



Kyrgyz Republic
Ministry of Emergency Situations

Contingency Emergency Response Project (CERP)

Environmental and Social Management Plan (ESMP)

September 2025

Abbreviations

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| KR | Kyrgyz Republic |
| MoES | Ministry of Emergency Situations |
| MoF | Ministry of Finance |
| CERP | Emergency Crisis Response Project |
| ESMP | Environmental and Social Management Plan |
| IPF | Investment Project Financing |
| ORP | Operational Response Option |
| ESF | Environmental and Social Framework (World Bank) |
| EHSB | Environmental, Health and Safety Guidelines (World Bank) |
| PIU | Project Implementation Unit |
| TCC | Technical Coordination Committee |
| GRM | Grievance Redress Mechanism |
| SEA/SH | Sexual Exploitation and Abuse / Sexual Harassment |
| GDP | Gross Domestic Product |
| CPI | Corruption Perceptions Index |
| WGI | Worldwide Governance Indicators |
| PPE | Personal Protective Equipment |
| CIS | Commonwealth of Independent States |
| ESCP | Environmental and Social Commitment Plan |
| M&E | Monitoring and Evaluation |
| KPI | Key Performance Indicator |
| CEDAW | Convention on the Elimination of All Forms of Discrimination Against Women |
| CRC | Convention on the Rights of the Child |
| CRPD | Convention on the Rights of Persons with Disabilities |
| ILO | International Labour Organization |
| SEP | Stakeholder Engagement Plan |
| PCC | Project Coordination Council |

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Executive Summary

This Environmental and Social Management Plan (ESMP) has been developed for the Emergency Crisis Response Project (CERP) in the Kyrgyz Republic. It sets out the procedures for identifying, assessing, and managing environmental and social risks associated with project-financed activities under the Bank's CERP mechanism.

Chapter I provides a concise overview of the project and the objectives of this document. It emphasizes that the ESMP serves as a universal tool to assess and mitigate environmental and social risks in emergency contexts—covering a broad spectrum of possible interventions.

Chapter II examines the natural-climatic, environmental, and social context of the Kyrgyz Republic—such as seismicity, flood and landslide vulnerability, demographic structure, poverty levels, vulnerable groups, and unequal access to social services. These factors set the context in which CERP will operate.

Chapter III describes the CERP activities, potential activation triggers, procedures, and guiding principles. It notes that activities may include provision of shelter, food, water, sanitation, medical supplies, logistics, and support to affected households—all implemented under expedited procedures.

Chapter IV covers the legal and policy framework applicable to the project, including Kyrgyz Republic legislation on environmental protection, waste management, labor, and public health, as well as international obligations and World Bank standards.

Chapter V addresses potential environmental and social risks and their mitigation measures. Risks related to waste management, water supply and sanitation, logistics safety, quality of goods and medicines, labor conditions, and gender-based vulnerabilities are considered. General measures applicable by activity type are described.

Chapter VI lays out the procedures for managing environmental and social aspects, including a step-by-step workflow: preliminary screening, completion of the risk assessment form, approval, implementation of mitigation measures, monitoring, and reporting. Roles and responsibilities of implementing entities are defined, as is the process for integrating ESMP requirements into procurement documents and contractor agreements.

Chapter VII addresses stakeholder consultations and disclosure. The ESMP will be disclosed to relevant government agencies and stakeholders via online platforms, media outlets, the e-112 system, and local administrations. Approaches to ensure informed public participation during implementation are outlined.

Chapter VIII sets out the project's institutional arrangements. Key responsible bodies are identified: the Ministry of Finance (financial coordinator), the Ministry of Emergency Situations (principal implementing agency), the Project Implementation Unit (PIU), the Coordination Council, and the Technical Coordination Committee. Core roles, decision-making processes, and coordination mechanisms are defined.

Chapter IX presents the monitoring and reporting system, including the Monitoring and Evaluation Plan (M&E Plan), key performance indicators (KPIs), reporting frequency (quarterly, semi-annual, and final), and procedures for data collection, analysis, and submission to the World Bank and national authorities.

This ESMP is a living document to be updated as needed, reflecting specific crisis contexts, implementation experience, and updates to Kyrgyz Republic and World Bank policies.

Introduction

The World Bank supports countries in preparing for emergencies by providing instruments that enable rapid, scalable responses to a wide range of natural and man-made disasters. Under this support, the Kyrgyz Republic will implement the Emergency Crisis Response Project (CERP)—a strategic mechanism designed to facilitate swift resource mobilization, enhance resilience, and minimize the adverse impacts of crisis events. Project financing is provided through Investment Project Financing (IPF) using the Operational Response Option (ORO), which allows the reallocation of uncommitted funds from existing World Bank projects to emergency-response activities.

CERP is a cornerstone of the national emergency-response system in the Kyrgyz Republic. It is activated upon the official declaration of a national- or transboundary-level emergency, in accordance with Kyrgyz law—including the Law on Civil Protection (No. 54 of 24 May 2018, as amended) and Cabinet of Ministers Resolution No. 21 of 17 January 2025 on the Classification of Emergencies and Their Assessment Criteria. Activation occurs at the Government’s request and with the World Bank’s concurrence, ensuring immediate access to funds and launch of priority actions defined in the CERP Positive List and the Crisis Response Plan.

This Environmental and Social Management Plan (ESMP) has been prepared to ensure the prompt identification, prevention, minimization, and management of potential environmental and social risks and impacts associated with CERP activities.

The ESMP ensures project compliance with the national legal and regulatory framework of the Kyrgyz Republic—covering environmental protection, occupational health and safety, sanitary-epidemiological safety, and social protection—and with the World Bank’s Environmental and Social Framework (ESF) and relevant Environmental, Health, and Safety Guidelines.

CERP in the Kyrgyz Republic is implemented under the coordination of the Ministry of Emergency Situations (MoES) and the Ministry of Finance (MoF), with key sector ministries engaged, and is managed by the existing Project Implementation Unit (PIU) and a dedicated Technical Coordination Committee (TCC). Activities span multiple sectors—including health, water supply, shelter, food, transport, education, agriculture, and energy—and may involve procurement of food, medicines, and hygiene kits; rental of equipment and vehicles; provision of temporary housing; deployment of generators and mobile clinics; and logistical and technical support for crisis operations.

For each activation, this ESMP applies to all activities on the approved Positive List. CERP uses an expedited risk-screening approach to rapidly identify which actions require enhanced controls and which are low risk. Risks are assessed against two criteria—likelihood and severity—to determine the need for additional mitigation. For every activity, designated implementing agencies conduct basic monitoring, apply the grievance-redress mechanism, and observe prescribed exclusions and restrictions.

The ESMP places special emphasis on worker and community health and safety—addressing epidemiological preparedness and response protocols; handling of medical and domestic waste; prevention of sexual exploitation and abuse/sexual harassment (SEA/SH); avoidance of discrimination and forced labor; protection of vulnerable groups; and maintaining continuity of supply chains and logistics in crisis settings.

The ESMP covers all categories of personnel and service providers—civil servants, contractors, subcontractors, suppliers, and technical advisors—and is mandatory at every stage of CERP activity implementation, from planning through demobilization.

This Plan is a living document and will be updated as necessary to reflect the specifics of each activation, available resources, implementation experience, and revisions to the national and the World Bank regulatory frameworks.

General Information

The Kyrgyz Republic is highly vulnerable to natural, man-made, and biological-social emergencies. Over 94 percent of its territory is mountainous, and its climatic, geological, hydrological, and socio-economic conditions foster frequent hazardous events—such as debris flows, landslides, floods, earthquakes, droughts, avalanches, and epidemics. These factors complicate population safety, infrastructure resilience, and prompt emergency response.

In recent decades, Kyrgyz Republic has experienced major emergencies, including the 2008 Osh earthquake, extensive debris flows in southern regions, large floods in Chuy, Talas, and Batken oblasts, and the COVID-19 pandemic in 2020–2021. Each year, more than 200 local and regional emergencies occur, requiring intervention by the MoES and essential services.

In 2018, the Government adopted the Comprehensive Population and Territory Protection Concept 2018–2030 (Resolution No. 58 of 29 January 2018), which introduced an Emergency Response Plan featuring integrated systems for early warning, rapid response, and recovery.

This Plan aligns with international standards and principles—such as the Sendai Framework priorities and targets—and with national legislation, including the Law on Civil Protection (No. 54 of 24 May 2018) and Cabinet Resolution No. 21 of 17 January 2025 on emergency classification and assessment criteria.

The Emergency Response Plan coordinates key agencies—MoES, sector ministries, local governments, international partners, and donors—and emphasizes early warning, resource mobilization, and joint operations to address natural, man-made, and biological-social threats.

Upon CERP activation, a Crisis Response Plan (CRP) is developed and approved—a tactical document defining specific actions, budgets, and processes for an effective, coordinated emergency response. The CRP is endorsed by the World Bank and serves as the principal tool for project coordination and implementation.

In the CERP Operational Manual, the CRP is the strategic planning document, allocating roles, procedures, and triggers for efficient crisis management. The CRP is integrated into the national risk-management system to ensure readiness, rapid response, damage reduction, and support for resilient recovery.

As of 2025, Cabinet Resolution No. 21 of 17 January 2025 formalizes emergency classification and assessment criteria, standardizing the recognition, categorization, and legal treatment of emergencies—including natural, man-made, biological-social, social, and transboundary events.

Since 2023, with support from the World Bank, UNDP, UNICEF, and other partners, Kyrgyz Republic has modernized its civil-protection capacity—deploying e-112 early-warning platforms, strengthening local authorities and response headquarters, registering vulnerable assets

(schools, hospitals, bridges, power lines), and updating logistics, evacuation, sanitary-hygiene, and emergency-stock procedures.

Vulnerability analyses show that over 7,000 settlements are at potential risk—especially densely populated areas with fragile infrastructure and remote mountainous regions, where logistical and climatic challenges hinder rescue and recovery.

Climate risks are increasing—avalanche periods, prolonged droughts, landslides, and extreme temperature swings. Man-made risks include water-supply failures, chemical spills, and fires. Epidemiological threats, underscored by COVID-19, demand sanitary stockpiles and coordination between health, logistics, and communications services.

CERP provides rapid access to financing and resources within days of an official emergency declaration. It allows up to 10 percent of uncommitted funds from existing World Bank projects to be used for Positive List activities that meet environmental and social requirements and exclude major civil works.

CERP activities include delivery of medicines, water, food, and hygiene supplies; establishment of temporary housing and emergency response centers; support for epidemiological measures; and logistics, supply-chain management, procurement, and staff mobilization.

Thus, CERP serves as an effective mechanism to bolster readiness and resilience of the Kyrgyz Republic's emergency-response system, fully integrated into national civil-protection frameworks and establishing uniform environmental and social management standards for emergency operations.

II. Background Environmental and Social Conditions in the Kyrgyz Republic

This section provides an overview of the key baseline conditions relevant to project activities. It describes the principal natural, climatic, social, and economic characteristics of the Kyrgyz Republic, recognizing that implementation will occur across diverse regions with unique environmental and social features. Baseline data form the basis for assessing potential risks and impacts and for designing appropriate prevention and mitigation measures.

Geography

The Kyrgyz Republic occupies approximately 200,000 km² in Central Asia at the crossroads of major transport and trade routes. About 94 percent of its territory is mountainous, dominated by the Tien-Shan and Pamir ranges. The landscape comprises high-altitude plateaus, narrow river valleys, intermontane basins, and extensive foothill plains.

Major rivers—such as the Chu, Naryn, Talas, and Ala-Archa—are critical for agricultural irrigation, hydropower generation, and domestic water supply. Lake Issyk-Kul, one of the world's largest high-altitude lakes, is an important natural asset and tourist destination. The country is also rich in mineral resources (gold, copper, uranium, and rare earth elements), underscoring the need for responsible environmental management.

Climate and Climate Change

Kyrgyz Republic has a sharply continental climate with pronounced seasonal and altitudinal zoning. Winters are cold and snowy—especially in mountainous areas, where snow cover may persist for months—and summers are warm and relatively wet, with peak precipitation from June through August.

Annual rainfall varies from around 200 mm in lowland southern regions to over 1,000 mm in northern and eastern mountain zones. Temperatures fluctuate between –30 °C in winter at high elevations and +35 °C in summer in valley bottoms.

Climate change is already manifesting as more frequent extreme weather events—intense rains, floods, debris flows, and prolonged droughts—which affect agriculture and water resources. High-altitude glaciers, which have significantly retreated in recent decades, are especially vulnerable. Their shrinkage reduces dry-season river flow and increases the risk of catastrophic floods and debris flows. Changing climate also exacerbates food-security challenges and heightens health risks—such as water-borne diseases.

The Government, together with international partners, is implementing climate-monitoring, forecasting, and adaptation measures, including early-warning systems, infrastructure reinforcement, and public awareness campaigns.

Vulnerability to Hazards and Key Risks

The Kyrgyz Republic regularly experiences natural and man-made hazards—including earthquakes, debris flows, floods, landslides, droughts, and epidemics—that pose serious threats to people, infrastructure, and the economy. Over 200 emergencies occur each year, affecting thousands of individuals and requiring rapid intervention by the Ministry of Emergency Situations (MoES). For example, in 2023 the MoES recorded more than 270 such events.

Major natural threats include high seismicity, flood and debris-flow hazards in both mountainous and lowland areas, and periodic droughts that undermine food security. On average, natural disasters inflict economic losses equivalent to 1–2 percent of GDP.

Social vulnerability is aggravated by poverty—estimated at 25–30 percent of the population—particularly in remote mountain regions. Agriculture, employing over 30 percent of the workforce, remains highly sensitive to climatic variability and natural hazards. Women, children, the elderly, and people with disabilities are particularly at risk and require additional support during emergencies.

Understanding the scale and nature of the Kyrgyz Republic’s vulnerabilities is critical to effective risk-reduction planning under CERP.

Economic Context and Macroeconomic Situation

A sound grasp macroeconomic environment of the Kyrgyz Republic is essential for planning and implementing CERP activities. Economic resilience, key performance trends, and the socio-economic profile of the population affect resource availability, input costs, and social stability in project areas.

According to the National Statistical Committee, real GDP grew by 3.8 percent in 2023 and accelerated to 4.8 percent in the first four months of 2025 compared to the same period in 2024. This revival in economic activity supports prompt response and sustainable recovery from emergencies. The services and industrial sectors drive growth, while agriculture—employing over 30 percent of the population—remains vulnerable to climate and structural challenges.

Inflation, which peaked at 14.7 percent at end-2022, had decreased to about 3.3 percent by April 2025, stabilizing prices of essential goods and services during crises. The National Bank’s monetary policy—including phased reductions in the key policy rate—has facilitated improved credit conditions for emergency financing.

Fiscal policy focuses on budgetary sustainability and expenditure optimization—measures crucial for timely and effective financing of CERP interventions. In 2023–2025, the Government has pursued deficit reduction and targeted allocations for social and infrastructure programs.

Official unemployment rates of 7–10 percent and poverty levels of 25–30 percent highlight persistent socio-economic challenges that must be addressed in CERP planning. Special measures are needed to support vulnerable groups and reduce social tensions, thereby increasing the inclusiveness of the emergency-response program.

Development of social infrastructure (education, health care, and transport) remains a major challenge—especially in remote areas—affecting the effectiveness of emergency response and post-disaster recovery.

In summary, the economic and social baseline analysis underpins the tailoring of project measures to current national conditions, helps mitigate operational risks, and ensures efficient, timely emergency interventions.

Population

As of 1 January 2025, the population of the Kyrgyz Republic stood at approximately 7.2 million, reflecting an annual growth rate of about 1.2–1.4 percent compared to the previous year. Natural increase (births exceeding deaths) and migration both contribute to this growth.

The sex ratio is roughly 0.97 males per 1 female—broadly in line with regional and global trends. Average population density is 36–37 persons/km², with significantly higher concentrations in the capital, Bishkek, and in the lowland plains.

Urban population increases are driven mainly by natural growth (around 2.0 percent) and migration from rural areas (approximately 0.7–0.9 percent per year), leading to urban sprawl and the expansion of peri-urban zones.

Internal migration involves movement from remote mountain and rural districts into urban centers, affecting the socio-economic structure of regions. International labor migration—primarily to CIS countries—also shapes the country’s demographic and economic landscape.

Special attention is given to social protection for vulnerable groups—children, the elderly, persons with disabilities, and women—a factor that is integrated into emergency-response planning and implementation.

Governance and Anti-Corruption

Effective governance and the prevalence of corruption are key factors influencing project success and sustainable national development. In the Kyrgyz Republic, progress has been made alongside ongoing challenges.

According to international indices—the Corruption Perceptions Index (CPI) and the World Bank’s Worldwide Governance Indicators (WGI)—Kyrgyz Republic maintains average governance scores but faces issues common to developing countries.

Recent trends show mixed performance across core governance dimensions:

- Strengths: Voice and accountability, and regulatory quality.
- Weaknesses: Government effectiveness, control of corruption, and rule of law—factors that erode investor and public trust.

Underlying causes include:

- A large informal economy and low financial inclusion, which hinder transparency of financial flows.
- Complex ownership structures in state enterprises, leading to opaque management and inefficiencies.
- Patronage practices that allocate benefits in exchange for political support, undermining public-sector integrity.
- Under-resourced and weakly enforced oversight and control agencies.

These challenges underscore the need for continued public-sector reform, strengthening of institutional checks and balances, and enhanced transparency and accountability.

Within CERP, understanding governance and corruption risks is critical to preventing financial mismanagement, ensuring transparent project execution, and maintaining stakeholder confidence.

Education

The education system in the Kyrgyz Republic faces significant challenges affecting quality and access—especially for vulnerable populations. Underlying issues include infrastructure deficits, resource shortages, and uneven geographic distribution of services.

Primary and General Education

- Enrollment: Approximately 92–94 percent of age-eligible children attend primary school.
- Drop-out rates: However, 40–50 percent of students (particularly in rural and remote areas) do not complete the full primary cycle. Only about 30 percent advance to and complete secondary education.
- Quality concerns: High teacher workloads, insufficient numbers of qualified staff, and outdated facilities lead to multi-shift schooling and elevated student-teacher ratios. Many graduates lack basic literacy and numeracy skills.

Vocational Education and Training (VET)

- Coverage: VET programs serve about 20–25 percent of youth aged 16–29, training for technical and service occupations.
- Challenges: Trade schools (PTUs) suffer from outdated equipment and teacher shortages. Curricula require updating and stronger links with labor-market needs. Dual-education models and business partnerships are emerging solutions.

Higher Education

- Enrollment: In 2025, around 200–220 thousand students pursue tertiary studies.
- Reforms: Leading universities are adopting international standards and expanding distance-learning offerings.
- Constraints: Limited funding, aging infrastructure, low research output, and a mismatch between graduate skills and labor-market requirements—particularly an imbalance between humanities and STEM fields.

A significant share of vocational and university graduates struggles to find employment due to skills gaps. The government and international partners are implementing programs to modernize educational facilities, enhance teacher training, and improve access to quality education—especially for vulnerable groups such as children, women, and marginalized communities.

Health

By 2025, the Kyrgyz Republic’s health system continues to advance, showing reductions in mortality rates and improved access to care. However, significant challenges remain in ensuring equitable, quality services—particularly in remote and rural regions.

Key health indicators by 2025:

- Under-five mortality: 17 per 1,000 live births (2022)¹
- Maternal mortality ratio: 50.4 per 100,000 live births (2020)²
- Child immunization coverage (DTP3): 86 % (2022)³
- Stunting prevalence in children under five: 11.8 % (DHS 2018)⁴
- Access to safely managed drinking water: 80 % of the population (2020)⁵
- Access to safely managed sanitation services: 75 % of the population (2020)⁶

¹UNICEF Data – <https://data.unicef.org/country/kgz/>

²World Bank – <https://data.worldbank.org/indicator/SH.STA.MMRT?locations=KG>

³UNICEF Data – <https://data.unicef.org/country/kgz/>

⁴DHS Program – <https://dhsprogram.com/what-we-do/survey/survey-display-559.cfm>

⁵WHO/UNICEF JMP – <https://washdata.org/data/household#!/kgz>

⁶WHO/UNICEF JMP – <https://washdata.org/data/household#!/kgz>

- Physician density: 2.5 doctors per 1,000 population (2021)⁷
- Health infrastructure: remains underdeveloped in remote mountainous and rural areas, limiting service quality and accessibility⁸

Government and international programs focus on strengthening health-care quality, modernizing facilities, training and supporting medical personnel, and improving sanitation and nutrition for vulnerable groups.

Livelihoods, Poverty, and Gender Equality

The Kyrgyz Republic continues to confront challenges in securing sustainable livelihoods and reducing poverty. According to national statistics and international sources, the following trends and metrics prevail in 2025:

Poverty

- Overall poverty rate: approximately 25–30% of the population, with higher prevalence in remote and mountainous districts.
- Urban poverty: gradually rising due to migration, labor-market shifts, and economic fluctuations.

Economic Inequality

- Gini coefficient⁹: around 27–31 (on a 0–100 scale), indicating moderate income inequality.
- Multidimensional poverty: remains high—particularly in rural areas—where many households lack basic services and resources.

Gender Equality

- Women face greater social vulnerability, including limited access to education, health care, and economic opportunities.
- Female literacy rate: about 94%, yet the share of women with tertiary education remains below that of men.
- Women constitute 60–65% of the informal-sector and agricultural workforce, often in poorly paid roles with minimal social protection.
- Social norms and cultural barriers continue to restrict women’s full participation in economic and public life.

Impact of the Pandemic and Economic Crises

The COVID-19 pandemic exacerbated socio-economic hardship for vulnerable groups—especially women and children—increasing the demand for targeted social and economic support programs.

⁷ World Bank – <https://data.worldbank.org/indicator/SH.MED.PHYS.ZS?locations=KG>

⁸ WHO Country Profile – <https://www.who.int/countries/kgz/>

⁹ <https://gateway.euro.who.int/ru/hfa-explorer/gini-coefficient/kyrgyzstan/#qxUEOj6yta>

III. Project Activities

The Contingent Emergency Response Project (CERP) is implemented in the Kyrgyz Republic through the World Bank's Rapid Response Option (RRO). This mechanism allows the country to quickly access financing for eligible crises and emergencies by reallocating funds from ongoing Investment Project Financing (IPF) operations and Program-for-Results (PforR) operations.

CERP activation occurs in response to events that have caused, or are likely to cause, serious social and economic consequences. These may include natural and man-made emergencies (earthquakes, floods, mudflows, landslides, droughts, technological accidents), as well as public health emergencies and other crises.

Activation is based either on an official declaration by the Government of the Kyrgyz Republic of a state of emergency, in accordance with the Law "On Civil Protection" (July 20, 2009 No. 239) and Resolution of the Cabinet of Ministers of January 17, 2025 No. 21 "On Approval of the Classification of Emergencies and Criteria for Their Assessment in the Kyrgyz Republic," or on a statement of facts acceptable to the World Bank. Such statements are typically informed by a rapid damage and needs assessment, including data from UN agencies or other international organizations (e.g., WHO, FAO, OIE, UNEP).

Each activation of the CERP lasts up to 12 months. Over the overall six-year implementation period, several activations may occur depending on the frequency and scale of crises. When an "eligible crisis or emergency" is declared, the CERP can be triggered to mitigate immediate impacts on vulnerable populations by ensuring access to critical supplies and resources for rapid response.

The main categories of activities supported by the CERP include fast-disbursing expenditures for interventions that do not involve creating a new physical footprint, including, inter alia:

1. **Emergency Response Support:** Support will be provided to equip first responders with essential Personal Protective Equipment (PPE) and ensure access to adequately equipped facilities to maintain uninterrupted emergency services. This includes the provision of PPE (masks, gloves, suits), mobile sanitation units, communication tools, and light emergency equipment. Resources will be tailored to the nature of the crisis and sourced locally or internationally to enable rapid response in affected areas.
2. **Emergency Livelihood Support to Households:** The CERP may provide direct emergency income support to people / households affected by disasters by scaling cash transfers programs. This will aid in stabilizing their livelihoods, smooth consumption, and enhance their ability to source food and items for basic needs. Cash transfers will be disbursed using existing mechanisms, through the Uy-Bulogo Komok (UBK) targeted social assistance program, as well as other cash transfer initiatives, to ensure timely and efficient delivery. The practical implementation of the scheme may include processing a time-bound or a one-off cash top-up to existing households that are beneficiaries of the UBK benefit or Social Passport holders residing in the priority affected areas, as well as to

allow for new eligible households in the impacted areas identified through the relevant social registry type database or Corporate System of Social Assistance of the Ministry of Labor, Social Security and Migration (MoLSSM) to receive emergency cash assistance on a time-limited basis.

3. **Provision of Essential Emergency Supplies and Services:** Support will be provided to sustain delivery of critical services and ensure the accessibility of essential supplies during and after emergencies. This will include financing the procurement and distribution of necessary supplies and services to meet immediate needs of affected persons, such as water supply and sanitation, light equipment and supplies, food staples, essential emergency supplies, pharmaceuticals, medicines, and medical equipment, agricultural inputs and veterinary medicines, green stoves, and rental of light equipment for restoration of access and implementation of CERP activities. All supplies will be tailored to the nature of the crisis and sourced from both local and international suppliers to ensure rapid delivery to the most affected areas.
4. **Emergency Response Coordination and Management:** Support will be provided for incremental operational expenditures incurred by the GoK for response and early recovery efforts including, inter alia, evacuation process, shelter administration, additional transportation costs (use of other transportation), increased electricity bills for the public sector, staff overtime and rental of light and critical machinery (i.e., generators for emergency and operation of temporary shelter, equipment for removal of debris, etc.). It will also support mobilization of necessary technical expertise (consultancy) to support emergency response activities, provide just-in-time technical assistance, and/or support preparation of technical documents for procurement, etc.

Project Beneficiaries

Support is available to all affected citizens of the Kyrgyz Republic. CERP's national scope ensures assistance reaches diverse demographic and socio-economic groups. Priority is given to vulnerable populations—women, children, the elderly, and persons with disabilities—through targeted interventions to safeguard their well-being and enhance resilience during and after emergencies.

IV. Legal and Regulatory Framework

National legislation

This section outlines the national legal and regulatory framework of the Kyrgyz Republic that governs the implementation of the Contingent Emergency Response Project (CERP). It covers environmental, public health, labor, social protection, cultural heritage, institutional, and international instruments that apply regardless of the emergency nature of the interventions. The objective is to ensure legal certainty and full compliance of all project activities with national laws and international commitments.

Table 1. Key Laws and Regulations Applicable to CERP

| Category | Act / Document | Applicability to CERP |
|--------------------------------------|---|--|
| Constitutional Provisions | Constitution of the Kyrgyz Republic (2021) | Guarantees citizens' rights to a healthy environment, protection of health, freedom of petition, non-discrimination, access to information, and social protection. |
| Environmental Regulation | <ul style="list-style-type: none"> • Law on Environmental Protection (1999; amended 2024) • Law on Environmental Impact Assessment • Law on Waste (2023) • Technical Regulation No. 151 (General Ecological Safety) • Law on Water (Decree No. 271) • Law on Air Protection (2024) • Sanitary Rules and Norms (Cabinet Resolution No. 201) • Law on the Protection and Use of Historical and Cultural Heritage (1999, amended 2020) | <p>Establish principles for pollution prevention, waste management, water-protection zone restrictions, sanitary-protection zones (SPZ), and disposal requirements.</p> <p>Sets restrictions on works in heritage areas and requires prior clearance if cultural assets may be affected.</p> |
| Public Health & Veterinary Standards | <ul style="list-style-type: none"> • Law on Public Health (2024) • Law on Veterinary Medicine (2014; amended 2024) • Sanitary and Veterinary Regulations | Regulate handling of medicines, food products, personal protective equipment (PPE), and veterinary pharmaceuticals. |
| Labor Legislation | <ul style="list-style-type: none"> • Labor Code of the Kyrgyz Republic (2025) • Occupational Health and Safety Rules | Govern hiring of temporary staff, working conditions, remuneration, prohibition of child and forced labor, and contractor liability. |

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| Social Protection & Vulnerable Groups | <ul style="list-style-type: none"> • Law on State Social Support (2017; amended 2024) • Law on Rights and Guarantees of Persons with Disabilities (2008; amended 2025) • Law on Equal Rights and Opportunities for Men and Women (2008; amended 2011) | Ensure consideration of vulnerable groups' needs, mandate a gender-responsive approach, and define eligibility for temporary assistance. |
|---------------------------------------|--|--|

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|-----------------------------------|---|---|
| Petitions & Access to Information | <ul style="list-style-type: none"> • Law on Citizens' Appeals (2007; amended 2025) • Law on Access to Information (2023) | Define the grievance mechanism, citizens' participation rights, and requirements for transparency of project information. |
| Local Government Involvement | Law on Local State Administration and Self-Government Bodies (2021; amended 2024) | Formalizes local authorities' roles in site allocation, public consultations, monitoring, and community information dissemination. |
| Emergency Regime | <ul style="list-style-type: none"> • Law on Civil Protection (2018) • Cabinet Resolution No. 21 on Emergency Classification and Criteria (2025) • National Concept for Population and Territory Protection from Emergencies (through 2030) | Establish the procedures for CERP activation, development of the Crisis Response Plan (CRP), and implementation of priority emergency measures. |

International Commitments and World Bank Standards

The Kyrgyz Republic is party to a number of international treaties and agreements directly relevant to the implementation of CERP. These instruments establish obligations on environmental protection, climate change, waste management, human rights, and labor conditions. Compliance with these international commitments ensures that the Project aligns with both international law and World Bank standards, including the Environmental and Social Framework (ESF).

CERP is implemented in accordance with the World Bank's Environmental and Social Framework (ESF), which comprises ten Environmental and Social Standards (ESS):

- ESS 1 – Assessment and Management of Environmental and Social Risks and Impacts
- ESS 2 – Labor and Working Conditions
- ESS 3 – Resource Efficiency and Pollution Prevention
- ESS 4 – Community Health and Safety
- ESS 5 – Land Acquisition, Restrictions on Land Use, and Involuntary Resettlement (not applicable)
- ESS 6 – Biodiversity Conservation and Sustainable Management of Living Natural

Resources (not applicable)

- ESS 7 – Indigenous Peoples (not applicable in the KR context)
- ESS 8 – Cultural Heritage
- ESS 9 – Financial Intermediaries (not applicable)
- ESS 10 – Stakeholder Engagement and Information Disclosure

CERP, including the ESMP, is designed to meet the requirements of ESS 1, ESS 2, ESS 3, ESS 4, ESS8 and ESS 10.

Where Project activities occur near sensitive ecosystems or cultural heritage sites, the principles of biodiversity conservation and cultural property protection—including “chance find” procedures—must be observed.

This approach upholds the “do no harm” principle, social inclusion, prudent resource management, transparency, and responsiveness to grievances. In addition, the IFC Environmental, Health, and

Safety (EHS) Guidelines are applicable. These Guidelines provide reference levels for emissions, noise, waste handling, and other parameters to guide equipment procurement, materials selection, and waste management under CERP.

Table 2. International Treaties, Conventions, and Frameworks Applicable to CERP

| Category | International Treaty / Framework | Applicability |
|--------------------------|---|---|
| Climate Change | Paris Agreement (2015) | Incorporate climate risks, energy efficiency, and adaptation measures. |
| Climate Change | Kyoto Protocol | Operationalizes the UN Framework Convention on Climate Change by committing industrialized countries and economies in transition to limit and reduce greenhouse gases (GHG) emissions in accordance with agreed individual targets. |
| Access to Information | Aarhus Convention | Apply principles of transparency, public participation, SEP (Stakeholder Engagement Plan), and GRM. |
| Hazardous Waste | Basel Convention | Ensure safe handling and disposal of hazardous wastes, notably medical and packaging materials. |
| Biodiversity | Convention on Biological Diversity & Cartagena Protocol | Account for migration corridors and protect ecosystems in project planning and implementation. |
| Social Rights | Universal Declaration of Human Rights; International Covenant on Economic, Social and Cultural Rights; CEDAW; CRC; CRPD | Safeguard the rights of women, children, and persons with disabilities; ensure social protection measures. |
| Disaster Risk Management | Sendai Framework for Disaster Risk Reduction (2015–2030) | Support priorities for response readiness, resilience building, and interagency coordination. |

Table 3. ILO Conventions Ratified by the Kyrgyz Republic and Applicable to CERP

| ILO Convention No. | Title | Applicability |
|--------------------|--|---|
| 29 | Forced Labour | Mandates abolition of forced labor and ensure its prohibition in all forms |
| 87 | Freedom of Association and Protection of the Right to Organise | Protects the rights of temporary staff and contractors to organize and form associations. |
| 98 | Right to Organize and Collective Bargaining | Guarantees labor rights through collective bargaining mechanisms. |
| 100 | Equal Remuneration | Ensures gender pay equity across project activities. |
| 105 | Abolition of Forced Labour | Prohibits forced labor |
| 111 | Discrimination (Employment and Occupation) | Upholds ESS2 requirements on non-discrimination and fair treatment in recruitment and work. |
| 131 | Minimum Wage Fixing | Governs the establishment and implementation of minimum wage standards |
| 138 | Minimum Age | Prohibits child labor in all project-financed activities. |
| 182 | Worst Forms of Child Labor | Mandates immediate elimination of the worst forms of child labor under all circumstances. |
| 155 | Occupational Safety and Health | Establishes workplace safety and hygiene standards, including during logistics operations. |

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| 190 | Violence and Harassment | Mandates the eradication of violence and harassment within the workplace |
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All CERP activities must adhere to the following universal principles:

- Respect the right to a safe and healthy environment
- Protect the rights of vulnerable groups
- Prohibit forced and child labor
- Apply the “do no harm” principle
- Ensure transparency, participation, and accountability in all interventions

Table 4. Gap analyses in the requirements of national legislation and the requirements of the ESS of the World Bank within the framework of the project

| WB ESS requirements | Environmental and social requirements of national legislation | Gaps | Actions by Project |
|--|---|--|--|
| ESS 1 - Assessment and management of environmental and social risks and impacts - Applicable | | | |
| <p>ESS1 requires the Borrower to identify, assess, and manage environmental and social risks and impacts of the project in a manner consistent with the Environmental and Social Standards (ESSs). It applies a mitigation hierarchy approach:</p> <p>a) anticipate and avoid risks and impacts;</p> <p>b) if avoidance is not possible, minimize or reduce risks and impacts to acceptable levels;</p> <p>c) once risks and impacts have been minimized or reduced, mitigate them; and</p> <p>d) where significant residual impacts remain, offset them if technically and financially feasible.</p> <p>The standard also requires differentiated measures so that adverse impacts do not disproportionately affect disadvantaged or vulnerable groups, and that these groups have equal opportunities to benefit from the project. Where appropriate, national environmental and social institutions, systems, laws, regulations, and procedures should be used. ESS1 promotes continuous improvement of environmental and social performance in a way that strengthens the Borrower's capacity.</p> | <ul style="list-style-type: none"> • Law “On Ecological Expertise” No. 54 of 16.06.1999 (as amended 04.05.2015) – establishes the framework for state environmental review of planned activities. • Law “On Environmental Protection” No. 53 of 16.06.1999 – sets out environmental protection principles, requirements, and responsibilities. • Law “On General Technical Regulations for Ensuring Environmental Safety” No. 151 of 08.05.2009 – includes environmental safety requirements and lists activities subject to EIA. • Regulation on the Procedure for Conducting Environmental Impact Assessment (Gov. Decree No. 60 of 13.02.2015) – establishes EIA stages, content, and approval process. • Regulation on the Procedure for Conducting State Environmental Expertise (Gov. Decree No. 248 of 07.05.2014) – defines SEE procedures and requirements. <p>The national system focuses on environmental risk assessment and applies a “List” of activities subject to EIA/SEE. Social risks are not systematically addressed in EIA procedures.</p> | <ul style="list-style-type: none"> • National legislation prioritizes environmental aspects and lacks a systematic requirement for social risk assessment, including identification of vulnerable or disadvantaged groups and application of differentiated measures. • Public health and safety are addressed only partially in sector-specific regulations, not integrated into EIA. • No explicit requirement for ongoing capacity building or continuous improvement in environmental and social performance. • Risk classification differs: national system is based on activity type; WB uses due diligence and project-specific risk profiling. | <ul style="list-style-type: none"> • Activities requiring a full national EIA/SEE are excluded under the CERP Positive List. This ensures that Substantial and High-risk activities are not eligible for financing. • The unified ESMP is applied as the sole operational tool; no site-specific ESMPs are prepared during activation. • The Environmental and Social Screening Checklist is used to flag relevant risk areas for each Positive List activity. • Mitigation measures are applied from Table 5, which serves as the risk-and-mitigation matrix. • Thematic Annexes of the ESMP (LMP, Waste/Medical Waste, OHS, GBV/SEA/SH, Chance Find, etc.) are activated depending on identified risks. • Monitoring and reporting are conducted through Annex 2 (E&S Reporting Checklist) as an operational emergency template. • Environmental and social risk management is embedded in the ESMP through the Positive List, the Environmental and Social Screening Checklist, Table 5, and the thematic Annexes, enabling the PIU to apply a clear and |

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| | | | <p>practical system under emergency conditions. The step-by-step Procedures for Addressing Environmental and Social Impacts are set out in Chapter VI.</p> |
| <p>ESS 2 - Labor and Working Conditions - Applicable</p> | | | |
| <p>ESS2 recognizes the importance of job creation and income generation in achieving poverty reduction and inclusive economic growth. The standard applies to all categories of project workers — full-time, part-time, temporary, seasonal, and migrant workers.</p> <p>Key requirements:</p> <ul style="list-style-type: none"> • Development and implementation of written Labor Management Procedures (LMP) covering all worker categories. • Clear terms of employment, non-discrimination, and equal opportunity. • Prohibition of child and forced labor. • Establishment of a dedicated grievance redress mechanism (GRM) for workers. • Occupational health and safety (OHS) management, including emergency preparedness and response. • Classification of worker categories in line with ESS2. • Minimum working age requirements in compliance with ESS2. | <ul style="list-style-type: none"> • Labor Code of the Kyrgyz Republic No. 7 of 23.01.2025 (entered into force 28.01.2025) – regulates employment relations, guarantees labor rights, non-discrimination, and safe working conditions. • Law “On Occupational Safety and Health” No. 167 of 01.08.2003 – sets OHS requirements, employer obligations, and worker rights. • Law “On Labor Protection” No. 167 of 01.08.2003 (Art. 2) – outlines labor protection principles. • Kyrgyz Republic has been an ILO member since 31.03.1992 and has ratified 11 core ILO conventions, including on forced labor, child labor, non-discrimination, freedom of association, and collective bargaining. • Law “On the Procedure for Considering Citizens’ Appeals” No. 67 of 04.05.2007 – provides a general grievance mechanism for all citizens, without a specific process for workers. • Law “On Trade Unions” No. 133 of 16.10.1998 (as amended) – guarantees the right to form and join trade unions and regulates collective bargaining. • Law “On Minimum Standards of Social Protection” No. 175 of 19.07.2018 (as amended) – sets minimum social standards, including wages, benefits, and living standards. | <ul style="list-style-type: none"> • No requirement for a unified, project-specific LMP covering all worker categories and linked to ESMPs. • National legislation allows light work for minors aged 14–15 with parental/guardian consent, which may conflict with ESS2 restrictions in emergency projects. • Absence of a dedicated, confidential GRM for project workers. • OHS obligations are not systematically integrated into short-term or emergency project contracts, and there is no ESS2-aligned performance monitoring requirement. • No formal classification of worker categories consistent with ESS2 definitions. | <ul style="list-style-type: none"> • Develop and implement a CERP-specific LMP aligned with ESS2 and national labor law, covering all worker categories. • Require contractors to comply with the Labor Management Procedures (LMP) and implement the Occupational Health and Safety (OHS) measures set out in the ESMP and its OHS Framework. • Enforce prohibition of child labor (under 18 in hazardous work) and forced labor through contractual clauses, Codes of Conduct, and regular monitoring. In addition, establish a minimum age of employment in line with the Labor Code of the Kyrgyz Republic (2025): generally 16 years; exceptionally 15 years with the consent of the workers’ representative body or the authorized state labor authority; and 14 years for schoolchildren engaged in light work during non- school hours with the written consent of a parent/guardian or guardianship authority. A child over the minimum age but under 18 shall not be employed or engaged in connection with the project in any work that is hazardous, interferes with |

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| | <ul style="list-style-type: none"> • Law “On Prevention and Protection against Domestic Violence” No. 63 of 27.04.2017 (as amended) – prohibits domestic violence and establishes protective measures, relevant for workplace GBV/SEA/SH prevention. | | <p>education, or is harmful to the child’s health, physical, mental, spiritual, moral, or social development. All minors under 18 are subject to preliminary and annual medical examinations at the employer’s expense.</p> <ul style="list-style-type: none"> • Establish a confidential, worker-specific GRM with accessible channels and clear timelines for resolution. • Define ESS2 worker categories in the LMP and ensure all receive appropriate protections. • Verify worker age documentation to comply with ESS2 minimum age requirements. • Integrate GBV/SEA/SH prevention measures in Codes of Conduct for all project workers, in line with the Law “On Prevention and Protection against Domestic Violence”. • Ensure workers are informed about their rights to join trade unions and engage in collective bargaining. |
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ESS 3 - Resources and Efficiency, Pollution Prevention and Management - Applicable

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| <p>ESS3 sets requirements to improve resource efficiency, prevent and manage pollution, and avoid or minimize the project’s adverse impacts on human health and the environment. The standard applies throughout the project life cycle and requires alignment with Good International Industry Practice (GIIP), including the World Bank Group Environmental, Health and Safety (EHS) Guidelines.</p> | <ul style="list-style-type: none"> • Law “On Energy Saving and Energy Efficiency” No. 69 of 02.07.2011 – sets energy efficiency requirements across sectors. • Law “On Environmental Protection” No. 53 of 16.06.1999 (last amended 13.06.2024) – sets principles for pollution prevention, waste management, and environmental safety. • Law “On Ecological Expertise” No. 54 of 16.06.1999 – requires environmental | <ul style="list-style-type: none"> • No integrated framework for resource efficiency in all sectors, especially for emergency procurement projects. • No unified project-level pollution prevention planning requirement or obligation to apply international EHS Guidelines. • No explicit requirement for project-specific waste management plans; medical waste handling procedures vary by sector. | <ul style="list-style-type: none"> • Integrate resource efficiency principles into procurement specifications, promoting energy-efficient and low-waste goods and services for CERP activities. • Require contractors to follow WB EHS Guidelines, relevant national standards and thematic site-specific plans • Prepare project-specific waste management procedures in line with national law and ESS3; |
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| <p>Key requirements:</p> <ul style="list-style-type: none"> • Efficient use of energy, water, raw materials, and other natural resources. • Prevention, reduction, and control of pollution (air, water, and land). • Proper management of waste, including hazardous and medical waste. • Safe handling, storage, and disposal of hazardous materials. • Avoidance and reduction of greenhouse gas (GHG) emissions. • Promotion of water efficiency and proper wastewater management. | <ul style="list-style-type: none"> • review of projects, including pollution prevention measures. • Law “On Production and Consumption Waste” No. 89 of 13.11.2001 (last amended 25.04.2024) – regulates hazardous, medical, and municipal waste management, including classification and disposal requirements. • Water Code of the Kyrgyz Republic No. 8 of 12.01.2005 – sets water use and wastewater discharge rules; requires permits for discharges. • Technical regulations, sanitary norms, and environmental safety laws require permits and compliance for handling certain hazardous substances. • Climate policy documents exist but do not impose binding GHG accounting for most activities. | <ul style="list-style-type: none"> • No unified requirement to maintain a hazardous materials inventory or project-level risk management plan. • Lack of mandatory GHG accounting at the project level. • No legal requirement to integrate water efficiency considerations into project design or procurement. | <ul style="list-style-type: none"> • ensure segregation, storage, treatment, and disposal per Annex 6. • Require contractors to prepare hazardous materials handling procedures, maintain inventory, and train staff. • Where relevant, apply WB/IFC GHG estimation methods and prioritize low-emission options in procurement. • Promote water-efficient goods/services in procurement |
| <p>• ESS 4 - Community Health and Safety - Relevance - Applicable</p> | | | |
| <ul style="list-style-type: none"> • ESS4 requires the Borrower to assess and manage risks and impacts to community health and safety arising from project activities, equipment, and infrastructure, with particular attention to individuals and groups that may be vulnerable. <ul style="list-style-type: none"> • Key elements include: • Community health and safety risk management (incl. communicable diseases). • Emergency preparedness and response. • Traffic and road safety. | <ul style="list-style-type: none"> • Law “On Public Health” No. 10 of 12.01.2024 (as amended 07.08.2024) – regulates sanitary and epidemiological safety, communicable disease control, and public health measures. • Law “On Prevention and Protection against Domestic Violence” No. 63 of 27.04.2017 (as amended) – includes measures to protect vulnerable groups, relevant for GBV/SEA/SH risk prevention during community engagement. • Law “On Civil Protection” (2012, as amended 2023) – national disaster risk management system; preparedness, response, and coordination. • Law “On Public Health” No. 10 (12.01.2024) – | <ul style="list-style-type: none"> • No explicit requirement for project-specific Community Health and Safety Plans aligned with WB EHS Guidelines. • Contractors are not expressly required to maintain site-specific emergency preparedness and response plans for temporary/emergency works. • No mandatory Traffic Management Plans tailored to surge logistics and last-mile deliveries. • Limited standards for temporary/emergency structures (e.g., tents, mobile clinics) on stability, fire safety, evacuation, accessibility. • No explicit requirement for community risk assessment related to hazardous materials during emergency operations. | <ul style="list-style-type: none"> • Community Occupational, Health and Safety (OHS) measures are included in this ESMP as general requirements. • Require contractors to follow the Emergency Preparedness and Response measures outlined in the ESMP and OHS Framework, including maintaining emergency contacts, communication protocols, and procedures for incident reporting and response. • Require contractors to comply with the Traffic Safety Management Framework (Annex 8), including measures for safe routing, adherence to speed limits, marshaling of vehicles, ensuring pedestrian safety near |

