17,8 million). The MOH recognizes that to fulfil the vision set forth in the NHP and effectively lead the SWAp, it will need to undertake a variety of institutional reforms. These include: (i) strengthening the Ministry's management capacity necessary for planning, contracting and supervising the expansion of the BPHS (e.g., programming and planning, information and reporting) and the rest of institutional fiduciary systems (financial accounting, procurement, auditing) so the SWAp can progressively adopt these national systems instead of donors' procedures; (ii) strengthening the GON's capacity to monitor and evaluate health sector performance, efficiency and equity; (iii) supporting the MOH's coordination role as executor and overseer of the GON's population policy; and (iv) developing a strong purchasing function at the MOH, including the identification of beneficiaries for the expansion of essential services, adjusting payment mechanisms, overseeing service quality, contract design and monitoring.</p>	

A.4. Project Location and salient physical characteristics relevant to the safeguard analysis: The project will be located along the Atlantic Coast of the Republic of Nicaragua. From the construction and remodeling of existing facilities, these areas have already been intervened, thus the environmental impacts are expected to be minor and reversible. With regards to the Health Care Waste Management activities, the environmental impact is expected to be positive, as these activities would be an enhancement of current practices in Nicaragua.

B. Check Environmental Category A [], B [X], C [], FI []

This operation aims at improving the current conditions of the Health Sector, through its expansion and modernization, which will lead to an increment on the production of Health Care Waste, and a generation of environmental impact in the areas where remodeling activities will take place. According to World Bank Safeguards policy and the criteria of the LCSES-QAT, this operation is category B. In order to fulfil the requirements of the Bank and also enhance the quality of the operation, the Government of Nicaragua has prepared a stand alone Environmental Assessment as well as a summary of the report, a Health Care Waste Management Plan, its implementation strategy, and a set of guidelines for construction activities.

Comments:

C. Safeguard Policies Triggered

	Yes	No
Environmental Assessment (OP/BP/GP 4.01)	[X]	[]
Natural Habitats (OP/BP 4.04)	[]	[X]
Pest Management (OP 4.09)	[]	[X]
Cultural Property (draft OP 4.11 - OPN 11.03-)	[]	[X]
Involuntary Resettlement (OP/BP 4.12)	[]	[X]
Indigenous Peoples (OD 4.20)	[X]	[]
Forests (OP/BP 4.36)	[]	[X]
Safety of Dams (OP/BP 4.37)	[]	[X]
Projects in Disputed Areas (OP/BP/GP 7.60)*	[]	[X]
Projects on International Waterways (OP/BP/GP 7.50)	[]	[X]

* By supporting the proposed project, the Bank does not intend to prejudice the final determination of the parties' claims on the disputed areas

Section II – Key Safeguard Issues and Their Management

D. Summary of Key Safeguard Issues.

D.1. Describe any safeguard issues and impacts associated with the proposed project. Identify and describe any potential large scale, significant and/or irreversible impacts.

This operation is a category B project with minor and reversible impacts in the environmental. The impact of this project is expected to be positive with the implementation of a Health Care Waste Management plan on the beneficiary facilities.

D.2 Describe any potential indirect and/or long term impacts due to anticipated future activities in the project area.

Long term environmental impacts are not expected from this operation.

D.3. Describe the treatment of alternatives (if relevant)

N/A.

D.4. Describe measures taken by the borrower to address safeguard issues. Provide an assessment of borrower capacity to plan and implement the measures described.

Environmental Assessment

The Government of Nicaragua has prepared a stand alone environmental assessment which contains a general objective, a methodology, legal framework and a health care waste management plan, which also includes an institutional framework for its implementation, an overview of the current practices on handling health care waste, a strategy and an action plan to improve the management of health care waste on selected facilities, indicators, training materials, environmental mitigation measures, lessons learned, conclusions, schedule, budget and bibliography.

This operation will be implemented by the Ministry of Health (MINSAL), which has extensive experience implementing this component. MINSAL has worked in this area since 1996 through technical cooperation with the European Union. In the case of managing construction activities, mitigation measures proposed by the guidelines will be implemented during implementation of the project.

To address the requirements of environmental assessment policy triggered by this project, MINSAL has proposed a strategy to implement the HCWMP focusing on the inclusion in the Budget each fiscal year during the time of the project, the required resources to support the implementation of HCWM plans, specifically to allocate their own funds to handle HCW, implement a recycling strategy for non- biomedical waste, sign technical cooperation agreements with the major's offices to manipulate and dispose treated HCW in specific sites, previously agreed under safety conditions, at the Sanitary Landfills, include into the accreditation and certification plan standards for accomplishments of HCWM plans, and support all these activities by a series of performance indicators in order to measure the effectiveness of the plan. These indicators are as follows: Health Care Waste Management Committee implemented, Health Care Waste Management Plan in Place, Implementation of the HCWMP, Efficiency on the Segregation Process, Treatment for Biomedical Waste, Training of Hospital Personnel, Coordination with Municipal Authorities, Consultative Councils to support the Implementation of the Plan, and Inclusion of HCWM in the Budget every Fiscal Year.