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| <ul style="list-style-type: none"> • Structural safety of (temporary and permanent) infrastructure. • Safe management of hazardous materials with community risk controls. • Proportionate, rights respecting engagement of security personnel (if any) | <p>sanitary/epidemiological safety, communicable disease control, public health measures.</p> <ul style="list-style-type: none"> • Law “On Traffic in the Kyrgyz Republic” No. 52 of 20 Apr 1998 (as amended 24 Apr 2025); Traffic Regulations– traffic rules, vehicle and operator requirements. • Construction technical regulations (SNIP/technical codes) – structural safety of permanent works; limited guidance for temporary structures. • Law “On Private Detective and Security Activities” No. 35 of 1 Jul 1996 (as amended)– licensing and conduct of private security • Hazardous materials management and safety – regulated under multiple laws, including environmental protection, sanitary safety, and transport legislation. Covers permitting and licensing for the storage, use, transport, and disposal of hazardous substances; requires compliance with safety standards and emergency notification procedures: <ul style="list-style-type: none"> • Law “On Environmental Protection” (1999) • Law “On Public Health” No. 10 (12 Jan 2024) • Law “On the Transportation of Dangerous Goods” No. 22 (02 Feb 2000) • Law “On Industrial Safety of Hazardous Production Facilities” No. 93 (28 May 2015) | <ul style="list-style-type: none"> • No ESS4-aligned provisions on training, proportionality, de-escalation, human rights, and SEA/SH prevention for security personnel (if engaged). | <p>delivery points, and incident reporting.</p> <ul style="list-style-type: none"> • Apply safety criteria to temporary/emergency structures (load/anchoring, fire safety, access/egress, lighting/ventilation, inclusive access). • Include hazardous materials community risk controls (inventories, labeling, segregation, spill kits, community notification protocols, coordination with local authorities). • If security personnel are engaged: adopt a Security Code of Conduct, provide training on human rights, GBV/SEA prevention, proportional use of force, and establish incident and grievance reporting pathways. • Include community-level GBV/SEA/SH awareness measures in engagement plans, in coordination with local protection services and in line with the Law “On Prevention and Protection against Domestic Violence”. |
| ESS 5 - Land Acquisition, Land Use Restrictions and Involuntary Resettlement – Not Applicable | | | |
| ESS 6 – Biodiversity Conservation and Sustainable Management of Living Natural Resources - Not Applicable | | | |
| ESS 7 - Indigenous Peoples - Not applicable | | | |

| ESS 8 - Cultural Heritage – Applicable | | | |
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| <p>ESS8 protects tangible and intangible cultural heritage from adverse project impacts and supports its preservation as part of sustainable development. It requires the application of internationally recognized practices for field surveys, documentation, and protection of cultural heritage, including by contractors and third parties.</p> <p>Key elements:</p> <ul style="list-style-type: none"> • Identification and protection of tangible cultural heritage (archaeological sites, historical monuments, cultural landscapes). • Protection of intangible cultural heritage (traditions, language, folklore). • Implementation of a “chance find” procedure for accidental discoveries during project activities. • Ensuring continued community access to cultural heritage, where feasible. • Avoidance or mitigation of impacts through project design and construction planning. | <ul style="list-style-type: none"> • Law “On the Protection and Use of Historical and Cultural Heritage” No. 91 of 26.07.1999 (as amended 2020) – establishes principles, responsibilities, and prohibitions for the protection of heritage; defines the procedure for identifying, recording, and conserving heritage sites. • Law “On Museums and the Museum Fund of the Kyrgyz Republic” No. 93 of 29.06.1999 – regulates protection and use of museum objects and collections. • National legislation obliges reporting of accidental finds of heritage objects to the authorities, but does not define a standardized project-level “chance find” procedure. • No explicit requirements for maintaining community access to heritage sites during project works. • Limited provisions for intangible cultural heritage within project risk assessment processes. | <ul style="list-style-type: none"> • National law focuses on legal protection and permitting but does not integrate cultural heritage considerations systematically into all project stages, especially emergency operations. • Legal obligation to report finds exists, but there is no detailed, standardized project-level chance find procedure aligned with ESS8. • No specific safeguards for community access to heritage in emergency project contexts. • No formal requirement to assess or mitigate impacts on intangible heritage during procurement or implementation. | <ul style="list-style-type: none"> • Follow Chance Find Procedures |
| ESS 9 - Financial intermediaries - Not applicable | | | |
| ESS 10 - Stakeholder Engagement and Information Disclosure – Applicable | | | |
| <p>ESS10 recognizes the importance of open, transparent, and inclusive engagement with stakeholders as a key element of good international practice. Effective engagement enhances the environmental and social sustainability of projects, improves</p> | <ul style="list-style-type: none"> • Constitution of the Kyrgyz Republic (11.04.2021) – guarantees the right to information and participation in decision-making. • Law “On the Procedure for Considering Citizens’ Appeals” No. 67 of 04.05.2007 – establishes a general | <ul style="list-style-type: none"> • No legal requirement for continuous engagement covering all stakeholder groups throughout the project cycle. • Absence of a mandatory stakeholder mapping process with vulnerability analysis. | <ul style="list-style-type: none"> • Conduct stakeholder mapping at project activation, identifying disadvantaged/ vulnerable groups and tailoring engagement accordingly. • Use multiple channels for disclosure (oral, visual, written) |

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| <p>acceptance, and contributes to successful design and implementation. Key elements:</p> <ul style="list-style-type: none"> • Stakeholder engagement throughout the project life cycle. • Early identification and analysis of all stakeholders, including disadvantaged/vulnerable groups. • Disclosure of project information in accessible, culturally appropriate formats. • Establishment of a project-level Grievance Redress Mechanism (GRM) for all stakeholders. • Regular reporting back to stakeholders on engagement results and grievance resolution. • | <p>framework for receiving and responding to appeals.</p> <ul style="list-style-type: none"> • Law “On the Right to Access Information” No. 217 of 29.12.2023 – regulates access to information held by state and local self-government bodies (replacing earlier laws). • Law “On Local State Administration and Local Self-Government” No. 123 of 20.10.2021 – defines roles of local authorities in public participation and information disclosure. • Law “On the Rights and Guarantees of Persons with Disabilities” No. 38 of 03.04.2008 – requires provision of accessible information. • Law “On State Guarantees of Equal Rights and Equal Opportunities for Men and Women” No. 184 of 04.08.2008 (latest edition 14.07.2011) – prohibits discrimination and promotes equality. • Kyrgyz Republic is a party to the UNECE Aarhus Convention (ratified by Law No. 5 of 12.01.2001) – guarantees rights to access information, public participation, and access to justice in environmental matters. | <ul style="list-style-type: none"> • No specific provisions for accessible, culturally appropriate disclosure (formats, languages) for vulnerable or remote communities. • No project-specific GRM requirement with clear monitoring and reporting obligations. • No obligation to provide feedback to stakeholders on how their input influenced decisions or how grievances were resolved. | <p>and ensure materials are accessible (languages, formats, locations).</p> <ul style="list-style-type: none"> • Establish and operate a project-specific GRM in line with SEP, ensuring confidentiality, multiple entry points, and timely resolution. Where feasible, the GRM will leverage existing national systems for emergency response (such as the MoES national hotline 112 or other sectoral hotlines) to enhance accessibility and efficiency in post-disaster contexts. • Integrate regular public reporting on stakeholder engagement results and grievance outcomes into SEP implementation. • Ensure early, ongoing, and inclusive engagement throughout all phases of CERP, following WB ESS10 and the UNECE Aarhus Convention principles. |
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V. Environmental and Social Impact Mitigation Measures

The CERP implements a limited set of activities during a declared emergency using streamlined procedures and accelerated timelines. Although these activities are not expected to cause significant or irreversible environmental or social impacts, the Project must uphold basic environmental and social management standards. This reduces residual risks, prevents violations, ensures stakeholder engagement, and maintains transparency, non-discrimination, and accountability.

This section describes the additional measures applied under the Project, including screening procedures, occupational health and safety, grievance management, public health safeguards, vulnerable-group inclusion, and information disclosure. These measures comply with the Kyrgyz Republic's legislation and international obligations, reflect the World Bank's Environmental and Social Standards (ESS) for risk management, and draw on the World Bank Group's Environmental, Health, and Safety Guidelines (EHS Guidelines). They are applied proportionately to each activity's nature, scale, and potential risk level.

1. Provision of Essential Services and Supplies for Emergency Response

Note: The Positive List of activities and expenditures under this ESMP is fully aligned with the CERP Project Paper. Additional items mentioned here (e.g., school kits, green stoves) are illustrative sub-categories within the approved categories and do not extend beyond the scope of the Project Paper.

Positive List of Activities

- Provision of direct income support to vulnerable households.
- Distribution of food and essential supplies.
- Provision of emergency water, sanitation, and hygiene (WASH) services.
- Provision of critical pharmaceuticals, medical equipment, and veterinary supplies.
- Provision of essential agricultural inputs.
- Support for the continuation of education during emergencies.
- Storage, transportation, and distribution of emergency goods.

Eligible Expenditures

- Purchase of food and nutritional items for vulnerable households.
- Acquisition of small-scale equipment and materials needed to operationalize emergency mechanisms.
- Procurement of essential emergency equipment and services.
- Acquisition of basic foodstuffs.
- Procurement of WASH-related items, such as:
 - o Bottled water, mobile treatment units, flexible tanks, water filters
 - o Water purification tablets¹⁰, latrine slabs, mobile toilets, plastic sheeting
- Purchase of:
 - o Pharmaceuticals, medical supplies, mosquito nets, ORS packets
 - o Medical equipment (ventilators, PPE, diagnostic tools)
 - o Veterinary medicines, vaccines, animal first aid kits

¹⁰ Must be World Health Organization certified tablets procured through approved vendors like UN agencies/NGOs who can distribute and monitor to prevent misuse and avoid large stockpiles.

- Agricultural inputs (seeds, tools, livestock feed, fertilizers – excluding pesticides)
- Essential NFI items: tarpaulins, hygiene kits, household kits, sleeping mats
- School kits and learning materials
- Small equipment for infrastructure restoration:
 - o Pumps, bridges, heavy machinery to clean up the consequences of emergencies (bulldozers, dump trucks), generators and fuel
 - o Hand tools (spades, hoes, wheelbarrows, etc.)
- Storage, transportation, and distribution costs for emergency goods

2. Emergency Response Coordination and Management

Positive List of Activities

- Coordination of field missions and emergency response teams.
- Management of temporary shelters.
- Supervision, logistics, and support for response operations.
- Project management and implementation support.
- Provision of technical assistance to support emergency operations.

Eligible Expenditures

- Travel, meals, accommodation, and logistics for field missions.
- Vehicle rental and fuel for coordination and supervision teams.
- Temporary rental of office and shelter space.
- Supplies for shelter operations (excluding land, compensation, or sanitation infrastructure).
- Costs of alternative transportation methods and increased utilities.
- Emergency support allowances.
- Project management costs (PIU, CERP, implementation partners).
- Recruitment of additional staff during the emergency period (with World Bank NOL).
- Technical assistance: contracting consultants for emergency response support and procurement preparation.

Table 5. Key risks and impacts, and mitigation measures

| № | Activity / Item | Risks & Impacts | Mitigation Measures | Responsible |
|--|--|--|--|---|
| Category 1. Provision of Essential Services and Supplies for Emergency Response | | | | |
| 1 | Direct income support for vulnerable households in the form of food or cash transfer | <p>Context: This activity ensures the provision of emergency livelihood support to crisis-affected households through either cash transfers or in-kind food aid. Implementation is carried out by the Ministry of Labor, Social Protection and Migration of the Kyrgyz Republic, with logistical support coordinated by the PIU under the Ministry of Emergency Situations. Beneficiary selection is based on the national targeting system, including eligibility filters for remote, low-income, and vulnerable groups. Local government bodies (ayil okmotu) and district-level social services facilitate outreach and support delivery. This activity includes only the delivery of support — long-term food security or livelihood stabilization is beyond its scope.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Exclusion of eligible vulnerable groups (e.g. persons with disabilities, elderly, rural households) due to lack of access to information or registration tools • Complaints of unfair allocation or confusion over entitlements • Potential fraud or diversion of assistance at local level • Safety and dignity risks for women or elderly at distribution points (overcrowding, lack of facilities) • Food hygiene risks (if in-kind) during temporary storage or transport • Waste generation risk | <ul style="list-style-type: none"> • Apply national targeting criteria and ensure field validation through local social protection officers • Disseminate accessible information via radio, printed posters, mobile outreach, and village leaders • Use community feedback mechanisms (GRM) at district and village level, with anonymous options • Ensure distribution points are safe, have shaded waiting areas, and provide gender-sensitive arrangements • Monitor distribution with local observers and social inspectors • For in-kind food, enforce expiry date checks and compliance with food safety rules • Maintain a beneficiary list and ensure grievance follow-up is documented | PIU / MoES KR / Ministry of Labor, Social Protection and Migration KR |
| 2 | Acquisition of small-scale equipment and materials | <p>Context: This activity supports the initial deployment of emergency mechanisms through the procurement of compact and</p> | <ul style="list-style-type: none"> • Ensure that technical specifications include usability in mountainous and remote areas, extreme weather conditions, and compliance with | PIU / MoES KR |

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| | <p>needed to operationalize emergency mechanisms</p> | <p>mobile equipment — such as personal protective kits, handheld tools, flashlights, documentation forms, or small field kits. These items are centrally procured by the PIU under the Ministry of Emergency Situations and allocated to response teams across the country. The procurement excludes installation, heavy equipment, or capital construction. Timely availability of these materials is crucial for supporting mobile teams, temporary shelters, and medical outreach units.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Delays in delivery due to difficult terrain, poor road access, or seasonal blockages • Incomplete or incompatible equipment sets due to rushed procurement • Risks of unsafe labor practices at supplier sites (e.g. lack of PPE, temporary labor)— while most suppliers’ workers are not considered primary supply workers under ESS2, contractors and suppliers are still required to comply with national labor law and the LMP provisions • Packaging waste accumulation in areas without waste collection • Absence of instructions in local languages, causing errors in usage or setup • Double delivery or under-distribution due to weak tracking at local level | <p>industry safety standards, while also considering gender aspects (e.g. appropriate sizing, accessibility, ease of use for both men and women)</p> <ul style="list-style-type: none"> • Apply labor safety checks through the Labor Management Procedures (Annex 3) • Require all manuals and labels to be in Kyrgyz and Russian • Conduct spot checks on equipment sets before delivery to district units • Use delivery logs and issue slips with QR codes or paper confirmation • Include clear clauses for packaging disposal, and link to the Waste Management Framework (Annex 6) • Work closely with district emergency commissions and social workers to manage the final delivery of goods to beneficiaries • Operate a feedback hotline and incident reporting via GRM <ul style="list-style-type: none"> • Acquisition of resource efficient equipment | |
| 3 | <p>Procurement of essential emergency equipment and services</p> | <p>Context: This activity includes the urgent procurement of basic emergency equipment and support services to maintain life- saving operations and enable rapid response. Items may include power banks, portable chargers, first-aid essentials, handheld radios, rescue tools, thermal blankets, and other emergency-use goods. It may also cover essential logistics services, including short-term rental of vehicles or generators for immediate deployment. Procurement is organized by the PIU under the Ministry of Emergency Situations (MoES) based on needs identified by territorial departments or through activation of national emergency</p> | <ul style="list-style-type: none"> • Require certification of emergency equipment and proof of compliance with local safety standards • Specify compatibility with national electrical standards (e.g., 220V sockets, plug types) • Include handling, lifting, and storage guidelines in local languages • Apply Labor Management Procedures (Annex 3) and require PPE use during loading/unloading • Mandate testing (if applicable) before handover to local emergency units • Implement Waste Management Framework (Annex 6) and prohibit uncontrolled disposal | <p>PIU / MoES KR</p> |

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| | | <p>response protocols. This component does not include long-term infrastructure, fixed installations, or deployment services post-delivery.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Delays in procurement or delivery to remote districts during weather-related access restrictions • Equipment failure due to substandard quality or incompatibility with local power systems • Lack of calibration or safety testing for critical emergency gear • Occupational health and safety (OHS) risks during deployment and use of equipment, including manual handling injuries, electrical hazards, and inadequate PPE • Improper labeling or unclear usage instructions • Generation of packaging waste in field sites without waste collection systems <p>Poor labor conditions at supplier or packaging sites (while most workers are not considered primary supply workers under ESS2, compliance with labor law and LMP provisions is required)</p> | <ul style="list-style-type: none"> • Distribute checklists and usage guides as part of each delivery package • Operate the GRM to handle incidents of faulty supplies or misuse <ul style="list-style-type: none"> • Resource efficient equipment | |
| 4 | Acquisition of basic foodstuffs | <p>Context: This activity supports the emergency procurement of essential non-perishable food items — such as flour, cereals, canned goods, cooking oil, or salt — to be distributed to crisis-affected populations as in-kind assistance. Procurement is organized through the PIU under the Ministry of Emergency Situations, in cooperation with the Ministry of Agriculture and/or the Ministry of Labor, Social Protection and Migration. The activity is limited to the acquisition and handover of goods; storage, repackaging, or final distribution is the responsibility of receiving authorities or agencies. Food is typically delivered to temporary distribution hubs or regional warehouses for further delivery.</p> <p>Risks & Impacts:</p> | <ul style="list-style-type: none"> • Procure only from certified food suppliers registered under national sanitary and food safety rules • Require visible expiry dates, batch tracking, and labels in Kyrgyz and Russian • Include clause requiring proper food-grade packaging (moisture- and pest-resistant) • Conduct on-site verification of packaging and product quality upon delivery • Use distribution plans linked to verified beneficiary lists and inclusion principles (see SEP) • Apply Labor Management Procedures (Annex 3) for all supplier contracts • Provide unloading teams with gloves and clear safe handling instructions • Coordinate with local authorities for secure and sanitary short-term storage | PIU / MoES KR / Ministry of Agriculture KR / Ministry of Labor, Social Protection and Migration |

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| | | <ul style="list-style-type: none"> • Delivery of spoiled, expired, or mislabelled food due to weak quality control or hot weather • Hygiene breaches during temporary storage in unsanitary or unventilated locations • Lack of allergen or ingredient information in Kyrgyz/Russian • Inequitable distribution or unclear eligibility criteria, leading to and related complaints and community tensions • Injuries during manual unloading (e.g., sacks, boxes) • Large volumes of packaging waste in villages with no waste collection • Labor violations at supplier warehouses or during transport • Waste generation | <ul style="list-style-type: none"> • Implement Waste Management Framework (Annex 6) and avoid bulk dumping in rural areas • Use GRM for reporting of spoiled food, delivery issues, or complaints on fairness | |
| 5 | Procurement of WASH-related items | <p>Context: This activity supports the urgent acquisition of portable water supply and sanitation solutions to prevent disease and ensure access to safe drinking water in crisis settings. Items may include bottled water, flexible storage tanks, mobile water treatment plants, household filters, chlorine tablets, latrine platforms, and plastic sheeting for basic sanitation enclosures. Procurement is carried out through the PIU under the Ministry of Emergency Situations, in consultation with the Ministry of Health and the Sanitary and Epidemiological Service of the Kyrgyz Republic. This activity excludes installation and maintenance, which are handled by local utility services or temporary shelter teams.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Unsafe storage or transport of chemical reagents (e.g. chlorine tablets) • Exposure to hazardous substances during unpacking or misapplication • Insufficient labeling or lack of instructions in Kyrgyz/Russian • Water contamination due to misused or improperly maintained equipment | <ul style="list-style-type: none"> • Procure only from certified vendors authorized to supply drinking-water and sanitation kits • Include clauses requiring safe packaging and transport of any disinfectants or chemical products • Ensure clear bilingual labeling and usage instructions for all equipment and tablets • Include material safety data sheets (MSDS) for all reagents and sanitation chemicals • Prohibit combined storage of water and fuel, or placement near ignition sources • Use distribution plans linked to verified beneficiary lists and inclusion principles (see SEP) • Apply Labor Management Procedures (Annex 3) to ensure safe handling at supplier and delivery level • Implement Hazardous Waste & Packaging Management Plan (Annex 6) for chemical and plastic disposal | PIU/ MoES / Ministry of Health KR |

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| | | <ul style="list-style-type: none"> • Packaging waste (plastic bottles, containers, pallets) accumulating at remote sites • Labor risks at supplier warehouses (manual loading of heavy drums or tanks) • Inequitable access and delivery delays to remote areas due to road washouts or blocked access | <ul style="list-style-type: none"> • Use GRM to log and respond to any misuse, product faults, or complaints of unsafe practices • Coordinate with local water utilities or emergency shelter units for safe handover and installation • Track temperature-sensitive items during transport and delivery | |
| 6 | <p>Purchase of pharmaceuticals, medicines, medical supplies, oral rehydration salt packets, and essential medical equipment such as ventilators, personal protective equipment (PPE), and various diagnostic tools</p> | <p>Context: This activity covers the procurement of critical medical inputs required for emergency healthcare response, including pharmaceuticals, diagnostic kits, rehydration packets, PPE, and essential life-support equipment. All procurement is carried out through the PIU under the Ministry of Emergency Situations, in close coordination with the Ministry of Health of the Kyrgyz Republic. Only certified suppliers with Ministry of Health registration may be used. The activity includes procurement only — storage, handling, and use are the responsibility of the receiving medical institutions. No procurement of radioactive, expired, or non-certified items is allowed.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Procurement of substandard or counterfeit drugs due to time pressure or poor vetting • Lack of cold chain or temperature control during transport, especially in summer • Packaging in foreign languages, with no instructions in Kyrgyz/Russian • Medical waste generation (expired medicines, PPE, damaged diagnostic kits) • Unsafe labor conditions at supplier warehouses (manual loading, chemical exposure) • Improper handling or storage at interim depots, risking spoilage or contamination • Inequitable distribution and delivery delays or blocked customs clearance at borders during emergencies | <ul style="list-style-type: none"> • Procure only from certified pharmaceutical suppliers registered by the Ministry of Health • Require WHO-prequalified or national-standard compliant items • Enforce packaging and transport requirements including sealed containers, cold boxes (if needed) • Include instructions and dosage information in Kyrgyz and Russian in all deliveries • Use distribution plans linked to verified beneficiary lists and inclusion principles (see SEP) • Apply Labor Management Procedures (Annex 3) for supplier staff and handling personnel • Track expiry dates, batch numbers, and maintain delivery records with verification by recipient • Implement Medical Waste Management Plan (Annex 7) for damaged, expired, or unused items • Require transport contractors to follow hygiene and security protocols (no fuel/food near medicine) • Use the Project GRM to capture reports of non-compliant deliveries or unsafe conditions | PIU / Ministry of Health KR |

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| 7 | Procurement of veterinary medicines and supplies, including animal first aid kits, medications, vaccines, and medical supplies. | <p>Context: This activity includes the procurement of essential veterinary supplies to support emergency response in the livestock sector, including vaccines, antibiotics, and basic treatment kits. Procurement is implemented through the PIU under the Ministry of Emergency Situations, in collaboration with the Ministry of Agriculture of the Kyrgyz Republic and its Department of Veterinary and Phytosanitary Safety. All veterinary products must comply with national animal health standards and be approved for use in the Kyrgyz Republic. The activity includes procurement only — storage, administration, and distribution are carried out by veterinary units and district agriculture departments.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Supply of expired, counterfeit, or non-registered drugs due to weak quality assurance • Breach of cold chain requirements for vaccines during transport in warm seasons • Instructions only in foreign languages, with no local language guidance • Injuries during manual handling (e.g. needles, glass vials, heavy feed sacks) • Improper administration of vaccines due to lack of training • Hazardous or pharmaceutical waste from expired/unused veterinary supplies • Traffic risks during rural delivery, especially in remote mountainous zones • Inequitable distribution | <ul style="list-style-type: none"> • Procure only from veterinary suppliers approved by the Ministry of Agriculture or relevant national body • Require proof of origin, batch documentation, and registration in KRG’s national veterinary register • Enforce transport standards including cold boxes or refrigerated containers for temperature-sensitive vaccines • Provide instructions in Kyrgyz and Russian, including dosage and contraindications • Use distribution plans linked to verified beneficiary lists and inclusion principles (see SEP) • Apply Labor Management Procedures (Annex 3) and require safe handling practices by supplier teams • Implement Waste Management Plan (as part of Annex 6) • Ensure safe transport routes and backup options for hard-to-reach areas • Include GRM channels to report vaccine reactions, damaged goods, or adverse events • Coordinate with district veterinary departments for safe receipt, storage, and use of supplies | PIU / Ministry of Agriculture KR |
| 8 | Purchase of agricultural inputs such as seeds, tool kits, livestock feed, essential fertilizers, except for the purchase of pesticides. | <p>Context: This activity supports rural households and small-scale farmers affected by emergencies through the provision of essential agricultural inputs, including crop seeds, hand tools, livestock feed, and basic fertilizers. Procurement is managed through the PIU under the Ministry of Emergency Situations, in coordination with the Ministry of Agriculture of the Kyrgyz Republic. Pesticides are strictly excluded</p> | <ul style="list-style-type: none"> • Procure only certified seeds and fertilizers registered in the national input register • Include agronomic suitability and region-specific criteria in technical specifications • Require packaging and labels in Kyrgyz and Russian with usage instructions | PIU / Ministry of Agriculture KR |

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| | | <p>from this activity. Inputs are distributed via local authorities or district agricultural departments. The activity includes only procurement — use and application remain under the responsibility of recipients and local implementers.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Supply of low-quality or non-adapted seeds leading to poor harvest • Mislabeled or untested fertilizers causing soil degradation or crop damage • Heavy manual handling injuries (e.g. sacks of feed or fertilizer) • Lack of instructions in Kyrgyz/Russian on safe use, dosage, or storage • Contamination of surface water from fertilizer run-off or misuse • Unfair distribution or exclusion of eligible farmers and related complaints • Generation of plastic and packaging waste in rural areas with no disposal system | <ul style="list-style-type: none"> • Apply Labor Management Procedures (Annex 3) to ensure safe loading/unloading practices • Prohibit any pesticide procurement under CERP activities • Implement Waste Management Framework (Annex 6), with instructions on proper bag/container disposal • Use distribution plans linked to verified beneficiary lists and inclusion principles (see SEP) • Require confirmation of receipt and tracking lists from local distribution points • Use GRM channels for complaints about input quality, distribution fairness, or safety concerns • Provide training leaflets or pictorial guides for safe fertilizer and feed use | |
| 9 | <p>Acquisition of essential supplies such as tarpaulins, buckets, sleeping mats, personal hygiene kits, household kits, etc.</p> | <p>Context: This activity includes the emergency procurement of basic non-food items (NFIs) to support displaced households or individuals affected by natural or other emergencies. Items may include plastic sheeting, buckets, soap, sleeping mats, towels, combs, and household tools. Procurement is carried out by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic, and deliveries are coordinated with local governments and emergency shelter providers. The activity does not include installation or repackaging — items are delivered as pre-packed kits or in bulk for direct distribution.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Inadequate product quality (e.g. thin plastic, easily torn mats, expired soap) • Lack of gender-sensitive or culturally appropriate hygiene materials | <ul style="list-style-type: none"> • Procure only from suppliers who can meet humanitarian NFIs quality standards • Ensure technical specifications include minimum size/thickness/weight for key items (e.g. tarpaulin gsm) • Require hygiene kits to include culturally appropriate items for women and children • Include safe lifting and handling requirements in supplier contracts (linked to LMP – Annex 3) • Label all kits and items in Kyrgyz and Russian, with diagrams where needed • Track kit distribution to avoid duplication and ensure fair coverage • Implement Waste Management Framework (Annex 6), especially in remote and unserved areas • Use the GRM for beneficiary feedback or to address issues of missing/inferior items | PIU / MoES KR |

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| | | <ul style="list-style-type: none"> • Unsafe working conditions at supplier packaging sites (temporary/seasonal workers) • Slips, trips, or musculoskeletal injuries during unloading of large or heavy NFIs • Inadequate labeling or assembly instructions for collapsible items (e.g. buckets, water containers) • Waste generation from plastic packaging in temporary camps or remote villages • Complaints over duplication or gaps in distribution | <ul style="list-style-type: none"> • Work closely with district emergency commissions and social workers to manage the final delivery of goods to beneficiaries | |
| 10 | Acquisition of school kits and Acquisition of school kits and support for continuation of education process. | <p>Context: This activity supports continuity of learning for children affected by emergencies through the procurement of school kits (notebooks, pens, backpacks, etc.), temporary classroom items (tables, benches, whiteboards), and learning tents. Procurement is coordinated by the PIU under the Ministry of Emergency Situations, in consultation with the Ministry of Education and Science of the Kyrgyz Republic. Delivery is made to schools, temporary learning centers, or education authorities. The activity includes procurement only — teaching, supervision, and classroom operation fall outside project responsibility.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Substandard or inappropriate school supplies (e.g. toxic materials, unsafe furniture) • Missing or delayed delivery, disrupting school continuity • Lack of instructional materials in local languages • Physical injury during unloading or setup (e.g. sharp table edges, heavy boxes) • Fire or hygiene hazards in temporary tents (e.g. poor ventilation, flammable materials) • Gender or vulnerability bias in access to kits (e.g. children with disabilities not accounted for) • Excess packaging waste in temporary learning centers or remote schools | <ul style="list-style-type: none"> • Procure only from suppliers familiar with humanitarian or public education supply standards • Require safety and quality certifications (e.g. fire retardancy, non-toxic materials) • Include bilingual (Kyrgyz/Russian) labels and simple pictorial guides where needed • Apply Labor Management Procedures (Annex 3) to handling and unloading operations • Provide soft-edged, stable, and lightweight furniture; prohibit dangerous components • Implement Waste Management Framework (Annex 6) for packaging and damaged items • Use GRM to capture feedback from school staff, parents, or education departments • Coordinate with school administrations to ensure fair allocation, including to vulnerable groups • Prohibit installation of tents or equipment in flood-prone or unstable locations | PIU / Ministry of Education KR |
| 11 | Small equipment for infrastructure restoration: • Pumps, mobile bridges, | <p>Context: This activity includes the urgent procurement or rental of small and heavy equipment needed to restore access, repair</p> | <ul style="list-style-type: none"> • Procure only from licensed rental firms and certified equipment suppliers | PIU / MoES KR |

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| | <p>heavy machinery (bulldozers, dump trucks), generators and fuel</p> <ul style="list-style-type: none"> • Hand tools (spades, hoes, wheelbarrows, etc.) | <p>critical infrastructure, and support emergency operations after disasters. Equipment may include pumps for flood response, temporary or movable bridges, heavy machinery for debris clearance, generators for emergency power, and basic hand tools for field teams. Procurement is managed by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic, in consultation with local emergency response units. Equipment is either handed over to relevant agencies or temporarily rented and operated under separate contracts. Use, maintenance, and fuel handling are the responsibility of the end user.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Unsafe operation or poor maintenance of rented/loaned equipment leading to accidents • Occupational health and safety (OHS) risks during operation and handling of tools or small machinery (e.g., wheelbarrows, pumps) including risks not limited to manual handling • Community occupational health and safety (OHS) risks, such as traffic safety during equipment transport, unsafe setup of temporary infrastructure, or improper use of machinery near populated areas • Fire, noise, or exhaust hazards from poorly ventilated generator operation • Soil erosion or ecological damage from inappropriate equipment use in sensitive zones • Improper handling or storage of fuel, oils, or lubricants • Unlicensed operators or missing documentation for heavy vehicles • Delays in delivery due to weather, road blockages, or lack of local suppliers | <ul style="list-style-type: none"> • Include documentation requirements for operators, equipment condition, and maintenance logs • Apply Labor Management Procedures (Annex 3) and OHS standards during transport and handover • Include fuel safety handling guidelines in procurement documents (no storage near shelters, food, or water sources) • Enforce fire safety measures for generator operation (e.g. ventilation, no open flames nearby) • Coordinate with local authorities to avoid ecological damage in highland or riverside zones • Implement Waste Management Framework (Annex 6) for used fuel containers, oil filters, and worn-out tools • Use GRM to log reports of unsafe operation, environmental damage, or equipment failure • Require visual inspection and safety briefing at time of delivery | |
| 12 | <p>Storage, transportation, and distribution costs for emergency goods</p> | <p>Context: This activity covers the logistical chain required to move emergency goods — such as food, WASH supplies, medical kits, NFIs, agricultural inputs, and small equipment — from central warehouses to regional hubs and final distribution points. Eligible expenditures include short-term rental of storage space, payment for transport services, fuel, and</p> | <ul style="list-style-type: none"> • Use vetted and licensed transport and storage providers • Ensure storage facilities meet minimum safety and hygiene requirements (pest control, ventilation, security) | <p>PIU / MoES KR / relevant line ministries / local governments</p> |

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| | | <p>handling costs. Implementation is carried out by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic, in coordination with relevant line ministries and local authorities. This activity excludes construction of permanent storage facilities or purchase of long-term transport assets.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Damage, spoilage, or loss of goods during storage or transport • Delays in delivery due to poor road access, weather conditions, or logistical bottlenecks • Unsafe manual handling at loading/unloading points, leading to injuries • Theft or diversion of goods in transit or at storage locations • Inadequate storage conditions causing contamination or deterioration (e.g. lack of ventilation, pest control) • Fuel leakage or improper waste disposal from transport vehicles • Inequitable distribution and community tensions if distribution is perceived as unfair | <ul style="list-style-type: none"> • Apply Labor Management Procedures (Annex 3) for all handling and transport staff • Use sealed containers or tamper-evident packaging for high-value or sensitive goods • Implement delivery tracking (GPS, waybills, or QR codes) to monitor movement and prevent diversion • Provide PPE and safe lifting training for loading/unloading crews • Follow Waste Management Framework (Annex 6) for disposal of damaged packaging or goods • Coordinate delivery schedules with local authorities to avoid crowding and ensure equitable distribution • Operate GRM channels for complaints related to delivery, storage, or fairness of allocation | |
| Category 2. Emergency Response Coordination and Management | | | | |
| 13 | Emergency response coordination and management | <p>Context: This activity includes procurement of basic equipment, furniture, and temporary facilities to enable emergency coordination. It also supports project-related operational needs such as logistics centers, mobile coordination offices, IT equipment, and temporary working spaces. Activities are managed by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic and do not include long-term infrastructure or major construction. Operations are time-limited to the activation period of CERP.</p> <p>Risks & Impacts:</p> | <ul style="list-style-type: none"> • Apply Labor Management Procedures (Annex 3) to PIU, temporary staff, and contractors • Ensure temporary facilities meet minimum standards for OHS (ventilation, space, lighting, sanitation) • Procure only certified electrical and communication equipment with fire and safety ratings • Coordinate closely with local emergency commissions and PIU • Use Stakeholder Engagement Plan (SEP) to communicate roles, responsibilities, and coordination protocols | PIU / MoES KR |

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| | | <ul style="list-style-type: none"> • Poor working conditions in temporary coordination centers (lack of ventilation, heating, lighting) • Delays in procurement or installation of critical coordination tools (e.g. communication equipment) • Overlap or misalignment of mandates across emergency stakeholders (local vs national levels) • Overcrowding or exposure to infection risks in shared spaces • OHS risks during setup (lifting, unstable wiring, fire hazards) • Public distrust if coordination appears ineffective or opaque | <ul style="list-style-type: none"> • Track operational purchases using simple asset logs and documentation systems • Implement Health & Safety Plan (Annex 4) for all temporary workplaces • Use the GRM to report grievances, safety hazards, or confusion in emergency coordination • Prohibit use of non-grounded power cords, indoor generator operation, or ad hoc installations | |
| 14 | <p>Financing of the influx of responders and repair teams in line with eligible expenses on IDA financing.</p> | <p>Context: This activity includes financing of field missions for government responders, repair crews, and technical specialists deployed to emergency-affected areas. It covers transport, lodging, meals, fuel, and minor operating costs during temporary assignments. Procurement is handled by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic and follows national regulations and CERP procedures. Only expenses incurred during CERP activation periods are eligible. Long-term hiring or construction of lodging facilities is excluded.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Overcrowded or unsafe accommodation (lack of fire safety, hygiene, basic OHS) • Labor-related risks for temporary workers and volunteers (long shifts, lack of insurance) • Disputes over per diem or reimbursement inconsistencies • Road safety risks in mountainous areas, especially during winter deployment • Risk of gender-based violence or harassment in mixed lodging or isolated work settings • Fatigue, heat stress, or cold exposure affecting responder safety | <ul style="list-style-type: none"> • Apply Labor Management Procedures (Annex 3) to all deployment contracts • Use vetted lodging providers that meet minimum safety, hygiene, and accessibility standards • Include safe transport clauses in agreements (vehicle conditions, driver requirements, seatbelts) • Require separation by gender in shared lodging; provide GBV/SEA prevention guidance (see SEP) • Ensure responders are briefed on emergency health, safety, and community interaction protocols • Implement GRM for responders and host communities to report any misconduct, risk, or concerns • Avoid deployments exceeding regulated shift hours; provide adequate rest breaks and meals • Use transparent reimbursement and per diem tracking systems • Coordinate movements with local authorities to prevent misunderstandings or social tension | PIU / MoES KR / local governments |

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| | | <ul style="list-style-type: none"> Community tensions if local labor is not engaged or host areas feel overburdened | | |
| 15 | <p>Temporary shelter: administration of shelters, including payments for shelter management activities, such as temporary rental of office space and the acquisition of goods necessary for the operation of shelters. It does not include shelter-related activities such as land agreements and compensation or the provision of sanitation and waste management services.</p> | <p>Context: This activity covers administrative and operational support to emergency shelters. It includes procurement of basic goods (e.g. tables, chairs, cots, office supplies), temporary rental of office spaces, and operational needs for staff overseeing shelter functioning. It does not include construction, land acquisition, sanitation infrastructure, or permanent facilities. Implementation is led by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic in coordination with local authorities and shelter managers.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> Unsafe or overcrowded shelter administrative spaces (risk of fire, falls, poor hygiene, spread of communicable diseases, and SEA/SH risk) Disorganized shelter recordkeeping or staff shortages during peak influx Labor risks for shelter staff and volunteers (long hours, unclear responsibilities) Stress, burnout, and poor mental health among frontline shelter teams Lack of furniture or materials suitable for children, elderly, or persons with disabilities (e.g. accessible design of temporary facilities, safe access routes, and inclusive communication materials). Community dissatisfaction if shelters are mismanaged or perceived as inequitable | <ul style="list-style-type: none"> Apply Labor Management Procedures (Annex 3) to shelter managers and support staff, including SEA/SH prevention measures and compliance with the Code of Conduct Require fire-safe, accessible, and well-ventilated administrative spaces Include safe furniture standards and ergonomic requirements in procurement specs Provide shelter staff with training on protection, safety, and grievance intake Coordinate shelter layouts and staff responsibilities with local emergency commissions Implement GRM to receive and respond to complaints from shelter residents or staff, including SEA/SH aspects Track asset delivery, usage, and condition with simple inventory tools Prohibit use of unsafe temporary structures, open-flame heating, or overloading of power sources Ensure data privacy and secure handling of personal records (if stored in shelters) | <p>PIU / MoES KR / local governments and shelter operating entities</p> |
| 16 | <p>Transport, utility bills, and overtime costs for emergency coordination</p> | <p>Context: This activity covers operating expenses incurred during emergency response coordination and supervision, such as renting vehicles for field missions, covering fuel costs, paying increased utility bills for emergency facilities, and compensating staff for verified overtime. The activity is time-bound to the CERP activation period and managed by the PIU under the Ministry of Emergency Situations of the</p> | <ul style="list-style-type: none"> Apply Labor Management Procedures (Annex 3) to overtime and temporary staff arrangements Require proper documentation (timesheets, route logs, receipts) for all transport and utility claims Use vetted transport providers and enforce minimum safety standards (vehicle condition, driver competence) Ensure fuel/electricity costs are tracked and aligned with verified emergency needs | <p>PIU / MoES KR / in coordination with line ministries and local government agencies</p> |

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| | | <p>Kyrgyz Republic. Long-term contracts, capital purchases, or permanent wage increases are excluded.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Unsafe or overburdened transport arrangements (e.g. unfit vehicles, overloading) • Disputes over overtime calculation or unequal compensation • Energy shortages or price spikes impacting essential coordination services • Staff fatigue and performance decline due to long working hours • Inadequate accountability for fuel and electricity use under crisis conditions | <ul style="list-style-type: none"> • Provide rest breaks and shift rotation for staff under high workload • Maintain simple cost-monitoring logs for additional expenses under this component • Use GRM to allow staff or public to report concerns regarding unfair payments or service gaps | |
| 17 | <p>Project management & support staff: Project management costs, including support for additional work for PIU staff, CERP and implementing partners, and recruitment of additional staff required during the CERP activation period, with the World Bank NOL.</p> | <p>Context: This activity covers operational and administrative expenditures to ensure timely implementation of CERP. Eligible costs include overtime compensation for PIU staff, hiring of short-term technical or fiduciary consultants, and logistical support for coordination and reporting. Long-term staffing, procurement of high-value assets, or structural expansion of institutions is excluded. All positions must be justified, documented, and approved in line with World Bank requirements. Activity is managed by the PIU under the Ministry of Emergency Situations.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Unclear roles or excessive workload among PIU and temporary staff • Recruitment without merit-based procedures or transparency • Inconsistent payment terms or delayed salaries • Conflicts of interest or nepotism in hiring short-term consultants • Inadequate orientation of new staff on E&S procedures, GRM, or stakeholder engagement | <ul style="list-style-type: none"> • Apply Labor Management Procedures (Annex 3) to all project staff, including short-term contracts • Use transparent hiring processes, with ToRs, qualification requirements, and competitive selection • Obtain World Bank No Objection Letter (NOL) prior to engaging new staff under CERP • Provide E&S induction, GRM training, and code of conduct (Attachment 1 to LMP) briefings for all new personnel • Use time-tracking, payment verification, and performance assessment tools • Ensure GRM access for staff to report concerns regarding working conditions or project integrity • Maintain clear documentation of staffing decisions, justifications, and outcomes • Cap management costs within limits defined in the CERP Manual and project agreements | <p>PIU / MoES KR / in consultation with the Ministry of Finance and the World Bank</p> |
| 18 | <p>Technical assistance & just-in-time expertise:</p> | <p>Context: This activity includes short-term consultancy services to enhance the technical, legal, social, environmental, or</p> | <ul style="list-style-type: none"> • Use competitive and merit-based selection processes in line with World Bank Procurement Guidelines | <p>PIU / MoES KR / in coordination with relevant sector</p> |

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| | <p>Funding of technical assistance, including international and local specialized expertise (consultancy) to support emergency response operations and provide timely technical assistance, preparation of technical documents for procurement</p> | <p>financial readiness of the project during emergencies. Typical tasks may include preparation of technical specifications, risk assessments, procurement documentation, social or environmental management plans, and capacity-building. The activity is managed by the PIU under the Ministry of Emergency Situations of the Kyrgyz Republic and must follow World Bank procurement and contract management procedures.</p> <p>Risks & Impacts:</p> <ul style="list-style-type: none"> • Selection of underqualified or non-relevant experts • Delayed or poor-quality outputs undermining emergency timelines • Conflicts of interest or limited transparency in consultant selection • Gaps in consultant understanding of national procedures or local context • Insufficient attention to cross-cutting risks (e.g. GBV, disability inclusion, language barriers) • Public mistrust in externally funded expertise if outputs are not disclosed or explained | <ul style="list-style-type: none"> • Require Terms of Reference (ToR) that clearly define outputs, timelines, and coordination duties • Ensure all consultants are briefed on relevant national regulations and CERP-specific procedures • Apply Labor Management Procedures (Annex 3) to all contracts • Integrate Stakeholder Engagement Plan (SEP), GRM, and relevant annexes (e.g. GBV protocols, Annex 9) into consultancy tasks where applicable • Track deliverables against agreed milestones and ensure timely clearance/review • Maintain documentation of all decisions and consultant selection steps • Share consultant outputs (summaries or public versions) with stakeholders where possible | <p>ministries and with prior No Objection from the World Bank (where required)</p> |
|--|--|--|---|--|

VI. Classification of Environmental and Social Risks

Based on preliminary screening and analysis, the CERP has been classified as a *Moderate Risk* project under the World Bank's Environmental and Social Framework (ESF). The Project focuses primarily on rapid procurement, logistics, and emergency support to vulnerable groups. While significant, irreversible, or cumulative impacts are not expected, some activities may generate environmental and social risks that must be managed under this ESMP.

Environmental Risks and Impacts

- Waste generation (packaging, sanitary, domestic, medical, PPE, disinfectants, single-use containers).
- Water and sanitation hazards (sludge, sediment, pollutants from pumps, tanks, sanitation equipment).
- Noise, dust, and emissions (from unloading, stockpiling, delivery, and relief operations).
- Fire and technical safety (generators, electrical cables, heaters, gas cylinders, PPE).
- Transport and road-safety risks (accidents during rapid

deliveries). All activities must follow ESS3 and IFC EHS Guidelines.

Social Risks and Impacts

- Exclusion of vulnerable groups (women, elderly, disabled, IDPs, remote households).
- Gender-based violence (GBV), sexual exploitation and harassment (SEA/SH).
- Labor risks (working conditions, OHS, lack of contracts for contractors/temporary workers).
- Communication barriers (limited access to information, digital divides).
- Cultural heritage risks (potential damage from equipment near protected sites).
- Psychosocial stress (anxiety among workers and beneficiaries).
- Community health and safety (traffic risks, temporary infrastructure, hazardous materials).

Risk Limitation and Eligibility Criteria

CERP financing is strictly limited to activities included in the **Positive List**.

- Any activity outside the Positive List is ineligible.
- Activities requiring a full Environmental Impact Assessment (EIA) and State Environmental Review (SEE) under national legislation are considered Substantial/High risk and will not be financed.
- As a result, CERP interventions will remain focused on procurement and logistics, with risks managed at a moderate and controllable level.

Procedures for Addressing Environmental and Social Impacts

Step 1 – Positive List confirmation

Confirm that the activity is included in the Positive List. Activities outside are automatically excluded.

Step 2 – Risk cut-off

Check whether the activity requires a full EIA/SEE under national law. If yes, the activity is excluded as Substantial/High risk.

Step 3 – Use of Screening Checklist (Annex 1)

The checklist incorporates decision-tree logic and covers key environmental and social aspects (waste, pollution, labor, vulnerable groups, stakeholder engagement, GBV/SEA/SH, community safety, biodiversity, cultural heritage). PIU staff must:

- record identified risks;
- indicate relevant ESMP instruments (Table 5 and Annexes);
- define responsibilities, monitoring arrangements, and reporting.

A step-by-step instruction has been prepared to guide PIU staff in applying the checklist (Annex 1).

Step 4 – Implementation

Activate relevant ESMP Annexes (LMP, SEP, GRM, OHS, Waste/Medical Waste, GBV/SEA/SH, Chance Find, etc.) depending on risks identified. Secure any permits/approvals if required under national law, within emergency timeframes.

Step 5 – Monitoring and reporting

The implementation of all activities is subject to continuous monitoring and reporting of environmental and social performance. Risk assessment and mitigation planning are carried out through the Environmental and Social Screening Checklist (Annex 1, Table 5). The completed checklist must be retained in the project documentation as evidence of screening and may be requested by the Bank for verification. A separate reporting template (Annex 2) is used to record and transmit information to the Bank. This procedure ensures that all CERP activities are:

- reviewed rapidly,
- assigned proportionate mitigation measures,
- implemented in line with national legislation and the World Bank ESF.

It balances the need for fast emergency response with protection of health, rights, and the environment.

VII. Stakeholder Consultation and Information Disclosure

In accordance with Kyrgyz Republic legislation and World Bank Environmental and Social Standard ESS10, stakeholder consultation and information disclosure will proceed through the following structured steps:

1. Disclosure to Government Agencies and Line Ministries

During the preparatory phase, the Ministry of Emergency Situations (MoES) disclosed the draft Environmental and Social Framework (ESF) package—including the draft ESMP, ESCP, SEP, and GRM—on 14 August 2025 on its official website in the local language, thereby launching the public consultation process. Feedback channels were made available through the MoES public reception office, telephone hotlines (including the Unified Emergency Service 112), and a dedicated email address (mchs-pressa@mail.ru).

Following this disclosure, stakeholder consultations were held on 22 August 2025 at the MoES premises in Bishkek with representatives of key sectoral ministries and agencies (16 participants in total). The event included a presentation of the draft ESMP, an overview of the World Bank’s Environmental and Social Standards, and a Q&A session. Feedback was recorded and will be reflected in the finalized ESF documents. After clearance by the World Bank, the final ESF package will be re-disclosed on the official MoES website. Details of the disclosure and consultations are provided in Annex 12.

2. Nationwide Public Notification

At the national level, public announcements have already been carried out through the disclosure of the draft ESF package on the official MoES website (14 August 2025), thereby informing the wider public of the Project, its objectives, and the availability of environmental and social documents for review. Further public information efforts during Project activation will be undertaken through national and local media, including newspapers, radio, and online platforms.

3. Accessibility of Information to Affected Communities

At the current preparatory stage, no specific affected communities have been identified, as the entire country remains the potential scope of CERP interventions. Nevertheless, citizens and other stakeholders can submit questions or comments through the existing MoES mechanisms: official website, public reception office, telephone hotlines, and the Unified Emergency Service 112.

Once CERP is activated, information will be disseminated to affected populations through established communication channels, and a project-specific Grievance Redress Mechanism (GRM) will be launched. This will ensure that beneficiaries are informed about their rights, available assistance, and grievance submission options. Materials will be adapted to literacy levels and language needs, ensuring accessibility for vulnerable groups.

4. Awareness on the Grievance Redress Mechanism (GRM)

During the preparatory phase, grievances and comments were handled through existing MoES mechanisms, including the Unified Emergency Service 112. Upon activation of CERP, a project-specific GRM will be established in line with the SEP. This mechanism will include multiple channels for complaints and inquiries, ensure timely acknowledgement and resolution, and guarantee confidentiality for sensitive cases (including SEA/SH). Importantly, existing national

mechanisms—particularly the 112 service—will continue to function in parallel, ensuring wide accessibility and continuity of grievance redress.

5. Targeted Consultations with Key Stakeholders

During the preparatory phase, targeted consultations were conducted on 22 August 2025 in Bishkek with representatives of line ministries and government agencies to clarify roles, responsibilities, and coordination mechanisms. Once CERP is activated, further consultations will be organized as required by the nature and location of the emergency, including with local governments and representatives of vulnerable or at-risk groups. These consultations will be carried out in safe and accessible formats, with simplified materials and translation support as needed.

6. Integration with Existing Stakeholder Engagement Platforms

CERP will leverage existing outreach mechanisms of the World Bank – financed projects in the Kyrgyz Republic, adapting them to the emergency context. This approach will accelerate outreach and disclosure by using tested communication channels and platforms.

This phased disclosure and consultation strategy balances the need for urgent action with the principles of transparency, accessibility, and participation. It ensures that stakeholder voices—particularly those of vulnerable populations—are heard and respected throughout the CERP cycle, both before and after activation

VIII. Institutional Arrangements and Resources

This section outlines the organizational structures and resources supporting CERP in the Kyrgyz Republic.

Project Coordination and Management

- Ministry of Finance (MoF): The MoF serves as the Project’s overall coordinator, liaising with line ministries, agencies, and donors throughout activation and implementation phases.
- Ministry of Emergency Situations (MoES): As the Executing Agency, MoES oversees all CERP activities—including procurement, financial management, monitoring, reporting, and compliance with environmental and social standards.

Project Implementation Unit (PIU)

- A dedicated PIU will be established within MoES to manage day-to-day operations: organizing procurements, tracking progress, compiling reports, and ensuring ESMP commitments are met. The PIU also provides secretariat services to the Project’s inter-agency bodies.

The PIU under the Ministry of Emergency Situations has a strong implementation track record in World Bank-financed emergency operations, including the CERC component under the ERIK Project and the Emergency COVID-19 Project. Its institutional mandate includes coordinating all emergency functions, services, and resources for emergency prevention and response. Given this, it is well-positioned to lead CERP implementation.

However, in view of the short implementation period and the urgency of emergency response, its current capacity will be strengthened to fully meet CERP requirements. To support this, the PIU may:

- Co-opt qualified staff from other World Bank–financed PIUs;
- Engage consulting firms or specialists on retainer, ensuring rapid availability of Environmental and Social (E&S) experts upon CERP activation;
- Prepare a pre-approved roster of E&S consultants and outreach teams, ready to be deployed when needed.

These measures will ensure timely mobilization of qualified personnel for procurement, financial management, stakeholder consultations, monitoring and evaluation, and full compliance with environmental and social standards, including the SEP, ESMP, and GRM.

Line Ministries and Agencies

- Relevant ministries (Health, Agriculture, Transport, etc.) and agencies are responsible for implementing CERP activities within their sectors, guided by the PIU.

Inter-Agency Coordination Bodies

- **Project Coordination Council (PCC):** Chaired by the MoF, with senior representatives from MoES, Economy, Health, Agriculture, Transport, and other key ministries. The PCC provides strategic direction, approves budgets, allocates resources, and resolves inter-ministerial issues. Meetings are convened as needed by the Chair.

- **Technical Coordination Committee (TCC):** Comprising sectoral experts in procurement, environment, labor, and social drawn from line agencies and the PIU. The TC reviews technical aspects of CERP activities, ensures compliance with standards, and advises on sector-specific matters.

The PIU facilitates communication between all stakeholders and supports both the PCC and TC in their functions.

Procurement and Compliance. All procurement under CERP adheres strictly to World Bank procurement rules and Kyrgyz regulatory requirements, with procedures tailored for emergency responsiveness while safeguarding transparency and value for money.

The current composition of the project's PIU.

Currently, the PIU under the MoES KR has 30 staff members involved in World Bank projects such as “Enhancing Resilience in Kyrgyzstan (ERIK, AF ERIK)” and “KG RESILAND Landscape Restoration Project”. The team includes a director, financial and disbursement specialists, procurement specialists, a coordinator, safeguard specialists, civil engineers, translators and administrative staff.

In addition, the KG RESILAND project team includes a deputy director/project coordinator, component 1 and 2 coordinators, a social development specialist, a monitoring and evaluation specialist/contract manager and support staff.

This information is reflected in the ESMP to ensure transparency of institutional capacity and availability of resources for project activation and implementation.

IX. Monitoring and Reporting

The Project Implementation Unit (PIU) within the Ministry of Emergency Situations (MoES) is responsible for monitoring CERP activities and preparing reports. Supported by sectoral stakeholders, the PIU collects, analyzes, and consolidates implementation data.

A Monitoring and Evaluation Plan (M&E Plan) defines Key Performance Indicators (KPIs) to track CERP progress and quality. Indicator values are updated regularly based on inputs from all project participants and included in reports to the Ministry of Finance and the World Bank. If CERP is activated, the M&E Plan is augmented with additional indicators tailored to the specific crisis context.

Pre-activation period (stand-by mode):

- CERP is not yet triggered; monitoring focuses on readiness and institutional arrangements- Implementation Status and Results Reports (ISRs) are submitted to the World Bank on an annual basis, ensuring continued engagement and oversight.
- Annual E&S reports summarize ESCP status, stakeholder engagement, GRM functionality, and readiness indicators.

Post-activation period (emergency response):

- Once triggered, CERP activities are rapid and short-lived (typically 6–12 months)
- Reporting frequency is increased: the PIU submits semi-annual or quarterly reports (as agreed with the World Bank) covering both M&E and E&S performance.
- Reports include: status of ESCP commitments, stakeholder engagement activities, grievances and resolutions, assessment of E&S performance, incident reporting, and corrective actions.
- A Final Completion Report is submitted within six months after deactivation, assessing all participants' performance and offering recommendations to sustain results.
- Implementing partners (ministries, agencies, contractors) supply E&S data to the PIU, which integrates it into the consolidated reports for the World Bank.

These monitoring and reporting mechanisms ensure timely information flow, enabling rapid identification and mitigation of emerging risks, and uphold transparency and effectiveness in CERP implementation.

A portion of the funds allocated under Emergency Response Coordination and Management will be dedicated to supporting the implementation of the ESMP, with the PIU assuming overall responsibility for its implementation.

Annex 1. Environmental and Social Screening Checklist

Instruction for Completing the Environmental and Social Screening Checklist

A. When to Use the Checklist

- *The checklist applies only to activities included in the CERP Positive List.*
- *A separate checklist must be completed for each activity.*
- *It is filled out by the responsible PIU staff (or an assigned specialist).*

B. Steps

1. **Fill in the header:** *project, activity, full name, position, date, location.*
2. **Question 1 (EIA/SEE):**
 - o *If national legislation requires a full Environmental Impact Assessment (EIA) or State Environmental Review (SEE) → the activity is excluded.*
 - o *If not required → proceed to the next item.*
3. **Environmental and social questions (items 2–14):**
 - o *For each question, answer “Yes” or “No.”*
 - o *If “Yes” → immediately refer to Table 5 (see ESMP) and find the row for your activity.*
Table 5 specifies:
 1. *risks and impacts;*
 2. *relevant mitigation measures;*
 3. *ESMP Annexes to be applied (e.g., LMP, SEP, GRM, Waste, OHS, GBV/SEA/SH).*
4. **Recording and monitoring:**
5. *At the bottom of the checklist, indicate:*
 - o *which item of Table 5 was applied;*
 - o *which Annexes were activated;*
 - o *who is responsible for implementation;*
 - o *timelines and monitoring arrangements (e.g., daily visual inspection, weekly report).*
6. **Final decision:**
 - o *If risks are manageable → “Activity is financed.”*
 - o *If the activity requires EIA/SEE or unacceptable impacts are identified (e.g., on a protected area) → “Not financed.”*
7. **Signature and date:**
 - o *The person completing the checklist must sign and date it.*

C. Important Requirements

- *If any question is answered “Yes,” always cross-check with Table 5 of the ESMP and the indicated Annexes.*
- *This checklist must be completed and kept in the PIU archive, as it is part of the reporting package to the Bank.*
- *Checklists serve as evidence that each step was reviewed and the relevant measures applied.*

Environmental and Social Screening Checklist

(for activities from the CERP Positive List)

Project: Contingent Emergency Response Project (CERP)

Activity (from Positive List): _____

Full name of person conducting screening: _____

Position: _____

Screening date: __/__/_____

Location (district/village/site): _____

Supporting documents attached: Yes No

Checklist

| № | Question | Yes / No | Next Steps (reference) | Comments |
|---|---|---|--|----------|
| 1 | Does the activity require a full EIA/SEE under national law? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If “Yes” → activity is excluded; further checklist completion not applicable | |
| 2 | Will the activity generate waste/packaging/broken items requiring disposal? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + Annex “Waste Management” | |
| 3 | Are hazardous materials/chemicals/fuels/batteries used? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + Annexes “OHS and Safety,” “Hazardous and Medical Waste” | |
| 4 | Is there a risk of water/soil contamination (spills, runoff, discharge)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + spill prevention measures | |
| 5 | Noise/emissions/dust from transport or generators near sensitive receptors? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + measures (time restrictions, ventilation, shielding) | |
| 6 | Proximity to protected areas or valuable ecosystems? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + biodiversity measures; if unacceptable → | |

| | | | | |
|--|--|--|---------|--|
| | | | exclude | |
|--|--|--|---------|--|

| | | | | |
|----|--|---|---|--|
| 7 | Will workers (contractors, temporary, community workers) be engaged? Any risks to labor conditions and safety? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + LMP, OHS, GRM for workers | |
| 8 | Could vulnerable groups (women, elderly, disabled, displaced) be affected? Any barriers to access? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + SEP | |
| 9 | Are consultations/information to communities needed? Is a grievance mechanism accessible? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + SEP, GRM | |
| 10 | Could the activity increase GBV/SEA/SH risks (e.g., during cash transfers, in shelters)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + GBV/SEA/SH protocols, Code of Conduct | |
| 11 | Could the activity trigger tension/conflict (e.g., unfair distribution of aid)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + SEP, GRM | |
| 12 | Are there community health and safety risks (transport, delivery, temporary structures, fuel/chemicals storage, infections)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + OHS, Traffic Safety, Emergency Preparedness | |
| 13 | Could the activity affect cultural heritage (monuments, archaeology, traditions)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + Chance Find Procedure | |
| 14 | Risks of fraud, aid diversion, disputes over payments, complaints of unfairness? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Table 5 + GRM, supply tracking and control | |

Recording and Monitoring

Which Table 5 item was applied and which ESMP Annexes were activated:

Responsible persons, timelines, and monitoring arrangements:

Decision: Activity financed: Yes No

Completed by (full name, position): _____

Signature: _____ **Date:** ____/____/____

Annex 2. E&S Reporting Checklist for Project Activities

The template below is presented for the quarterly E&S report, which the PIU will provide to the World Bank. The PIU will prepare tailor-made reporting formats to the Implementing Partners and contractor, capturing necessary information from their respective activities.

Template for the Quarterly Report on the Environment and Social Aspects of the CERP

The objectives of the periodic report are:

- To record environmental and social impacts and risks resulting from the project activities and to ensure implementation of the mitigation, monitoring and institutional measures identified in the Environment and Social Commitment Plan (ESCP) and the ESMP, functionality of the GRM, accidents, and any other environmental and social instruments e.g. LMP, in order to reduce adverse impacts and risks and enhance positive impacts from specific project activities;
- Identify and address any unexpected or unforeseen environmental and social impacts or risks, that may arise during the period of the reporting;
- Address any unexpected issues that may impact on the implementation of the project or compliance with the E&S requirements;
- To ensure that the implementation of the project is in line with the WB ESS;
- To ensure development and implementation of necessary occupational health and safety management plans to identify hazards and mitigate risks, to ensure safe working procedures;
- To report any changes in the project activities requiring a material change in the ESCP and/or other project instruments (e.g. ESMP, LMP etc) during the monitoring period; and
- To propose mitigations and corrective measures or actions for unforeseen adverse environmental and social risks and impacts identified during the monitoring period of the Project.

Please fill in ALL of the following information in the following template. If there is not an applicable heading for particular information, please include a section called Other or another appropriate heading and include the information. In addition, text can be included under any table, or as an additional Annexure, to further justify, provide additional details on a topic as needed.

If there is more information that you would like to report, please do so. If you require additional columns or rows to complete the tables, please add as necessary. However please DO NOT delete columns from tables, or sections from the template. Rather indicate as not relevant, or not applicable to this reporting period.

Please delete this Guidance note section when compiling the report.

Proposed Template

| | |
|---|--|
| Project Name | |
| Project Code | |
| Project Amount (or Component Amount if relevant) | |
| Board Approval Date | |
| Implementing Agency | |
| Applicable ESS standards/Safeguard Operational Policies | |
| Monitoring Period | |

If this is not the first report, please indicate any changes as compared to the previous reporting period.

Planned/Undertaken CERP Activities

Please provide a synopsis of the main CERP activities planned/undertaken during the reporting period.

Synopsis of the Project Activities Implemented During the Reporting Period

| Description of Project work/activities | Monitoring Indicators during reporting Period | Frequency (annual quarterly) |
|--|---|--|
| | | Pre-activation: Annual (as part of ISR and ESCP updates). Post-activation: Quarterly, as agreed with the World Bank, given the short duration of CERP activities (6–12 months). |
| | | |

Pending/Delayed Actions (If any)

Please highlight any pending or delayed actions of the precedent report (if any), as well as activities planned but not undertaken in the current reporting period, indicating reasons and/or challenges and actions to address the delay. If there are no pending or delayed actions please mark the Table as not applicable.

Table for Delayed Actions of the Project

| No. | Activities (components, subcomponents) | Safeguards requirements | Reason for delay | Actions to be taken | Timeline |
|-----|--|-------------------------|------------------|---------------------|----------|
|-----|--|-------------------------|------------------|---------------------|----------|

| | | | | | |
|--|-----------------------------|--------------------------------|--|--|--|
| | planned but not implemented | associated with the activities | | | |
| | | | | | |
| | | | | | |

Status of Implementation of the Environmental and Social Commitment Plan (ESCP).

Please use the ESCP with the following columns in sequence. (The Table can be made landscape to accommodate text or included as an annex.)

Status of the Implementation of the ESCP.

| ESS# | ESCP obligations | Timeframe of ESCP obligations | Status of implementation | Justification of delays/shortcomings | Actions to be taken and timeline |
|------|------------------|-------------------------------|--------------------------|--------------------------------------|----------------------------------|
| | | | | | |
| | | | | | |

Status of the Implementation of the ESMP

This section will inform/update on the status of the mitigation and monitoring measures of significant project risks, using a matrix approach including the relevant community health and safety measures. Please use the ESMP matrix with the following columns in sequence as shown below.

Status of Implementation of the ESMP

| Reference | E&S Mitigation Measures | Monitoring Indicators | Linked to Investment Activity or the ESSs | Status of Implementation | Justification of delays/shortcomings | Actions to be taken and timeline |
|-----------|-------------------------|-----------------------|---|--------------------------|--------------------------------------|----------------------------------|
| | | | | | | |

Status of the Implementation of the Project’s Grievance Mechanism

This section will inform/update on the status of grievances filed and how the CERP PIU is responding to the concerns and grievances (including labour, social, environment grievances) of project-affected parties related to the environmental and social performance of the project.

State total number of grievances recorded during the reporting period; How many were resolved?

How many were referred elsewhere? Is the GRC/ GRM following up? How many issues are unresolved and why?

What is the plan for the unresolved issues?

In Annex D, please attach copies of the GRMs for this reporting period.

Overview of Grievances During the Reporting Period

| # | Stakeholder | Nature of Grievance (s) | Total Grievances | Status | Remarks/ Comment(s) |
|---|--|-------------------------|------------------|-------------------------|---------------------|
| | <i>(e.g. institution, community members, local leaders, etc)</i> | | | Resolved/ unresolved | |
| | | | | | |
| | | | | | |
| | | | | | |

Stakeholder Engagement

This section will inform/update on the status of stakeholder engagement and how the CERP PIU is ensuring that stakeholders are being met with in line with the requirements of the Project and / or SEP as relevant. The section should outline:

- The number of engagement activities undertaken during the reporting period and types of stakeholders met with (e.g., communities, districts, neighbouring facilities, etc)
- Key issues raised or discussed during the meetings
- To what extent are the stakeholders being engaged during the implementation of E&S risks and impacts management measures?
- Do they participate in monitoring the implementation of E&S risk and impact management measures?
- Is the engagement/consultations organized according to the SEP?
- Were the participants informed before the meeting and minutes were shared with the participants?

Health and Safety Accidents

This section summarizes the Environmental, Health and Safety accidents and incidences that occurred during the reporting period. Importantly, the section includes detailed descriptions of the procedures to mitigate recurrence and avoid further injury. The section includes reports on near-misses and treats these as incidents in line with comparative accidents. The section includes a table for follow-up of earlier accidents, incidents, and near-misses.

Accident and Incident Reporting

| Date and time of accident/Incident | Confidential identifier (if provided)* | Description of the accident | Severity of Accident (Minor /Major | Mitigating measures taken by the contractor/proponent | Actions to be taken to prevent the occurrence | Status of the accidented |
|------------------------------------|--|-----------------------------|------------------------------------|---|---|--------------------------|
| | | | | | | |

| | | | | | | |
|--|--|--|-------------------|--|--------------------|----------------------------------|
| | | | injury/ death) | | of the accident | (open /closed ¹¹) |
|--|--|--|-------------------|--|--------------------|----------------------------------|

** Personal identifiers must not be disclosed. All SEA/SH cases must be referred immediately and confidentially through the established GBV referral pathways. Survivor consent and confidentiality must be strictly respected*

Environmental and Social Management Capacity

This section details the E&S supervision arrangements for the activities. The section includes a diagram of the reporting arrangements as well as roles and responsibilities, any vacant positions and timelines to fill them if relevant. The description may require several diagrams for various project sites.

Administration:

State any changes or updates on administrative requirements e.g. E&S personnel, location, etc.; Any changes in terms of applicable national and international requirements.

Capacity Building:

Provide an update on any E&S safeguards related CB activities undertaken. Indicate outstanding CB activities and timelines for undertaking them.

Other Project specific issues to flag, raise, report on:

Other Specific Issues

Please answer the following questions:

Is the CERP PIU adequately staffed with skilled and permanent E&S specialists? Do they have resources (finance and equipment) to carry out field visits and supervisions?

Are the Implementing Partners adequately staffed with skilled and permanent E&S staff. Are they preparing their periodic E&S reports to the Owner?

Is the project GRM still robust enough to respond to complaints? How many complaints have been received and resolved (provide current and cumulative data)?

Is there sufficient budget allocation for implementing the ES instruments?

What are the constraints to the achievement of the ESCP and ESMP?

Conclusions and Recommendations

Please summarize the major conclusions during this periodic report and recommendations for actions to be implemented in the next monitoring period. Include a summary (in a table) of measures or activities that were planned vs achieved; And state reasons why some activities are still outstanding.

Include a table of planned activities for the next quarter/ reporting period.

¹¹ Closed incident referring to those that have all the actions completed

Annex 3. Labor Management Procedures (LMP)

Introduction

The Labor Management Procedures (LMP) for the Contingent Emergency Response Project (CERP) in the Kyrgyz Republic have been developed in accordance with the World Bank's Environmental and Social Framework (ESF) and specifically Environmental and Social Standard 2 (ESS2) on Labor and Working Conditions. The LMP ensures that all categories of project workers are engaged, managed, and treated in a manner consistent with ESS2 and the national labor legislation of the Kyrgyz Republic.

The LMP provides:

- A description of labor use under the Project, including worker categories, number of workers, and timing of labor requirements;
- An assessment of potential labor-related risks and corresponding mitigation measures;
- Procedures for recruitment, working conditions, occupational health and safety (OHS), and grievance redress;
- Clear institutional arrangements for the implementation and monitoring of labor provisions;
- Mechanisms to ensure compliance with both national law and the World Bank's ESS2.

This LMP is a living document and will be updated during project implementation to reflect changes in project scope, labor requirements, or applicable legislation.

1. Project Description

The Contingent Emergency Response Project (CERP) is implemented in the Kyrgyz Republic through the World Bank's Rapid Response Option (RRO). This mechanism enables rapid access to financing in the event of eligible crises and emergencies, such as natural disasters (earthquakes, floods, landslides, droughts), technological accidents, or public health emergencies.

Each activation of the CERP lasts up to 12 months and may occur multiple times during the six-year project period, depending on the frequency and scale of crises. The Project does not involve new construction and is focused on small-scale, rapid logistics interventions aimed at mitigating immediate impacts on vulnerable populations.

The main categories of activities supported by the CERP include:

Emergency Response Support: provision of PPE, communication tools, sanitation units, and light emergency equipment for first responders.

Emergency Livelihood Support: direct income support to disaster-affected households, primarily through existing cash transfer mechanisms.

Essential Emergency Supplies and Services: procurement and distribution of food, medicines, agricultural inputs, water supply and sanitation items, and rental of light equipment for restoring access.

Emergency Response Coordination and Management: support to operational expenditures of government agencies, including evacuation, temporary shelters, transport, energy, debris removal, and mobilization of technical expertise.

1.2 LMP Goal

The goal of the Labor Management Procedures (LMP) is to establish clear rules, procedures, and safeguards for managing all categories of project workers engaged under the CERP. The LMP ensures that workers are hired and managed in accordance with the principles of fairness, transparency, and equal opportunity, in line with the national labor legislation of the Kyrgyz Republic and the World Bank's ESS2.

Specifically, the LMP aims to:

- Protect workers' rights and prevent labor exploitation;
- Ensure safe and healthy working conditions;
- Provide clear mechanisms for grievance redress;
- Promote non-discrimination and equal opportunity in recruitment and employment;
- Establish clear institutional responsibilities for labor management across all project components.

2. Overview of labor use under the project

2.1 Categories of Workers

In line with Environmental and Social Standard 2 (ESS2) and the Labor Code of the Kyrgyz Republic, the CERP may involve the following four categories of workers:

1. **Direct Workers** – Individuals employed directly by the Project Implementation Unit (PIU) or associated ministries (e.g., Ministry of Finance, Ministry of Emergency Situations, Ministry of Health) for project management, coordination, and oversight. They are under the direct supervision of the PIU.
2. **Contracted Workers** – Workers engaged through third-party contractors, service providers, NGOs, or consultants to deliver specific project-related services, such as procurement, logistics, distribution of emergency goods, or technical support. This category may also include personnel of international agencies (e.g., UN bodies) implementing project-financed activities.
3. **Community Workers** – Volunteers mobilized during emergencies to support the delivery of assistance, such as distribution of relief items, search and rescue, basic medical aid, or recovery operations. They are not formally employed but must adhere to the Project's Code of Conduct and have access to the Workers' Grievance Redress Mechanism (GRM).
4. **Primary Supply Workers** – Employees of suppliers who, on an ongoing basis, provide goods and materials directly to the Project (e.g., food, medicines, emergency shelter kits, equipment). They are not under direct control of the PIU but are subject to due diligence and monitoring to prevent risks such as child labor, forced labor, or poor occupational health and safety (OHS) practices.

Oversight Approach Across All Worker Categories

The PIU is responsible for ensuring that labor-related risks are identified, assessed, and mitigated for all categories of workers. Oversight measures include:

- Recruitment controls – following fair and transparent procedures (Section 7).
- Contractual safeguards – including ESS2 compliance clauses in all contracts with contractors and suppliers.

- Training and awareness – providing induction on Code of Conduct, GRM, and OHS to all categories of workers, including community volunteers.
- Monitoring and reporting – regular reviews, site visits, and documentation checks; risk-based monitoring for primary supply chains.
- Lessons learned – integrating practices from other World Bank–financed projects in the Kyrgyz Republic to strengthen labor risk management.

This structure ensures that all four worker categories are subject to proportionate risk management, in compliance with national legislation and ESS2 requirements.

2.2 Characteristics, number of project workers. Timing of labor requirements

Due to the contingency nature of the CERP, which is activated in response to unforeseen eligible crises or emergencies, it is not possible at the current stage to determine the exact number, composition, or deployment schedule of project workers. The scale, location, and type of labor required will depend entirely on the type and severity of the emergency event and the activities selected from the approved Positive List at the time of activation.

General Characteristics of Labor Use

- **Flexibility and short-term engagement** – most project workers will be engaged for limited periods corresponding to the emergency response phase, with contracts or assignments tailored to the specific operational needs.
- **Diverse categories** – the project anticipates engagement of direct workers, contracted workers, community workers, and primary supply workers (as defined in Section 2.1).
- **Emergency context** – recruitment and mobilization processes must be rapid, while still meeting the requirements of ESS2 and national labor legislation.

Indicative Labor Profiles

Although no definitive numbers can be set, typical CERP activation is expected to require:

- **Direct workers:** PIU staff and government personnel seconded for coordination, procurement, and monitoring, as well as first responders directly engaged or hired by the MoES under CERP activation.
- **Contracted workers:** consultants, logistics and transport providers, medical and technical specialists, and distribution teams.
- **Primary supply workers:** employees of suppliers providing goods such as food, medicine, shelter materials, and equipment.
- **Community workers:** volunteers assisting with distribution, public information, or basic support services.

Timing of Labor Requirements

- **Activation phase:** rapid surge in labor demand, especially for logistics, distribution, and coordination functions.
- **Implementation phase:** sustained use of contracted and supply workers for delivery of goods and services, with fluctuating volumes depending on needs.
- **Demobilization phase:** gradual reduction of workforce as emergency activities conclude.

The PIU will document and report the number and type of workers engaged during each activation, ensuring all categories are managed in accordance with the LMP, national labor law, and ESS2.

2.3 Procedures for Hiring Key and Support Staff

In the context of CERP, where recruitment often needs to be conducted within compressed timeframes in response to unforeseen emergencies, the hiring process must strike a balance between operational efficiency and adherence to ESS2 and the labor legislation of the Kyrgyz Republic.

The procedures below apply to all key and support staff (both direct and contracted workers), taking into account the nature and scale of the specific project activation.

2.3.1 Personnel Selection Procedure

- **Recruitment Plan:**

Contractors shall submit a recruitment plan to the PIU:

- o For approval – for key personnel, as specified in the Terms of Reference (TOR);
 - o For information – for support and temporary personnel.
- The plan shall include:
- o Type and number of required workers;
 - o Work locations and conditions;
 - o Qualification and experience requirements for key positions;
 - o Outreach measures to ensure inclusive access (e.g., encouraging applications from women, youth, and persons with disabilities).

- **Vacancy Announcement:**

Job announcements shall be published through accessible channels (local press, online platforms, community leaders for community workers).

- **Candidate Selection:**

- o Minimum employment age is 18 years;
- o Selection shall be merit-based and aligned with the job requirements;
- o Aim to promote gender balance where feasible;
- o Discrimination, nepotism, and conflict of interest are strictly prohibited.

2.3.2 Staffing and Terms of Reference

- **Key personnel** are defined in the TOR and include critical positions for management, logistics, procurement, and monitoring.
- **Support staff** refers to administrative, technical, and auxiliary roles essential for project operations.
- Each worker shall have a clear job description, working conditions, and performance expectations.
- TORs and employment conditions must be aligned with the Labor Code of the Kyrgyz Republic and ESS2.

2.3.3 Contracts and Probationary Period

- All workers (including temporary and seasonal) must be engaged under written employment contracts or “Written Particulars of Employment,” signed by both parties.
- Contracts must include:
 - o Position and duties;
 - o Duration of employment;
 - o Salary and payment terms;
 - o Working conditions;
 - o Occupational Health and Safety (OHS) provisions;
 - o Code of Conduct (CoC).

- The probationary period shall follow the Labor Code of the Kyrgyz Republic (not exceeding 3 months, where applicable).
- In emergency contexts, expedited hiring is permitted, but a written contract must be formalized within 30 calendar days of commencement of work.

2.4. Labor Discipline

All project workers, regardless of category, are required to comply with the internal labor regulations of their employer, the provisions of the Labor Code of the Kyrgyz Republic, and the requirements of this Labor Management Procedures (LMP) in line with World Bank Environmental and Social Standard 2 (ESS2).

2.4.1. Employee Obligations

Project workers shall:

- Perform their duties conscientiously, efficiently, and in accordance with job descriptions and instructions.
- Comply with occupational health and safety (OHS) requirements, including the proper use of personal protective equipment (PPE).
- Treat colleagues, beneficiaries, and the public with respect and without discrimination, harassment, or abuse.
- Adhere to the approved Code of Conduct (CoC), including zero-tolerance for gender-based violence, sexual exploitation and abuse, and sexual harassment (GBV/SEA/SH).
- Safeguard the employer's property, use it only for work purposes, and report any damage or loss.
- Follow established procedures for reporting incidents, hazards, or grievances.

2.4.2. Prohibited Conduct

The following are strictly prohibited:

- Being under the influence of alcohol, drugs, or other intoxicants during working hours.
- Acts of violence, threats, or harassment (including GBV/SEA/SH) against colleagues, beneficiaries, or others in the workplace.
- Discrimination based on gender, ethnicity, religion, disability, age, or other status.
- Breaching safety rules or refusing to use required PPE.
- Unauthorized use or removal of employer property or project resources.
- Falsifying documents or providing false information.

2.4.3. Disciplinary Measures

In accordance with the Labor Code of the Kyrgyz Republic, the following disciplinary measures may be applied for violations of labor discipline:

1. Remark;
2. Reprimand;
3. Termination of employment on disciplinary grounds.

All disciplinary actions shall be documented and applied proportionally to the violation, following due process under national law.

2.4.4. Emergency Context Considerations

Given the nature of the CERP as an emergency response mechanism, flexibility in work arrangements may be required (e.g., extended hours, relocation, or reassignment). Nevertheless, all rules of labor discipline, CoC provisions, and worker protections remain fully applicable. The PIU and contractors must ensure that emergency work schedules do not compromise workers' health, safety, or dignity.

2.5. Working Hours, Holidays, and Vacations

All working time arrangements under the Project shall comply with the Labor Code of the Kyrgyz Republic and World Bank ESS2 requirements, ensuring protection of workers' rights while allowing operational flexibility in emergency contexts.

2.5.1. Working Hours

- The standard working week shall not exceed 40 hours, distributed over five or six working days, in accordance with Article 94 of the Labor Code of the Kyrgyz Republic.
- Daily working hours shall not normally exceed 8 hours (or 7 hours for work involving harmful conditions, as per national regulations).
- In emergency situations, overtime work may be required; such work shall be compensated either by additional pay (at least 1.5 times the normal hourly rate) or equivalent time off, in compliance with Articles 104–106 of the Labor Code.
- Overtime must be limited to avoid excessive fatigue and must not exceed 4 hours over two consecutive days and 120 hours per year, unless otherwise permitted by emergency labor regulations.

2.5.2. Weekends and Public Holidays

- Workers are entitled to at least one day off per week for a six-day working week, or two consecutive days for a five-day working week.
- Work on official public holidays (as established by the Government of the Kyrgyz Republic) is generally prohibited, except in cases where continuous operations or emergency response require it.
- If work on weekends or holidays is required for operational reasons, workers shall receive double pay or compensatory rest days, in line with Articles 111–113 of the Labor Code.

2.5.3. Labor and Social Vacations

- Annual paid leave shall be at least 28 calendar days for full-time workers, in accordance with Article 115 of the Labor Code.
- Part-time or temporary workers shall receive leave on a pro-rata basis.
- Social leave (e.g., maternity, paternity, study, or bereavement leave) shall be granted in accordance with national legislation.
- For community workers and short-term contracted personnel engaged in emergency response, rest breaks and recovery days shall be provided as soon as operationally feasible.

Emergency Context Considerations

Given the nature of CERP activities, flexibility in work schedules may be required during activation periods. In such cases:

- Overtime and holiday work must be minimized and justified by operational necessity.
- Workers must receive adequate rest and recovery time to protect health and performance.
- All deviations from standard working hours must be documented and approved by the PIU or the relevant contractor's management.

2.6. Emergency Response Periods

Given the nature of the Contingent Emergency Response Project (CERP), there are no construction phases. Instead, the Project will have emergency response activation periods, during which work intensity, scheduling, and operational demands will significantly increase to meet urgent needs.

2.6.1. Duration and Scope

The duration of emergency response periods will depend on the type, scale, and location of the crisis. These periods may last from several days to several weeks and can occur multiple times during the Project's implementation. Activities may include:

- Distribution of emergency goods (food, medicine, hygiene kits, agricultural inputs);
- Deployment of temporary facilities (shelters, water tanks, mobile clinics);
- Coordination and logistics support for relief operations;
- Technical and administrative support for emergency response coordination.

2.6.2. Workload and Scheduling

- Extended working hours may be required, subject to the Labor Code of the Kyrgyz Republic and ESS2 provisions.
- Workers will be provided with adequate rest breaks and days off following intensive shifts, in accordance with national labor legislation.
- Rotational shifts will be organized, where feasible, to avoid excessive fatigue.

2.6.3. Occupational Health and Safety (OHS)

- OHS requirements will be strictly enforced, including provision of personal protective equipment (PPE), safe transportation, and adherence to safety protocols.
- All workers will receive safety briefings relevant to the specific emergency activities they are involved in.

2.6.4. Compensation

- Overtime work during emergency periods will be compensated in accordance with national labor law, either through additional pay or time off in lieu.
- Workers engaged temporarily for the emergency period will receive fair remuneration aligned with market rates for the tasks performed.

2.6.5. Wellbeing and Support

- Psychological first aid and stress management support will be made available to workers involved in prolonged or high-stress emergency operations.
- The Workers' Grievance Redress Mechanism (GRM) will remain fully accessible during emergency periods.

3. Assessment of key potential labor risks

3.1 Overview

The Contingent Emergency Response Project (CERP) in the Kyrgyz Republic does not involve large-scale construction, land acquisition, or activities creating new permanent physical footprints. Instead, it is activated in response to emergencies and focuses on the rapid delivery of goods, services, and targeted livelihood support as defined in the Positive List.

Given the project’s emergency nature, labor risks are generally limited compared to infrastructure- heavy projects but remain significant in certain areas, particularly in relation to occupational health and safety (OHS), fair treatment, prevention of gender-based violence (GBV) and sexual exploitation and abuse/sexual harassment (SEA/SH), and the protection of vulnerable groups. Moreover, operating in post-disaster contexts can heighten OHS risks due to unstable environments, debris, disrupted infrastructure, and the high-pressure conditions under which workers and first responders may operate

Labor needs cannot be estimated in advance, as they will vary depending on the scale, location, and type of emergency. At the time of activation, the PIU and implementing partners will assess specific labor requirements and risks.

3.2 Anticipated Labor-Related Risks

Potential risks identified for CERP include:

- Occupational Health and Safety (OHS) risks related to handling, transport, and distribution of emergency goods, as well as operation of temporary facilities (e.g., mobile clinics, water tanks).
- Labor rights violations at contractor and supplier sites, including poor working conditions, unpaid wages, and excessive working hours.
- GBV/SEA/SH risks, particularly in contexts involving close interaction between workers and affected communities, or where gender imbalances exist in the workforce.
- Discrimination and exclusion of women, persons with disabilities, and other vulnerable groups in hiring and work allocation.
- Traffic and transport-related hazards during delivery and distribution activities.
- Lack of grievance channels for certain worker categories (especially community volunteers and primary supply workers).

3.3 Worker Categories and Key Risks

| Worker Category | Typical Activities | Key Labor Risks |
|-----------------|--|---|
| Direct Workers | Project management, reporting, oversight; government staff seconded to PIU; first responders directly engaged by MoES during CERP activation | Stress due to emergency response workload, long hours, inadequate rest; risk of discrimination or exclusion in recruitment. |

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| Contracted Workers | Procurement, logistics, warehousing, distribution, and— where applicable— professional services such as search and rescue (carried out by trained specialists: | Poor working conditions at contractor sites; insufficient OHS training; GBV/SEA/SH risks; lack of grievance mechanism. |
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| | firefighters, military, or first responders) | |
| Primary Supply Workers | Manufacturing, packaging, and transport of goods | Labor rights violations at supplier sites; child or forced labor; cold chain breaches; OHS risks during transport and handling. |
| Community Workers | Voluntary emergency support (assistance with distribution, first aid, outreach, information dissemination) | Lack of training; lack of insurance or medical support; potential exposure to hazards (weather, injuries); exclusion from GRM. |

3.4 Risk Mitigation Measures

| Risk / Impact | Mitigation Measures |
|---------------------------------------|---|
| Employment conditions | All project workers (direct and contracted) will be engaged under written contracts in accordance with Kyrgyz labor law and ESS2. Contractors and suppliers will ensure compliance with ESS2 provisions, including prohibition of child/forced labor and SEA/SH. Insurance will be provided for all workers during their engagement period. |
| Overtime work | In line with the Labor Code of the Kyrgyz Republic, workers will be compensated for overtime through additional rest time or payment. All workers will be informed of their rights. GRM will be available for any complaints related to overtime or excessive workload. |
| Labor disputes | A dedicated Worker GRM will be implemented, with an appeals mechanism independent from the direct employer. All workers will be informed of the GRM during induction. |
| Discrimination (gender, status, etc.) | Contractors and suppliers will ensure non-discriminatory hiring practices, gender parity where possible, appropriate sanitation facilities, and PPE for all, including women. Worker GRM will address any related |

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| | grievances. |
| GBV/SEA/SH risks | Zero-tolerance policy towards GBV/SEA/SH. All workers must sign a Code of Conduct (CoC). Awareness training on respectful conduct and prohibition of harassment will be provided before deployment. |
| Child and forced labor | Minimum employment age is 18 years. Compliance with child/forced labor prohibitions is mandatory. |
| Traffic and transport accidents | Safe transport and handling procedures will be enforced. A simplified Traffic Management Framework (TMF) will be applied for delivery and distribution activities. |
| Occupational Health and Safety (OHS) | All workers will receive basic OHS training. Contractors must ensure safe working conditions and provide necessary PPE. OHS measures aligned with national law and ESS2 will be monitored by PIU during field visits. Significant OHS-risk activities, such as search and rescue, may only be carried out by trained and qualified personnel with the required professional certification. These tasks cannot be assigned to untrained community workers or general staff. |

4. Brief review of national legislation and WB ESS2

This section provides an overview of the main provisions of the national labor legislation of the Kyrgyz Republic that are relevant to the implementation of the Contingent Emergency Response Project (CERP), in alignment with ESS2 requirements. The LMP will be implemented in full compliance with the following laws and regulations.