In the case of construction activities, a set of environmental rules for contractors are to be included in the construction contracts as follows: site selection criteria, heating needs, ventilation, natural and artificial light energy efficiency, historical and cultural considerations, security and handicapped access, floor space (ft²) per bed/ward, requirements for x-ray rooms, and adequacy of corridors for wheel chair/bed access, waste management, maintenance, stockpiles and borrow pits; site cleanup; safety during construction;

nuisance and dust control; community relations; and environmental supervision during construction.

Social Assessment and Indigenous Peoples

A social assessment that includes consultations, focus groups and interviews with local communities, NGOs, health services users, traditional authorities, etc. was carried out (October 2004-January 2005) by a local independent firm. The assessment includes indigenous, non-indigenous and Afro-Nicaraguan population living in highly vulnerable areas with limited access (geographic, linguistic and/or cultural) to health services. The assessed areas included the Northern and Southern Autonomous Atlantic Regions (RAAN, RAAS), Jinotega, Río San Juan, and selected municipalities of Nueva Segovia, Matagalpa and Madriz. The objectives of the assessment were: (a) to assess the social feasibility of the creation of new Women's Centers in 15 remote communities, and to evaluate the utilization of 4 existing Centers (El Rama, Bilwi, Bluefields, Matagalpa); (b) to assess utilization of public health services (including 4 hospitals: Bluefields, Bilwi, Juicalpa and Matagalpa) in 15 municipalities, (c) to assess the relationship among the primary, secondary and tertiary levels of health care, and (d) to identify and systematize the mechanisms of social control and health care surveillance presently in operation by Councils, Committees, Associations and organized groups or civil society.

Given that 11 percent of the population are indigenous peoples, an Indigenous Peoples Plan (IPP) has been incorporated in the project design to ensure the indigenous and Afro-Nicaraguan peoples benefit from the project in a culturally adequate manner. The IPP derives from consultations with the Central and Regional Autonomous Government of RAAN and RAAS, and is consistent with the National and Regional Health Plans. Some of the activities included in the IPP under Component 1 are: (a) a consultancy to determine the PBSS for RAAN and RAAN; (b) contracting of private health care providers serving remote areas; (c) training and equipment of itinerant health care units serving remote areas; (d) installation of at least 15 new community-managed Women's Centers in RAAN, RAAS, Rio San Juan, Jinotega, Madriz, Nueva Segovia and Chontales; (e) strengthening the services of 10 existing *Subsedes* and creation of 8 new ones in selected municipalities; and (f) creation of Municipal Delegation in Prinzapolka. Under Component 2: (a) training of 900 midwives and 500 traditional healers; (b) equipping midwives and health promoters; and (c) workshops with traditional health providers at the Institute of Traditional Medicina of URACCAN to share experiences, and disseminate best practices in intercultural medicine. Under Component 3: (a) strengthening technical skills of Regional Health Councils and Regional Government to administrate health; (b) strengthening the capacity of the Coordinating Commission to manage de decentralization process; and (c) strengthening the social auditing mechanisms by financing workshops, training, with the Regional, Municipal and Communal Health Commissions.

D.5. Identify the key stakeholders and describe the mechanisms for consultation and disclosure on safeguard policies, with an emphasis on potentially affected people.

This operation follows World Bank Disclosure guidelines. The EA report and the Social Feasibility Study including executive summaries will be disclosed at the Infoshop, as well as in the MOH , before appraisal.