Labor Code of the Kyrgyz Republic

The Labor Code (*No. 23 of 23 January*) regulates employment relations in the Kyrgyz Republic, including the rights and obligations of employers and employees, employment contracts, working hours, rest periods, occupational safety, and dispute resolution.

Key provisions relevant to the Project include:

- Prohibition of child and forced labor (Articles 3,10, 14, , 19, 20).
- Minimum age for employment – 16 years; light work permitted from age 15 with restrictions; CERP requires a minimum of 18 years.
- Working hours – standard duration of 40 hours per week; limits on overtime (Article 5110) and requirements for overtime compensation (minimum 1.5x rate for first 2 hours, 2x thereafter).
- Written employment contracts (Article 20) required for all workers, including temporary and seasonal staff.
- Occupational health and safety obligations for employers (Section VII).
- Non-discrimination in employment (Article 96), ensuring equal opportunities regardless of gender, ethnicity, religion, disability, or social status.

Law of the Kyrgyz Republic “On Occupational Safety and Health” No. 167 of 1 August 2003 (as amended)

Defines the legal, economic, and organizational foundations for ensuring safe working conditions and protecting the health of workers.

Relevant provisions:

- Employer’s duty to provide personal protective equipment (PPE) and conduct OHS training.
- Obligation to investigate and report occupational accidents and diseases.
- Right of workers to refuse work in case of immediate danger to life or health.

Law of the Kyrgyz Republic on Trade Unions (No. 133 of 16 October 1998, as amended)

Guarantees the right of workers to form and join trade unions, engage in collective bargaining, and protect their labor rights. The law also prohibits discrimination for trade union membership or activities.

Law of the Kyrgyz Republic on Public Service (No. 79 of 30 May 2022)

Applies to civil servants involved in CERP implementation who remain under their existing public service contracts. The law defines the status, rights, duties, and restrictions for public servants, including provisions on integrity, conflict of interest, and accountability.

Law of the Kyrgyz Republic on Minimum Standards of Social Protection (No. 175 of 19 July 2018, as amended)

Establishes state-guaranteed minimum labor standards, including minimum wage, social benefits, and working conditions.

Law of the Kyrgyz Republic on Prevention and Protection against Domestic Violence (No. 63 of 27 April 2017, as amended)

Relevant for GBV/SEA/SH prevention measures. It provides a legal framework for protecting individuals from violence, including in the workplace, and establishes mechanisms for victim support.

Alignment with ESS2

The national legal framework broadly aligns with ESS2 requirements, particularly in prohibiting child and forced labor, ensuring OHS standards, and protecting against discrimination. Where gaps exist (e.g., supply chain labor oversight, community workers' protection), the Project will apply ESS2 provisions to fill them.

5. Institutional arrangements for LMP implementation

5.1 Overall Responsibility

The Project Implementation Unit (PIU) under the Ministry of Emergency Situations (MoES) has overall responsibility for implementing, monitoring, and reporting on the Labor Management Procedures (LMP) for the Contingent Emergency Response Project (CERP).

The PIU will ensure that all categories of project workers—direct, contracted, community, and primary supply workers—are managed in compliance with the requirements of the World Bank's Environmental and Social Standard 2 (ESS2) and the national labor legislation of the Kyrgyz Republic.

Key PIU functions include:

- Integrating LMP requirements into procurement, contractual, and operational documents;
- Providing induction and capacity building to contractors, suppliers, and implementing partners on LMP provisions;
- Conducting regular monitoring and supervision to verify compliance;
- Operating the Worker Grievance Redress Mechanism (GRM) and ensuring its accessibility to all worker categories;
- Reporting labor compliance status in quarterly Environmental and Social (E&S) reports to the World Bank.

The PIU Social Specialist will be the primary focal point for labor management under the CERP, working in close coordination with the PIU Environmental Specialist, technical staff, and implementing partners.

5.2 Roles and Responsibilities by Worker Category

| Worker Category | Responsible Entity | Responsibilities |
|------------------------|---------------------------|---|
| Direct Workers | PIU / MoES | Recruitment, contracts, and daily management; ensuring fair terms of employment; OHS compliance; access to GRM. |

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| Contracted Workers | Contractors, service providers; oversight by PIU | Implementing LMP provisions, including GRM, OHS, and Code of Conduct (CoC); PIU to verify compliance through document review and field visits. |
| Community Workers | Implementing partners, local authorities; oversight by PIU | Ensuring volunteer engagement protocols, CoC adherence, basic OHS briefing, and access to GRM. |
| Primary Supply Workers | Suppliers; oversight by PIU | Compliance with labor laws and ESS2; prohibition of child/forced labor; safe working conditions; documentation of labor practices; risk-based monitoring by PIU. |

5.3 Coordination with Other Stakeholders

The PIU will coordinate with:

- Contractors and Service Providers – to integrate LMP clauses into contracts and ensure compliance;
- Suppliers – to apply the Primary Supplier Verification Procedure (Section X);
- Local Authorities – to support community worker engagement, information dissemination, and grievance resolution;
- National Labor Inspectorate and State Sanitary-Epidemiological Service – to address regulatory compliance, inspections, and labor dispute resolution.

5.4 Monitoring and Reporting

The PIU Social Specialist will develop an annual LMP monitoring plan, which will include:

- Field supervision and spot checks to review working conditions, OHS compliance, and GRM accessibility;
- Review of contractor documentation, including contracts, payment records, training logs, and grievance registers;
- Non-compliance management, including immediate corrective actions and, if necessary, contract suspension or termination;
- Quarterly reporting on LMP compliance to the World Bank, integrated into E&S progress reports.

All findings, corrective actions, and lessons learned will be documented to improve labor risk management throughout the project cycle.

5.5 Capacity Building

The PIU will ensure that all relevant staff, contractors, and implementing partners receive LMP induction training, which will cover:

- ESS2 requirements and national labor laws;
- OHS standards and emergency response procedures;
- GBV/SEA/SH prevention and the Code of Conduct;
- GRM operation and confidentiality principles.

Refresher training will be provided annually or when significant changes occur in project scope, worker categories, or legal requirements.

The responsibilities outlined above extend to the implementation of all policies and procedures described in Sections 6–11 of this LMP. This includes ensuring compliance with national labor laws, World Bank ESS2 requirements, and all relevant project-specific standards and commitments.

6. Responsible Employees

The Project Implementation Unit (PIU) under the Ministry of Emergency Situations (MoES) is responsible for the overall implementation and compliance with these Labor Management Procedures (LMP). The PIU will designate a Social Specialist who will act as the focal point for labor management, including oversight of occupational health and safety (OHS), grievance redress, and compliance monitoring.

Key responsibilities:

- PIU Social Specialist – coordinates implementation of the LMP across all worker categories (direct, contracted, community, and primary supply workers), provides training, monitors compliance, and reports to the PIU Project Manager and the World Bank.
- PIU Project Manager – ensures that adequate resources are allocated for LMP implementation and addresses non-compliance issues raised by the Social Specialist.
- Contractors and Service Providers – appoint a labor focal point responsible for implementing LMP requirements, maintaining records, and reporting to the PIU.
- Suppliers – ensure compliance with labor standards as per procurement contracts and provide required documentation to the PIU or implementing partners.

The PIU will also engage with relevant national authorities (e.g., State Labor Inspectorate, State Sanitary and Epidemiological Service) when needed for inspections, enforcement, or investigation of labor-related incidents.

7. Policies and Procedures

The CERP will apply labor management policies and procedures consistent with the Labor Code of the Kyrgyz Republic (2025), other applicable national laws, and the World Bank's Environmental and Social Standard 2 (ESS2). These policies ensure fair treatment, non-discrimination, safe and healthy working conditions, and effective grievance resolution for all categories of project workers.

Key policy principles:

- Non-discrimination and Equal Opportunity – All recruitment, remuneration, and employment conditions will be applied without discrimination based on gender, ethnicity, religion, disability, or social status. Where feasible, measures will be taken to promote the participation of women and other underrepresented groups in project activities.
- Prohibition of Child and Forced Labor – The minimum age for employment under the Labor Code of the Kyrgyz Republic is 16 years (18 years for hazardous work); the use of forced labor is strictly prohibited under Article 3 of the Code. Contractors, suppliers, and implementing partners must ensure compliance with these requirements.
- Written Contracts – All direct and contracted workers will be employed under written contracts in accordance with national legislation and ESS2, specifying terms and conditions of employment, wages, working hours, leave entitlements, and grievance procedures.

- Occupational Health and Safety (OHS) – The PIU and contractors must ensure a safe working environment, provision of necessary personal protective equipment (PPE), and training on safe work practices, emergency preparedness, and first aid.
- Prevention of Gender-Based Violence, Sexual Exploitation, and Harassment (GBV/SEA/SH) – All workers will sign a Code of Conduct that includes zero-tolerance provisions for GBV/SEA/SH. Awareness sessions will be conducted before deployment.
- Workers’ Grievance Redress Mechanism (GRM) – All project workers will have access to a confidential, easily accessible GRM that protects against retaliation. Procedures for the GRM are described in Section 10 of this document.

7.1 Recruitment and Replacement Procedure

The Project promotes fair labor practices and non-discriminatory recruitment in line with the Labor Code of the Kyrgyz Republic and the World Bank’s ESS2. In emergency contexts, recruitment must remain flexible, rapid, and efficient, while upholding core principles of equal opportunity and transparency.

Objective:

To ensure that recruitment and deployment of project workers are conducted fairly, transparently, and efficiently, minimizing risks of discrimination, nepotism, or labor exploitation, and ensuring workers understand their roles, rights, and working conditions.

Procedure:

7.1.1 Recruitment Planning

Contractors shall submit a recruitment plan to the PIU:

- For review and approval regarding key personnel, as specified in the Terms of Reference (TOR);
- For information only regarding support and temporary personnel.

The plan should outline:

- Type and number of workers required;
- Intended work conditions and locations;
- Qualification and experience requirements for key roles;
- Outreach measures to ensure inclusive access (e.g., encouraging applications from women, youth, and persons with disabilities).

7.1.2 Vacancy Announcement

- All job vacancies should be advertised in appropriate media (local press, community noticeboards, word of mouth via local leaders for community workers), ensuring wide and equitable access to information.
- Discrimination based on gender, ethnicity, age, religion, disability, or political affiliation is prohibited.
- Nepotism and conflict of interest are also not allowed.

7.1.3 Shortlisting and Hiring

- Contractors should aim to promote gender inclusiveness, where feasible, by encouraging qualified women and other underrepresented groups to apply.

- All candidates must be at least 18 years of age;
- Selection must be merit-based and linked to job requirements;
- Employment contracts must be issued voluntarily and in writing to all workers (including community workers).

7.1.4 Induction and Training

Before deployment, all project workers must be briefed on:

- Job responsibilities and performance expectations;
- Terms and conditions of employment;
- Code of Conduct and disciplinary procedures;
- Workers' Grievance Redress Mechanism (GRM);
- Freedom of association;
- Environmental and social requirements, including key aspects of the ESMP;
- Occupational health and safety procedures, emergency response protocols.

7.1.5 Recordkeeping

Contractors must maintain comprehensive records of the recruitment process, including announcements, shortlists, signed contracts, and induction attendance. These must be made available upon request to the PIU, the World Bank, or national oversight bodies.

7.2 Implementation Procedures

1. Integration into Contracts – LMP provisions will be incorporated into all contracts with contractors, suppliers, and service providers.
2. Induction and Training – All workers will receive induction covering their rights, obligations, and the GRM process before starting work.
3. Monitoring and Enforcement – The PIU Social Specialist will monitor compliance with these policies through site visits, document reviews, and interviews, and will enforce corrective measures in case of non-compliance.
4. Coordination with National Authorities – Where necessary, the PIU will coordinate with the State Labor Inspectorate, State Sanitary and Epidemiological Service, and other competent bodies to ensure compliance and address violations.

8. Age of Employment

The Project strictly prohibits the use of child labor in any form and ensures compliance with the minimum working age requirements of the Kyrgyz Republic's Labor Code (2025) and the World Bank's ESS2.

8.1 Minimum Age Requirement

- The minimum legal age for employment in the Kyrgyz Republic is 18 years for all types of work under the Project.
- No person under 18 years of age will be engaged in project-related activities, whether as a direct worker, contracted worker, community worker, or primary supply worker.
- This requirement applies to all contractors, sub-contractors, suppliers, and implementing partners.

8.2 Exceptional Cases under National Law

- Article 14 of the Labor Code allows employment from age 15 for light work that does not harm health and does not interfere with education, subject to parental/guardian consent and approval by the authorized state body in the field of labor.
- However, the Project will not apply this exception due to the emergency nature of activities and potential occupational hazards.

8.3 Hazardous Work Restriction

- In line with national law and ESS2, no person under 18 years of age will perform work considered hazardous, harmful to health, or likely to interfere with physical, mental, or social development.
- Hazardous work includes, but is not limited to:
 - o Handling of heavy loads;
 - o Work with hazardous chemicals or substances;
 - o Work in extreme weather conditions;
 - o Operating dangerous machinery or vehicles;
 - o Any activity at heights or in confined spaces.

8.4 Verification of Age

- Contractors and suppliers must verify the age of all workers prior to engagement by reviewing official documents such as a passport, birth certificate, or national ID.
- Records of age verification will be maintained and available for inspection by the PIU or relevant authorities.

8.5 Consequences of Non-Compliance

- Any case of underage employment will require immediate termination of the work arrangement and notification to the PIU Social Specialist.
- Contractors or suppliers found to be in violation will be subject to corrective actions, contractual penalties, and potential contract termination.

9. Terms and Conditions

The Project ensures that all workers engaged in CERP activities are employed under fair, transparent, and non-discriminatory terms and conditions in compliance with the Labor Code of the Kyrgyz Republic (2025) and the World Bank's ESS2.

9.1 General Principles

- All workers (direct, contracted, community, and primary supply) must have clear and documented terms of engagement.
- Working conditions must comply with national labor legislation and reflect the principles of decent work, including fair wages, reasonable working hours, and safe working conditions.
- Employment terms must be provided in writing, in a language the worker understands, and signed by both parties before work commences.

9.2 Key Requirements

- Minimum wage: Not lower than the national minimum wage established by the Government of the Kyrgyz Republic.

- Payment frequency: Wages must be paid at least once per month, with payslips issued to workers.
- Working hours: In accordance with Article 51 of the Labor Code – standard working time not exceeding 40 hours per week.
- Overtime compensation: Overtime must be compensated in line with Article 108 of the Labor Code – at least 1.5 times the hourly rate for the first 2 hours and at least 2 times thereafter, or with equivalent rest time upon worker’s request.
- Rest periods: Minimum uninterrupted weekly rest of 24 hours; daily rest in accordance with national law.
- Leave entitlements: Paid annual leave of at least 28 calendar days, plus additional leave as per law for hazardous work.
- Social protection: Workers are entitled to social insurance coverage, including sick leave and maternity/paternity leave as per national law.

9.3 Non-Discrimination and Equal Opportunity

- No discrimination based on gender, ethnicity, religion, political opinion, disability, or social status is permitted.
- Contractors are encouraged to promote gender balance where possible, especially in recruitment for support and administrative positions.

9.4 Specific Provisions for Community Workers

- Community workers (volunteers) engaged under the Project will receive clear information on their tasks, expected conduct, and safety measures.
- While volunteers will not have formal employment contracts, they will be provided with written agreements outlining their rights (including access to the GRM) and safety provisions.

9.5 Documentation and Recordkeeping

- Contractors and suppliers must maintain complete records of employment contracts, attendance, payment, and leave.
- These records must be made available to the PIU upon request.

9.6 Enforcement

Non-compliance with terms and conditions will result in corrective action plans and, if necessary, contractual penalties or termination of the contract.

10. Grievance Redress Mechanism (GRM)

The CERP will maintain a robust and accessible Workers’ Grievance Redress Mechanism (GRM) to address any workplace concerns of direct, contracted, community, and primary supply workers. The GRM is designed in full compliance with the Labor Code of the Kyrgyz Republic (2025) and the World Bank’s ESS2, ensuring confidentiality, protection from retaliation, and timely resolution.

The GRM is separate from the project’s community GRM under ESS10 but coordinated for efficiency and oversight.

10.1 Objectives

- Provide all categories of project workers with a transparent and fair process to raise workplace concerns, including but not limited to: terms and conditions of employment, occupational health and safety (OHS), discrimination, harassment, and GBV/SEA/SH.
- Resolve grievances promptly at the lowest appropriate level.
- Protect workers from retaliation for using the mechanism.
- Ensure lessons learned from grievances feed into improved labor management practices.

10.2 Scope

The GRM applies to:

- Direct workers — PIU staff under the Ministry of Emergency Situations (MoES).
- Contracted workers — engaged by contractors, implementing partners, or service providers.
- Community workers — volunteers engaged during emergency response.
- Primary supply workers — employees of suppliers providing goods or materials to the project.

10.3 Accessibility and Awareness

Information on the GRM will be included in all worker induction programs and posted in visible locations at workplaces, warehouses, distribution points, and offices.

Materials will be in Kyrgyz and Russian, and in other languages if required for specific worker groups.

Contractors and suppliers must ensure that their workers are informed about the GRM and have equal access to it.

10.4 Procedure

Step 1 – Submission of Grievance

A worker may submit a grievance verbally or in writing to:

- Their direct supervisor;
- Contractor's designated labor focal point; or
- PIU Social Specialist (for escalation or in cases of conflict of interest).

Channels include:

- In-person submission;
- Dedicated email address and phone hotline;
- Locked grievance boxes at key sites;
- Anonymous submissions accepted.

Step 2 – Registration

- All grievances are logged in a Workers' GRM Register with a unique ID number.
- The register must include: date of submission, category, brief description, status, and outcome.
- Contractors submit monthly GRM logs to the PIU Social Specialist.

Step 3 – Acknowledgement

- The grievance must be acknowledged within 2 working days of receipt, confirming that it will be processed.

Step 4 – Review and Resolution

- Contractor or PIU Social Specialist investigates, seeks clarification, and proposes resolution.
- Simple grievances should be resolved within 7 working days; complex cases within 14 working days.
- If the grievance concerns GBV/SEA/SH, it will be handled through the project's GRM using survivor-centered, confidential, and referral-based procedures which will supplement to the existing national system.

Step 5 – Escalation

If unresolved:

- First escalation: PIU Project Manager;
 - Second escalation: MoES oversight unit;
 - Third escalation: External bodies such as the State Labor Inspectorate or courts.
- At any stage, the worker retains the right to access formal legal remedies.

Step 6 – Closure

- A grievance is closed only when the complainant confirms satisfaction, or when all resolution options have been exhausted and documented.
- All outcomes are recorded in the GRM Register.

10.5 Protection Measures

Strict prohibition of retaliation, intimidation, or discrimination against any worker using the GRM. Anonymous complaints will be processed with the same diligence as identified ones. Personal data of complainants will be kept strictly confidential and accessible only to those directly involved in resolution.

10.6 Reporting

Contractors and Suppliers — Monthly GRM report to PIU Social Specialist, including number of grievances, types, status, and resolutions.

PIU — Consolidates data into quarterly Environmental & Social (E&S) reports to the World Bank. Serious incidents (e.g., fatalities, severe injuries, confirmed SEA/SH cases) must be reported to the World Bank within 48 hours in line with the Incident and Accident Notification Protocol.

10.7 Integration with Other Mechanisms

Where workers' grievances overlap with community issues, coordination will be established between the Workers' GRM and the Community GRM to ensure efficiency without compromising confidentiality.

Lessons learned from grievances will be integrated into training, contractor performance evaluations, and updates to the LMP.

11. Contract Management

Effective contract management is essential to ensure that all labor-related obligations under the CERP are clearly defined, implemented, and monitored in accordance with the Labor Management Procedures (LMP), the Labor Code of the Kyrgyz Republic, and the World Bank's Environmental and Social Standard 2 (ESS2).

11.1 Objectives

Integrate LMP requirements into all contracts with contractors, suppliers, and implementing partners.

Ensure legal enforceability of labor, OHS, and grievance redress provisions.

Provide a basis for monitoring, compliance verification, and corrective actions.

11.2 Contractual Requirements

All contracts financed under the CERP — including those with contractors, service providers, and suppliers — must contain clauses that:

Compliance with Labor Laws and ESS2

- Full adherence to the Labor Code of the Kyrgyz Republic (2025), other applicable national labor and OHS regulations, and ESS2 requirements.
- Explicit prohibition of child labor (minimum age 18) and forced labor.

Occupational Health and Safety (OHS)

- Provision of safe and healthy working conditions, adequate PPE, and OHS training.
- Compliance with the project's ESMP and any sector-specific safety guidelines.

Terms and Conditions of Employment

- Written employment contracts for all workers, stating wages, working hours, leave entitlements, benefits, and termination conditions.
- Wages to be paid at least monthly, with proper documentation.

Non-Discrimination and Equal Opportunity

- Commitment to fair recruitment, equal opportunity for women, minorities, and persons with disabilities.
- Provision of adequate and gender-sensitive sanitation facilities.

Code of Conduct (CoC)

- Mandatory signing of the project's CoC by all workers before deployment, including clauses on GBV/SEA/SH prevention and respectful conduct.

Workers' Grievance Redress Mechanism (GRM)

- Contractors must implement and maintain an accessible GRM for their workers in line with Section 9 of this LMP, and report monthly to the PIU.

Monitoring and Reporting

- Contractors and suppliers must submit regular LMP compliance reports, including GRM logs, OHS statistics, and any incidents.

Corrective Actions and Sanctions

- Non-compliance will trigger corrective action requirements, withholding of payments, or contract termination.
- Serious breaches (e.g., confirmed child labor, GBV/SEA/SH violations) may result in immediate termination and reporting to authorities.

11.3 Contract Management

Process Preparation Stage

- PIU Social Specialist and Procurement Officer review all bidding documents to ensure integration of LMP requirements.
- All tender announcements clearly state labor compliance obligations.

Evaluation Stage

- Bidders must demonstrate capacity to comply with LMP requirements, including labor policies, OHS systems, and past performance records.

Award Stage

- Contracts include a specific annex on LMP obligations, to be signed and acknowledged by both parties.

Implementation Stage

- Contractors designate a labor focal point.
- Monthly LMP compliance reports submitted to PIU.
- PIU conducts periodic site visits, worker interviews, and documentation checks.

Close-Out Stage

- Final LMP compliance assessment conducted by PIU.
- Any outstanding corrective actions must be resolved before contract closure and final payment.

11.4 Recordkeeping

The PIU will maintain a centralized repository of all contracts, compliance reports, and corrective action records.

Contractors and suppliers must keep all employment, payroll, OHS, and GRM records for at least 3 years after contract completion and make them available upon request.

Attachment 1 of LMP. Sample Code of Conduct for Project Workers

Project: Contingent Emergency Response Project (CERP), Kyrgyz Republic

Employer: [Name of Contractor/Supplier/Implementing Partner]

Worker Name: _____

Position: _____

Date: _____

1. Purpose

This Code of Conduct (CoC) establishes the minimum standards of behavior expected from all project workers engaged under the CERP, regardless of employment status or category. It aims to:

- Ensure respectful, safe, and non-discriminatory working environments;
- Prevent and address risks of gender-based violence (GBV), sexual exploitation and abuse (SEA), and sexual harassment (SH);
- Protect community members, including vulnerable groups, during project implementation;
- Ensure compliance with national legislation of the Kyrgyz Republic and the World Bank's Environmental and Social Standards (ESS).

2. Scope

The CoC applies to:

- Direct workers employed by the PIU under the Ministry of Emergency Situations (MoES);
- Contracted workers engaged through contractors, service providers, or implementing partners;
- Community workers (volunteers) engaged for emergency activities;
- Primary supply workers delivering goods or materials under CERP procurement.

3. General Standards of Conduct

All project workers must:

1. Perform duties diligently, responsibly, and in accordance with safety protocols and the project's operational procedures.
2. Treat all persons with dignity, respect, and fairness, without discrimination based on gender, ethnicity, religion, age, disability, or social status.
3. Refrain from any form of harassment, intimidation, or abuse—verbal, physical, or psychological—towards colleagues, beneficiaries, or community members.
4. Comply with applicable laws of the Kyrgyz Republic, project policies, and this CoC at all times.
5. Follow occupational health and safety (OHS) procedures, including proper use of personal protective equipment (PPE).
6. Protect project assets and resources from misuse, theft, or damage.

4. Prohibitions

The following behaviors are strictly prohibited under this CoC:

- **Child Labor:** Engaging persons under the age of 18 in any project-related work.
- **Forced Labor:** Any work or service not voluntarily agreed to, including under threat or coercion.
- **GBV/SEA/SH:** Any form of gender-based violence, sexual exploitation, abuse, or harassment, including transactional sex or inappropriate relationships with beneficiaries.
- **Discrimination:** Unequal treatment or exclusion based on protected characteristics.

- **Substance Abuse:** Consumption or possession of alcohol or illegal drugs during working hours or in project-related premises.
- **Fraud and Corruption:** Soliciting or accepting bribes, kickbacks, or other improper benefits in connection with project work.

5. GBV/SEA/SH-Specific Commitments

All workers must:

1. Avoid any sexual activity with persons under 18 years of age, regardless of the legal age of consent or mistaken belief about the person’s age.
2. Not exchange money, employment, goods, or services for sex, including sexual favors or other forms of humiliating, degrading, or exploitative behavior.
3. Immediately report any suspected or actual GBV/SEA/SH incidents to the designated GBV focal point or through the confidential grievance mechanism.
4. Cooperate fully with investigations while ensuring survivor confidentiality.

6. Community Interaction

When interacting with community members, workers must:

- Show respect for local customs, culture, and traditions;
- Avoid entering private property without permission;
- Use respectful language at all times;
- Avoid any behavior that could create a perception of favoritism, exploitation, or abuse of authority.

7. Grievance Mechanism (GRM)

Workers are entitled to access the confidential Worker GRM (Section 9 of LMP) to raise concerns or complaints without fear of retaliation. GBV/SEA/SH-related complaints will be handled under a survivor-centered approach, ensuring confidentiality and referral to appropriate support services.

8. Disciplinary Actions

Breaches of this CoC will result in disciplinary measures, which may include:

- Verbal or written warnings;
- Suspension from work;
- Termination of employment or contract;
- Referral to law enforcement authorities where applicable.

9. Acknowledgment

I, the undersigned, have read and understood this Code of Conduct. I agree to abide by its terms and understand that violations may result in disciplinary action or legal consequences.

Worker Name: _____

Signature: _____

Date: _____

Employer Representative Name: _____

Signature: _____

Date: _____

Annex 4. Occupational Health and Safety Framework

PURPOSE

The purpose of this Occupational Health and Safety (OHS) Framework is to provide guidance for the systematic identification, evaluation, prevention and control of general workplace hazards, specific job hazards, potential hazards and environmental and social impacts that may arise from foreseeable conditions during the implementation of the CERP.

This document shall be followed by all implementers and suppliers. In case World Bank specific documents are to be implemented, this document will be followed in conjunction with World Bank's specific documents and WB Environment Social and Health Guidelines.

Although every effort has been made to make the procedures and guidelines in line with statutory requirements, in case of any discrepancy, relevant statutory guidelines must be followed. In case World Bank, the financier, has any specific requirement, the same is to be fulfilled.

SCOPE

The document is applicable for CERP implementers at all project sites during the implementation of the activities as per the relevant contractual obligations.

OBJECTIVES AND TARGETS

- The OHS Framework reflects that the implementer places high priority upon the Occupational Health, Safety and Environment at workplaces;
- Ensure that the Health and Safety of all persons at work site is not adversely affected by the work;
- Ensure protection of environment of the work site and adjacent community;
- Comply with all applicable OHSE laws and contractual obligations, in accordance with Kyrgyz OHS legislation, IFC/WB standards, and Good International industry Practice and WB ESHGs;
- Provide trained, experienced and competent personnel. Ensure medically fit personnel only are engaged at work;
- Provide and maintain plant, places and systems of work that are safe and without risk to health and the environment;
- Provide all personnel with adequate information, instruction, training and supervision on the safety aspect of their work;
- Effectively control, co-ordinate and monitor the activities of all personnel on the Project sites including suppliers and contractors in respect of OHSE;
- Establish effective communication on OHSE matters with all relevant parties involved in the Project works;
- Ensure that all work planning takes into account all persons that may be affected by the work;
- Ensure fitness testing of all equipment are certified by competent persons;
- Ensure timely provision of resources to facilitate effective implementation of OHS requirements;
- Ensure continual improvements in OHS performance;
- Ensure conservation of resources and reduction of wastage;

- Capture the data of all incidents including near misses, process deviation etc. Investigate and analyze the same to find out the root cause;
- Ensure timely implementation of correction, corrective action and preventive action.

OHS TARGETS

| | |
|-------------------|------|
| Explosion | zero |
| Fatality | zero |
| Lost time injury | zero |
| Fire incidents | zero |
| vehicle incidents | Zero |

TERMS AND DEFINITIONS

Definitions

Incident: Work- related or natural event(s) in which an injury, or ill health (regardless of severity), damage to property or fatality occurred, or could have occurred.

Near Miss: An incident where no ill health, injury, damage or other loss occurs, but it had a potential to cause, is referred to as “Near-Miss”.

Man-Hours Worked: The total number of man hours worked by all employees including Contractors working in the premises. It includes managerial, supervisory, professional, technical, clerical and other workers including contract laborers. Man-hours worked shall be calculated from the payroll or time clock recorded including overtime. When this is not feasible, the same shall be estimated by multiplying the total man-days worked for the period covered by the number of hours worked per day. The total number of workdays for a period is the sum of the number of men at work on each day of period. If the daily hours vary from department-to-department separate estimate shall be made for each department and the result added together.

First-Aid Cases: First aids are not essentially all reportable cases, where the injured person is given medical treatment and discharged immediately for reporting on duty, without counting any lost time.

Lost-Time Injury: Any work injury which renders the injured person unable to perform his regular job or an alternative restricted work assignment on the next scheduled work day after the day on which the injury occurred.

Medical Cases: Medical cases come under non-reportable cases, where owing to illness or other reason the employee was absent from work and seeks medical treatment.

Types of Incidents & Their Reporting: The three categories of Incident are as follows:

Non-Reportable Cases:

An incident, where the injured person is given medical help and discharged for work without counting any lost time.

Reportable Cases:

In this case the injured person is disabled for 48 hours or more and is not able to perform his duty.

Injury Cases:

These are covered under the heading of non-reportable cases. In these cases, the incident caused injury to the person, but he/she still continues his duty.

Total Reportable Frequency Rate: Frequency rate is the number of Reportable Lost Time Injury (LTI) per one Million Person hours worked. Mathematically, the formula read as:

Number of Reportable LTI x 1,000,000

Total Person Hours Worked

4.1.9 Severity Rate

Severity rate is the Number of days lost due to Lost Time Injury (LTI) per one Million Person hours worked. Mathematically, the formula reads as:

Days lost due to LTI x 1,000,000

Total Person Hours Worked

Incidence Rate

Incidence Rate is the Number of LTI per one thousand manpower deployed. Mathematically, the formula reads as:

Number of LTIx1000

Average number of manpower deployed

HSE ORGANIZATION

Number of Safety Officers: In accordance with the national legislation of the Kyrgyz Republic, at least one Occupational Health and Safety (OHS) specialist shall be appointed for each site where the number of workers exceeds 50.

In addition, based on international good practices and site-specific needs, one safety officer may be deployed for every 500 workers, and one safety-steward/supervisor for every 100 workers. Final staffing ratios are subject to agreement with the PIU and national labor authorities.

Table 6. Qualification for OHS Personnel

| No | Designation | Qualification | Experience |
|----|------------------------------|--|---|
| 1. | Health and Safety officer | Degree in Engineering or Public Health/ Environmental Health | Minimum two years in the field of Construction or Occupational Health and safety. |
| 2 | Health and Safety Supervisor | Degree or diploma in any discipline, with officially certified OHS training (recognized in the Kyrgyz Republic), including construction safety | Minimum two years |

Responsibilities**Site In -Charge of Contractor**

- Shall engage qualified safety officer(s) and steward (s) as per clause;
- Shall adhere to the rules and regulations mentioned in this code, practice very strictly in his area of work in consultation with his concerned engineer and the safety coordinator;
- Shall screen all workmen for health and competence requirement before engaging for the job and periodically thereafter as required;
- Shall not engage any employee below 18 years of age;
- Shall arrange for all necessary PPEs like safety helmets, belts, full body harness, shoes, face shield, hand gloves etc. before starting the job;
- Shall ensure that no person lifts, carries or move any load which, by reason of its weight, is likely to injure his health or jeopardize his safety as stipulated in the Occupational Safety, Health and Welfare provisions of the Kyrgyz Republic;
- Shall ensure that all Tools & Plants (T&Ps) engaged are tested for fitness and have valid certificates from competent person;
- Shall ensure that provisions for the welfare of the employees such as canteen, rest rooms/washing facilities are provided for at the site;
- Shall adhere to the instructions laid down in Operation Control Procedures (OCPs) available with the site management;
- Shall ensure that person working above 2.0 meter should use Safety Harness tied to a life line/stable structure;
- Shall ensure that materials are not thrown from height. Cautions to be exercised to prevent fall of material from height;
- Shall report all incidents (Fatal/Major/Minor/Near Miss) to the Site engineer /HSE officer;
- Shall ensure that Horseplay is strictly forbidden;
- Shall ensure that all personnel working under Contractor are working safely and do not create any Hazard to self and to others;
- Shall ensure display of adequate signage/posters on OHSE;

- Shall ensure conductance of OHSE audit, mock drills, medical camps, induction training and training on OHSE at site;
- Shall ensure full co-operation during OHSE audits;
- Shall ensure submission of look-ahead plan for procurement of HSE equipment's and PPEs as per work schedule;
- Shall ensure good housekeeping;
- Shall ensure adequate valid fire extinguishers are provided at the worksite;
- Shall ensure availability of sufficient number of toilets /restrooms and adequate drinking water at work site and labor colony;
- Shall ensure adequate emergency preparedness;
- Shall be member of site OHSE committee and attend all meetings of the committee;
- Temporary fencing should be done for open edges if Hand – railings and Toe-guards are not available.

Health, Safety and Environment Officer of Contractor

- Carry out safety inspection of Work Area, Work Method, Men, Machine & Material, processes and materials and other tools;
- Facilitate inclusion of safety elements into Work Method Statement;
- Highlight the requirements of safety through Tool-box talks/ other meetings;
- Help concerned heads of sections to prepare Job Specific instructions for critical jobs;
- Conduct investigation of all incident/dangerous occurrences & recommend appropriate safety measures;
- Advice & co-ordinate for implementation of HSE permit systems;
- Convene HSE meeting & minute the proceeding for circulation & follow-up action;
- Plan procurement of PPE & Safety devices and inspect their healthiness;
- Report to OHS specialist on all matters pertaining to status of safety and promotional program at site level;
- Facilitate administration of First Aid;
- Facilitate screening of workmen and safety induction;
- Conduct fire Drill and facilitate emergency preparedness;
- Design campaigns, competitions & other special emphasis programs to promote safety in the workplace;
- Notify site personnel non-conformance to safety norms observed during site visits / site inspections;
- Recommend to Site In-Charge, immediate discontinuance of work until rectification of such situations warranting immediate action in view of imminent danger to life or property or environment;
- To decline acceptance of such PPE / safety equipment that do not conform to specified requirements;
- Encourage raising Near Miss Report on safety along with, improvement initiatives on safety.

PLANNING BY THE CONTRACTOR

Monthly planning and review of HSE activities shall be carried out by Contractor jointly with the implementer.

Mobilization of Machinery/Equipment/Tools by Contractor

As a measure to ensure that machinery, equipment and tools being mobilized to supplier or consultant are fit for purpose and are maintained in safe operating condition and complies with legislative and owner requirement, inspection shall be arranged by in-house competent authority for acceptance as applicable.

Mobilization of Person power by Contractor

- The Contractor shall organize OHS induction training and pre-employment medical check-ups for all personnel before assigning them to work, and shall ensure periodic health screenings in accordance with the occupational health and safety requirements of the Kyrgyz Republic.
- Workers suffering from occupational or chronic diseases shall be excluded from tasks that may aggravate their conditions.
- Personnel who do not meet health fitness requirements shall not be engaged in project activities.
- The Contractor shall comply with national sanitary regulations on maximum permissible loads for manual lifting and carrying, differentiated by gender.
- The Contractor shall provide safe and hygienic accommodation conditions, including adequate sanitation, cleanliness, lighting, and protection from weather conditions, for all workers.

Provision of PPEs

Personnel Protective Equipment (PPEs), in adequate numbers, will be made available at site & their regular use by all concerned will be ensured.

- All the PPEs shall be checked for its quality before issue and the same shall be periodically checked. The users shall be advised to check the PPEs themselves for any defect before putting on. The defective ones shall be repaired/ replaced.
- The issuing agency shall maintain register for issue and receipt of PPEs.
- The Helmets shall have logo or name (abbreviation of agency name permitted) affixed or printed on the front.

Arrangement of Infrastructure

Drinking water

Drinking water shall be provided and maintained at suitable places at different elevations. Container should be labeled as “Drinking Water”

Washing Facilities

In every workplace, adequate and suitable facilities for washing shall be provided and maintained.

Separate and adequate cleaning facilities shall be provided for the use of male and female workers. Such facilities shall be conveniently accessible and shall be kept in clean and hygienic condition and dully illuminated for night use.

Latrines and Urinals

- Latrines and urinals shall be provided in every work place.
- They shall be adequately lighted and shall be maintained in a clean and sanitary condition at all times, by appointing designated person.
- Separate facilities shall be provided for the use of male and female worker if any.

Provision of Shelter During Rest

Proper Shed & Shelter shall be provided for rest during break.

Medical Facilities

Medical Centre:

- A medical center shall be ensured/identified at site with basic facilities for handling medical emergencies. The medical center can be jointly developed on proportionate sharing basis with permission from the implementer.
- A qualified medical professional shall be deployed at the medical center
- The medical center shall be equipped with one ambulance, with trained driver and oxygen cylinder.
- Medical waste shall be disposed as per prevailing legislation.

First Aider:

- Ensure availability of Qualified First-aider throughout the working hours.
- Every injury shall be treated, recorded and reported.
- Refresher course on first aid shall be conducted as necessary.
- List of Qualified first aiders and their contact numbers should be displayed at conspicuous places

First Aid Box:

- The Contractor shall provide necessary first aid facilities at every work place.
- The first aid box shall be kept by first aider who shall always be readily available during the working hours of the work place. His name and contact number to be displayed on the box.
- The first aid boxes should be placed at various elevations so as to make them available within the reach and at the quickest possible time.
- The first aid box shall be distinctly marked with a Green Cross on white background.
- Monthly inspection of First Aid Box shall be carried out by the owner.
- The Contractor should conduct periodical first –aid classes to keep his supervisor and Engineers properly trained for attending to any emergency.

Health Check Up

The persons engaged at the site shall undergo health checkup before induction.

Provision of Canteen Facility

- Canteen facilities shall be provided for the workers of the project inside the project site.
- Proper cleaning and hygienic condition shall be maintained.
- Proper care should be taken to prevent biological contamination.
- Adequate drinking water should be available at the canteen.
- Fire extinguisher shall be provided inside the canteen.

- Regular health check-up and medication to the canteen workers shall be ensured.

Provision of Emergency Vehicle

Dedicated emergency vehicle shall be made available at workplace by the Contractor to handle any emergency.

Pest Control

Regular pest control should be carried out at all offices, mainly laboratories, canteen, labor colony and stores.

Scrapyard

Scrapyard shall be developed to store metal scrap, wooden scrap, waste, hazardous waste in line with the Waste Management Framework.

Scrap/Waste shall be segregated as Bio-degradable and non-bio-degradable and stored separately.

Illumination

- The Contractor shall arrange at his cost adequate lighting facilities e.g. flood lighting, hand lamps, area lighting etc. at various levels for safe and proper working operations at dark places and during night hours at the work spot as well as at the pre-assembly area.
- Adequate and suitable light shall be provided at all work places & their approaches including passage ways.
- Lamp (hand held) shall not be powered by mains supply but either by 24V or dry cells.
- Lamps shall be protected by suitable guards where necessary to prevent danger, in case of breakage of lamp.
- Emergency lighting provision for night work shall be made to minimize danger in case of main supply failure.
- If the Contractor fails to take appropriate safety precautions or to provide necessary safety devices and equipment or to carry out instructions issued by the authorized official, the implementer shall have the right to take corrective steps at the risk and cost of the Contractor.

HSE TRAINING AWARENESS

HSE Induction Training

All persons entering into project site shall be given HSE induction training by the HSE officer of Contractor before being assigned to work.

In-house induction training subjects shall include but not limited to:

- Briefing of the Project details.
- Safety objectives and targets.
- Site HSE rules.
- Site HSE hazards and aspects.
- Types, Use and the Importance of the Consistent Use of PPE
- First aid facility.
- Emergency Contact No.
- Incident reporting.

- Fire prevention and emergency response.
- Rules to be followed in the camp
- Proper safety wear & gear must be issued to all the workers being registered for the induction (i.e., Shoes/Helmets/Goggles/Leg guard/Apron etc.)
- They must arrive fully dressed in safety wear & gear to attend the induction.
- Any one failing to conform to this safety wear & gear requirement shall not qualify to attend.
- On completing attending Contractor's in-house HSE induction, each employee shall sign an induction training form to declare that he/she had understood the content and shall abide to follow and comply with safe work practices. They may only then be qualified to be issued with a personal I.D. card, for access to the work site

HSE Toolbox Talk

HSE tool Box talk shall be conducted by frontline foreman/supervisor of Contractor to specific work groups prior to the start of work. The agenda shall consist of the followings:

- Details of the job being intended for immediate execution.
- The relevant hazards and risks involved in executing the job and their control and mitigating measures.
- Specific site condition to be considered while executing the job like high temperature, humidity, unfavorable weather etc.
- Recent non-compliances observed.
- Appreciation of good work done by any person.
- Any doubt clearing session at the end.
- Tool box talk to be conducted at least once a week for the specific work.

HSE Training During Project Execution

Other HSE training shall be arranged by Contractor as per the need of the project execution and recommendation of HSE committee of site.

The topics of the HSE training shall be as follows but not limited to:

- Types, Use and the Importance of the Consistent Use of PPE
- Hazards identification and risk analysis (HIRA)
- Work Permit System
- Incident investigation and reporting
- Fire fighting
- First aid
- Fire-warden training
- T & Ps fitness and operation
- Storage, preservation & material handling
- A matrix shall be maintained to keep an up-to-date record of attendance of training sessions carried out.

HSE Promotion-signage, Posters, Competition, Awards etc.

Display of HSE posters and banners

Site shall arrange appropriate posters, banners, slogans in local languages at workplace

Display of HSE signage

Appropriate HSE signage shall be displayed at the work area to aware workmen and passersby about the work going on and dos and don'ts to be followed

Competition on HSE and award

Contractor shall arrange HSE awareness program periodically on different topics including medical awareness for all personnel working at site

HSE COMMUNICATION

Incident Reporting

The Contractor shall submit report of all incidents, fires and property damage etc., not later than 24 hours of the occurrence. The Engineer shall report the same to the OHS Specialist immediately. Such reports shall be furnished in the manner prescribed by the implementer. (Refer to HSE procedure for incident investigation, analysis and reporting for details).

In addition, periodic reports on safety shall also be submitted by the Contractor to the implementer from time to time. Compiled monthly reports of all kinds of incidents, fire and property damage to be submitted to the Specialist as per prescribed formats.

HSE incidents of site shall be reported to the implementer site Management as per Procedure for Incident Investigation and Reporting. Corrective action shall be immediately implemented at the workplace and compliance shall be verified by the implementer's OHS Specialist and until then, work shall be put on hold by Construction Manager.

Work Permit System

"HSE Procedure for Work Permit System" shall be followed while implementing permit system.

- Permit applicant shall apply for work permit of particular work activity at particular location before starting of the work with Job Hazard Analysis.
- Permit signatory shall check that all the control measures necessary for the activity are in place and issue the permit to the permit holder.
- Permit holder shall implement and maintain all control measures during the period of permit. He will close the permit after completion of the work.
- The closed permit shall be archived in HSE Department of site.

Safety During Work Execution

Respective Operation Control Procedures (OCPs) are to be followed and adhered to and the same would be contractually binding.

Cylinder Storage and Movement

All gas cylinders shall be stored in upright position. Suitable trolley shall be used. There shall be flash-back arrestors conforming to IS-11006 at both cylinder and burner ends. Damaged tube and regulators must be immediately replaced. Number of cylinders shall not exceed the specified quantity as per OCP.

Cylinders shall be moved by tilting and rolling them on their bottom edges. They shall not be intentionally dragged, struck or permitted to strike each other violently. When cylinders are transported by powered vehicle they shall be secured in a vertical position.

Chemical Handling

Displaying safe handling procedures for all chemicals such as lube oil, acid, alkali, sealing compounds etc., at workplace. Where it is necessary to provide and/or store petroleum products or petroleum mixture & explosives, the Contractor shall be responsible for carrying out such provision / storage in accordance with the rules & regulations. All such storage shall have prior approval.

Electrical Handling

- Providing adequate number of 24 V sources and ensure that no hand lamps are operating at voltage level above 24 Volts.
- Fulfilling safety requirements at all power tapping points.
- High/ Low pressure welders to be identified with separate color clothing. No welders will be deployed without passing appropriate tests and holding valid welding certificates. Approved welding procedure should be displayed at workplace.
- The Contractor shall not use any hand lamp energized by Electric power with supply voltage of more than 24 volts in confined spaces like inside water boxes, turbine casings, condensers etc.
- All portable electric tools used by the Contractor shall have safe plugging system to source of power and be appropriately earthed. Only electricians licensed by appropriate statutory authority shall be employed by the Contractor to carry out all types of electrical works. Details of earth resource and their test date to be submitted to OHS specialist.
- The Contractor shall use only properly insulated and armored cables which conform to the requirement.
- The implementer reserves the right to replace any unsafe electrical installations, wiring, cabling etc. at the cost of the Contractor.
- All electrical appliances used in the work shall be in good working condition and shall be properly earthed.
- No maintenance work shall be carried out on live equipment.
- The Contractor shall maintain adequate number of qualified electricians to maintain his temporary electrical installations.
- Area wise Electrical safety inspection is to be carried out on monthly basis as per "Electrical Safety Inspection checklist" and the report is to be submitted to the implementer's safety officer
- Adequate precautions shall be taken to prevent danger for electrical equipment. No materials on any of the sites of work shall be so stacked or placed as to cause danger or inconvenience to any person or the public
- The Contractor shall carefully follow the safety requirement of the implementer/ the purchaser with the regard to voltages used in critical areas.

Fire Safety

- Providing appropriate firefighting equipment at designated workplace and nominate a fire officer/warden adequately trained for his job.
- Contractor shall provide enough fire protecting equipment of the types and numbers at his office, stores, temporary structure in labor colony etc. Such fire protection equipment shall be easy and always kept open.

- The fire extinguishers shall be properly refilled and kept ready which should be certified at periodic intervals. The date of changing should be marked on the Cylinders.
- All other fire safety measures as laid down in the emergency preparedness and response plan shall be followed.
- Non-compliance of the above requirement under fire protection shall in no way relieve the Contractor of any of his responsibility and liabilities to fire incident occurring either to his materials or equipment or those of others.
- Emergency contact numbers must be displayed at prominent locations
- Tarpaulin being inflammable should not be used (instead, only non-infusible covering materials shall be used) as protective cover while preheating, welding, stress relieving etc. at site.

Lifting Safety

- It will be the responsibility of the Contractor to ensure safe lifting of the equipment, taking due precaution to avoid any incident and damage to other equipment and personnel.
- All requisite tests and inspection of handling equipment, tools & tackle shall be periodically done by the Contractor by engaging only the Competent Persons as per law.
- Defective equipment or uncertified shall be removed from service.
- Any equipment shall not be loaded more than its recommended safe working load.

Environmental Control

Environment protection has always been given prime importance. Environmental damage is a major concern of the principal Contractor, and every effort shall be made, to have effective control measures in place to avoid pollution of Air, Water and Land and associated life. Chlorofluorocarbons such as carbon tetrachloride and trichloroethylene shall not be used. Waste disposal shall be done in accordance with the guidelines laid down in the Waste Management Plan.

Any chemical including solvents and paints, required for construction shall be stored in designated bonded areas around the site as per Material Safety Data Sheet (MSDS).

In the event of any spillage, the principle is to recover as much material as possible before it enters drainage system and to take all possible action to prevent spilled materials from running off the site. The Contractor shall use appropriate MSDS for clean-up technique.

All Contractors shall be responsible for the cleanliness of their own areas.

The Contractors shall ensure that noise levels generated by plant or machinery are as low as reasonably practicable. Where the Contractor anticipates the generation of excessive noise levels from his operations the Contractor shall inform the Construction Manager accordingly so that reasonable and practicable precautions can be taken to protect other persons who may be affected. It is imperative on the part of the Contractor to join and effectively contribute in joint measures such as tree plantation, environment protection, contributing towards social upliftment, conversion of packing woods to school furniture, keeping good relation with local populace etc. The Contractor shall carry out periodic air and water quality check and illumination level checking in his area of workplace and take suitable control measure.

Housekeeping

Keeping the work area clean/ free from debris, removed scaffoldings, scraps, insulation/sheeting wastage /cut pieces, temporary structures, packing woods etc. will be in the scope of the

Contractor. Such cleanings must be done by Contractor on daily basis by an identified group. If such activity is not carried out by Contractor is not satisfied, then the implementer may get it done by other agency and actual cost along with overheads will be deducted from contractor's bill. Such decisions shall be binding on the Contractor.

- Proper housekeeping to be maintained at workplace and the following are to be taken care of on daily basis.
- All surplus earth and debris are removed/disposed of from the working areas to identified locations.
- Unused/Surplus cables, steel items and steel scrap lying scattered at different places/elevation within the working areas are removed to identified locations.
- All wooden scrap, empty wooden cable drums and other combustible packing materials, shall be removed from workplace to identified locations. Sufficient waste bins shall be provided at
- Different workplaces for easy collection of scrap/waste. Scrap chute shall be installed to remove scrap from high location.
- Access and egress (staircase, gangways, ladders etc.) path should be free from all scrap and other hindrances.
- Workmen shall be educated through toolbox talk about the importance of housekeeping and encourage not to litter.
- Labor camp area shall be kept clear and materials like pipes, steel, sand, concrete, chips and bricks, etc. shall not be allowed in the camp to obstruct free movement of men and machineries.
- Fabricated steel structures, pipes & piping materials shall be stacked properly.
- No parking of trucks/trolleys, cranes and trailers etc. shall be allowed in the camp, which may obstruct the traffic movement as well as below LT/HT power line.
- Utmost care shall be taken to ensure overall cleanliness and proper upkeep of the working areas

Waste Management

Take suitable measures for waste management and environment related laws/legislation as a part of normal construction activities. Compliance with the legal requirements on storage/ disposal of paint drums (including the empty ones), Lubricant containers, Chemical Containers, and transportation and storage of hazardous chemicals will be strictly maintained.

Bins at a Workplace

- Sufficient rubbish bins shall be provided close to workplaces.
- Bins should be painted yellow and numbered.
- Enough drip trays shall be provided to collect oil and grease.
- Enough broomsticks with handle shall be provided.
- Adequate strength of employees should be deployed to ensure daily monitoring and service for waste management.

Storage and Collection

- Different types of rubbish/waste should be collected and stored separately.
- Paper, oily rags, smoking material, flammable, metal pieces should be collected in separate bins with close fitting lids.
- Rubbish should not be left or allowed to accumulate on construction and other workplaces.

- Do not burn construction rubbish near working site

Segregation

- Earmark the scrap area for different types of waste.
- Store wastes away from building.
- Oil spill absorbed by non-combustible absorbent should be kept in separate bin.
- Clinical and first aid waste stored and incinerated separately.

Disposal

- Sufficient containers and scrap disposal area should be allocated.
- All scrap bin and containers should be conveniently located.
- Provide self-closing containers for flammable/spontaneously combustible material.
- Keep drainage channels free from choking.
- Make schedule for collection and disposal of waste.

Warning and Signs

- Appropriate sign to be displayed at scrap storage area
- No toxic, corrosive or flammable substance to be discarded into public sewage system.
- Waste disposal shall be in accordance with best practice.
- Comply with all the requirements of Pollution Control Board (PCB) for storage and disposal of hazardous waste.

Emergency Preparedness and Response

- Emergency preparedness and response capability of site shall be developed and implemented accordingly.
- Availability of adequate number of first aiders and fire warden shall be ensured with the implementer and its Contractors
- All the Contractor's supervisory personnel and enough workers shall be trained for fire protection systems. Enough number of such trained personnel must be available during the tenure of contract. Contractor should nominate his supervisor to coordinate and implement the safety measures.
- Assembly point shall be earmarked and access to the same from different location shall be shown
- Fire exit shall be identified, and pathway shall be clear for emergency escape.
- Appropriate type and number of fire extinguisher shall be deployed as per Fire extinguisher deployment plan and validity shall be ensured periodically through inspection
- Adequate number of first aid boxes shall be strategically placed at different workplaces to cater emergency need. Holder of the first aid box shall be identified on the box itself who will have the responsibility to maintain the same.
- First aid center shall be developed at site with trained medical personnel and ambulance
- Emergency contact numbers (format given in EPRP) of the site shall be displayed at prominent locations.
- Tie up with fire brigade shall be done.
- Tie up with hospital shall be done in case Contractor is not having a hospital.
- Disaster Management group shall be formed at site
- Mock drill shall be arranged at regular intervals. Monthly report of the above to be given to the OHS Specialist

- Mock drill shall be conducted on different emergencies periodically to find out gaps in emergency preparedness and taking necessary corrective action

HSE INSPECTION

Inspection on HSE for different activities being carried out at site shall be done to ensure compliance to HSEMS requirements. The Contractor shall maintain and ensure necessary safety measures as required for inspection and tests as applicable, to enable inspection agency for performing Inspection. If any test equipment is found not complying with proper safety requirements, then the Inspection Agency may withhold inspection, till such time the desired safety requirements are met.

Daily HSE Checks

- Both the Site Supervisors and safety officer of Contractor are to conduct daily site Safety inspection around work activities and premises to ensure that work methods and the sites are maintained to an acceptable standard. The following are to form the common subjects of a daily safety inspection:
 - Personal Safety wears & gear compliance.
 - Complying with site safety rules and permit-to-work.
 - Positions and postures of workers.
 - Use of tools and equipment etc. by the workers.
 - The inspection should be carried out just when work starts in beginning of the day, during peak activities period of the day and just before the day's work ends.

Inspection of PPE

PPEs shall be inspected by HSE officer at random once in a week for its compliance to standard and compliance to use and any adverse observation shall be recorded in the PPE register.

Inspection of Tools and Plants (T&Ps)

- A master list of T&Ps shall be maintained by the Contractor.
- All T&Ps being used at site shall be inspected by HSE officer once in a month
- The T&Ps which require third party inspection shall be checked for their validity during inspection. The third-party test certificate should be accompanied with a copy of the concerned competent person's valid qualification record.
- The validity of T&P shall be monitored as per "Status of T&Ps" format.

HSE PERFORMANCE

- Contractor shall be assessed on monthly basis for HSE Compliance by Safety In-charge at the site.
- The implementer shall reserve the right to use this assessment for evaluating bidder's capacity for future tenders
- Suitable HSE reward system shall be developed at site level to promote HSE compliance amongst workmen by the Contractor. To decide HSE reward, performance towards HSE shall be evaluated for workmen and it shall be awarded regularly in public gathering.

- If safety record of the Contractor in execution of the awarded job is to the satisfaction of safety department of the implementer, issue of an appropriate certificate to recognize the safety performance of the Contractor may be considered by the implementer after completion of the job.

OTHER REQUIREMENTS

- In case of any delay in completion of a job due to mishaps attributable to lapses by the Contractor, the implementer shall have the right to recover cost of such delay from the payments due to the Contractor, after notifying the Contractor suitably.
- If the Contractor fails to improve the standards of safety in its operation to the satisfaction of the implementer after being given reasonable opportunity to do so and/or if the Contractor fails to take appropriate safety precautions or to provide necessary safety devices and equipment or to carry out instruction regarding safety issued by the implementer, the implementer shall have the right to take corrective steps at the risk and cost of the Contractor after giving a notice of not less than 7 days indicating the steps that would be taken by the implementer .
- If the Contractor succeeds in carrying out its job in time without any fatal or disabling injury incident and without any damage to property, the implementer may, at its sole discretion, favorably consider rewarding the Contractor suitably for the performance.
- In case of any damage to property due to lapses by the Contractor, the implementer shall have the right to recover the cost of such damages from the Contractor after holding an appropriate enquiry.
- The Contractor shall take all measures at the sites of the work to protect all persons from incidents and shall be bound to bear the expenses of defense of every suit, action or other proceeding of law that may be brought by any persons for injury sustained or death owing to neglect of the above precautions and to pay any such persons such compensation or which may with the consent of the Contractor be paid to compromise any claim by any such person, should such claim proceeding be filed against the implementer, the Contractor hereby agrees to indemnify the implementer against the same.
- The Contractor shall not employ men below the age of 18 years and women on the work of painting with products containing lead in any form. Wherever men above the age of 18 are employed on the work of lead painting, overalls shall be supplied by the Contractor to the workmen and adequate facilities shall be provided to enable the working painters to wash during the cessation of work.
- The Contractor shall notify the implementer of his intention to bring to site any equipment or material which may create hazard.
- The implementer shall have the right to prescribe the conditions under which such equipment or materials may be handled, and the Contractor shall adhere to such instructions.

NON-COMPLIANCE

NONCONFORMITY OF SAFETY RULES AND SAFETY APPLIANCES WILL BE VIEWED SERIOUSLY AND THE IMPLEMENTER HAS THE RIGHT TO IMPOSE PENALTIES ON THE CONTRACTOR FOR EVERY INSTANCE OF VIOLATION NOTICED:

HSE AUDIT/INSPECTION

Regular HSE Audit/inspection shall be carried out by Contractor as per Site HSE audit calendar.

HSE checklist shall be used for carrying out audit/inspection and report shall be submitted to site management.

All non-conformities and observations on HSE identified during internal or external HSE audit shall be disposed of by site in a time bound manner and reported back the implementation status

Corrective action and Preventive action on HSE issues raised by certification body issued by Regional HQs shall be implemented by site and reported to Site management.

MONTHLY HSE REVIEW MEETING

Site shall hold HSE review meeting every month to discuss and resolve HSE issues of site and improve HSE performance. It will also discuss the incidents occurred since previous meeting, its root cause and Corrective action and Preventive action. The agenda is given below:

- HSE performance
- HSE inspection
- HSE audit
- HSE training
- Health check-up camp
- HSE planning for the erection and commissioning and installation activities in the coming month
- HSE reward and promotional activities

The meeting shall be chaired by Construction Manager, convened by HSE coordinator and attended by all relevant staff including Site In-charge of Contractors and HSE officer of Contractors.

Attachment 1: FIRST AID BOX

The first-aid box shall be distinctively marked with a Red Cross on a white background and shall contain the following items, namely:

For establishments in which the number of contract laborers employed does not exceed fifty, each first aid box shall contain the following equipment:

- 6 small, sterilized dressings
- 3 medium size sterilized dressings
- 3 large size sterilized dressings
- 6 pieces of sterilized eye pads in separate sealed packets.
- 6 roller bandages 10 cm wide.
- 6 roller bandages 5 cm wide.
- One tourniquet
- A supply of suitable splints
- Three packets of safety pins.
- Kidney tray.
- 3 large, sterilized burn dressings.
- One (30ml) bottle containing a two percent alcoholic solution of iodine
- One (30 ml) bottle containing Sal volatile having the dose and mode of administration indicated on the label
- One snake bite lancet
- One (30gms) bottle of potassium permanganate crystals.
- One pair scissors
- A bottle containing 100 tablets (each of 5 grains) of aspirin
- Ointment for burns
- A bottle of suitable surgical anti-septic solution

(b) For establishment in which the number of contract labor exceeds fifty each first-aid box shall contain the following equipment:

- 12 small, sterilized dressings
- 6 medium size sterilized dressings
- 6 large size sterilized dressings.
- 6 large size sterilized burn dressings
- 6 (15 grams) packets sterilized cotton wool
- 12 pieces of sterilized eye pads in separate sealed packets.
- 12 roller bandages 10 cm wide.
- 12 roller bandages 5 cm wide.
- One tourniquet.
- A supply of suitable splints.
- Three packets of safety pins.
- Kidney tray.
- Enough eye washes bottles filled with distilled water or suitable liquid clearly indicated by a distinctive sign which shall be visible at all times.
- 4 per cent Xylocaine eye drops, and boric acid eye drops and soda by carbonate eye drops.
- One (60ml) bottle containing a two percent alcoholic solution of iodine

- One (two hundred ml) bottle of mercurochrome (2 per cent) solution in water.
- One (120ml) bottle containing Sal volatile having the dose and mode of administration indicated on the label.
- 2roll of adhesive plaster (6 cmX1 meter)
- 2rolls of adhesive plaster (2 cmX1 meter)
- A snake bite lancet.
- One (30 grams) bottle of potassium permanganate crystals.
- One pair scissors
- A bottle containing 100 tablets (each of 5 grains) of aspirin for burns
- A bottle of a suitable surgical anti septic solution.
- Adequate arrangement shall be made for immediate recoupment of the equipment when necessary.

Attachment 2: HSE AUDIT/INSPECTION CHECKLIST / COMPLIANCE REPORT

Table 7 HSE Checklist

| Project | | | | |
|--|------------|-----------|----------------|---------------|
| Contractor Date | | | | |
| Inspection by | | | | |
| Item | Yes | No | Remarks | Action |
| Housekeeping | | | | |
| Waste containers provided and used | | | | |
| Passageways and walkways clear | | | | |
| General neatness of working area | | | | |
| Other | | | | |
| Personnel Protective Equipment | | | | |
| Vehicle and Traffic | | | | |
| Rules and regulations observed | | | | |
| Inspection and maintenance | | | | |
| Licensed drivers | | | | |
| Other | | | | |
| Temporary Facilities | | | | |
| Emergency instructions posted | | | | |
| Fire extinguishers provided | | | | |
| First-aid equipment available | | | | |
| General neatness | | | | |
| Others | | | | |
| Fire Prevention | | | | |
| Personnel instructed | | | | |
| Fire extinguishers checked | | | | |
| No smoking in prohibited areas | | | | |
| Hydrants | | | | |
| Clearance | | | | |
| Others | | | | |
| Electrical | | | | |
| Handling & Storage of Materials | | | | |
| Properly stored or stacked | | | | |
| Passageways clear | | | | |
| Other | | | | |
| Flammable Gases and Liquids | | | | |
| Containers clearly identified | | | | |
| Proper storage | | | | |

| | | | | |
|---|--|--|--|--|
| Fire extinguisher nearby | | | | |
| Other | | | | |
| Environment | | | | |
| Lubricant waste/engine oils properly dispose. | | | | |
| Waste from Canteen disposed properly. offices, sanitation etc. | | | | |
| Disposal of surplus earth, stripping materials, expired batteries, oily r | | | | |
| Health Checks | | | | |
| Hygienic conditions at camps O.K. | | | | |
| Availability of first-aid facilities | | | | |
| Proper sanitation at site, office & labor camps. | | | | |
| Arrangement of medical facilities. | | | | |
| Measures for dealing with illness. | | | | |
| Availability of potable drinking water for workmen & staff | | | | |
| Provision of crèches for children. | | | | |
| | | | | |

Attachment 3: INSPECTION OF FIRST AID BOX

Table 8 Inspection of First Aid Box

| | |
|---------------------------|--|
| Name of Site | |
| Name of Contractor | |
| Inspection by | |
| Date of Inspection | |

Number of Employees on the Site.....

| No | Item | No Available | Remarks |
|-----------|--|---------------------|----------------|
| | No. of small, sterilized dressings | | |
| | No of medium sized sterilized dressings | | |
| | No of large sized sterilized dressings | | |
| | No of dressings large sized sterilized burn | | |
| | No of (15 grams) packets sterilized cotton wool | | |
| | No of pieces of sterilized eye pads in separate sealed packets | | |
| | No of roller bandages 10 cm wide. | | |
| | No of roller bandages 5 cm wide | | |
| | Whether tourniquet available | | |
| | Whether supply available. of Suitable P splints | | |
| | No of packets of safety pins | | |
| | Whether kidney tray available | | |
| | Whether enough eye wash bottles, filled with distilled water or suitable liquid, clearly indicated by a distinctive sign which shall be visible at all times, available. | | |
| | Whether 4%-xylocaine eye drops, and boric acid eye drops and soda by carbonate eye drops available | | |
| | Whether (60ml) bottle containing a two percent alcoholic solution of iodine available | | |
| | Whether (two hundred ml) bottle of mercurochrome (2 per cent) solution in water available. | | |
| | Whether 120ml bottle containing Sal | | |

| | | | |
|--|--------------------------------------|--|--|
| | volatile having the dose and mode of | | |
|--|--------------------------------------|--|--|

| No | Item | No Available | Remarks |
|----|---|--------------|---------|
| | administration indicated on the label, available | | |
| | Whether roll of adhesive plaster (6 cm x 1 meter) available | | |
| | No of rolls of adhesive plaster (2 cm x 1 meter) | | |
| | Whether snake bite lancet available. | | |
| | Whether (30 grams) bottle of potassium permanganate crystals available | | |
| | Whether a pair of scissors available | | |
| | Whether bottle containing 100 tablets (each of 5 grains) of aspirin available | | |
| | Whether Ointment for burns available | | |
| | Whether bottle of a suitable surgical anti-septic solution available | | |

Signature of Contractor's Site Manager:

Attachment 4: HEALTH CHECK UP

Table 9 Health Check

| | |
|---------------------------|--|
| Name of Site | |
| Name of Contractor | |
| Name of Employee | |
| Name of Inspector | |

| | |
|---------------------------|-----------------------------|
| History of Illness | H/O Epilepsy |
| | H/O Drug Allergy |
| | H/O Diabetics/ Hypertension |
| | H/O Unconsciousness |

Personal History

| | |
|--------------------|--------------------|
| EXAMINATION | OBSERVATION |
|--------------------|--------------------|

General Physical Examination

Height

Weight

BMI

Built And nourishment

Pallor

Temperature

| | | |
|------------------|-------------|-----------|
| Chest Expansion: | Inspiration | Expansion |
|------------------|-------------|-----------|

Lymph Node Enlargement

Ear, Nose, Throat

Ear:

Nose:

Throat:

Cardiovascular System Examination:

Inspection :

Palpation : Pulse BP

Auscultation (Heart Sounds) :

Respiratory System

Inspection : Respiratory Rate

Palpation :

Percussion :

| |
|--------------------------------------|
| Auscultation (Breath Sounds) : |
| <u>Examination of Abdomen</u> |
| Inspection |
| Palpation |
| Auscultation (Bowel Sounds) |
| <u>Any Other</u> |
| |
| <u>Clinical Impression</u> |
| |

Signature of examining doctor.....

Attachment 5: CHECKLIST FOR EVALUATION OF HSE PERFORMANCE

Table 10 Checklist for HSE Performance

| No | Parameter for Measurement | M/O | Supporting Documents |
|-----------|---|------------|---|
| 1 | Induction training for new workers conducted through audio-visual medium & documented? | M | Induction training records |
| 2 | Tool box talk conducted regularly as per plan, and documented? | M | Toolbox records |
| 3 | Contractor in charge and safety in charge attended safety meetings? | M | Minutes of meetings |
| 4 | Whether observations in safety meetings are complied before next meeting | M | Minutes of meetings |
| 5 | Preparation and submission of Monthly HSE report within stipulated time | M | Report submission date |
| 6 | Preparation and submission of Incident/near-miss report and RCA Report (as applicable) within stipulated time | M | Incident/near miss records |
| 7 | Carrying out Inspections and submission of Inspection reports within stipulated time | M | Inspection records |
| 8 | Regular Job Specific Training ensured for High-Risk Workers (through audio-visual medium) as per plan | M | Training and attendance records |
| 9 | Whether the contractor is registered under construction regulatory authority | M | Registration certificates |
| 10 | Availability of Qualified safety officer (1 for every 500 labor) | M | Safety officers' qualification and experience records |
| 11 | Availability of Qualified safety supervisor (1 for every 100 labor) | M | Safety supervisor qualification and experience records |
| 12 | All the workers are provided PPE | M | PPE Issue Records, Inspection/ non- conformity records |
| 13 | Housekeeping done on regular basis and scrap removal at site | M | Housekeeping records, Inspection/ non- conformity records |
| 14 | Usage of PPE | | PPE Issue Records, Inspection/ non- conformity records |
| 15 | Wall openings & floor openings are guarded? | | Inspection/ non- conformity records |

| | | | |
|----|--|--|------------------------------------|
| 16 | Adequate illumination provided in all working area? | | Inspection/ non-conformity records |
| 17 | Safety posters, sign boards and emergency contact numbers in all prominent location are displayed? | | Inspection/ non-conformity records |

| No | Parameter for Measurement | M/O | Supporting Documents |
|----|---|-----|---|
| 18 | Availability of automatic reverse horns, Main horn, hook latches for Vehicles, | | Inspection/ non- conformity records |
| 19 | Availability of Tags & Inspection Certificates for Winches of all capacities | | Master T&P List with internal & external test details |
| 20 | Availability of Tags & Inspection Certificates, color coding for Chain pulley blocks | | Master T&P List with internal & external test details |
| 21 | Availability of Tags & Inspection Certificates for Vehicles - | | Master T&P List with internal & external test details |
| 22 | Use of Any other Applicable Permit as per requirement | | Permit Records |
| 23 | Material safety data sheet (MSDS) available for all chemicals and displayed in usage and storage area? | | Inspection/ non- conformity records |
| 24 | Spillages of oil/concrete and other chemical is controlled and cleaned by proper method in case of spill? | | Inspection/ non- conformity records |
| 25 | Availability of adequate number of urinals in workplace and in elevations and maintained | M | Inspection/ non- conformity records |
| 26 | Availability of rest rooms for workers at site | M | Inspection/ non- conformity records |
| 27 | Availability of Drinking water facility at work spot | | Inspection/ non- conformity records |
| 28 | Hygienic rest area for workers | | Inspection/ non- conformity records |
| 29 | If First aid trained personnel are available and their names are displayed at site? | M | |
| 30 | Periodical medical check-up is conducted for all the workers and submitted? | | Medical check records |
| 31 | Availability of sufficient number of first aid box as per standard list and maintaining record | | Inspection records |
| 32 | Availability of Fire extinguishers, buckets at all vulnerable points | | Fire extinguisher records |
| 33 | Periodic fire mock drill conducted? | | Fire, Mock drill records |
| 34 | Are all flammable materials are stored separately? | | |

Note: M: Mandatory; O: Optional. Points other than mandatory can be excluded with appropriate justification (scope etc.)

Annex 5. Grievance Redress Mechanism

Procedure Description

The grievance redress mechanism (GRM) under the CERP will build on existing institutional and administrative channels, supplemented by the provisions of this SEP. The core principle is to use the simplest, most accessible, and most transparent approach, enabling any interested or affected party to submit a complaint, inquiry, or suggestion related to the project. Implementation of the GRM will be coordinated by the PIU within the Ministry of Emergency Situations, with support from sectoral agencies and local government representatives; contractors engaged in project activities will be required to establish their own worker- and community-friendly grievance systems, aligned with the PIU-managed GRM.

The GRM's objective is to provide a sustainable feedback channel for addressing claims and resolving conflicts arising from project implementation, including complaints from employees, suppliers, residents, vulnerable groups, and other stakeholders.

General grievance submission and handling procedure:

1. Initial submission at the local level:

- Complaints may be submitted orally or in writing via the ayil okmotu (rural council), the designated PIU focal point, the project "hotline" (if established), complaint boxes, or by email.
- Complainants may be accompanied by a trusted person (family member, neighbor, or community leader).
- Each complaint is logged in the Grievance Register, assigned a unique reference number, and the date of receipt is recorded.

2. Review and response:

- The PIU (or its designated officer) reviews the complaint and, within 10 working days, proposes possible resolutions.
- The agreed solution is documented, including implementation deadlines and the responsible party.
- If needed, a follow-up meeting with the complainant is held to clarify the resolution.

3. Appeal:

- If the complainant is dissatisfied with the decision, they may escalate the grievance to the next level within the PIU or the Ministry of Emergency Situations.
- A response to the appeal is provided within 15 working days.

4. Independent recourse (if unresolved):

- Should internal mechanisms fail to resolve the grievance, the complainant may seek redress through external or judicial channels as per national law.

Principles Governing the GRM:

- Confidentiality: Protect complainants from retaliation or discrimination.

- No-cost Submission: Filing a grievance is free of charge.
- Inclusivity: Ensure complaints from vulnerable groups—women, the elderly, persons with disabilities, internally displaced persons—are recorded and addressed.
- Anonymity: Complainants may submit grievances anonymously.
- Full Documentation: Record every step—registration, review process, outcome, and closure.

Contractor Responsibilities:

- Contractors must establish their own worker grievance mechanism (per the Labor Management Procedures, Annex 3) and maintain a complaint register.
- All grievances related to health & safety, working conditions, wages, or discrimination must be escalated through the project’s GRM for independent review.

Escalation Structure:

- First Instance: Ayil okmotu (local council) or Project Coordinator at the PIU
- Second Instance: Project Implementation Unit (PIU) at the Ministry of Emergency Situations
- Third Instance: Relevant line ministry or national working group (as needed).

At any point in the process, affected parties retain the right to seek redress through the Courts of the Kyrgyz Republic, in accordance with national legislation.

Handling of GBV/SEA Complaints

In the event of complaints related to Gender-Based Violence (GBV), Sexual Exploitation, Abuse or Harassment (SEA), the Project will apply a specialized survivor-centered protocol that complements the overall Grievance Redress Mechanism (see Section 6.1). , while ensuring that GBV/SEA/SH complaints are addressed through a separate, confidential process. Such complaints will be immediately and confidentially registered and referred to specialized survivor-centered support services, ensuring that any action is taken only with the survivor’s voluntary and informed agreement. GBV/SEA /SH complaints will **not** be processed through the regular project grievance channels. All information will remain strictly confidential, and complainants will be protected from any form of retaliation or adverse consequences. Response protocols will prioritize the survivor’s safety and well-being, prevent secondary victimization, and guarantee access to essential services (e.g., psychosocial counseling, medical care, legal assistance).

A qualified GBV/SEA/SH Focal Point will be engaged during project activation, either as an individual consultant or through a partnership with an experienced local NGO. This specialist will oversee case handling and coordination with survivor-centered support services.

To ensure that survivors are aware of their rights and options, information about available GBV/SEA/SH reporting channels and referral services will be disseminated through trusted actors, including social workers from territorial Departments of Social Protection, feldsher-midwife station (FAP) staff, and trained community volunteers. Materials will be distributed via posters, leaflets, mobile outreach teams, and oral briefings, especially in rural areas. Messaging will be adapted to local languages, formats, and literacy levels to ensure accessibility for women, children, and other vulnerable groups.

World Bank-Level Grievance Channels

Individuals or communities who feel adversely impacted by CERP activities funded by the World Bank may use both the project's GRM and the Bank's independent mechanisms:

1. **World Bank Grievance Redress Service (GRS)**

- o **Scope:** Complaints about environmental or social harms, labor or procedural breaches, or non-compliance with Bank policies.
- o **How to File:**
 - Email: grievances@worldbank.org
 - Online: www.worldbank.org/grievance
- o **What to Include:**
 - Project name and country
 - Description of the harm and how it affects you
 - Contact information (optional for anonymous submissions)

2. **World Bank Inspection Panel**

- o **Scope:** Independent, confidential review of alleged failures by the Bank to follow its policies and procedures, resulting in harm.
- o **How to File:**
 - Online or mail via www.inspectionpanel.org
 - Must be submitted on behalf of one or more affected individuals or communities.
- o **Prerequisite:** Complainants are encouraged to first seek resolution through the Bank's management channels before approaching the Panel.

These Bank-level mechanisms supplement the national GRM and may be used if:

- The national GRM fails to address the complaint satisfactorily.
- The issue involves procedural or policy non-compliance by the Bank or project implementers.

Annex 6. Waste Management Framework

National Context for Waste Management in the Kyrgyz Republic

The Kyrgyz Republic has an established legal and institutional framework for managing medical (including infectious), household, hazardous (including electronic), and special waste streams. For CERP, potential waste generation may include:

- Medical and/or infectious waste from PPE, vaccines, syringes, diagnostic kits, and other health-related materials are regulated by Annex 7;
- Household and general waste from project activities are regulated by the Law of the Kyrgyz Republic “On Production and Consumption Waste”
- Electronic waste (e-waste) from damaged or obsolete equipment, batteries, accumulators, lighting devices containing hazardous substances and Potentially hazardous disaster debris from emergencies are regulated by:
 - Order on the Management of Hazardous Waste in the Kyrgyz Republic
 - Resolution of the Cabinet of Ministers No. 201
 - Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and their Disposal.

National Legal and Institutional Framework

- Law of the Kyrgyz Republic “On Environmental Protection” (June 16, 1999 No. 53) – overarching principles for environmental protection and waste management.
- Law of the Kyrgyz Republic “On Production and Consumption Waste” (August 15, 2023 No. 181) – defines waste categories, including hazardous waste, and sets requirements for handling, storage, transport, treatment, disposal, licensing, and reporting.
- Order on the Management of Hazardous Waste in the Kyrgyz Republic (December 28, 2015 No. 885) – establishes procedures for classification, collection, temporary storage, transportation, processing, neutralization, disposal, and final placement of hazardous waste, including e-waste, in compliance with safety and environmental requirements.
- Law of the Kyrgyz Republic “On Public Health” (January 12, 2024 No. 10) – covers sanitary and epidemiological well-being, including medical waste.
- Resolution of the Cabinet of Ministers of the Kyrgyz Republic (December 12, 2023 No. 663) – updated Instructions on Infection Control in Healthcare Organizations, regulating segregation, storage, treatment, and disposal of medical waste.
- Resolution of the Cabinet of Ministers No. 201 (April 25, 2024) – updated Classifier of Hazardous Waste, including e-waste and asbestos-containing waste (code T4 – IV hazard class).
- Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and their Disposal (ratified by the Kyrgyz Republic in 1996).
- Relevant technical regulations, sanitary rules, and municipal by-laws.

The Ministry of Natural Resources, Ecology and Technical Supervision oversees environmental compliance and hazardous waste management; the Ministry of Health (via the Department of Disease Prevention and State Sanitary and Epidemiological Surveillance) supervises medical waste; municipal authorities manage household waste collection, transportation, and disposal.

Current System and Gaps

Medical and Infectious Waste – In urban areas, treated by licensed operators using autoclaves/incinerators; in rural areas, treatment often relies on small autoclaves or chemical disinfection. Infrastructure is uneven. Detailed operational procedures are provided in Annex 7.

E-waste – Regulated as hazardous waste under national law and the Basel Convention; however, there is no centralized national collection system, and coverage by licensed recyclers is limited.

Household Waste and Disaster Debris – Managed by municipal services and disposed of at designated landfills; there is no standardized national system for hazardous disaster debris management.

Adequacy for CERP

The legal basis for waste management in the Kyrgyz Republic is sufficient; however, practical capacity remains uneven, particularly in rural areas and for e-waste and hazardous disaster debris. For CERP implementation, the following supplementary measures are recommended:

- Pre-identifying temporary storage sites for hazardous disaster debris;
- Rapid contracting with licensed operators for medical, hazardous, and e-waste disposal during emergencies;
- Provision or leasing of mobile treatment units for infectious waste;
- Simple, standardized procedures for safe collection, segregation, and transfer of e-waste;
- Training for all CERP staff and implementing partners on safe handling, segregation, and emergency disposal of all relevant waste types.

Waste Management Framework

This framework allows taking stock of the existing situation, defining the objectives that need to be met, formulating appropriate strategies, and identifying the necessary implementation means. This General Waste Management Framework will guide for reducing, reusing, recycling, and last resort disposing of waste during the project activities, such as packaging deriving from food and water supply, and including associated handling, storage, transport, and disposal procedures. Detailing all types of waste and their origins, the steps taken to lower the level of waste, and plans for removing and eliminating waste, is what constitutes effective waste management planning.

This General Waste Management Framework presents the activities to be conducted to support the safe handling of general waste during the project implementation in compliance with relevant legal provisions regarding Occupational Safety, Health and Welfare, Environment Management, the Public Health, Sanitation and the World Bank's General Environmental, Health, and Safety (EHS) Guidelines on Waste Management.

It should be noted that this Annex focuses on the handling and management of only non-hazardous waste. This Framework will assist in the development of activity or site-specific Waste Management Plans. It will be given to implementers and suppliers for keeping waste at a minimum. The Framework is therefore a binding document that shall be legally recognized and is expected to be implemented at the same level of importance as any other legally binding contractual document.

The Project will ensure that this instrument, alongside the rest of the E&S instruments are disseminated to the implementing partners and the rest of the project team. Capacity building training will be organized to ensure that the contents of all the instruments are well understood and

that every stakeholder fully understand their roles and that they have the capacity to perform those roles.

This framework has been prepared to explain the management of the different types of waste that will be generated during the CERP. The likely wastes are pieces of packaging from food and water supply, or general waste produced by office work. Traffic operations may produce small amounts of waste plastic containers for oils and lubricants, broken filters and belts, and damaged tires will be generated. Managerial staff will also generate some waste such as paper, bottles, cans, plastics, and food scraps. Waste related to medical supplies is handled in a separate plan.

This Framework will reduce the risk(s) of destroying and/or polluting the environment. It therefore, expresses the commitment to prevent of any adverse impacts to the local environmental conditions from any construction activities that generate waste by the implementation of waste management principles and best practice strategies.

The Objectives are as follows:

- Minimizing waste generation in line with the principles of the waste hierarchy as reduce, reuse and recycle.
- Safely disposing of all non-reusable and non-recyclable hazardous and non-hazardous wastes and.
- Complying with relevant regulations and standards.
- Increase the efficiency of the use of raw material.
- Reuse, reduce or recycle material where feasible.
- Promote awareness of and adhere to proper waste management procedures.
- Managing waste as close to the source as practicable.
- Take cognizance of our Duty of Care to the environment.

TYPES OF WASTE AND MANAGEMENT

This procedure describes Non-Hazardous Waste as waste that causes no harm to humans or environmental health. Such waste can be categorized into biodegradable and non-biodegradable waste. Biodegradable waste includes any organic matter which can be broken down into carbon dioxide, water, methane, compost, humus, and simple organic molecules by micro-organisms. Non-biodegradable waste is those that cannot be decomposed or dissolved by natural agents. – During the site activities, waste will be generated from sources such as the project mini camps and distribution and transmission line worksites.

Table 11 Waste Generated Proposed Management Method

| Type of Waste | Management Measures |
|---|----------------------------|
| Wood (timber, slash, stumps, etc.) | Reuse, donate, dispose |
| Treated wood (poles, cross arms | Reuse, donate, dispose |
| Metals (Ferrous and Non-Ferrous) (But not including drained electrical equipment (transformers, etc.) <i>refer hazardous substances.</i> | Reuse, Recycle, dispose. |
| Food waste | Composting, dispose |

| | |
|-------------------------------|------------------------|
| Wooden Cable Spools & Pallets | Reuse, donate, Dispose |
|-------------------------------|------------------------|

| | |
|---------------------|----------------------------|
| Paper and Cardboard | Recycle |
| Concrete wastes | Reuse, Dispose in landfill |
| plastics | Reuse, Dispose, Recycle |
| Office waste | Recycle, dispose. |

Waste Management Plan

Waste Management Process: Any existing unidentified waste exposed or uncovered on site prior to the initialization of site activities will be brought to the attention of the implementing partner. All wastes identified pre-project will be clearly documented, and pictorial evidence taken if necessary.

Waste Avoidance and Minimization: The opportunity for avoidance and minimization of waste production identified in the observation as described above can be summarized as follows:

- Non-hazardous or low toxicity materials/products will be selected instead of hazardous material/products, whenever feasible.
- As far as possible, it must be ensured that all materials are stored and handled correctly to minimize damage to the materials which will render it unusable; and
- Minimization of waste will also include the reduction of waste toxicity. This may be performed by selecting low toxic chemicals used during the Project.

Waste Collection Points: The main waste collection point will be in an easily accessible area within the main area. The waste collection point will be selected, taking into considering the prevailing wind direction, surface runoff patterns, topography and visual context and will as far as possible, cause the minimum of nuisance to adjacent properties. It will be ensured that the waste disposal area will not be located near any drainage areas, wetlands or wells and boreholes.

The selected waste area will comprise of a cordon-off and contained area. The waste area will make provision for the segregation of waste into non-hazardous and hazardous waste. Non-hazardous waste will further be divided into organic and non-organic waste. Organic waste will consist of general domestic food waste.

Non-organic waste will consist of:

Glass;

Plastic; and

Metals.

All waste containers on site (bins, skips, drums, etc.) will be clearly labelled with visible signs to indicate which wastes it contains.

Waste Treatment and Disposal: If waste produced cannot be reused or recycled, the waste will be disposed of at a waste disposal facility as guided by the District Council

Option for disposal of non-hazardous non-organic waste: Most of the camp's non-hazardous

non-organic waste is recyclable. Where it is not recyclable or too dirty for recycling, it shall be disposed of at a waste disposal facility.

Table 12 Waste Disposal Methods

| Waste | Disposal Method |
|--|--|
| METALS: Scrap metal, tins, cans, foil | Separate Bin - Metals |
| Plastic bottles and polythene | Separate Bin – Plastics Empties of water etc. |
| Cardboard boxes and papers | Separate Bin – Card & Paper |
| Bottles and Glass | Separate Bin - Glass |

Procedure for Handling and Storage of Waste

Waste Handling: All personnel who are involved in the handling of non-hazardous waste will undergo specific training in:

- The procedure to be followed to ensure adequate segregation;
- Waste handling (and PPE requirements) including collection;
- Waste storage; and
- Correct waste disposal procedures.
- Waste from litter bins will be collected from site on a weekly basis or as required. Accumulated hazardous waste will be removed from the site daily and will be transported to the main waste collection point.
- Waste will be removed from site on a monthly/weekly basis. The frequency of waste collection will be determined based on the rate in which the waste accumulates during the construction activities.

Temporary Waste Storage

Waste Storage Area: All waste produced during activities at site and servicing activities and camps shall be collected using appropriate personnel protective equipment and they shall be sorted out and temporarily stored in special containers at the camp.

The waste storage areas are to be indicated on relevant site Procedures and will be located at least 100m from any watercourses. Wastes will be stored in a manner to prevent:

- Accidental spillage or leakage, contamination of soils and groundwater, loss of integrity from accidental collisions or weathering by provision of suitable secondary containment and/or roofing;
- Corrosion or wear of containers both from the weather, by protecting waste storage areas, and from the wastes themselves, by selecting containers suitable for storage of intended waste,
- Theft by people by storing waste within security of camp perimeter; and
- Scavenging by animals by storing putrescible waste in closed bins before composting.

The waste storage containers used will be appropriate in terms of volume, composition, shape and opening for the material that is being stored. Only containers in good condition will be utilized. Lids will be securely fastened, or other forms of covering shall be provided. No containers will be used that are susceptible to reaction with the wastes, which may lead to the release of harmful substances. All hazardous wastes will be strictly segregated. Only one category of hazardous waste may be placed in any one container. Solid and liquid wastes will not be mixed, as well as hazardous waste of incompatible nature.

Best Waste Management Practices

These include the following:

- The Implementing Partner to obtain permits regarding waste management from relevant authorities.
- The Implementing Partner to provide handling containers, storage, signage, transportation, and other items as required to implement waste management plan during the entire duration of the project.
- The Environmental management personnel to be responsible for matters of managing the environment including being responsible for implementing, monitoring, and reporting status of this procedure and shall be full time on worksites throughout the project.
- All workers, subcontractors, and suppliers to be trained on proper waste management plans, as appropriate for the work occurring at Project Site(s). Information, Education and Communication (IEC) materials shall be distributed and/or made available to everyone concerned and to all entities when they first begin works.
- To provide specific designated and labeled areas on project site(s) necessary for separating materials that are to be recycled, reused, donated, and sold. Recycling and waste bin areas are to be kept neat, and clean, and clearly marked in order to avoid contamination of materials and.
- Hazardous wastes to be separated, stored, and disposed of according to local regulations and according to the Hazardous Materials and Waste Management Plan and should not be included in management of the other waste streams.

Community Safety

The primary goal of waste management planning is to protect members of the community in which the project is being executed from harming to effectively manage waste, debris and all waste materials generated. While the amount of waste varies between projects, the generated waste is often greater than the amount of waste many communities handle each year. Additionally, projects may generate waste streams, such as chemical, biological and radiological-contaminated wastes, which typically are not handled by communities or waste management facilities. Some of this are absorbed or processed through natural resources outlets like air and water. In addition to managing the project wastes in such a manner that does not negatively impact the surrounding communities, the Project will need to prepare the community by disclosing the types of potential of wastes that will be generated through sensitization campaigns.

While this at source intervention planning should be documented in a Waste management plan (WMP), the community's preparation provides the most benefits, such as:

- Saves valuable time and resources.
- Allows more efficient and effective waste management decision-making.

- Encourages stakeholders (e.g., state, local, tribal and local governments; owners of private storage, treatment and disposal facilities; residents) to work together before an incident occurs such as children collecting and playing with hazardous wastes, pollution of water sources, pollutions of soil etc. Boosts the community's resilience, resulting in a quicker and less costly recovery to potential misconducts by the contractors as well as the communities.