F. Disclosure Requirements	Date	
<i>Environmental Assessment/Audit/Management Plan/Other:</i>		
Date of receipt by the Bank	12/12/04	or Not Applicable
Date of "in-country" disclosure	02/08/05	or Not Applicable
Date of submission to InfoShop	02/09/05	or Not Applicable
For category A projects, date of distributing the Executive Summary of the EA to the Executive Directors	.../.../...	or Not Applicable
<i>Resettlement Action Plan/Framework/Policy Process:</i>		
Date of receipt by the Bank	.../.../...	or Not Applicable
Date of "in-country" disclosure	.../.../...	or Not Applicable
Date of submission to InfoShop	.../.../...	or Not Applicable
<i>Indigenous Peoples Development Plan/Framework:</i>		
Date of receipt by the Bank	12/12/04	or Not Applicable
Date of "in-country" disclosure	02/08/05	or Not Applicable
Date of submission to InfoShop	02/09/05	or Not Applicable
<i>Pest Management Plan:</i>		
Date of receipt by the Bank	.../.../...	or Not Applicable
Date of "in-country" disclosure	.../.../...	or Not Applicable
Date of submission to InfoShop	.../.../...	or Not Applicable
<i>Dam Safety Management Plan:</i>		
Date of receipt by the Bank	.../.../...	or Not Applicable
Date of "in-country" disclosure	.../.../...	or Not Applicable
Date of submission to InfoShop	.../.../...	or Not Applicable
If in-country disclosure of any of the above documents is not expected, please explain why.		
Section III – Compliance Monitoring Indicators at the Corporate Level (To be filled in when the ISDS is finalized by the project decision meeting)		
<i>OP/BP 4.01 - Environment Assessment:</i>	<u>Yes</u>	<u>No</u>
Does the project require a stand-alone EA (including EMP) report?	X	
If yes, then did the Regional Environment Unit review and approve the EA report?		N/A
Are the cost and the accountabilities for the EMP incorporated in the credit/loan?		X
<i>OP/BP 4.04 - Natural Habitats:</i>	<u>Yes</u>	<u>No</u>
Would the project result in any significant conversion or degradation of critical natural habitats?		X
If the project would result in significant conversion or degradation of other (non-critical) natural habitats, does the project include mitigation measures acceptable to the Bank?		
<i>OP 4.09 - Pest Management:</i>	<u>Yes</u>	<u>No</u>
Does the EA adequately address the pest management issues?		N/A
Is a separate PMP required?		X
If yes, are PMP requirements included in project design?		N/A
<i>Draft OP 4.11 (OPN 11.03) - Cultural Property:</i>	<u>Yes</u>	<u>No</u>
Does the EA include adequate measures?		N/A
Does the credit/loan incorporate mechanisms to mitigate the potential adverse impacts on physical cultural resources?		X
<i>OD 4.20 - Indigenous Peoples:</i>	<u>Yes</u>	<u>No</u>
Has a separate indigenous people development plan been prepared in consultation with the Indigenous People?	X	
If yes, then did the Regional Social Development Unit review and approve the plan?		N/A
If the whole project is designed to benefit IP, has the design been reviewed and approved by the Regional Social Development Unit?		

OP/BP 4.12 - Involuntary Resettlement:	<u>Yes</u>	<u>No</u>
Has a resettlement action plan, policy framework or policy process been prepared? If yes, then did the Regional Social Development Unit review and approve the plan / policy framework / policy process?		X
OP/BP 4.36 - Forests:	<u>Yes</u>	<u>No</u>
Has the sector-wide analysis of policy and institutional issues and constraints been carried out? Does the project design include satisfactory measures to overcome these constraints? Does the project finance commercial harvesting, and if so, does it include provisions for certification system?		X
OP/BP 4.37 - Safety of Dams:	<u>Yes</u>	<u>No</u>
Have dam safety plans been prepared? Have the TORs as well as composition for the independent Panel of Experts (POE) been reviewed and approved by the Bank? Has an Emergency Preparedness Plan (EPP) been prepared and arrangements been made for public awareness and training?		X
OP 7.50 - Projects on International Waterways:	<u>Yes</u>	<u>No</u>
Have the other riparians been notified of the project? If the project falls under one of the exceptions to the notification requirement, then has this been cleared with the Legal Department, and the memo to the RVP prepared and sent? What are the reasons for the exception? Please explain: Has the RVP approved such an exception?		X
OP 7.60 - Projects in Disputed Areas:	<u>Yes</u>	<u>No</u>
Has the memo conveying all pertinent information on the international aspects of the project, including the procedures to be followed, and the recommendations for dealing with the issue, been prepared, cleared with the Legal Department and sent to the RVP? Does the PAD/MOP include the standard disclaimer referred to in the OP?		X
BP 17.50 - Public Disclosure:	<u>Yes</u>	<u>No</u>
Have relevant safeguard policies documents been sent to the World Bank's Infoshop? Have relevant documents been disclosed in-country in a public place in a form and language that are understandable and accessible to project-affected groups and local NGOs?	X X	
All Safeguard Policies:	<u>Yes</u>	<u>No</u>
Have satisfactory calendar, budget and clear institutional responsibilities been prepared for the implementation of the safeguard measures? Have safeguard measures costs been included in project cost? Will the safeguard measures costs be funded as part of project implementation? Does the Monitoring and Evaluation system of the project include the monitoring of safeguard impacts and measures? Have satisfactory implementation arrangements been agreed with the borrower and the same been adequately reflected in the project legal documents?	X X	
Signed and submitted by:	<u>Name</u>	<u>Date</u>
Task Team Leader:	Jesus Maria Fernandez Diaz	02/08/05
Project Safeguards Specialist 1:	Ximena Traa	
Project Safeguards Specialist 2:	José Ramón Gómez Guerrero	
Project Safeguards Specialist 3:		
Approved by:	<u>Name</u>	<u>Date</u>
Regional Safeguards Coordinator:		
Comments:		
Sector Manager:	Cristian Baeza, Acting	02/09/2005
Comments:		