Consultation with interested stakeholders and link with GRM: Community members need to have information or resources related to various waste management-related activities such as (e.g., transportation, sanitation, emergency response, environmental health, public health, and business leaders viz a viz potential generators of waste). The communities must have a chance to express their grievances around waste management through the provided Grievance Redress Mechanism (GRM) should that need arise. Each stakeholder's role, in terms of waste management should be clearly spelt out in stakeholder consultation meetings, disclosures and consultative meetings.

The Waste management plan should define ways in which the community where the project is being implemented should be informed of waste management-related information, including the transportation and management of incident-related wastes in or near the community. The most effective methods of notifying the community about the risks that each waste stream may present to human health and the environment should be clearly spelt out and disseminated at stakeholder engagement opportunities. Communication channels for waste management information should be clearly stipulated be it through the media, community meetings and any other channels that may be identified. If there are possible ways to increase public understanding and acceptance of decontaminated wastes, reused materials and recycled products, let this be known to all stakeholders and members of the community.

Table 13 Waste Management Matrix

| No. | WASTE MANAGEMENT MATRIX | | | | | |
|-----|---|--|---|---------------------------|----------------------|---|
| | Implementer Measures | Output Indicator | Means of Verification | Time Frame | Responsible Person | Legal Limits / acceptable criteria |
| 1.0 | General Measures | | | Construction phase | | |
| 1.1 | Develop & implement staff training program | Number of staff trained | Training/toolbox talks/progress reports | Continuous | Implementing Partner | IFC Performance Standards (2012) 1 & 3, ESS 1 & 3 & EIB ESS 1& 3, GIIP, WBG General EHS Guidelines |
| 1.2 | Work fronts and office waste handling activities | Clean sites | Progress reports | Continuous | Implementing Partner | IFC Performance Standards (2012) 1 & 3, ESS 1 & 3 & EIB ESS 1& 3, GIIP, WBG EHS Guidelines. |
| 1.3 | Identification and implementation of measures for avoiding or reducing waste generation at work fronts as far as practicable. | Amount/type of waste generated | Waste register/progress reports | Continuous | Implementing Partner | IFC Performance Standards (2012) 1 & 3, ESS 1 & 3 & EIB ESS 1& 3, GIIP, WBG General EHS Guidelines. |
| | Waste handling & storage | | | | | |
| 1.3 | Waste segregation at source: color coding/bin labelling | Labeled storage containers for different types of waste onsite | Inspection/progress reports | Continuous | Implementing Partner | Waste Handling Standards |

| | | | | | | |
|-----|---|--|-----------------------------|------------|----------------------|-------------------------------------|
| 1.4 | Designation of secure temporary waste storage areas on sites for various waste types: hazardous/gen | Availability of secure waste storage yards | Inspection/progress reports | Continuous | Implementing Partner | Wozambique waste Handling Standards |
|-----|---|--|-----------------------------|------------|----------------------|-------------------------------------|

| No. | WASTE MANAGEMENT MATRIX | | | | | |
|-----|--|--|----------------------------------|------------|----------------------|------------------------------------|
| | Implementer Measures | Output Indicator | Means of Verification | Time Frame | Responsible Person | Legal Limits / acceptable criteria |
| | eral. Provision of proper storage containers, waterproof flooring and signage | | | | | |
| | Non-Hazardous Waste Transportation and Disposal | | | | | |
| 1.5 | Collection and transportation of waste without spilling while in transit to disposal site. | Covered vehicle with tarpaulin | Inspection/progress reports | Continuous | Implementing Partner | Waste handling standards |
| 1.6 | Regular (weekly) emptying and collecting waste for disposal | Frequency & quantity of waste disposed | Waste registers/progress reports | Continuous | Implementing Partner | Waste handling standards |

| | | | | | | |
|------|--|--------------------------------------|-----------------------------|------------------------------------|----------------------|---|
| 1.7 | Prohibition of open burning of waste | No evidence of waste burning on site | Inspection/progress reports | Continuous | Implementing Partner | Waste handling standards |
| 1.8 | When necessary, License shall be obtained from District Councils for handling, transportation and disposal of waste 2017 | Licenses obtained | Copies of the Licenses | The first 2 months of commencement | Implementing Partner | EMA 2017 |
| 1.10 | Prohibit dumping of waste in water | No trace of waste dumped | Waste registers/ | Continuous | Implementing Partner | IFC Performance Standards (2012) 1 & 3, ESS 1 & 3 & EIB |

| No. | WASTE MANAGEMENT MATRIX | | | | | |
|-----------|---|--|-----------------------|------------|---------------------------------|--|
| | Implementer Measures | Output Indicator | Means of Verification | Time Frame | Responsible Person | Legal Limits / acceptable criteria |
| | bodies and general littering shall not be allowed. | in water bodies | progress reports | | | ESS 1& 3, GIIP, WBG General EHS Guidelines |
| 1.12 1 | Other alternative disposal options will be evaluated on a situation-situation basis during construction and / or at start-up of work Phase. | Identified alternative disposal methods. | Progress reports | Continuous | Contractor Implementing Partner | Waste handling standards |

Performance Monitoring

Inspections: Sites inspections will be performed by the Health, Safety and Environment (HSE) Officer of the Implementing Partner on weekly basis. Waste quantity shall be recorded (as number of 200L waste bins collected and disposed per week). These inspections will ensure that all commitments in this plan are being enforced and that specific waste management elements are verified.

Data collection: Waste material register should be maintained to ensure the measurement of eliminated waste and of residual matter sent for reuse, recycling and others.

Audit: Six months since commencement of the project, a waste management audit should be performed, on sites all waste data collected, to identify waste streams and fate and develop ways to reduce waste production.

Responsibilities: The roles and responsibilities inherent to this waste management plan are as per table below:

Table 14 Roles and Responsibilities

| ENTITY | RESPONSIBILITY |
|--|--|
| PIU/PCU | Enforce the Waste Management Framework. Contractually obligate the Implementing Partner to meet the requirements of this Waste Management Framework. |
| Implementing Partner | Employ a person responsible for overseeing matters of environmental management. Provide garbage receptacles to allow for waste segregation. Develop a site-specific Waste Management Plan for the activities the Contractor is undertaking. Educate all members of staff on the waste hierarchy. Education is to be provided to each staff member prior to commencement of work, and regular refresher sessions are to be undertaken Provide and distribute Information, Education and Communication (IEC) materials to everyone on sites |
| District Councils/other stakeholders and authorities | Conduct audit and monitoring activities |

Table 15 Specific Implementer Responsibilities:

| Responsible Person | Responsibility |
|--------------------|---|
| Project Director | Will ensure that there are enough resources (people and money) to manage and monitor the waste issues of the project. Will ensure that the General Waste management plan reflects any changes during the construction process that may have a significant environmental impact and manage them accordingly. Will ensure the waste records are returned to Head Office for review. |

| | |
|-----------------|--|
| Project Manager | Will be responsible for ensuring that all site staff, including sub-contractors, and activities comply with the General Waste management plan. |
|-----------------|--|

| Responsible Person | Responsibility |
|--------------------|---|
| | Will ensure that all environmental incidents are reported and dealt with effectively. |
| HSE Officer | Will ensure that environment and waste management activities comply with applicable ESHS standards and all project E&S Instruments. Ensure that signage for waste segregation and other relevant safety signs are clearly posted as required. |

Record Keeping, Tracking and Institutional Oversight

Record Keeping

For all waste streams (including household, healthcare, infectious, and hazardous waste), basic records will be maintained on quantity, origin, transfer, and disposal. Implementing agencies will:

- Maintain simple waste registers (paper or digital) at site level;
- Attach signed waste transfer forms or delivery slips to each consignment;
- Collect proof of disposal (e.g., stamped tickets from licensed landfills or disposal sites);
- Submit copies of these documents to the PIU as part of regular ESHS reporting.

Tracking and Oversight

- Considering the emergency context, a simplified but verifiable tracking procedure will apply:
- Each waste shipment will be logged with the date, waste type, quantity, origin, and intended disposal site;
- Hazardous and healthcare waste will be labeled using color-coded bags or containers and transported in sealed, leak-proof packaging, in accordance with national regulations on medical and hazardous waste;
- Waste transport routes and disposal sites will be reported to the Ministry of Emergency Situations and local sanitary-epidemiological services;
- The PIU will conduct random checks of documentation and disposal sites to verify compliance.

Institutional Oversight

Waste tracking and disposal oversight will be shared among:

- The PIU (through the EHS monitoring team);
- The Ministry of Natural Resources, Ecology and Technical Supervision (MNRETS KR);
- The Department of Disease Prevention and State Sanitary and Epidemiological

Surveillance (Ministry of Health KR).

Note:

Disposal of any waste at unauthorized locations is strictly prohibited and will be treated as a compliance violation under the project.

Annex 7. Infection Control and Medical Waste Management Framework

Rationale / Objectives of the Infection Control and Waste Management Framework (ICWMF)

Wherever healthcare service is provided, there is a risk of acquiring or transmitting infections more especially if Infection Prevention and Control measures are not followed. Health care wastes are also generated. There is a considerable amount of waste that is generated as well as the increased need of following standard precautions for infection prevention and waste management. This ICWMF has been put in place to mitigate these risks and impacts.

The overall objective is to detail steps that will ensure that Health Care Wastes generated as a downstream impact of the Project activities in the health care facility are handled appropriately and safely, consistent with international good practices. It also aims to facilitate the implementation of appropriate waste management practices which include generation, segregation, collection, storage, treatment, and disposal to avoid the spreading of infection and environmental pollution. The ICWMF is to be used by relevant stakeholders including health care facilities, the community, and the Ministry of Health. It has been developed using the best available sources of information, including the WHO and national guidelines or policies.

ICWMF plays a key role in achieving sustainable waste management and infection control. The purpose of this plan is to ensure that effective procedures are implemented for the generation, segregation, collection, storage, transportation, treatment, and final disposal of waste that is generated from the health care services occurring in the Health Care Facilities.

Medical Waste Management under CERP

The procurement and use of personal protective equipment (PPE), vaccines, medicines, and related medical supplies under the CERP will inevitably generate medical and/or infectious waste. This includes used PPE, syringes, sharps, vaccine vials, contaminated packaging, and other materials classified as medical waste under the Sanitary Rules for the Management of Medical Waste (Resolution of the Ministry of Health of the Kyrgyz Republic No. 164 of March 18, 2024).

Current Medical Waste Management System in the Kyrgyz Republic

Medical waste management is regulated through an updated set of legal instruments, including:

- Resolution of the Ministry of Health No. 164 (18.03.2024) – Sanitary Rules for the Management of Medical Waste;
- Resolution of the Cabinet of Ministers No. 663 (12.12.2023) – Infection Control Instruction for healthcare organizations (new edition);
- Resolution of the Cabinet of Ministers No. 148 (19.03.2024) – General Waste Management Rules;
- Law on Public Health No. 10 (January 2024);
- Law on Medical Devices No. 216 (29.12.2023);
- Law on Medicines No. 13 (12.01.2024).

According to these regulations, healthcare facilities must segregate waste at the point of generation, use color-coded and labeled containers, ensure secure temporary on-site storage, and arrange for transportation and final disposal through licensed operators. Waste categories include hazardous (infectious, sharps, pathological) and non-hazardous waste, with specific handling requirements.

Capacity and Adequacy

In major urban areas, licensed companies operate high-temperature incinerators and autoclaves that can process infectious waste to national standards. However, in rural and remote regions, capacity is limited. Facilities often rely on small-scale on-site incinerators, burial pits, or temporary storage until waste can be transported to regional centres — which may not meet international best practice. During emergencies (e.g., floods, earthquakes), sudden surges in medical waste volumes could overwhelm existing infrastructure, particularly for secure temporary storage and safe transportation.

Additional Mitigation Measures under CERP

To address these risks, CERP will implement supplementary actions, including:

- Mapping and pre-identifying licensed medical waste treatment facilities in each target region;
- Procuring and deploying mobile autoclaves or small-scale incinerators for areas without fixed facilities;
- Providing training for healthcare workers, contractors, and logistics staff on emergency medical waste handling, in line with MoH Resolution No. 164;
- Installing temporary secure storage solutions (e.g., refrigerated containers) for infectious waste surges;
- Coordinating with local sanitary-epidemiological services for rapid waste removal and disposal during emergencies.

The Kyrgyz Republic has an adequate legal and institutional framework for medical waste management, but its operational capacity — especially in rural settings and during large-scale emergencies — is limited. CERP will therefore integrate targeted technical, logistical, and training measures to ensure safe, timely, and compliant management of all medical waste generated during project implementation.

Infection Control and Waste Management

Health Care Waste (HCW) includes all the waste generated within health-care facilities, research centres and laboratories for medical procedures; and includes sharps, non-sharps, blood, body parts, chemicals, pharmaceuticals, medical devices and radio-active materials (WHO, 2014). This waste carries greater potential for causing infection and injury than any other form of waste due to its contamination state (*Ibid*) and this necessitates its proper handling and management. Between 75% and 90% of the waste produced by health care providers is equivalent to domestic waste which is usually called ‘non-hazardous’ or general health care waste (See Figure below).

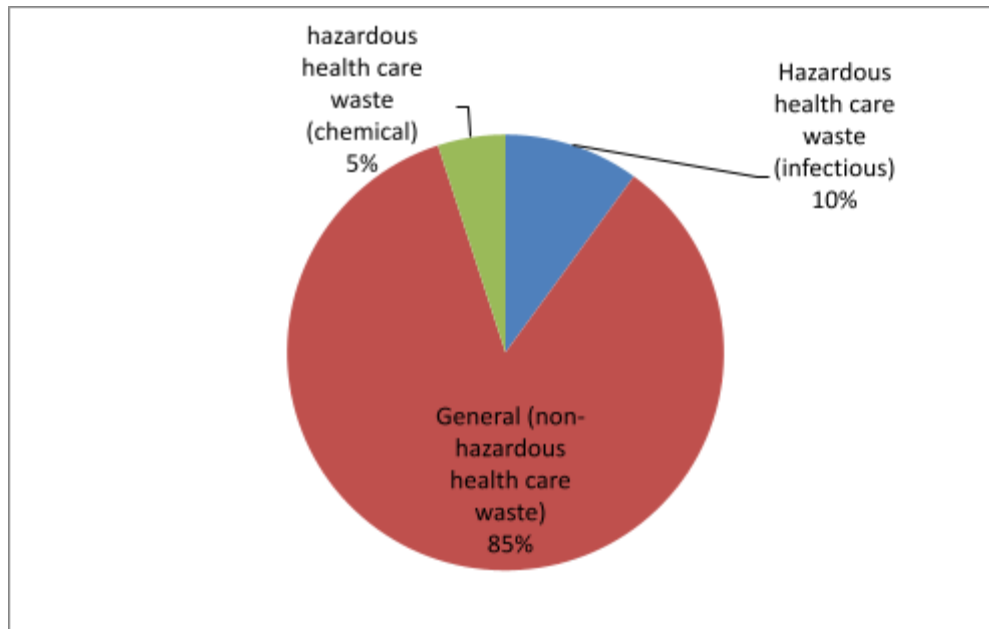


Figure 1 Typical waste composition in a Health Care Facilities (Source: WHO, 2014)

There are generally two major classifications of waste: hazardous and non-hazardous waste. Hazardous waste includes cytotoxic drugs and clinical waste (e.g. sharps and non-sharps) while non-hazardous waste includes biodegradable waste (e.g. kitchen waste or generally domestic waste) and inorganic waste (i.e. waste that is recyclable and can be sold at the market). The Table below shows more categories of waste (hazardous and non-hazardous) according to WHO (2014) classifications.

Table 16 Waste Categories

| Waste category | | Descriptions and examples |
|----------------------|----------------------|---|
| Hazardous HCW | | |
| 1 | Sharps waste | Used or unused sharps (e.g. hypodermic, intravenous or other needles; auto-disable syringes; syringes with attached needle infusion sets; scalpels; pipettes; knives; blades; broken glass) |
| 2 | Infectious waste | Waste suspected to contain pathogens and that poses a risk of disease transmission (e.g. waste contaminated with blood and other body fluids; laboratory cultures and microbiological stocks; waste including excreta and other materials that have been in contact with patients infected with highly infectious diseases in isolation wards). |
| 3 | Pathological waste | Human tissues, organs or fluids; body parts; foetuses; unused blood products. |
| 4 | Pharmaceutical waste | Pharmaceuticals that are expired or no longer needed; items contaminated by or containing pharmaceuticals. |
| 5 | Cytotoxic waste | Cytotoxic waste containing substances with genotoxic properties (e.g. waste containing cytostatic drugs – often used in cancer therapy; genotoxic chemicals) |

| | | |
|---|--------------------|---|
| 6 | Chemical waste | Waste containing chemical substances (e.g. laboratory reagents; film developer; disinfectants that are expired or no longer needed; solvents; waste with high content of heavy metals, e.g. batteries; broken thermometers and blood-pressure gauges) |
| 7 | Radio-active waste | Waste containing radioactive substances (e.g. unused liquids from radiotherapy or laboratory research; contaminated glassware, packages or absorbent paper; urine and excreta from patients treated or tested with unsealed radionuclides; sealed sources). |
| Non-hazardous or general HCW | | |
| Waste that does not pose any particular biological, chemical, radioactive or physical hazard. | | |

healthcare waste is of primary concern, due to its potential to cause infections, disease or injury. On the other hand, Infection prevention and control (IPC) is defined as the discipline concerned with prevention of the spread of infections within the health-care setting and at community level. IPC are evidence-based practices and procedures that are applied consistently in health care settings to prevent or reduce the risk of transmission of micro-organisms to health care providers, clients, residents and visitors. Therefore, either at health care or community setting, IPC is concerned with interventions relating to health and environment, which can be divided into 4 parts; Personal (staff) protection; Patient protection; Population (Community) Protection and Environment protection.

According to WHO, about 15-25% of total health-care waste should be infectious waste, and improper handling of health care waste can cause serious health problems for workers, community and environment. WHO reports showed that worldwide, about 5.2 million people (including 4 million children) die each year from waste related diseases. The hazards of exposure to health care waste can range from gastro-enteric, respiratory, and skin infections to more deadly diseases such as HIV/AIDS, and Hepatitis (Babanyara et. al 2013). WHO reported that globally, injections with contaminated syringes caused 21 million hepatitis B infections (32% of all new infections), 2 million hepatitis C infections (40% of all new infections) and 260,000 HIV infections (5% of all new infections). More specifically medical waste has a high potential of carrying micro- organisms that can infect people who are exposed to it, as well as the community at large if it is not properly disposed of. Many of these infections were avoidable if the wastes had been disposed of safely (WHO 2004).

Although treatment and proper disposal of health-care waste reduces risks, indirect health risks may occur through the release of toxic pollutants into the environment through treatment or disposal. For instance, landfills can contaminate drinking-water if they are not properly constructed. Occupational risks exist at disposal facilities that are not well designed, run, or maintained. Furthermore, incineration of waste has been widely practiced but inadequate incineration or the incineration of unsuitable materials results in the release of pollutants into the air and generate ash residue.

Incinerated materials containing chlorine can generate dioxins and furans, which are human carcinogens and have been associated with a range of adverse health effects. Incineration

of heavy metals or materials with high metal content (in particular lead, mercury and cadmium) can lead to the spread of toxic metals in the environment. Dioxins, furans and metals are persistent,

and bio accumulate in the environment. Materials containing chlorine or metal should therefore not be incinerated.

The beneficiary health-care activities in the laboratory, vaccination centres, quarantine, isolation and treatment centres will protect and restore health and save lives however, the amount of infectious waste and by-products being generated may cause adverse potential health and environmental impacts. The average distribution on types of medical waste for purposes of waste management planning is approximately 80% non-infectious and 20% infectious such as biological/pathological waste, chemical/pharmaceutical waste and sharp materials. The quantity of infectious wastes generated will increase due to infectious nature of the infectious disease. According to WHO guidelines, all the waste generated in and around the care of patients is treated as infectious waste.

Health Care Waste Management in the Health Care Facilities (HCFs).

Country like other developing countries faces the problem of HCWM. While less percentages of waste could be considered as infectious, this is not the case in many health facilities with poorly developed waste-segregation practices, hence many waste is being categorized as infectious. The main reason for this is the increased generation of diverse types of healthcare waste due to the multiplication and expansion of healthcare facilities as a result of population growth, ongoing immunizations and treatment of various conditions including emerging (i.e. infectious diseases) and re-emerging communicable and non-communicable diseases. The different types of health care wastes generated from these health care services poses potential health risks to the health workforce, the environment and community at large.

Health care settings produce infectious waste that may lead to Hospital Acquired Infections (HAIs) and HIV/AIDS among health care workers, waste handlers, and patients. HAIs have been a major contributor to morbidity and mortality burden in the developing world.

Health Care Waste Generation

Appropriate handling, treatment, and disposal of waste by type can help to reduce costs and in the same breath serve as safeguard in the protection of public health and the environment. Critical here is the observance of health care waste production with the following being key result areas:

Waste Generation: Most health facilities generate varying quantities of waste ranging from one health facility to the other in accordance with their patient workload and treatment offered in the health care facilities. However, the facilities are not able to quantify the volume of the amount of waste generated.

Waste Minimization: Waste minimization is a strategy for sound management of health care waste although most health facilities have difficulties in practicing waste minimization or showing any efforts geared towards waste minimization.

Waste receptacles: The containment of waste from points of generation is critical towards the achievement of sound management of health care waste. Many health care facilities have inadequate waste receptacles; hence the poor management of the health care wastes in health care facilities.

The Table below presents an overview of the minimal procedures that should be followed to effectively manage HCW from point of generation to point of disposal.

Table 17 Summary for HCW stream

| step | location | healthcare waste stream | key points |
|------|----------------------------|---------------------------------------|--|
| 0 | | <i>waste minimization</i> | <i>purchasing policy; stock management; recycling of certain types of waste...</i> |
| 1 | in medical unit | generation | |
| 2 | | segregation at source | <i>one of the most important steps to reduce risks and amount of hazardous waste</i> |
| 3 | in health facility | collection + on-site transport | <i>protective equipment; sealed containers; specific easy to wash trolleys</i> |
| 4 | | on-site storage | <i>lockable easy to clean storage room; limited storage time of 24-48 hours</i> |
| 5 | | on-site treatment / disposal | <i>adequate storage room; limited time of max 48 hours</i> |
| 6 | outside of health facility | off-site transport | <i>appropriate vehicle and consignment note; HCF is informed about final destination</i> |
| 7 | | off-site treatment / disposal | <i>appropriate vehicle and consignment note to ensure...</i> |

Source: Secretariat for Basel Convention & WHO, National Health-Care Waste Management Plan: Guidance Manual. Can also be accessed at www.who.int website

Health Care Waste Handling

Health-care waste management options may themselves lead to risks in human health and environment and no perfect readily achievable solution exists in the management of health-care waste. Waste, whether generated at smaller rural clinics or larger facilities, can be managed where adequate well-operated infrastructures exist. In order to achieve sound implementation of waste management, most healthcare institutions have adopted the following steps as a strategy for success:

Waste Segregation Practices: Segregation of waste by type is observed in some facilities in the country which have embraced segregation practices using color-coded bins. Segregation of HCW is done according to the following categories: infectious or clinical waste (hazardous waste), Non-infectious or general waste, highly infectious waste, and sharps waste. Use of colour codes for waste containers is low in many facilities.

Careful segregation of waste into different categories helps to minimize the quantities of hazardous waste. Poor segregation and poor choice of technology for treatment and disposal of waste are two problems that exist due in part to inadequate management practices or simply because of absence of adequate provision of waste receptacles.

Packaging of Healthcare waste: The packaging involves putting waste in colour-coded waste bags. Many facilities do not have the required temporary waste storage facilities, hence waste is just kept in the corner or where health care is being provided.

Labelling: Labelling of waste bags is a recommended practice to ensure each waste category is easily identified, and waste loads can be traced back to their point of generation.

Waste Transportation and Storage

Waste Transportation: It is common practice that most hospitals continue to use wheelbarrows and wheelchairs for the transportation of waste within the health care facilities and within its compounds, while only a few of the facilities use standard trolleys mainly in private and CHAM facilities. The use of wheelbarrows and wheelchairs should be discouraged since it leads to spillage of waste. The recommended practice for waste transportation within hospitals should be dedicated trolleys with separate ones for infectious waste to be drawn on paved surfaces to waste treatment sites.

Waste Storage: Generally, most health care facilities do not have a standard storage area for the waste generated. Mostly the waste is just kept somewhere in a corner close to where health service delivery is occurring. In some facilities, they do improvise some small room for waste storage. Other facilities store their waste right beside the incinerators (batch burners) so that they should be treated at the right time. This makes waste collection time differing even within the facilities.

Waste Treatment and Final Disposal

The goal of treating health care waste is to render the waste safe for disposal, therefore it aims at eliminating hazards and exposures. WHO and Stockholm convention guidelines among other related global best practices recommend “prioritizing consideration of alternative waste treatment processes” that do not generate dioxins and furans.

It may be safer for some wastes to be treated or pre-treated on site. Laboratories are uniquely capable of treating some wastes to eliminate hazards or reduce the amount of waste for disposal, thereby cutting costs. However, the technologies are rather sophisticated and capital intensive, requiring elaborate maintenance capacity. Best practices recommend **Incineration**, which when done properly is a highly advanced technology that can adequately treat all types of special healthcare waste. The key parameters of controlled incineration are combustion at a sufficiently high temperature (between 1,000°C and 1,200°C) for long enough time in a combustion chamber with sufficient turbulence and oxygen for complete combustion to be achieved; and problematic gases to be minimized.

Occupational Health & Safety

Personal Protective Equipment: Awareness of the danger of disease transmission from infectious waste among health workers in most health facilities raised demand for provision of personal protective equipment (PPEs) to waste handlers. Use of gumboots for protection of waste handlers’ feet, and possession of heavy-duty gloves for hand protection is common. The provision of respirators or face masks, overalls, helmets, and plastic goggles for eyes protection is poor in most health facilities. The use of the PPEs is what has not been internalized among expected users. In most waste treatment sites, waste operators have possession of face masks or goggles, however most of them do not utilize them accordingly.

Overall, adherence to occupational health and safety measures, which include occupational health and safety provisions, employer responsibility, use of PPEs and workers protection and coordination of OHS activities in the management of health care waste is still weak.

Capacity Building

Training plans on HCWM: Best practices in Health Care Waste Management require that all healthcare staff receive induction and repeated training on health care waste management. Information was not found on how many health staff have received training in health care waste management per facility, but many have received trainings. However, most staff members who are deployed to handle waste are also engaged in doing other chores apart from waste management.

Development of Waste Management Plans: A good waste management plan is a good basis for implementing waste management plans that has allocation of roles, responsibilities and resources. A well-thought-out plan describes the actions to be implemented by authorities, health-care personnel and waste management workers. At the national level, a plan is critical for government to define its intentions to make improvements, and the resources required across the country for successful implementation of environmental safeguards.

The government and the respective health facilities in the countries are expected to develop their health care waste management plans and allocate resources for their operationalization in accordance with the relevant strategic objectives.

Infection Control Measures

IPC strategies to prevent or limit transmission in health care settings as per the WHO Infection prevention and control during health care when novel coronavirus (nCoV) infection is suspected, include the following:

- Ensuring triage, early recognition, and source control (isolating patients with suspected infectious disease).
- Applying standard precautions for all patients.
- Implementing empiric additional precautions (droplet and contact and, whenever applicable, airborne precautions) for suspected cases of infectious disease.
- Implementing administrative controls.
- Using environmental and engineering controls.
- Healthcare facilities should adopt IPC measures to limit the infection to the healthcare workers and community members in general; including the acquisition of specialised medical equipment and supplies as enlisted below:
 - o Management of the Healthcare Personnel
 - o Healthcare personnel should not report to work if they have a febrile respiratory illness.
 - o In communities where transmission is occurring, healthcare personnel who develop a febrile respiratory illness should be excluded from work and should be tested for the infectious disease. If negative, then they should stay away from work until symptoms resolve. If positive, then they should proceed to isolation for 14 days; and
 - o Healthcare personnel, who develop a febrile respiratory illness and have been working in areas of the hospital where SARS-COV-2 patients are present, should

be excluded from work for 7 days or until symptoms have resolved, whichever is longer.

Stewardship of personal protective equipment, antivirals, medical equipment and supplies: Health Facilities will implement plans to ensure appropriate allocation of personal protective equipment, including gloves, masks, N95 respirators, and antiviral medications. Referral isolation centres should be adequately staffed, equipped with functional mechanical ventilators, oxygen, patient monitors and consumables.

Environmental and engineering infection control: Routine cleaning and disinfection strategies will be applied to the environmental management of SARS-COV-2. Management of laundry, utensils and medical waste will be performed in accordance with procedures for infectious waste management (refer to the National Guidelines for the Management of COVID-19 (2020).

Implementation of Respiratory Hygiene/Cough Etiquette: To prevent the transmission of all respiratory infections in healthcare settings, including SARS-COV 2, respiratory hygiene/cough etiquette measures will be implemented. Elements of Respiratory Hygiene/Cough Etiquette include:

- Education of healthcare facility staff, patients, and visitors
- Posted signs in language appropriate to the population served with instructions to patients and accompanying family members or friends
- Source control measures (e.g., covering the mouth/nose with a tissue when coughing and disposing of used tissues, using surgical masks on the coughing person when tolerated and appropriate) and
- Hand hygiene after contact with respiratory secretions and
- Spatial separation, ideally 1-2 meters of persons with respiratory infections in common waiting areas when possible.

N.B. Covering sneezes and coughs and placing masks on coughing patients are proven means of source containment that prevent infected persons from dispersing respiratory droplets into the air. Physical proximity of 1-2 metres apart has been associated with a decreased risk for transmission of infections via the droplet route and therefore supports the practice of distancing infected persons from others who are not infected.

Infection Control and Hand hygiene

WHO notes that management of healthcare waste is an integral part of health facility or hospital hygiene and infection control. Healthcare waste can be considered as a reservoir of pathogenic micro-organisms, which if someone is exposed could give rise to an avoidable infection. If waste is inadequately managed, these micro-organisms can be transmitted by direct contact, by inhalation or by a variety of animal vectors (e.g. flies, rodents, roaches), which could come into contact with waste.

Standard precautions are the basic level of infection control precautions which are to be used, as a minimum, in the care of all patients. Hand hygiene in both health care and non-health care settings is one of the most important measures that can be used to prevent transmission of infection. In health care settings, health care workers (HCWs) should apply the WHO's 5 Moments for Hand Hygiene approach before touching a patient, before any clean or aseptic procedure is performed, after exposure to body fluid, after touching a patient, and after touching a patient's surroundings.

Functioning hand washing facilities with water and soap should be available within 5 meters of toilets.

Waste Management Guiding Principles for the Project

Improper management of health care waste can cause serious health problem for health workers and other workers along the waste management chain, community and the environment. Medical wastes have a high potential of carrying micro-organisms that can infect people who are exposed to it, as well as the community at large if it is not properly disposed of. Wastes that will be generated from vaccination centres, labs, quarantine, isolation and treatment facilities and screening posts readiness and response could include solid and liquid contaminated waste (e.g. blood, other body fluids and contaminated fluid) and infected materials (used water ; lab solutions and reagents, syringes, bed sheets, majority of waste from labs and quarantine and isolation centres, etc.), which requires special handling and awareness, as it may pose an infectious risk to healthcare workers in contact or handle the waste. It is also important to ensure that sharps are properly disposed of.

Infectious waste if not managed properly has the potential to endanger the health of patients, health-care workers, waste-handlers, waste-pickers and the general population. To manage the waste generated from the health facilities (vaccination areas, laboratories, isolation, quarantine, treatment centres and PoE), the following waste mitigation strategies, usually referred to as key steps in management of HCWM will be implemented:

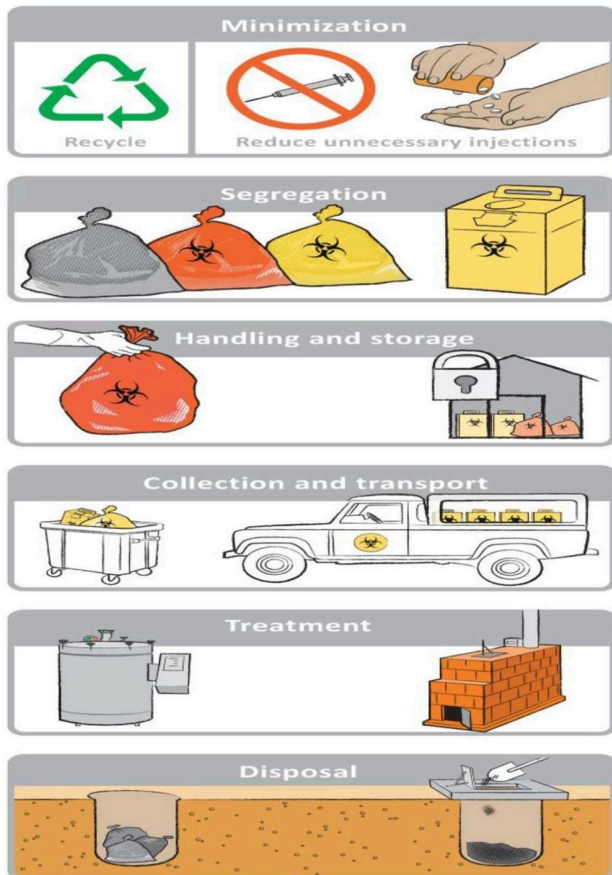


Figure 2 Infectious Healthcare Waste Management

In achieving sound management of waste, a hierarchy of waste management should always be applied. This is a ranking of waste management methods in terms of their 'desirability'. The hierarchy is based largely on the concept of the 3R's – reduce, reuse, recycle. The most preferable approach is that which produces as little waste as possible, thus minimizing the amount entering the waste stream, taking cautious and very careful attention to the risks involved. Therefore, while applying this to HCWM, ensuring safety of the workers and protection of the environment at every level of control is very critical.



Figure 3 Waste Minimization Stages

Waste Minimization

The best practice is to ensure that all health facilities (vaccination centres/points, laboratories, isolation, quarantine, treatment centres) should minimize their waste generation to the barest possible minimum amounts. Appropriate plans, strategies and actions should be established to ensure adequate medical waste minimization at source by implementing the following waste minimization strategies:

- Source reduction. Purchasing and supplying materials which are less wasteful and/or generate less medical waste.
- Stock management. Frequent auditing; use of the oldest stock first and checking the expiry date of products during receiving and issuing of commodities.
- Encouraging the use of recyclable products. Using materials that can be reused both off-site and on-site.
- Centralized purchasing, supply of medical goods to ensure the selection of less wasteful materials.
- Source suppliers who may deliver chemicals and pharmaceuticals in small quantities, this will encourage the hospital administration to make purchase in small manageable quantities,
- Ensure good management and control practices especially in the purchase and use of pharmaceuticals; and
- Enforcing a rigorous and careful segregation of the infectious waste at source.
- Segregation of waste at the point of generation. Sorting the waste into different categories helps to minimize the quantities of infectious waste generated.
- Reduction of unnecessary injections to reduce on sharps waste

- Training of relevant staff on waste minimization and benefits especially the medical staff to make changes towards less wasteful clinical practices.

Waste Segregation and Colour Coding

In the case of an infectious disease all the waste generated in care of patients is considered as infectious waste and will be segregated in the yellow bags and adhere to MoH Infection Prevention & WASH Guidelines as well as recommended by WHO Safe management of wastes from health-care activities with the following colour-coding system:

Black: All bins or bags containing non-risk HCW.

Yellow: Any kind of container filled with infectious HCW, including safety boxes.

Red: Any kind of container filled with heavy metal or effluent.


Double layered bags should be used for the collection of waste from isolation and treatment wards to ensure that no accidental leakage occurs from the bags.



In the case of an infectious disease all the waste generated in care of patients is considered as infectious waste and will be segregated in the yellow/red bags. The waste generated from treatment facilities and vaccination points, will be segregated and colour coded as outlined below in table 18 as recommended by WHO. Other measures include:

Facility containing a Person Under Investigation (PUI) or Person Under Monitoring (PUM) should be encouraged to segregate all medical waste (face masks, wipes, tissues).

Keep separate coded bins/bags/containers in wards and maintain proper segregation of waste.

Table 18 Three-bin and safety box system to be used at all health facilities.

| Segregation category | Colour Coding | Container | Examples | Marking |
|--|-----------------------------------|--|--|---|
| Sharp Waste | White or yellow (Marked 'Sharps') | Bag or bin (Puncture Proof) | Syringes with needles, blades | Biohazard symbol and appropriate MOH messages on injection safety |
| Infectious clinical waste (different type) | Yellow | Bag or bin (Strong leak proof plastic bag with biohazard symbol) | Laboratory waste, materials potentially not infected with blood. |  BIOHAZARD |

| Segregation category | Colour Coding | Container | Examples | Marking |
|--|--------------------------------------|--|---|--|
| Highly Infectious | Red (Marked Highly Infectious) | Containers capable of being autoclaved | Laboratory waste, materials potentially infected blood, swabs, cultures / TB laboratories, contaminated blood clots, glassware, swabs containers /specimen bottles and culture media. |  |
| Non-Infectious/ non-hazardous (non-clinical) | Black | Plastic Bag or container. | Paper, ash, cardboard, carton boxes | |
| Chemical and Pharmaceutical | Brown | Plastic bag or Container | Waste containing chemical substances (e.g. laboratory reagents; film developer; disinfectants that are expired or no longer needed; solvents; waste with high content of heavy metals, e.g. batteries; broken thermometers and blood-pressure gauges), Cytotoxic waste, expired drugs | Marking will vary with classification of the chemical |
| Radioactive waste | Yellow with black radioactive Symbol | Lead Box | Waste containing radioactive substances (e.g. unused liquids from radiotherapy or laboratory research; contaminated glassware, packages or absorbent paper; urine and excreta from patients treated or tested with unsealed radionuclides; sealed sources) |  Radio Active symbol |

Packaging and Labelling of Healthcare Waste

The packaging involves putting wastes in the colour-coded waste bags (bin liners) and label it for easy identification of waste streams and easy tracking back. All waste bags or containers should be labelled with basic information in English language and or in Chichewa (local language). Basic label information should include type of waste in the container, name of the health department, date of collection and, warning of hazardous nature. In general, labelling is important to:

- Identify the source of infectious or date of generation in case of an accident or improper segregation of the waste, ensure that the workers responsible for infectious management

handle the different types of wastes safely, ensure that each staff member feels more responsible for what they put into the bag/receptacle.

- Ensure that Medical Departments gather data on the amount of waste produced in each department.
- The packaging should be appropriate for the type of waste involved. In order to reduce the risk of exposure to medical waste, stringent packaging protocols including decontaminating the waste containers at point of origin must be adhered to. The following guidelines should be included for packaging sharps and other health care wastes:
 - o The bio-medical waste should be collected and stored separately by the same common bio-medical waste treatment facility staff prior to handling it. A dedicated collection bin labelled as infectious waste should be used to store waste from the isolation wards.
 - o At the waste treatment area, prioritize treatment within 48 hours and disposal of waste coming from the treatment and isolation areas immediately upon receipt.
 - o The inner and outer surface of the containers, bins and trolleys used for storage of infectious waste should be disinfected with sodium 0.5% chlorine solutions.
 - o There would be special packaging characteristics for some treatment techniques; incineration requires combustible containers while steam sterilization requires packaging material that allow steam penetration and air evacuation,
 - o Once the waste generated has been containerized/packaged for disposal it must not be in a position to be exposed again as it is moved from site to site to final disposal.

Waste Collection and Handling

Collection of waste from beneficiary health care facilities is extremely important particularly to avoid over spilling of infectious waste out of collection containers to medical staff and general public; collection should be done promptly and routinely or as often as required. Collection of waste should be done by approved and trained personnel fully equipped with appropriate PPEs and conveying machinery such as waste trolley and carts. Administrators or managers, health care workers and laboratory staff of health facilities should be actively involved in collection of waste as well as the waste handlers. They should ensure that their containers/bags (Bins/safety boxes and collection receptacles) are never more than three-quarter full before sealing them at their points of generation. Replacement bags should be made available at each waste collection period. They should also ensure that such collection containers are appropriately labelled as per WHO Health Care Waste Management.

- As a precaution double layered bags (using 2 bags) should be used for collection of waste from isolation wards so as to ensure adequate strength and no leaks.
- Dedicated medical waste collection should be made available by the facility management, to ensure the double-bagged waste bags are disposed of immediately.
- Collect and store biomedical waste separately prior to handing over in case the facility is utilizing the services of an off-site treatment facility. It is important to use a dedicated collection bin labelled as infectious waste to store all medical waste and keep separately in temporary storage room prior to handing over to authorized Biomedical Waste Collectors; and
- Maintain a separate record of waste generated from vaccination, Isolation, quarantine and treatment areas.

Waste Handling Safety Measures

All health care waste handlers should wear appropriate PPE (that is, gumboots, apron, long-sleeved gown, heavy duty gloves, mask, and goggles or a face shield) and perform hand hygiene after removing it. For more information refer to the WHO guidance, Safe management of wastes from health-care activities. PPE should be disposed of accordingly as infectious waste.

When performing procedures where splashing may occur or when infectious medical waste bags or containers may contact more than the worker's hands and wrists, the following medical protective clothing and PPE should be provided in addition to gloves:

Waste Storage

There will be designated multiple waste storage area designed for different types of wastes with appropriate design and capacity to store the generated waste and be classified into internal and external. Consideration for storage shall be based on the classification or type of waste being dealt with and the potential risk of infection to health-care workers and waste disposal staff. The storage place must be identified depending on the type of waste. WHO guidelines provide key recommendations for storage facilities of health care waste which includes: i) the storage area should have a hard standing floor with good drainage that allows easy cleaning and disinfection, ii) adequate water supply and supply of cleaning equipment and PPE for staff, iii) easy access by staff handling the waste and lockable to prevent unauthorized entry of persons, iv) should be away from any food preparation areas and patients' wards.

The following rules will be observed for proper storage of infectious waste:

- Initial packaging and storage should take place where infectious waste is generated.
- Medical waste from isolation/quarantine areas should be pre-treated or decontaminated to reduce the microbial load,
- Treatment processes methods may include autoclaving, incineration, chemical disinfection, grinding/ shredding/disinfection methods,
- Storage of waste shall then be moved to a temporary on-site storage location that is secure and completely closed or lockable,
- The facility should have earmarked segregation points, as close to the generation points of infectious waste as possible.

The facility should ensure availability of good quality and adequately sized containers for waste segregation and on-site storage. These should preferably be thick plastic and should be lined with non- chlorinated plastic liners, refer to additional information in WHO [water, sanitation, hygiene and waste management for COVID-19](#) and [WHO Safe management of wastes from health-care activities](#).

Internal storage is the temporary placement of waste at the point of generation before transfer to external storage points. A temporal storage location for the infectious waste should be designated within the health-care facilities, PoE, isolation and quarantine areas and laboratories. External storage refers to the transit point where waste is stored after removal from primary storage to the time it is collected and transported for treatment and final disposal. External storage location should be isolated and stored in the larger containers found near the waste treatment facilities awaiting treatment. Infectious waste should not be stored for more than 48 hours after generation before treatment.

To ensure infectious waste is kept separately, the central storage receptacles for each color-coded bag should be placed in similarly color-coded receptacles. This waste should be pre-treated (autoclaving, chemical treatment) before being transported to final treatment point.

Transportation

Consideration for transportation will be based on the classification or type of waste being dealt with and the potential risk of infection to health-care workers and waste disposal staff. Transportation is classified into On-site transport and Off-site transport, the waste generated from HCF is treated and disposed both at (on-site) and also there shall be off-site transport. On-site transport involves conveying of wastes from the various points of generation to a temporary storage location also within the same area. Waste transportation within hospitals should be done by using dedicated trolleys with separate ones for infectious waste to be drawn on paved surfaces to waste treatment sites.

On-site Transportation: On-site transport should take place during less busy times whenever possible. Set routes should be used to prevent exposure to staff and patients and to minimize the passage of loaded carts through patient care and other clean areas. Depending on the design of the health-care facility, the internal transport of waste should use separate floors, stairways as far as possible. Regular transport routes and collection times should be fixed and reliable. Transport staff should wear adequate personal protective equipment, gloves, strong and closed shoes, overalls and masks.

Hazardous and non-hazardous waste should always be transported separately. In general, there are three different transport systems; the following should be adhered to when carrying out On Site transportation.

Waste transportation trolleys for general waste should be painted black, only be used for non-hazardous waste types and labelled clearly “General waste” or “Non-hazardous waste”.

Infectious waste should not be transported together with other hazardous waste, to prevent the possible spread of infectious agents. Trolleys should be coloured in the appropriate colour code for infectious waste (yellow) and should be labelled with an “Infectious waste” sign.

- Waste should never be transported by hand even if the distance is short due to risks of accident/exposure to infectious material,
- Other hazardous waste, such as chemical and pharmaceutical wastes, should be transported separately in boxes to central storage sites.
- The collected waste should not be left even temporarily anywhere other than at the designated storage room.
- Containers should be covered with lids during storage and transport.

Off-site Transportation: During the transportation of waste outside the vaccination sites, Labs, HCF, quarantine and isolation centers the following safety precautions should be included: -

Off-site transportation of waste should comply with WHO guidelines.

- Single-bagged waste and containers of sharps and liquids should be placed within a rigid or semi rigid container such as a bucket, box, or carton lined with a plastic bag.
- When transporting plastic bags of infectious waste, care should be taken to prevent tearing of the bags.

- Infectious waste should not be compacted before treatment.
- Outside selected HCFs, infectious waste should be transported in closed, leak-proof, rigid containers.
- The transportation should be properly documented, and all vehicles will carry a consignment note from the point-of collection to the treatment facility.
- Staff should be fully aware of emergency procedures for dealing with accidents and spillage.
- Recycling of waste MUST be avoided to prevent human contact with infections.
- Landfill sites with informal waste picking shall need increased education awareness, management and security.

Vehicle requirements: Off-site transportation of infectious waste should follow i) the WHO guidelines for the vehicle requirements for transporting infectious waste for both the Pick Up and Truck ii) carry adequate supplies of protective clothing, waste bags, cleaning tools and disinfectants in case of spillage iii) internal finish of the vehicle should be good to allow for ease in cleaning and disinfecting the vehicle after use.

Labelling of the transport vehicle: The transport vehicle should be labelled according to the type of waste that is being transported. The label that is displayed will depend on the United Nations classification of the waste. Before sending hazardous health-care wastes off-site, transport documentation (commonly called a “waste tracking note”) should be prepared and carried by the driver with the following information: i) waste classes ii) waste sources iii) pick-up date iv) destination v) driver name vi) number of containers or volume vii) Receipt of load received from responsible person at pick-up areas; On completion of a journey, the transporter should complete a consignment note and return it to the waste producer for filing.

Waste Treatment and Disposal Methods

Waste Treatment: The CERP will adopt the World Health Organization (WHO¹²) waste treatment techniques which minimize the formation and release of chemicals or hazardous emissions. In general, proper treatment and disposal of healthcare waste is necessary to ensure that its impact on the environment and human health is minimized or eliminated. Among all the current existing technologies for the treatment and disposal of infectious waste, the most appropriate technology shall be applied, and this should be the safest, reliable, affordable, and sustainable taking into considerations technical, human, financial and available infrastructure and resources (power and fuel) available. Foremost, the technology so chosen should be able to guarantee minimization of the immediate public health risks associated with infectious waste management as well as with the lowest negative impact on the environment.

There are several methods appropriate for infectious waste treatment, depending on the type of waste material. These treatment methods shall include one of the following options or combination of options: steam sterilization (autoclaving), incineration, thermal inactivation, gas/vapor sterilization, chemical disinfection, shredding, maceration, and sterilization by radiation, or electromagnetic radiation.

All biological wastes from health Care facilities (isolation and quarantine centres) should be decontaminated and marked as “Treated Biohazard Waste” prior to disposal in designated

¹² WHO Safe management of wastes from health-care activities, Second edition.

containers for treated infectious waste. HCFs, Isolation & Quarantine Centres Infectious Medical Waste should be handled in the following ways:

- Workers shall be provided with adequate PPEs, including three (3) layer masks, splash proof aprons, gowns, nitrile gloves, gumboots and safety goggles.
- All PUI related waste should be double bagged, “swan neck” tied and the outside sprayed with a 0.5% chlorine disinfectant solution (1% household bleach solution).
- If dedicated medical waste collection is available, then the double-bagged waste should be disposed of immediately.
- The surface of containers/bins/trolleys (inner and outer) used for storage of waste should be disinfected with 1% Sodium Hypochlorite Solution.

Incinerator control method

Proper design and operation of incinerators should achieve desired temperatures, waste residence time inside the furnace, and other conditions necessary to destroy pathogens, minimize emissions, avoid clinker formation and slagging of the ash (in the primary chamber), avoid refractory damage destruction, and minimize fuel consumption. Good Combustion Practice (GCP) elements also should be followed to control dioxin and furan emissions.

If existing on-site incinerators are used, mitigation measures will be taken to control emissions to air in line with WBG EHS guidelines for healthcare facilities and WHO Safe management of wastes from health-care activities.

The good practices include:

- Waste reduction and segregation to minimize quantities of waste to be incinerated
- Siting incinerators away from patient wards, residential areas or where food is grown
- A clearly described method of operation to achieve the desired combustion conditions and emissions; for example, appropriate start-up and cool-down procedures, achievement and maintenance of a minimum temperature before waste is burned, use of appropriate loading/charging rates (both fuel and waste) to maintain appropriate temperatures, proper disposal of ash and equipment to safeguard workers
- Periodic maintenance to replace or repair defective components
- Improved training for operators and management including the availability of an operating and maintenance manual, visible management oversight, and regular maintenance schedules
- Ensure provision of well sited ash pits to properly dispose of contaminated ash from incineration
- The incinerator housing should have adequate water supply and provision of sanitation facilities (toilets and wash areas) for use by the staff and
- Installed incinerators should be compliant with the Environmental standards; national regulations as well as the World Bank Group EHS guidelines.

Caution: Due diligence of an existing incinerator will be conducted to examine its technical adequacy, process capacity, performance record, and operator’s capacity. In case any gaps are discovered, corrective measures should be recommended. Health and safety provisions should be made available at the incinerator’s facilities including fire extinguishers, sand buckets, first aid kits.

Waste Disposal: Final disposal of the non-hazardous healthcare waste and residues or by-products from the treatment of waste will be disposed of in the following ways among others;

- Burial in pits: Infectious waste pits, placenta pits, ash pits.
- Sterilized and shredded microwaved or autoclaved waste can be channelled to waste reprocessing facilities or be disposed of through the municipal waste stream to the landfills.
- Please note that incineration is not a disposal method because the ash residue has to be disposed either in a protected ash pit or municipal landfill.
- Liquid Waste Generated Treatment and Disposal
- Liquid contaminated waste (e.g. pathological sample, blood, faeces, urine, other body fluids and contaminated fluid) from healthcare facilities requires special handling, as it may pose risks to healthcare workers who contact or handle the waste. Typically, a system of sewer pipes linked to form a sewerage system should collect wastewater from around a facility and carry it below ground to a central location for treatment at selected HCFs (quarantine/isolation/treatment/Blood centers) and Laboratories. The treatment plant should be located at a facility, and waste water collected from laboratory by pipe system and passed into different units of liquid waste treatment units in line with WHO Water, sanitation, hygiene and waste management for COVID-19 technical guidance. All infectious waste generated from healthcare facilities (including sample packaging materials, culture materials, petri dishes, PPE and associated process wastes) should leave the facility only after decontamination using the autoclave or after being chemically sterilized.
- The virus of the infectious disease is an enveloped virus with a fragile outer membrane that can be destroyed by applying the following method of disinfection using 0.5% or 0.05% chlorine solution in accordance with the materials to be treated.

Managing Blood / Body fluid Exposure¹³

Persons including HCWs with percutaneous or muco-cutaneous exposure to blood, body fluids, secretions, or excretions from a patient with suspected or confirmed infectious disease, should immediately and safely stop any current tasks, and leave the patient care area.

- Safely take off PPE according to the steps in the procedure room.
- Treat affected exposed area:
 - wash the affected skin surfaces or the percutaneous injury site with soap and water
 - Irrigate mucous membranes (e.g. conjunctiva) with copious amounts of water or an eyewash solution, and not with chlorine solutions or other disinfectants.
- Immediately report the incident to the chief of unit, IPC focal point (following hospital exposure procedure) as soon as the HCF staff exit the isolation room/ unit.
- Exposed persons should be medically evaluated for:
 - infectious disease (ID) (of isolated patient)
 - other potential exposures (e.g., HIV, HBV, HCV) if sharp/needle-stick injury
- Exposed persons must receive follow-up care, including:
 - fever monitoring, twice daily period of recording symptoms will depend on the ID, and
 - Counselling and psychological support.

¹³ Interim Infection Prevention and Control Recommendations for Coronavirus Disease 2019 (COVID-19) in Health Care Settings

- Immediate consultation with an expert in infectious diseases for any exposed person who develops fever, symptoms after exposure.
- If fever appears and other symptoms, isolate HCF staff, and follow procedure for ID suspected until a negative diagnosis is confirmed, Or
- People suspected of having infected should be cared for/isolated, and the same recommendations outlined in this document must be applied until a negative diagnosis is confirmed.
- Conduct contact tracing and follow-up of family, friends, co-workers and other patients, who may have been exposed to ID virus through close contact with the infected HCW/ staff.

Handling of Dead Bodies

Discourage any local practices (touching/ being in contact with the corpse) by HCW, family, friends. The corpse/remains should not be sprayed, washed or embalmed. Use fully PPE to safely handle the dead body/corpse including disposable gown with long-sleeves, waterproof apron, disposable, non-sterile gloves (over the cuffs of the gown), surgical mask (wear particulate mask if autopsy), eyes protection (preferable face-shield, or goggle), rubber gloves and rubber boots. Other measures include:

- Put corpse in waterproof/ impermeable body bag immediately; and transfer to the mortuary as soon as possible after death,
- Bury or incinerate corpse without delay,
- Train and pre-position a Safe and Dignified Burial (SDB) Team in local communities, preferably adopting a member of the local community on this team; and
- Ensure SDB teams are fully knowledgeable about WHO SDB protocols and associated activities including decontamination, community involvement and psychosocial support.
- Any staff and visitor who is entering in the isolation room/ isolation unit (IU), or has any contact with contaminated equipment, linen, waste, dead body MUST:
- Register their name and contact details in the logbook of isolation room/ unit, for contact tracing purpose,
- Follow up health status, fever & other symptoms (refer to suspect case definition/ triage form)
- Take and record temperature twice daily, for the entire incubation period after the last contact
- Notify to head of unit, IPC team, focal point if any symptoms,
- Have a good hygiene, drink plenty of safe drinking water, and rest to avoid mistake due to overwhelmed, severe fatigue.
- Provide supervision and support from chief of IU, IPC focal point and director of hospital, by promoting preventive medicine:
- No pregnant women should be working in isolation room/ unit
- Provide psychological support to the staff/team who work in isolation room/ unit
- Prevent heat illness/ dehydration (serious risk of heat illness while wearing PPE in tropical conditions).
- For HCWs who are developing symptoms
- Stop work immediately or do not report to work;
- Limit interactions with others (self-quarantine / isolation);
- Exclude themselves from area (self-quarantine / isolation);

- Notify the chief of unit or focal point if any fever > 38°C. and/ or other symptoms (refer to case definition);
- Exposed persons must receive follow-up care (e.g. antiviral therapy when available), counselling and psychological support; and
- Inform supervisor, for contact tracing and follow-up of family, friends, co-workers and other patients, who may have been exposed to the disease through close contact with the infected HCW/staff.

Get additional information from the WHO Infection Prevention and Control for the safe management of a dead body in the context of COVID-19.

Emergency Preparedness and Response (EPR)

The purpose of this section is to provide emergency response for the healthcare facilities (vaccination centers, hospitals, PoE, isolation & quarantine centers and laboratories) with regard to the potential threat associated with both novel pathogen identified and other risks that could affect Health Care Facility operations (including risks to workers and patients and on operation of waste treatment and disposal options) in line with the requirements of ESS4. Emergency incidents occurring in an HCF may include spillage, occupational exposure to infectious materials or radiation, accidental releases of infectious or hazardous substances to the environment, medical equipment failure, and fire. These emergency events are likely to seriously affect medical workers, communities, the HCF's operation and the environment.

Emergency Response Plan for Waste Treatment Facility

In the event that an emergency situation occurs in which the activities at the waste treatment facility poses a threat to the public's health as well as environmental contamination, the following need to be addressed immediately:

- Identify the cause of emergency,
- Call for the external support from the Country responsible agency for Emergency situations.
- Notifying the workers and surrounding residents to take necessary protective measures according to the nature of the incident;
- Liaise with the county disaster department to organize the evacuation of the residents to safety, and determining the means of evacuation according to the weather and geographical conditions and the population density;
- Set up the emergency shelter outside the safety boundary of the incident site;
- The responsible entity in the emergency environmental incidents should take immediate actions to control or cut-off the source of pollution, taking all possible measures to control the situation, in order to prevent the secondary pollution and the derivative incidents;
- The field rescue team should be organized immediately, if necessary, to reduce the casualty and property loss; and
- Individuals in the contaminated area should be evacuated to safety, and irrelevant individuals should be barred from the area.
- Termination of emergency
- The emergency for the situations above that meet the following requirement is qualified to be terminated:
- The scene of incident has been under control, and the conditions for the incident to occur are removed.

- The leakage or release of pollution source has been limited within a stipulated scope.
- The hazard caused by the incident has been thoroughly removed and cannot cause any new incident.
- It is not necessary to continue to adopt professional emergency disposals at the incident site.
- Necessary measures have been taken for protecting the public from any secondary danger.

NB: If the existing waste disposal facility has the Emergency Response Plan, the plan will be updated to meet the minimum requirement for handling potential infectious healthcare waste and the workers trained on the emergency response plan of the HCF.

The MoES is likely to be the main implementing agency for the activities and will designate a team to oversee the implementation of the project activities and ensure compliance of E&S instruments and World Bank ESF requirements.

At the National level institutional responsibility for implementation of E&S instruments will rest with the PIU. The PIU shall have an environmental officer who will support the project implementation and monitoring of project activities as well as adherence to the environment and social due diligence requirements.

Table 19 Summary of key parameters to be monitored

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|---|---|--|------------------|--|
| Waste segregation and collection | Number of HCFs (supported by the project) with color coded and labelled HCW Receptacles | Physical verification Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs practicing waste separation | Rapid Assessments, Supervision Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCWs trained in HCW segregation and collection | Routine data | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard PPE for HCW segregation and collection | HCWM Rapid Assessment Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with national standard guidelines on HCW segregation and collection | Rapid Assessment Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|-----------------------------|--|---|------------------|--|
| Waste Storage | Number HCFs with designated temporary storage facilities for HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with temporary storage facility which is inaccessible to unauthorized persons and animals | -Rapid Assessments Routine reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with designated temporary storage facilities for HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with designated temporary storage facilities for HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard storage containers | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard PPE for HCW storage PERSONNEL | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|-----------------------------|--|--------------------------------------|------------------|--|
| | Number of HCFs with national standard guidelines on HCW storage | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard storage containers | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard PPE for HCW storage PERSONNEL | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| Waste Transportation | Number of HCFs with standard PPEs for transporting HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard equipment for transporting HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs aware of risks associated with improper handling of HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs catchment population aware of health risks of HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|-------------------------------------|--|--------------------------------------|------------------|--|
| | Number of HCFs trained in HCW transportation | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard PPEs for HCW transportation | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard equipment for HCW transportation | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with national standard guidelines on HCW transportation | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| Waste Treatment and Disposal | Number of HCFs with standard treatment equipment for HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard treatment plant/facilities for HCW | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard guidelines for HCW treatment | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|-----------------------------|--|--------------------------------------|------------------|--|
| | Number of H/Ws trained in HCW treatment and disposal | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard PPEs for treatment and disposal. | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number HCFs with standard equipment for HCW treatment | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number HCFs with standard equipment for HCW disposal | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with national standard guidelines on HCW treatment and disposal | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|-----------------------------|---|--|------------------|--|
| | Number of HCFs with designated supervisor to man incinerators and disposal facilities | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with standard treatment equipment for HCW | - Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with designated supervisor to man incinerators and disposal facilities | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|--|---|--------------------------------------|------------------|--|
| Health care waste related accidents and spillages | Number of health institutions with annual emergency response plan for HCW related accidents and spillages | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs using national standard PPEs for preventing accidents and spillages | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs reporting on HCW related accidents and injuries | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|-----------------------------|--|---|------------------|--|
| | Number of HWs treated after HCW related spillages following IP standard guidelines | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of H/Ws vaccinated against Hepatitis B | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs with national standard guidelines on accidents and spillages | Assessment reports Distribution report | Monthly | Heads of HCF/ Institution, PIU |
| | Number of H/Ws trained in Accident and spillage management | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

| Monitoring parameter | Indicator | Methods | Frequency | Responsibility for Implementation |
|---|---|--------------------------------------|------------------|--|
| | Number of health institutions with annual emergency response plan for HCW related accidents and spillages | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of HCFs using national standard PPEs for preventing accidents and spillages | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| Infection Prevention and Control | Number of HCFs able to follow standard precautions namely e.g. hand hygiene | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |
| | Number of health facilities performing environmental cleaning according to standards | Rapid Assessments Routine Reports | Monthly | Heads of HCF/ Institution, PIU |

Table 20 Infection Control and Waste Management Baseline Mitigation Measures for HCF / Laboratory / Isolation Area/PoE

| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
|----------|---|---|---------------------------------------|-------------------------|------------------------|
| 1 | Waste Generation in HCF (PoE, Vaccination points, Laboratory, quarantines and isolation areas) | | | | |
| 1.1 | In emergency situations, all waste from clients arriving at a HCF should be classified as potentially infectious to minimize the transmission of infection. | Wastes generated at the HCF should be segregated on generation and placed in the appropriate bin as per the segregation rules. | Patients, Health Care Workers (HCWWs) | On Generation | HCF Operational Budget |
| 1.2 | Direct exposure of HCF workers and HCWWs to infectious and biohazard waste from the generate source leading to risks of exposure to infectious disease and other conditions | All HCF workers involved in infectious disease health care services must follow all standard precautions of infections which are; Hand hygiene, respiratory hygiene/ cough etiquette, use of PPE, environmental cleaning, prevention of needlestick injuries, and appropriate health care waste management. | MoH; HCF Management | At all times within HCF | HCF Operational Budget |
| 1.3 | Looking at waste minimization, reuse, and recycling where possible and in the | Facilities should consider practices and procedures to minimize waste generation, without sacrificing patient hygiene and safety considerations. | MoH; HCF Management | At all times within HCF | HCF Operational Budget |
| | | Source reduction by | | | |

| | | | |
|------|--------------------------|--|--|
| long | purchasing and supplying | | |
|------|--------------------------|--|--|

| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
|----------|--|---|-----------------------------------|---------------|------------------------|
| | term within the HCF. This will facilitate in the reduction of waste that needs to be handled, especially in smaller HCFs, more in the longer term. | <p>materials that are less wasteful and/or generate less medical waste.</p> <p>Stock management through frequent auditing; use of the oldest stock first and checking the expiry date of products during receiving and issuing of commodities.</p> <p>Encouraging the use of recyclable products. Using materials that can be reused both off-site and on-site.</p> <p>Enforcing rigorous and careful segregation of the infectious waste at source helps to minimize the quantities of infectious waste generated.</p> <p>Training of relevant staff on waste minimization and benefits especially the medical staff to make changes towards less wasteful clinical practices.</p> | | | |
| 2 | Segregation and Storage Before Collection | | | | |
| 2.1 | <i>All Infectious Waste/ Biohazardous Waste</i> generated from infectious disease health care related | <p>All waste indicated here should be placed in red biohazard bags, labelled, “Biohazardous Waste” or with the international biohazard symbol and the word, “Biohazard”.</p> <p>Full red bags must be tied</p> | Health Care Workers (HCWs); HCWWs | On Generation | HCF Operational Budget |

| | | so that leakage or | | | |
|-----------|--|---|-------------------------|-----------------|---------------------|
| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
| | activities will be placed under this category. | <p>expulsion of contents does not occur and should be contained in a rigid container.</p> <p>A strong, leak-proof plastic bag or container capable of being autoclaved should be used</p> <p>The container can be of any (preferred to be red) colour with a tight-fitting lid and labelled "Biohazard," readable from any lateral direction.</p> <p>Staff should use impermeable bags and hard standing containers</p> <p>Containers must have handles and be easy to clean</p> <p>Staff should ensure the use of easy to clean surfaces for storage and placement of containers containing HCW</p> <p>Management and staff should ensure the availability of water supply for convenient cleanliness and hygiene of storage surfaces.</p> <p>Storage areas, containers, or bags should not be readily accessible to non-staff or animals.</p> | | | |

| | | Staff must ensure that the maximum storage time of | | | |
|-----|---|--|------------------|---------------|------------------------|
| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
| | | infectious wastes is 48 hours in the cool dry season and 24 hours in the hot dry season. All storage sites should be enclosed to ensure that they are not accessible to the public and livestock and in areas not at risk of flooding. | | | |
| 2.2 | Sharps Waste: Patient care and clinical support areas generate sharps that are infectious and can spread disease and cause minor injuries to HCWs unless properly handled. | Used sharps should be placed into the appropriate sharp's container immediately after use- containers must be puncture-proof. All sharps are disposed of in either a labelled sharps container or a pharmaceutical/chemo sharps container. Containers should be labelled "SHARPS WASTE" or "BIOHAZARD," with the international biohazard symbol $\frac{3}{4}$ full sharps containers must be collected regularly and replaced with empty containers As per WHO guidance, they should be marked "INCINERATION ONLY" so that they can be visible from any lateral direction. | HCWs; HCWWs | On Generation | HCF Operational Budget |

| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
|----------|---|---|--------------------|---------------|------------------------|
| | | Pharmaceutical waste, including empty vials and syringes, is placed into a sharp's container or chemo container at the point of generation, stored in a utility room. | | | |
| 2.4 | General Waste generated | General healthcare waste such as food waste should be disposed off accordingly General waste will be collected via a separate stream from all health care waste and should not be mixed under any circumstances. | HCWs; HCWW s | On Generation | HCF Operational Budget |
| 3 | Transport of HCW Within HCFs for Storage or Direct Final Treatment | | | | |
| 3.1 | Onsite transport of waste from point of generation to storage needs to be managed in a planned manner to avoid environmental risks associated with cross-contamination with general waste, accidental spillage, and exposure of | Waste transportation should take place during less busy times whenever possible. Set routes should be used to prevent exposure to staff and patients and to minimize the passage of loaded carts through patient care and other clean areas. Depending on the design of the HCF, the internal transport of waste should use separate floors, stairways, or elevators as far as possible. Regular transport routes and collection times should be fixed and reliable. | HCWs; HCWW s | On Generation | HCF Operational Budget |

| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
|-----|--|---|------------------|---------------|------------------------|
| | HCWs and patients | <p>Associated staff should wear adequate personal protective equipment, gloves, strong and closed shoes, overalls, and masks.</p> <p>Health-care waste can be bulky and heavy and should be transported using wheeled trolleys or carts that are not used for any other purpose.</p> <p>Waste, especially hazardous waste, should never be transported by hand due to the risk of accident or injury from infectious material or incorrectly disposed sharps that may protrude from a container.</p> <p>All waste bag seals should be in place and intact at the end of transportation.</p> | | | |
| 3.2 | Routing of the infected waste in HCFs should be maintained to minimize risks of exposure and accidents during operating hours. | <p>Separate hazardous and non-hazardous routes should be planned and used.</p> <p>A specific routing plan should be developed based on the layout of the HCF.</p> <p>Special covered trolleys should be used in transporting HCWs.</p> | HCWs; HCWWs | On Generation | HCF Operational Budget |
| 4 | Occupational Health and Safety Management for Health Care Waste Workers | | | | |

| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
|-----|--|--|------------------|---------------|------------------------|
| 4.1 | Management of exposure to infectious waste from vaccination centres or other forms of toxic health care waste, chemicals, and partaking in risky activities during the health care waste management cycle to workers involved in Health Care Waste Management. | <p>Adequate awareness and training should be provided.</p> <p>Only trained personnel should be allowed to operate machinery such as autoclaves and incinerators as these reduce the risk of operational injuries.</p> <p>Provide appropriate PPE to waste handlers</p> | HCWs; HCWWs | On Generation | HCF Operational Budget |
| 4.2 | Reporting accidents and incidents | All health care management staff at the HCFs should be trained in emergency response and made aware of the correct procedure for prompt reporting. | HCWs; HCWWs | On Generation | HCF Operational Budget |

| | | | | | |
|--|--|--|--|--|--|
| | | Accidents or incidents, including spillages, damaged containers, inappropriate segregation, and any incidents involving sharps, should be reported to the designated person. | | | |
|--|--|--|--|--|--|

| SN | Activities and potential E&S Issues and Risks | Proposed Mitigation Measures | Responsibilities | Timeline | Budget (MZN) |
|-----------|--|--|-------------------------|-----------------|---------------------|
| | | The cause of the accident or incident should be investigated by a designated person or another responsible officer, who should also take action to prevent a recurrence. | | | |

Infection Control and Waste Management Plan (ICWMP) Template

Introduction

- Describe the project context and components
- Describe the targeted healthcare facility (HCF):
- Type: E.g. general hospital, clinics, inpatient/outpatient facility, medical laboratory, quarantine or isolation centers;
- *Special type of HCF in response to infectious disease: E.g. existing assets may be acquired to hold yet-to-confirm cases for medical observation or isolation;*
- Functions and requirement for the level infection control, e.g. biosafety levels;
- Location and associated facilities, including access, water supply, power supply;
- Capacity: beds
- Describe the design requirements of the HCF, which may include specifications for general design and safety, separation of wards, heating, ventilation and air conditioning (HVAC), autoclave, and waste management facilities.

Infection Control and Waste Management

Overview of infection control and waste management in the HCF

- Type, source and volume of healthcare waste (HCW) generated in the HCF, including solid, liquid and air emissions (if significant)
- Classify and quantify the HCW (infectious waste, pathological waste, sharps, liquid and non-hazardous) following WBG EHS Guidelines for Healthcare Facilities and pertaining GIIP.
- *Given the infectious nature of the novel coronavirus, some wastes that are traditionally classified as non-hazardous may be considered hazardous. It's likely the volume of waste will increase considerably given the number of admitted patients during COVID-19 outbreak. Special attention should be given to the identification, classification and quantification of the healthcare wastes.*
- Describe the healthcare waste management system in the HCF, including material delivery, waste generation, handling, disinfection and sterilization, collection, storage, transport, and disposal and treatment works
- Provide a flow chart of waste streams in the HCF if available
- Describe applicable performance levels and/or standards
- Describe institutional arrangement, roles and responsibilities in the HCF for infection control and waste management.

Management Measures

Waste minimization, reuse and recycling: HCF should consider practices and procedures to minimize waste generation, without sacrificing patient hygiene and safety considerations.

Delivery and storage of specimen, samples, reagents, pharmaceuticals and medical supplies: HCF should adopt practice and procedures to minimize risks associated with delivering, receiving and storage of hazardous medical goods.

Waste segregation, packaging, color coding and labelling: HCF should strictly conduct waste segregation at the point of generation. Internationally adopted method for packaging, color coding and labelling the wastes should be followed.

Onsite collection and transport: HCF should adopt practices and procedures to timely remove properly packaged and labelled wastes using designated trolleys/carts and routes. Disinfection of pertaining tools and spaces should be routinely conducted. Hygiene and safety of involved supporting medical workers such as cleaners should be ensured.

Waste storage: A HCF should have multiple waste storage areas designed for different types of wastes. Their functions and sizes are determined at design stage. Proper maintenance and disinfection of the storage areas should be carried out. Existing reports suggest that during the infectious disease outbreak, infectious wastes should be removed from HCF's storage area for disposal within 24 hours.

Onsite waste treatment and disposal (e.g. an incinerator): Many HCFs have their own waste incineration facilities installed onsite. Due diligence of an existing incinerator should be conducted to examine its technical adequacy, process capacity, performance record, and operator's capacity. In case any gaps are discovered, corrective measures should be recommended. For new HCF financed by the project, waste disposal facilities should be integrated into the overall design and ESIA developed. Good design, operational practices and internationally adopted emission standards for healthcare waste incinerators can be found in pertaining EHS Guidelines and GIIP.

Transportation and disposal at offsite waste management facilities: Not all HCF has adequate or well-performed incinerator onsite. Not all healthcare wastes are suitable for incineration. An onsite incinerator produces residuals after incineration. Hence offsite waste disposal facilities provided by local government or the private sector are probably needed. These offsite waste management facilities may include incinerators, hazardous wastes landfill. In the same vein, due diligence of such external waste management facilities should be conducted to examine its technical adequacy, process capacity, performance record, and operator's capacity. In case any gaps are discovered, corrective measures should be recommended and agreed with the government or the private sector operators.

Wastewater treatment: HCF wastewater is related to hazardous waste management practices. Proper waste segregation and handling as discussed above should be conducted to minimize entry of solid waste into the wastewater stream. In case wastewater is discharged into municipal sewer sewerage system, the HCF should ensure that wastewater effluent comply with all applicable permits and standards, and the municipal wastewater treatment plant (WWTP) is capable of handling the type of effluent discharged. In cases where municipal sewage system is not in place, HCF should build and properly operate on site primary and secondary wastewater treatment works, including disinfection. Residuals of the onsite wastewater treatment works, such as sludge, should be properly disposed of as well. There're also cases where HCF wastewater is transported by trucks to a municipal wastewater treatment plant for treatment. Requirements on safe transportation, due diligence of WWTP in terms of its capacity and performance should be conducted.

Emergency Preparedness and Response

Emergency incidents occurring in a HCF may include spillage, occupational exposure to infectious materials or radiation, accidental releases of infectious or hazardous substances to the environment, medical equipment failure, failure of solid waste and wastewater treatment facilities, and fire. These emergency events are likely to seriously affect medical workers, communities, the HCF's operation and the environment.

Thus, an Emergency Response Plan (ERP) that is commensurate with the risk levels is recommended to be developed.

Institutional Arrangement and Capacity Building

A clearly defined institutional arrangement, roles and responsibilities should be included. A training plan with recurring training programs should be developed. The following aspects are recommended:

- Define roles and responsibilities along each link of the chain along the cradle-to-grave infection control and waste management process;
- Ensure adequate and qualified staff are in place, including those in charge of infection control and biosafety and waste management facility operation.
- Stress the chief of a HCF takes overall responsibility for infection control and waste management;
- Involve all relevant departments in a HCF, and build an intra-departmental team to manage, coordinate and regularly review issues and performance;
- Establish an information management system to track and record the waste streams in HCF; and
- Capacity building and training should involve medical workers, waste management workers and cleaners. Third-party waste management service providers should be provided with relevant training as well.

Monitoring and Reporting

Many HCFs in developing countries face the challenge of inadequate monitoring and records of healthcare waste streams. HCF should establish an information management system to track and record the waste streams from the point of generation, segregation, packaging, temporary storage, transport carts/vehicles, to treatment facilities. The HCF is encouraged to develop an IT based information management system should their technical and financial capacity allow.

As discussed above, the HCF chief takes overall responsibility, leads an intra-departmental team and regularly reviews issues and performance of the infection control and waste management practices in the HCF. Internal reporting and filing systems should be in place.

WHO Guidance and Advice for the public

WHO advice for the public, including on social distancing, respiratory hygiene, self-quarantine, and seeking medical advice, can be consulted on this WHO website: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

Technical guidance

[Infection prevention and control during health care when novel coronavirus \(nCoV\) infection is suspected](#), issued on March 19, 2020

[Recommendations to Member States to Improve Hygiene Practices](#), issued on April 1, 2020

[Severe Acute Respiratory Infections Treatment Center](#), issued on March 28, 2020

[Infection prevention and control at health care facilities \(with a focus on settings with limited resources\)](#), issued in 2018

[Laboratory biosafety guidance related to coronavirus disease 2019 \(COVID-19\)](#), issued on March 18, 2020

[Laboratory Biosafety Manual, 3rd edition](#), issued in 2014

[Laboratory testing for COVID-19, including specimen collection and shipment](#), issued on March 19, 2020

[Prioritized Laboratory Testing Strategy According to 4Cs Transmission Scenarios](#), issued on March 21, 2020

[Infection Prevention and Control for the safe management of a dead body in the context of COVID-19](#), issued on March 24, 2020

[Key considerations for repatriation and quarantine of travellers in relation to the outbreak COVID-19](#), issued on February 11, 2020

[Preparedness, prevention and control of COVID-19 for refugees and migrants in non-camp settings](#), issued on April 17, 2020

[Coronavirus disease \(COVID-19\) outbreak: rights, roles and responsibilities of health workers, including key considerations for occupational safety and health](#), issued on March 18, 2020

[Oxygen sources and distribution for COVID-19 treatment centers](#), issued on April 4, 2020

[Risk Communication and Community Engagement \(RCCE\) Action Plan Guidance COVID-19 Preparedness and Response](#), issued on March 16, 2020

[Considerations for quarantine of individuals in the context of containment for coronavirus disease \(COVID-19\)](#), issued on March 19, 2020

[Operational considerations for case management of COVID-19 in health facility and community](#), issued on March 19, 2020

[Rational use of personal protective equipment for coronavirus disease 2019 \(COVID-19\)](#), issued on February 27, 2020

Getting your workplace ready for COVID-19, issued on March 19, 2020

Water, sanitation, hygiene and waste management for COVID-19, issued on March 19, 2020

Safe management of wastes from health-care activities, issued in 2014

Advice on the use of masks in the community, during home care and in healthcare settings in the context of the novel coronavirus (COVID-19) outbreak, issued on March 19, 2020

Disability Considerations during the COVID-19 outbreak, issued on March 26, 2020

WORLD BANK GROUP GUIDANCE

Technical Note: Public Consultations and Stakeholder Engagement in WB-supported operations when there are constraints on conducting public meetings, issued on March 20, 2020

Technical Note: Use of Military Forces to Assist in COVID-19 Operations, issued on March 25, 2020

ESF/Safeguards Interim Note: COVID-19 Considerations in Construction/Civil Works Projects, issued on April 7, 2020

Technical Note on SEA/H for HNP COVID Response Operations, issued in March 2020

Interim Advice for IFC Clients on Preventing and Managing Health Risks of COVID-19 in the Workplace, issued on April 6, 2020

Interim Advice for IFC Clients on Supporting Workers in the Context of COVID-19, issued on April 6, 2020

IFC Tip Sheet for Company Leadership on Crisis Response: Facing the COVID-19 Pandemic, issued on April 6, 2020

WBG EHS Guidelines for Healthcare Facilities, issued on April 30, 2007

ILO GUIDANCE

ILO Standards and COVID-19 FAQ, issued on March 23, 2020 (provides a compilation of answers to most frequently asked questions related to international labor standards and COVID-19)

MFI GUIDANCE

ADB Managing Infectious Medical Waste during the COVID-19 Pandemic

IDB Invest Guidance for Infrastructure Projects on COVID-19: A Rapid Risk Profile and Decision Framework

KFW DEG COVID-19 Guidance for employers, issued on March 31, 2020

CDC Group COVID-19 Guidance for Employers, issued on March 23, 2020

Annex 8. Traffic Safety Management

Framework Purpose and scope of this framework

The Project is expected to generate traffic during the transportation of goods in particular. It is therefore important to ensure that traffic is managed in a manner that facilitates efficiency as well as ensuring the safety of personnel and the local community.

This Framework has been prepared to enable the CERP and its implementers to identify and implement all legal and good practice requirements in respect of the management of traffic risks and impacts associated with the Project activities. The purpose of this Framework is to ensure that traffic management (and management of vehicles and equipment in respect of the Project) is undertaken in a safe and efficient manner. As such, the management of traffic in terms of this framework is intended to avoid and minimize traffic risks to (and impacts on) the health and safety of the local community and any personnel on site during the Project, under both routine and non-routine circumstances. The requirements of this Framework shall apply to all project activities including any implementer appointed to provide vehicles, machinery or drivers for the project.

This is a Framework that will guide the implementer to develop detailed plans suited to specific sites. The implementer or supplier will be required to conduct a site road safety and traffic risk assessment to determine potential road safety and traffic hazards including types of roads, routes, location relative to communities, schools, sensitive issues, etc., considering prevailing traffic conditions and future projections.

A copy of the specific Traffic Safety Management Plan derived from this framework must be maintained on site by the implementer or supplier. This Traffic Safety Management Framework should be kept as an annexure to the ESMP. All employees are obliged to abide by these plans. Sub-contractors must be trained to ensure compliance with these plans.

Activity-specific Traffic Safety Management Plans

This section outlines the requirements for compiling an activity-specific Traffic Safety Management Plan, which must also take into consideration section 5 of the World Bank Good Practice Note on Road Safety under ESF ESS4 and the E&S considerations listed in this ESMP. Project activity specific measures should be added according to the specific risks and impacts identified. The implementer or supplier is required to compile the detailed plan for how they will conduct their works to ensure that the health and safety risks posed by movable machines and vehicles are either eliminated or mitigated.

Institutional Arrangements for Implementation:

The Project Implementation Unit (PIU) under the Ministry of Emergency Situations of the Kyrgyz Republic will oversee the implementation of all activity-specific traffic safety plans. Contractors and suppliers will be contractually obligated to develop and enforce traffic safety measures in line with this annex. Coordination with local authorities (e.g., traffic police, municipalities) will be ensured for route approvals and risk mitigation. Each site shall have designated HSE officers responsible for daily monitoring and compliance, reporting to the PIU.

Activity description: Include a map, indicating routes in relation to the surrounding environment, community, other public roads and facilities such as schools, hospitals or clinics. Include a google map. Who and how are likely to be impacted by the project-activity traffic?

Include a site layout including Parking areas, access roads, loading and unloading areas, refueling areas, blind spots or sharp corners, access for emergency services including emergency assembly, workspaces and workshops, offices, sanitary facilities, kitchen and rest areas.

Indicate how suitability of the construction roads was determined in relation to the other alternatives considered.

Activity Risk Assessment

- Identify all crossings where pedestrians, vehicles and other road users cross.
- Identify possible blind spots (where vehicles are obscured by other buildings, stockpiles, scaffold)
- Identify all activities taking place in areas that are in proximity with moving vehicles and plant (loading bays, refueling areas, pedestrian area)
- Conduct site risk assessment and provide measures to avoid accidents. The risk assessment should include roles and responsibilities for implementation.
- Hazards and risks related to moving objects (Cranes, vehicles transporting loads).
- Hazards and risks related to flying objects (transportation of quarry, soil and sand, waste materials, fly rock from blasting, roofing material).
- Hazards and risks related to falling objects (movement of unsecured loads or during loading activities).
- Hazards and risks related to collisions with moving vehicles
- Hazards and risks related to striking against fixed or stationary objects (poor stacking of materials such as timber or bricks, which may cause a person to walk into them, poor housekeeping in work areas, scaffold edges close to walk ways, vehicles reversing into fuel tanks or buildings)
- Vehicles and Plant Movement
- Indicate the type of plant and vehicles, its use and type of load and Maximum load (Can be in a table);
- Measures implemented to ensure visibility on roads (signage, including reflective signage);
- Construction vehicle routing agreement, that establishes the routes that construction vehicles take to access sites and camps, and showing the agreed safe regular routes between quarries and batching plants;
- Details of safety measures at the key risk points, such as turn outs, narrow roads, unstable roads;
- Measures to ensure that vehicles are fit for purpose and are checked prior to each use (pre start inspections);
- Measures to avoid mechanical failure of plant and vehicles (such as failure of breaks);
- Measures to avoid accidents from environmental/weather conditions (such as slippery roads during the rainy season, high wind when operating a crane);
- Measures implemented to ensure separation of people from construction vehicles (barriers, alternative foot paths, crossing points with signage);
- Measures to avoid congestion of vehicles in an area. Use one-way systems to avoid reversing. Use of audible devices, banksman while reversing;

- Gradients of 1 in 10 to be avoided, inspections to check access road surface conditions and carrying out regular and timely maintenance on access roads;
- Sufficient lighting especially for night works;
- Management of visiting vehicles such as delivery trucks;
- Loading and Unloading activities
- Develop Safe operating procedure for all loading and offloading activities
- Measures to prevent overloading
- Measures to prevent accidents from placing sheeting over loads and removing it
- Measures to prevent accidents from coupling activities such as trailer attachment and detachment processes.

Hazardous materials and Spill Control

- Records of hazardous materials on site and Material Safety Data Sheet (MSDS)
- Training for workers on MSDS
- Measures to prevent, minimize and clean-up of spills, provision of spill response equipment.
- Establish safe areas for parking, delivery and storage of hazardous materials.
- Provisions for designated wash bays to avoid contaminating land or water resources
- Site rules, communication and training
- Speed limits, Parking areas, one way route systems, visitors' inductions, no resting under plant and vehicles, no reversing from site into traffic.
- Prohibition of parking near structures like scaffolding
- Indicate measures for driver competence (selection criteria, general basic training, job specific training).
- Training plan (Inductions, refresher training, training workers on Job Hazards Assessments, tool box talks)
- Traffic related site rules and driving control measures incorporated into Code of Conduct
- Training workers on incident reporting.
- Work schedules (avoid and minimize impacts of noise, dust, safety of children going to school).
- Workers' transportation
- Provide measures for safety of workers during transportation (Driver competency, Suitability and safety of vehicle including provisions for seatbelts, road conditions).
- Develop Safe Operating Procedures for the following:
 - Fleet management and vehicle road safety, vehicle markings, etc.
 - Driver assessment, check in, work schedules, etc.
 - Driving routes traffic management, including filling potholes from the driving, clearing fallen obstacles from vehicles, etc.
 - Site traffic safety management, including site layout plan marking routes for vehicles, pedestrians, etc.
 - Emergency procedures, if there is an accident/incident what to do on the scene (separate to the ESIRT).
- For Works on active roads:
 - Standards for traffic control and signage that will be used:
 - The work site itself;
 - The roads to get to/from the work site;
 - The roads/routes from resource points e.g. borrow pits, quarry, and others;

- How machinery and construction move around on the site – esp. scaffold hazardous substances, worker rest areas, etc.;
- How the construction vehicles move on public roads;
- How to protect the public and other road users from construction vehicles.

General Considerations

The following sections outline general environmental, health, safety, and social considerations to be included in the Traffic Safety Management Plans for specific works.

Licensing, Roads and Maintenance:

Licensing: The implementer shall ensure that:

- All Project vehicles comply with relevant traffic and transport licensing requirements (such as with regard to licensing requirements relating to the transportation of over-sized loads or hazardous materials, including hazardous waste).
- All drivers of vehicles used during the Project shall have the requisite licenses to operate any vehicle (or machinery) operated by them on Site or on any public roads.
- All Project vehicles shall have valid roadworthy certificates and licenses.
- Maintenance
- All vehicles and machinery used during the Project shall be regularly maintained and repaired where necessary. In this regard, all construction and passenger vehicles used during the Project shall be inspected by an appropriately qualified mechanic every six months following the commencement of the Project. The Project Managers shall ensure that regular inspections are undertaken of construction and passenger vehicles to ensure that they are in good working order and are not overloaded.
- Road and stormwater management infrastructure on Site shall be maintained by the Contractor so as to facilitate traffic safety. Road borders must also be regularly maintained to ensure vegetation remains short. This will enable roads to function as firebreaks.
- Gravel roads shall be sprayed with water or, where available, molasses to limit the generation of dust (where economically viable and environmentally acceptable). If the utilization of water or molasses to limit dust generation on gravel roads is not possible for these reasons, an appropriate dust suppressant must be used for this purpose.
- Any potential road hazard or vehicle defect which may render a vehicle or road unsafe for use shall be immediately reported to the Project Managers of the contractor who shall ensure that the vehicle/road is not used until the necessary repairs have been undertaken.

Maintenance and repairs of vehicles and equipment on sites:

- Where possible and practical, all maintenance of vehicles and equipment shall take place in a workshop area.
- During servicing of vehicles or equipment, a suitable drip tray shall be used to prevent spills onto the soil, especially where emergency repairs are conducted outside the workshop area.
- Leaking equipment shall be repaired immediately or be removed from site to facilitate repair.

- All potentially hazardous and non-degradable waste shall be collected and removed to a registered waste site.
- Workshop areas shall be monitored for oil and fuel spills and such spills shall be cleaned and re-mediated to satisfaction.
- Should emergency repairs be necessary, drip trays or tarpaulins must be utilised to ensure the collection of the oil. The area for emergency repairs should be identified by the site manager.
- Only emergency repairs shall be allowed on site and a drip tray shall be used to prevent oil spills.
- The implementer must ensure that delivery drivers and plant operators are informed of all relevant procedures and restrictions required ensuring compliance with this document.
- All vehicles and equipment must be well maintained to ensure that there are no oil or fuel leakages.
- The following shall apply:
- All contaminated soil / yard stone shall be removed and be placed in containers for further disposal;

Routing of Traffic, Speed Limits and Signage

Routing and direction of traffic and site access: The movement of all vehicles to and from Site shall be along designated public roads and site access roads. The most appropriate route for large Project vehicles (such as trucks and buses) transporting equipment, materials and employees (along public roads) to and from the Site shall be determined by the Contractor in consultation with the local district council, local road traffic authorities and the local community. A copy of the approved routes must be maintained on Site together with this Plan.

Any anticipated or scheduled traffic delays occasioned by Project vehicles (such as abnormal loads, i.e. the transformers) should be coordinated with local traffic authorities in advance.

The Route: The route utilized for transporting equipment to and from the Site should, as far as possible, avoid urban and residential areas, and should avoid areas of high pedestrian traffic (such as schools and trading centers) so that the interaction of pedestrians with all Project-related traffic will be minimized as far as reasonably possible. No deviation from approved access routes must be allowed by the implementer, unless roads forming part of the approved routes are closed for any reason. Where traffic delays due to transport requirements for the Project are likely, the implementer must liaise and coordinate such events with the responsible authorities.

A designated site access to the Site must be created to ensure safe entry and exit. The Site access will be clearly sign posted and shall not be located so as to cause a traffic risk.

The location and access roads shall be informed by road-use safety requirements and shall seek to limit the impact of traffic on neighboring landowners. The movement of all vehicles within the Site must be along designated roadways. Where possible, existing roads on Site shall be used as access roads.

Adequate and appropriate traffic warning signage must be erected where applicable, along transport routes and access roads.

The implementer shall take preventative measures e.g. screening, muffling, timing, pre-notification of affected parties to minimise complaints regarding noise and vibration nuisance from sources.

Vehicle speed on site shall be restricted to 20km/h for construction vehicles and 30km/h for other motor vehicles.

Fine material which can easily be blown off by wind must be covered during transportation when travelling on public roads.

Deliveries must be scheduled for off-peak hour traffic times.

All trucks and vehicles removing spoil from the site via a public road must have load areas and must be covered by a tarpaulin (plastic/synthetic sheets covers) to prevent rocks and spoil falling onto the road surfaces. Should the covering of vehicles not be possible, vehicles are only to be loaded to a capacity of 80% of the maximum capacity of the vehicle. Pickups and trucks transporting load will have closed tail gates during transportation.

All drivers and operators are to have licences for driving and moving of plant on site. Speed limit:

- The speed limit on the Site and access roads shall be 20km/h for construction vehicles and 30km/h for light vehicles and passenger vehicles.
- All speed limits applicable to public roads shall be strictly adhered to by all drivers operating vehicles as part of the Project.
- The failure to adhere to the prescribed speed limits is an offence and disciplinary action may be taken by PIU.

Signage:

It is the responsibility of the Project Managers of the implementer in consultation with the Safety Officer to ensure that signage is conspicuously placed at appropriate locations along all access roads, and public roads (in consultation with the relevant traffic authorities) to indicate the following:

- Road hazards such as blind or sharp corners or loose gravel, speed bumps;
- Warning of construction vehicles operating in the area;
- Appropriate speed limits;
- Turning traffic;
- The Site access;
- Indicating sensitive areas e.g. school, children crossing, church, medical facility, etc.;
- Routes to be used by construction vehicles, where appropriate;
- That caution should be taken by motorists or pedestrians;
- No-go areas for vehicles; and
- Any traffic control information which may be relevant in the circumstances such as temporary road closures, detours, or lane reductions
- All project vehicles will be given code numbers conspicuously marked on the body, for example "T04" for easy identification by the public and the officers in case of any eventualities like hit and run accidents.

- Any signage erected in terms of this Plan must be secured against being blown over or out of position by the wind or by-passing traffic. In addition, they should be located so as to provide adequate warning of hazards. Signs located on two-way roads should be visible to traffic traveling in both directions, and care should be taken to ensure that signs are not obscured by vegetation or dirt.

Pedestrian and Passenger Safety

All personnel transported to and from the Site shall be safely accommodated in appropriate passenger vehicles. No employee or member of public shall be transported on the back of open trucks or in grader bins. The Safety Officer shall ensure that this requirement is adhered to at all times.

All vehicles transporting employees shall be appropriately maintained and shall not carry more passengers than the number of persons for whom seating accommodation is provided.

Assembly points for passengers embarking passenger vehicles shall be located a safe distance from areas/routes of high vehicle traffic. Roads and areas used by construction vehicles shall, as far as possible be avoided by all personnel. Designated pedestrian routes shall be demarcated where appropriate.

Vehicle and pedestrian safety shall be emphasized in the Safety Induction Training required to be provided by PIU/PCU. All employees and construction personnel shall be trained and informed as to the dangers and risks posed by construction and other traffic, such training shall also include appropriate precautionary measures required to be undertaken to facilitate safe and efficient traffic management (e.g. checking for traffic before crossing roadways and utilizing designated pedestrian routes). Drivers shall be adequately trained in the recognition and avoidance of road hazards, vehicle maintenance and safety requirements.

Arrangements shall be made to ensure that pedestrians, livestock, cyclists and motorcyclists are kept clear of site vehicles and mobile plant by providing adequate traffic routes and other controls.

In as much as it is reasonably practical, eliminate or minimise the need for reversing.

In instances where reversing cannot be eliminated, pedestrian exclusion zones will be created so far as is reasonably practical.

Where reversing cannot be eliminated and pedestrian cannot be excluded, a competent traffic marshal shall be used to guide the vehicle from a position of safety.

All vehicles being used for transport of goods shall:

- Be driven in a manner which is safe.
- Be loaded in a way that it can be driven, operated or towed safely.
- Have means to provide adequate visibility to the operator.
- Have suitable steps taken to prevent unintended movement of the vehicle; and
- Have the person in control of the vehicle able to give adequate warning to any person liable to be at risk from movement of the vehicle

Any vehicle leaving the site will have clean wheels and bodywork free of loose materials.

Driver Responsibilities: Drivers shall ensure that all passengers fasten their seat belts and adhere to all safety protocols while in the vehicle. They must follow designated routes, avoid excessive speed, and immediately report any observed hazards or incidents to the site supervisor or Safety Officer.

Stakeholder engagement

The traffic safety procedures, transport routes and construction schedules intended to be applied during the construction phase shall be finalized in consultation with members of the local community, the local authority and affected landowners, in accordance with the project Stakeholder Engagement Plan, prior to the commencement of construction activities.

The scope of such engagement should include the designation of routes for construction vehicles, procedures for complaints and emergency procedures shall be concluded in consultation with local community members, affected land owners and local emergency and traffic authorities.

In this regard, appropriate measures shall be taken to ensure that:

- The routes used by construction vehicles (as far as possible) avoid areas of high pedestrian traffic;
- Adequate signage is used to warn local community members of hazards (e.g. site access, construction vehicles turning);
- Information dissemination and awareness is conducted to inform community members of increased traffic risks and appropriate precautionary measures; and
- Community members are aware of the Contractors' construction (and delivery) schedules.

Transport of Equipment and Materials

It is the responsibility of the implementer (i.e., the contractor or executing agency operating under PIU oversight, for the duration of the construction phase) to ensure the following:

- All equipment and/or materials transported to or from Site shall be appropriately secured to, or contained in, vehicles.
- No construction vehicles shall be loaded in excess of its manufacturer-specified weight bearing capacity.
- All vehicles used during the Project shall have the appropriate load-bearing capacity for the materials and/or equipment intended to be transported.
- Drivers shall be appropriately trained and permitted in driving techniques applicable to specific loads (e.g. hazardous substances) where necessary.

Emergency Response and Reporting of Hazards

Prior to the commencement of the activity, local emergency services (ambulance and medical services, police and fire and rescue) shall be consulted by the implementer in relation to the availability of emergency services to attend to road accidents associated with the Project.

In the event that any traffic hazard is identified on Site by any person or Project personnel, such hazard shall be immediately reported to the Manager who shall take the appropriate measures to avoid an incident or accident being caused. The reported hazard shall be kept in the site OHS File,

including how the hazard was mitigated/addressed. Fatality, severe injury or near miss will be reported to the World Bank within 48 hours. Minor incidents will be recorded and submitted through monthly progress reports.

Drivers of project vehicles will be required to undertake first aid training and all project vehicles shall carry first aid supplies, emergency markers, and applicable valid fire extinguishers which should be adequate to cater for the number of passengers carried on the vehicle in question. Vehicles will have working and operational hazard lights.

In the event that an accident occurs on-site or off-site, the on-site emergency procedure shall be followed. In the event that an accident occurs off-site, it shall immediately be reported to the relevant emergency service providers by the driver, and in the event that the driver is incapacitated, by any other passenger on such vehicle.

Surrounding community members should be sensitized of the existence of the Grievance Redress Mechanism (GRM) through which they can register their concerns including drivers' misconduct like over speeding and careless driving. Construction vehicles will be required to have conspicuously visible identification numbers (e.g T4) for easy identification and reporting by the community members.

Contingency Planning for Unexpected Events, Such as Extreme Weather Conditions, Accidents, or Delays.

It is important for the implementer to reduce the impacts of delays caused by extreme weather conditions and other unforeseen emergencies by planning ahead and scheduling well. There should be Plan B and Plan C if possible. Weather is unpredictable but proper and accurate planning can help the contractors optimize their plans and resources around the expected delays. Should Plan A fail in the event of weather disturbances, at least it's easier to shift to Plan B without losing track when you have a construction software like Pro Crew Schedule to guide you.

Prioritize Safety: During the rain, it can still be possible to work on the site provided that it is complete with safety features intended for this kind of weather disturbance. But there are times when it's also impossible to work like during heavy downpours, electrical storms, and hail. So don't push for operations to continue otherwise, you would see some accidents happening. Not only that, it can also require rework like when you are trying to rush cement pouring or installation of steel bar frames.

For marginal weather that allows for some outdoor work, make sure workers have the proper garb and equipment. Treaded, non-skid footwear, gloves, hoods and other outerwear permits work in some conditions.

Health and safety risks are higher during most adverse weather spells. The hazards should undergo a thorough assessment to decide if work must stop until the conditions have cleared or if it can continue.

Firstly, risk management should begin with monitoring the closest weather stations to the construction site. This will provide a head start on planning for any adverse weather predictions, allowing the contractor to consider the risks before it arrives. However, bad weather might show

up with little to no warning, meaning the contractors have no time to prepare. For this reason, planning for all available scenarios should be carried out before construction starts.

Each risk should be evaluated to see if it could be avoided, eliminated, reduced, transferred or accepted. The level of impact should also be graded either low, medium or high. For example, torrential rain might have a high impact since the water can cause erosion of materials. Flooding becomes more likely, which creates a serious risk of danger to life. Health and safety dangers combined with potential losses for materials and equipment means that action must be taken. At this point, halting work is the only solution to eliminate the life-threatening risk. The risk management team for the construction site should begin looking at possible ways to reduce the impact on the workers without drastically increasing the time and cost of the project.

Extreme temperatures are usually easier to predict and plan around. For example, water should be provided, and breaks encouraged at regular intervals in extremely high temperatures. These risks can easily be mitigated to avoid delays.

Monitoring and Reporting

Monitoring: Monitoring the performance of the traffic management plan is essential to evaluate its effectiveness and identify any areas for improvement. We will use various indicators and methods, such as traffic counts, travel time, crash data, and feedback surveys, to measure the impact of the traffic management plan on the traffic flow and the user satisfaction. We will also conduct regular audits and inspections to check the compliance and safety of the traffic management plan. Reports and findings should be documented, and recommendations suggested for future reference and learning.

Reporting: The implementer shall submit reports of all incidents, fires and property damage etc to the Engineer immediately after such occurrence, but in any case, not later than 24 hours of the occurrence.

In addition, periodic reports on safety shall also be submitted by the implementer to PIU from time to time. Compiled monthly reports of all kinds of incidents, fire and property damage to be submitted to the E&S Specialist as per prescribed formats. HSE incidents of site shall be reported to the PIU.

Annex 9. GBV/SEA/SH Risk Assessment and Action Plan

This document aims to establish principles and procedures to assess and establish mitigation measures for the risks that may arise from the implementation of the project related to sexual exploitation and abuse and sexual harassment (SEA/SH), and other forms of Gender-Based Violence (GBV) under CERP. It provides an assessment of potential risks and propose measures to avoid/reduce their impact on the project and the communities. It is worth noting main mitigation measures are those under the PIU and implementing agencies which already have systems and procedures in place under World Bank-Funded Projects. This GBV/SEA/SH Risk Assessment and Action Plan is meant to provide indicative interventions which shall be achieved through the following:

- Identify pre-existing GBV risks and those that may be exacerbated or arise with project activities;
- Map GBV service providers in the surrounding project areas that can be used by beneficiaries;
- Identify other measures the project should undertake to reduce the risk of GBV;
- Develop an Action Plan to mitigate the identified risks;
- Disseminate the process for submitting and managing complaints related to GBV/SEA/SH to stakeholders and affected parties;
- Implement the action plan.

Concept - Gender-Based Violence (GBV)

The concept of gender refers to the socially constructed roles, behaviors, activities, and attributes that a given society considers appropriate for men and women (GTZ, nd). Gender relations vary and change within the same society according to other social categories, such as race, class, age, sexual orientation, ethnicity, and religion. These factors do not act independently and create a system that reflects the "intersection" of multiple forms of discrimination (MGCAS, 2016). Gender-Based Violence (GBV) is referred to as any harmful act perpetrated against a person's will and based on socially constructed gender differences and unequal power positions between men and women sustained by patriarchy (Council of Europe, 2007). It includes acts that cause physical, mental, sexual harm or suffering, threats of such acts, coercion, and other deprivations of liberty, occurring in public or private life.

The terms violence against women and gender-based violence are often used interchangeably in literature and by women's rights advocates. However, GBV emphasizes the gender dimension, specifically the interconnection between (i) the subordinate status of women and (ii) the increased vulnerability to violence derived from unequal power relations and gender roles. The term GBV provides an opportunity to examine and understand the phenomenon of violence against women, shifting the focus from viewing women as victims to focusing on the gender and power relations between men and women created and maintained by gender stereotypes (UNFEM, 2001). In this context, women can be victims of GBV perpetrated by other women attempting to exercise patriarchal power, and it also means that men and boys can be victims of GBV, with particular attention to sexual violence, as in cases where they are considered "outside the traditional pattern" of gender roles. However, it is important to note that the vast majority of GBV victims are women.

Gender-Based Violence (GBV) can take different forms described below:

- **Physical Violence:** Results in injuries, distress, and health problems. Typical forms of physical violence include beating, strangulation, pushing, and using weapons to attack the victim.
- **Sexual Violence:** Includes sexual acts, attempts to obtain a sexual act, acts of trafficking, or other acts directed against a person's sexuality without their consent.
- **Psychological Violence:** Acts or omissions aimed at controlling a person's behavior, actions, beliefs, and decision-making ability through manipulation, intimidation, insult, threat, isolation, humiliation, etc.
- **Property or Economic Violence:** Includes barriers imposed by the perpetrator to prevent the victim from accessing money or resources. Pressure not to work and stay at home or control of resources are clear examples of economic violence.
- **Political Violence:** Any practice or act of discrimination or verbal, psychological, physical, sexual, or economic violence, as well as threats of such acts or intimidation, that prevent or hinder victims' access to public or political office or the free exercise of their political career.
- **Sociocultural Violence:** Any practice that can endanger people's self-esteem, health and lives. Examples of sociocultural violence include female genital mutilation, early marriage, forced labor, forced sexual exposure, being prevented from socializing with other people, friends, family or neighbors, etc.

Some examples of gender-based violence

- a. Domestic violence: includes all acts of physical, sexual, psychological, and economic violence that occur in the private sphere within the family, domestic unit, or between intimate partners (former or current, even if they do not live together);
- b. Sexual harassment includes unwanted verbal, physical, or other conduct of a sexual nature with the purpose or effect of violating the dignity of a person. This may occur in the context of unequal power relations, such as in the workplace, and includes verbal acts, touching without consent, viewing pornography, etc.;
- d. Forced marriage/union involving the use of force or coercion, including child or early marriage, where children are married before reaching the minimum age for marriage.
- e. Sexual exploitation and abuse: Any actual or attempted abuse of a person's vulnerability, power, or trust for sexual purposes, including, but not limited to, obtaining monetary, social, or economic benefits from a person. Sexual violence is further defined as “actual or threatened / attempted physical intrusion of a sexual nature, whether by force or in unequal or coercive circumstances.

Context of GBV in Kyrgyzstan

Legal framework:

Table 21: Summary of relevant legal instruments on GBV/SEA/SH in the Kyrgyz Republic

| Topic | Title of Legal Instrument | Link / Reference |
|---|--|--|
| Prevention and Protection against Domestic Violence | Law of the Kyrgyz Republic “On Protection from Domestic Violence” No. 63 of April 27, 2017 | https://cbd.minjust.gov.kg/111570/edition/14086/ru |
| Counter-Trafficking | Law of the Kyrgyz Republic “On Counteracting Human Trafficking” No. 17 of February 17, 2005 (as amended in 2021) | https://cbd.minjust.gov.kg/1650/edition/1213498/ru |
| Prohibition of Religious Marriage with Minors | Criminal Code of the Kyrgyz Republic (2019, as amended in 2023), Article 178: Religious marriage with a minor | https://cbd.minjust.gov.kg/3-38/edition/2087/ru |
| Minimum Legal Age of Marriage | Family Code of the Kyrgyz Republic, Articles 14–16 (minimum age 18) | https://cbd.minjust.gov.kg/1327/edition/1163855/ru |
| Anti-Discrimination Measures | Law “On Equal Rights and Opportunities for Men and Women”; No. 184 August 4, 2008 | https://cbd.minjust.gov.kg/202398/edition/382698/ru |
| Gender Equality Strategy | National Strategy for Achieving Gender Equality in the Kyrgyz Republic for 2022–2030, approved by Decree No. 618 of the Cabinet of Ministers dated December 19, 2022 | https://cbd.minjust.gov.kg/159472/edition/1189691/ru |
| National Action Plan on GBV | Action Plan for Implementing the Gender Equality Strategy (2022–2024) | http://cbd.minjust.gov.kg |
| International Obligations | UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), ratified on June 2, 1997 | https://www.un.org/womenwatch/daw/cedaw/ |
| Institutional Coordination | Regulation on the Coordinating Council on Protection from Domestic Violence, adopted by Government Decree | https://mlsp.gov.kg/wp-content/uploads/2022/07/rukovodstvo-dlya-mk-russk.pdf https://cbd.minjust.gov.kg/7-17013/edition/1075833/ru |

Institutional mechanisms

Order of the Ministry of Health on Comprehensive Care for Victims of Gender-Based Violence: Sets out the procedures to be followed by health facilities in providing care to victims of gender-based violence, the majority of whom are women and girls. Establishes the relationship between the health facility and other services for survivors of gender-based violence, such as the police. Defines the role of health care providers and the protocols to be followed to identify cases of violence and address problems.

Multisectoral Mechanism for Integrated Care for Women Victims of Violence: This mechanism establishes a comprehensive and coordinated response to violence against women and girls through the combined efforts of state institutions and civil society. It addresses the diverse needs of survivors by defining clear roles and coordination procedures among all key actors. In the Kyrgyz Republic, the main government agencies involved in the multisectoral response include the Ministry of Internal Affairs, Ministry of Health, Ministry of Labor, Social Protection and Migration, Ministry of Justice, the Office of the Ombudsman (Akyikatchy), local self-government bodies, and crisis centers..

The mechanism aims to improve care for women survivors of violence against women by better coordinating the work and roles of the different stakeholders and defining care protocols to standardize the services offered by the different professionals involved.

Context of the situation of gender-based violence in Kyrgyzstan

Gender-based violence (GBV), including domestic violence, sexual exploitation, and harassment (SEA/SH), remains a widespread and persistent issue in the Kyrgyz Republic, particularly affecting women and girls. Official statistics and recent studies confirm high prevalence and low reporting rates due to stigma, weak enforcement mechanisms, and socio-cultural acceptance of certain forms of violence.

According to the Ministry of Internal Affairs of the Kyrgyz Republic, over 14,000 cases of domestic violence were officially registered in 2023, with more than 96% of survivors being women. This represents a 7.5% increase compared to 2022, reflecting both increasing incidence and improved case reporting mechanisms (MIA KR, 2024)¹⁴.

Data from UN Women Kyrgyzstan (2023–2024)¹⁵ shows that approximately 13.3% of women aged 15–49 reported experiencing physical and/or sexual violence by an intimate partner within the previous 12 months. A broader 2021 study by UNFPA¹⁶ and the National Statistical Committee found that more than one-third of women in the country have experienced physical or sexual violence in their lifetime, while less than 40% of them sought help.

Harmful traditional practices, such as early and forced marriage (including the illegal practice of bride kidnapping), remain prevalent, especially in rural and mountainous areas. Although the practice is officially banned, studies estimate that 5–10% of marriages in certain regions still occur

¹⁴<https://mvd.gov.kg>

¹⁵ <https://data.unwomen.org/country/kyrgyzstan>

¹⁶<https://kyrgyzstan.unfpa.org>

without the woman's consent (UNICEF, 2023)¹⁷. This context of normalized coercion and inequality increases the risk of SEA/SH, particularly in low-income or isolated communities.

While the current Project does not include large-scale construction or heavy labor influx, planned activities such as technical assistance, field training, equipment delivery, and community engagement may still increase the risk of GBV and SEA/SH. Even moderate levels of external workforce presence, particularly in rural or conservative areas, can exacerbate pre-existing gender inequalities and social tolerance to violence.

Therefore, despite the relatively low scale of labor mobilization, SEA/SH risks cannot be considered negligible. In line with ESS1, ESS2, ESS4 and ESS10 of the World Bank's Environmental and Social Framework, preventive and responsive mechanisms must be in place. These include mandatory Code of Conduct for contractors and consultants, SEA/SH-sensitive grievance mechanisms, and targeted awareness-raising among both project workers and community members.

¹⁷ <https://www.unicef.org/kyrgyzstan>

Risk Assessment and Mitigation Measures for GBV Risks in the

Project Table 22: SEA/SH Risk Mitigation Measures

| Risks and Considerations | Mitigation Measures | Execution Indicators | Responsible Parties |
|---|---|---|--|
| SEA/SH by project personnel (e.g., outreach teams, contractors) during aid distribution or field sessions | <ul style="list-style-type: none"> All CERP staff and contractors sign Codes of Conduct (with SEA/SH clauses) Mandatory induction on GBV ethics Information sessions for beneficiaries on SEA/SH rights and GRM access | <ul style="list-style-type: none"> % of project personnel trained and signed CoC # of SEA/SH briefings conducted # of outreach sessions where GRM materials were distributed | PIU under MES KR Contractors Local outreach teams |
| Low awareness of SEA/SH rights and support mechanisms among women and girls | <ul style="list-style-type: none"> Dissemination of visual materials (Kyrgyz/Russian) Use of local communication channels (aiyl okmotu, mosques, FAPs) SEA/SH component included in all community outreach | <ul style="list-style-type: none"> # of awareness sessions held # of women reached % of project areas with visible GBV information | PIU MoLSPM KR Local governments |
| Fear of retaliation or lack of confidentiality deters survivors from reporting | <ul style="list-style-type: none"> Anonymous and survivor-sensitive GRM GRM focal points trained in handling SEA/SH Referral protocol with crisis centers activated | <ul style="list-style-type: none"> # of GBV/SEA/SH complaints received and followed up GRM includes clear SEA/SH protocol # of trained focal points | PIU GRM focal point Crisis centers MoLSPM KR |
| SEA/SH or abuse by public officials (e.g., during aid targeting or distribution) | <ul style="list-style-type: none"> GBV awareness training for local officials Anti-coercion messages integrated in community materials Monitoring presence during distributions | <ul style="list-style-type: none"> # of joint trainings conducted # of reported cases involving officials % of distributions monitored for misconduct | PIU MoLSPM KR Ministry of Internal Affairs (MIA KR) LSG bodies |
| Tolerance of harmful traditional practices (e.g., early marriage, ala kachuu) | <ul style="list-style-type: none"> Awareness materials address ala kachuu and forced marriage Involvement of women leaders, elders, imams | <ul style="list-style-type: none"> # of sessions referencing early marriage / ala kachuu # of leaders engaged # of materials distributed on cultural GBV risks | PIU MoLSPM KR Religious leaders Local NGOs Ayil Okmotu |

| | | | |
|--|--|--|--|
| | <ul style="list-style-type: none">• Messages aligned with National Gender Strategy | | |
|--|--|--|--|

Annex 10. Incident Report Form

The following report form is to be completed by the PIU/PCU within 24 hours in the case of an incident/accident:

Table 21 Incident report form

| B1: Incident Details | | | |
|-------------------------------|--------------------|---|----------------------|
| Date of Incident: | Time: | Date Reported to PIU: | Date Reported to WB: |
| Reported to PIU by: | Reported to WB by: | Notification Type: Email/'phone call/media notice/other | |
| Full Name of Main Contractor: | | Full Name of Subcontractor: | |

| B2: Type of incident (please check all that apply) ¹ |
|---|
| Fatality <input type="checkbox"/> Lost Time Injury <input type="checkbox"/> Displacement Without Due Process <input type="checkbox"/> Child Labor <input type="checkbox"/> Acts of Violence/Protest <input type="checkbox"/> Disease Outbreaks <input type="checkbox"/> Forced Labor <input type="checkbox"/> Unexpected impacts on heritage resources <input type="checkbox"/> Unexpected impacts on biodiversity resources <input type="checkbox"/> Environmental pollution incident <input type="checkbox"/> Dam failure <input type="checkbox"/> Other <input type="checkbox"/> |
| See Annex for definitions |

| B3: Description/Narrative of Incident |
|--|
| <i>For example:</i> <ol style="list-style-type: none"> I. What is the incident? II. What were the conditions or circumstances under which the incident occurred (if known)? III. Are the basic facts of the incident clear and uncontested, or are there conflicting versions? What are those versions? IV. Is the incident still ongoing or is it contained? V. Have any relevant authorities been informed? |

| B4: Actions taken to contain the incident | | | |
|---|-------------------|---------------|--------|
| Short Description of Action | Responsible Party | Expected Date | Status |
| | | | |
| | | | |
| | | | |

For incidents involving a contractor:
 Have the works been suspended under Contract GCC8.9? Yes ; No ;
 Name of Contractor: _____

| B5: What support has been provided to affected people |
|---|
| |

The following report form will be completed by the PCU following investigations into an incident:

Table 22 Incident form to be completed after investigation

| C3a: Fatality/Lost time Injury information | | | | | | |
|--|-------------------|----------------------|---------------|-------------------|--------------------------|--------------------------|
| Cause of fatality/injury for worker or member of the public (please check all that apply): | | | | | | |
| 1. Caught in or between objects <input type="checkbox"/> 2. Struck by falling objects <input type="checkbox"/> 3. Stepping on, striking against, or struck by objects <input type="checkbox"/> | | | | | | |
| 4. Drowning <input type="checkbox"/> 5. Chemical, biochemical, material exposure <input type="checkbox"/> 6. Falls, trips, slips <input type="checkbox"/> 7. Fire & explosion <input type="checkbox"/> | | | | | | |
| 8. Electrocution <input type="checkbox"/> 9. Homicide <input type="checkbox"/> 10. Medical Issue <input type="checkbox"/> 11. Suicide <input type="checkbox"/> 12. Others <input type="checkbox"/> | | | | | | |
| Vehicle Traffic: 13. Project Vehicle Work Travel <input type="checkbox"/> 14. Non-project Vehicle Work Travel <input type="checkbox"/> 15. Project Vehicle Commuting <input type="checkbox"/> | | | | | | |
| 16. Non-project Vehicle Commuting <input type="checkbox"/> 17. Vehicle Traffic Accident (Members of Public Only) <input type="checkbox"/> | | | | | | |
| Name | Age/DOB | Date of Death/Injury | Gender | Nationality | Cause of Fatality/Injury | Worker (Employer)/Public |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| C3b: Financial Support/Compensation Types (To be fully described in Corrective Action Plan template) | | | | | | |
| 1. Contractor Direct <input type="checkbox"/> 2. Contractor Insurance <input type="checkbox"/> 3. Workman's Compensation/National Insurance <input type="checkbox"/> | | | | | | |
| 4. Court Determined Judicial Process <input type="checkbox"/> 5. Other <input type="checkbox"/> 6. No Compensation Required <input type="checkbox"/> | | | | | | |
| Name | Compensation Type | | Amount (US\$) | Responsible Party | | |
| | | | | | | |
| | | | | | | |
| C4: Supplementary Narrative | | | | | | |
| | | | | | | |

C1: Investigation Findings

For example:

- I. where and when the incident took place
- II. who was involved, and how many people/households were affected
- III. what happened and what conditions and actions influenced the incident
- IV. what were the expected working procedures and were they followed
- V. did the organization or arrangement of the work influence the incident
- VI. were there adequate training/competent persons for the job, and was necessary and suitable equipment available
- VII. what were the underlying causes; where there any absent risk control measures or any system failures

C2: Corrective Actions from the investigation to be implemented (To be fully described in Corrective Action Plan)

| Action | Responsible Party | Expected Date |
|--------|-------------------|---------------|
| | | |
| | | |
| | | |
| | | |

Table 25 Incident for cases related to SEA/SH

| B1: Incident Details | |
|--|---|
| Date of incident intake by the project/GM: Reported to project/GM by: <input type="checkbox"/> Survivor <input type="checkbox"/> Third party <input type="checkbox"/> Other: _____ Is a record of this incident in GM? Yes <input type="checkbox"/> No <input type="checkbox"/> | Date Reported to PIU: Reported to PIU by: <input type="checkbox"/> GM operator <input type="checkbox"/> Directly, by Survivor <input type="checkbox"/> Directly, by third party <input type="checkbox"/> Other: _____ |
| | Date Reported to WBG: Reported to WBG by: <input type="checkbox"/> PIU <input type="checkbox"/> Directly, by Survivor <input type="checkbox"/> Directly, by third party <input type="checkbox"/> Other: _____ |
| B2: Incident type (please check all that apply) See Appendix 1 for definitions | |
| Sexual exploitation <input type="checkbox"/> Sexual abuse <input type="checkbox"/> Sexual harassment <input type="checkbox"/> | |
| B3: Provide the following details from the GM record | |
| Age of survivor (if recorded in GM): Sex of survivor (if recorded in GM): Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/> Is the survivor employed by the project (as indicated by the survivor or complainant and reported in the GM)? Yes <input type="checkbox"/> No <input type="checkbox"/> | Have the national legislation or mandatory reporting requirements been followed? Yes <input type="checkbox"/> No <input type="checkbox"/> Was the survivor referred to service provision? ²⁹ Yes <input type="checkbox"/> No <input type="checkbox"/> Is the alleged perpetrator employed by the project (as indicated by the survivor or complainant and reported in the GM)? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| B4: Basis for further action | |
| a. Has the complainant provided informed consent to lodge a formal complaint? Yes <input type="checkbox"/> No <input type="checkbox"/> b. Does the employer have a suitable administrative process and capacity in place to investigate misconduct relating to SEA/SH in a survivor-centered way? Yes <input type="checkbox"/> No <input type="checkbox"/> | c. Has the survivor provided informed consent to be part of an investigation into misconduct? Yes <input type="checkbox"/> No <input type="checkbox"/> d. Has the complaint been filed anonymously or through a third party? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If the answer to any of these questions is no, has the GM assessed the risks and benefits of carrying out an investigation into the alleged misconduct, taking into account the survivor's safety and wellbeing? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Will an investigation into misconduct be undertaken in addition to an investigation into adequacy of project systems, processes or procedures? Yes <input type="checkbox"/> No <input type="checkbox"/> | |

Table 26 Incident report form after the investigation

| C1: Findings of the investigation | | |
|---|--|--------------------------------|
| Have sanctions against a perpetrator been recommended as part of an investigation into misconduct? Yes <input type="checkbox"/> No <input type="checkbox"/> | Has an investigation into adequacy of project systems, processes or procedures been undertaken? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| C2: Corrective actions to be implemented (To be fully described in Corrective Action Plan) | | |
| Short Description of Action (SEA/SH examples) | Responsible Party | Timeline for completion/Status |
| <i>Referral of Survivor to holistic care services</i> | | |
| <i>Undertake disciplinary investigation in accordance with GM timelines and confirmed process</i> | | |
| <i>Disciplinary actions, including sanctions, to be applied following misconduct investigation by Employer</i> | | |
| <i>Increased training on Codes of Conduct (CoC)</i> | | |
| <i>Audit of implementation of SEA/SH safety mitigation</i> | | |
| <i>Strengthened awareness training on project-related risks, CoC and how to report incidents for project-affected community</i> | | |
| <i>Training for project supervisors on the need to follow guidelines of behaviour in CoC and their supervisory responsibilities</i> | | |
| <i>Plan to improve coverage/quality of service provision</i> | | |
| <i>Any other system strengthening measures or corrections for system failures that are necessary</i> | | |
| C3: For incidents involving a Contractor: | | |
| Has the incident been referred to the DAAB? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |

Annex 11. Chance Find Procedure

To be implemented under the CERP Project during emergency activation

1. Purpose and Applicability

This procedure aims to protect cultural heritage and ensure compliance with the legislation of the Kyrgyz Republic and the World Bank’s Environmental and Social Standard 8 (ESS8). It is designed for immediate use by all CERP project actors — including contractors, suppliers, PIU staff under the Ministry of Emergency Situations, volunteers, and temporary workers — in case of accidental discovery of objects with potential cultural, archaeological, historical, or religious value.

2. What Qualifies as a Chance Find

A chance find is any unintentional discovery made during project activities (including delivery, excavation, installation of temporary infrastructure, etc.) of:

- archaeological objects, ceramics, stone or metal tools;
- human remains or mass graves;
- remnants of ancient structures, foundations, roads, or walls;
- religious items, symbols, engravings, commemorative plaques;
- any unusual objects clearly different from natural soil or rocks.

3. Step-by-Step Response

Procedure Step 1 – Immediate

Suspension of Work

- Responsible: Any person involved in the project who discovers the item (worker, driver, engineer, volunteer).
- Actions:
 - o Immediately stop all activities within a radius of at least 10–15 meters of the find.
 - o Do not touch, move, or attempt to remove the object.
 - o Secure the area to prevent further disturbance.

Step 2 – Notification

- Responsible: Site supervisor or person responsible for safeguard matters on site.
- Actions:
 - o Notify:
 - the designated safeguard specialist from the PIU (if available),
 - the regional CERP project coordinator or emergency operations center,
 - and — where possible — local cultural or municipal authorities.

Step 3 – Temporary Protection

- Responsible: Contractor, site coordinator, or volunteer team.
- Actions:

- o Install temporary barriers (tape, pallets, makeshift fencing).
- o Assign a person to monitor the area until authorities arrive.
- o Prevent any unauthorized access.

Step 4 – Documentation

- Responsible: Safeguard specialist from the PIU or the contractor.
- Actions:
 - o Complete the Chance Find Incident Form (see Attachment A).
 - o Take photographs from multiple angles.
 - o Record GPS coordinates.
 - o Prepare a short written description (what, where, when, who discovered it).

Step 5 – Notification of Authorities

- Responsible: Project coordinator or regional PIU representative.
- Actions:
 - o Within 24 hours, send details to:
 - the Ministry of Culture, Information, Sports and Youth Policy of the Kyrgyz Republic, or local cultural authorities, as appropriate.

Step 6 – Decision on Next Steps

- Responsible: In coordination with the authorized cultural heritage body.
- Possible actions:
 1. Allow resumption of work (if item has no significance),
 2. Temporarily secure the item for future investigation,
 3. Adjust work routes/locations (if item is significant),
 4. Transfer the object to a museum or archive (if safe and permitted).

Step 7 – Resumption of Activities

- Work may resume only after formal written or verbal clearance, duly logged in the site observation record.

4. Implementation Principles

- This procedure shall be integrated into CERP’s overall emergency response system.
- Chance Find orientation shall be included in mandatory safeguard briefings for all contractors and volunteers.
- All supporting materials (leaflet, contact list, incident form) shall be kept in the on-site mobile documentation kit.

5. Sample Contact Information

| Authority | Contact | Notes |
|-----------|---------|-------|
|-----------|---------|-------|

| | | |
|--|--------------------|--|
| Ministry of Culture, Information, Sports and Youth Policy of the Kyrgyz Republic | [to be determined] | Archaeology/Cultural Heritage Specialist |
| Local Administration (Akimat) | [to be determined] | Department of Culture or Architecture |
| PIU Safeguard Specialist | [to be determined] | Appointed during emergency activation |

Attachment A. Chance Find Incident Form (Sample)

Form No. 1 – “Chance Find”

| Field | Content |
|---------------------------------|--|
| Date and Time | |
| Name of Reporter | |
| Location (GPS) | |
| Brief Description | |
| Photos Attached | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Urgency Level | <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High |
| Immediate Actions Taken | |
| Signature of Responsible Person | |

Annex 12. Report on Stakeholder Consultations

Report on Stakeholder Consultations (22 August 2025)

1. General Information

- Date: 22 August 2025
- Time: 15:00 – 16:30
- Venue: Ministry of Emergency Situations of the Kyrgyz Republic, 101/1 Jumabek Street, Bishkek
- Format: Presentation of the draft ESMP, discussion, and Q&A session
- Organizer: Project Implementation Unit (PIU) under the Ministry of Emergency Situations (MoES)

2. Objectives of the Consultation

- Present the draft Environmental and Social Management Plan (ESMP) under the CERP to key stakeholders.
- Introduce the scope of the project, the Positive List of activities, and operational procedures.
- Familiarize participants with the World Bank's Environmental and Social Standards (ESS) applicable in the Kyrgyz Republic.
- Discuss potential environmental and social risks and mitigation approaches.
- Collect initial feedback from relevant ministries, agencies, and MoES structural divisions.

3. Consultation

Process Opening

remarks:

Delivered by Ms. Jyldyz Toktorbaeva, Director of the PIU under MoES, who emphasized the objectives of the CERP, the importance of preventive readiness, and the role of MoES in coordinating emergency response.

Presentation:

Ms. Nazira Abdylasova, PIU Safeguard Specialist, presented the draft ESMP, highlighting:

- CERP components and Positive List of activities and expenditures;
- Overview of 10 Environmental and Social Standards (ESS), focusing on those applicable in the Kyrgyz Republic;
- Preliminary assessment of potential environmental and social risks;
- Mitigation and management tools (screening, updated ESMP, risk mitigation and monitoring plan);
- Grievance Redress Mechanism (GRM), Labor Management Procedures (LMP), and Code of Conduct.

Discussion:

Participants actively asked questions regarding financing mechanisms, project implementation timelines, and lessons from past emergency response operations.

4. Q&A Session

- Q1: *Is there an estimate for emergency expenses, and has a similar project been implemented before?*

A: The mechanism is new. Expenditure amounts will depend on the emergency type. Up to 10% of the undisbursed World Bank project portfolio may be reallocated. Similar mechanisms were applied during the COVID-19 pandemic (\$9 million reallocated to MoH).

- Q2: *What is the project implementation period?*

A: The project will last for six years, with the possibility of multiple activations. Documents will be reviewed and updated annually.

- Q3: *Has Kyrgyzstan had similar experience before?*

A: Yes, during COVID-19 simplified procurement and reallocation procedures were applied, demonstrating feasibility of the CERP mechanism.

5. Participants

The consultation was attended by representatives of:

- Central ministries and agencies of the Kyrgyz Republic;
- Structural divisions of MoES;
- Technical specialists in environmental and social management;
- International development partners (as observers).

The full list of participants is provided in Attachment D-1 (*List of Participants*).

6. Outcomes

- Information on the draft ESMP and related safeguard documents (SEP, LMP, GRM, Code of Conduct) was received and accepted by participants.
- The Positive List was noted as a key measure to limit environmental and social risks.
- The draft ESMP was considered acceptable for further processing and financing under the CERP.
- Participants expressed overall support for the project's objectives and wished success in its implementation.

7. Supporting Documents

- Attachment 1: List of Participants (22 August 2025)
- Attachment 2: Official Minutes of Consultation Meeting (signed protocol)
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Attachment 1: List of Participants (22 August 2025)

Список участников (офф-лайн)

Общественное обсуждение Плана управления окружающей и социальной средой Проекта экстренного реагирования на чрезвычайные ситуации

Дата: 22.08.2025 г.

Время: 15.00

Место: здание МЧС КР

Заинтересованные стороны:

| № | Организация | ФИО | Должность | Контактные данные | Подпись |
|----|--|------------------|----------------------------------|-------------------|---------|
| 1 | Министерство транспорта | Султанов Р.С. | вед. спец. СС и МР | 0553 | |
| 2 | Аппаратный состав | Самбагулов Д.А. | 21. спец | 0700 | |
| 3 | Мин. водных рес. РК | Иммендик у. К. | вед. спец | 0700 | |
| 4 | Мин. экологии | Зинилов Г.С. | вед. спец | 0702 | |
| 5 | Рем. по дел. Бюджетного | Турраббеков Т.Ш. | спец. | 0704 | |
| 6 | МУФ | Иманов В. | инженер | 0703 | |
| 7 | ГИССИП при Минстрой | Абдулгаева А.З. | вед. специалист | 0507 | |
| 8 | Мин. труда, соц. обеспечения и миграции | Нурмадилов К.Т. | вед. спец. | 0550 | |
| 9 | ОАО "НЭО Казпожар" и "НЭО Казавтомобиль" | Байтөбеков Д.Д. | наст. первого орг. | 0550 | |
| 10 | Минкультура | Масманов А.К. | зав. сектор | 0502 | |
| 11 | МЧС КР | Ахмеджанов С.Ш. | вед. спец. | 0555 | |
| 12 | КЧСА | Чингизов у. Дос | вед. спец. | 0557 | |
| 13 | ОРП при МЧС КР | Абдураманов И.К. | координатор | 0553 | |
| 14 | ОРП при МЧС КР | Кожомуров А.Э. | специалист по мерам безопасности | 0550 | |
| 15 | УПЗ МЧС КР | Шарипов В.А. | НЧО | 0550 | |
| 16 | ОО УПЗ МЧС КР | Жаппиев И.П. | отдел. оп. оо | 0708 | |
| 17 | | | | | |
| 18 | | | | | |
| 19 | | | | | |

Attachment 2: Official Minutes of Consultation Meeting (signed protocol)

Протокол
общественного обсуждения Плана управления окружающей и социальной
средой проекта Всемирного Банка «Экстренного реагирования на
чрезвычайные ситуации»

Дата: 22.08.2025 года

Время: 15.00-16.30

Место: г. Бишкек, ул. Жумабека 101/1, здание МЧС КР

Повестка дня:

1. Информация о проекте
2. Презентация проекта ПУОСС
3. Сессия «вопросы-ответы»

Докладчики:

Токторбаева Ж. А. – директор ОРП МЧС КР

Абдыласова Н. – специалист по мерам безопасности ОРП при МЧС

С приветственным словом выступила директор ОРП МЧС КР Токторбаева Жылдыз Айтбековна. В своей речи директор рассказал о работе ОРП МЧС КР, о реализуемых ОРП проектах Всемирного Банка, о достижениях, рассказала предысторию нового проекта, о проведенной работе по согласованию целей и задач намечаемого проекта с заинтересованными сторонами, визитов миссии Всемирного Банка и их официальных встреч, о проведенных встречах в государственных органах власти, научных организациях, с населением, местных органах власти, международных организациях развития и др.

Также кратко рассказала о принципах, которыми придерживались вовлеченные в процесс разработки проекта специалисты при выборе «Положительного списка товаров, услуг, работ и операционных расходов» и попросила озвучить все пожелания и возможные замечания к проекту документа.

Далее слово было передано специалисту по мерам безопасности Абдыласовой Назире.

Абдыласова Н. представилась и начала презентацию ПУОСС, в котором рассказала о компонентах проекта, подробно остановилась на раскрытии информации, касающееся новых 10 экологических и социальных стандартов ВБ, а именно подробно остановилась на 8 из них, применимых в КР.

Далее Абдыласова перешла на освещение прогнозов потенциальных экологических рисков, связанных с возможными ЧС. Сложность прогнозирования на этапе разработке ПУОСС является неопределенность возможных ЧС, ее масштабов, локации и ущерба.

Именно из-за отсутствия четкого прогноза экологических и социальных воздействий проекта была предложены прогнозные значения влияния проекта исходя из «Положительного списка».

При этом в зависимости от возможного ЧС ПУОСС будет корректироваться специалистом по мерам безопасности, которого ОРП наймут по упрощенной системе из заранее подготовленного списка отобранных специалистов.

Далее Абдыласова рассказала о применимых инструментах по исключению рисков, их минимизации или смягчения – это эколого-социальные скрининги и уточненный ПУОСС с планом мероприятий по смягчению рисков и планом мониторинга.

Абдыласова также уделила внимание Механизму рассмотрения жалоб, ПУТР, ПВЗС, Кодексу поведения.

После презентации участники перешли к части «вопросы-ответы».

Участники активно участвовали и задавали вопросы относительно проектных работ. Специалисты ОРП постарались ответить на все вопросы.

Общественное обсуждение прошло с участием представителей ключевых министерств и представителей структурных подразделений МЧС. Общее количество участников - ___ чел.

Общественное обсуждение прошло в доброжелательной атмосфере. В конце обсуждения все участники выразили огромную благодарность Проекту, с пожеланием удачи в реализации проекта, а также вклад в решении вопросов по устранению опасных участков на местах.

В конце встречи специалисты поделились контактами, по которым можно задать вопросы или направить обращения относительно проводимых работ: 0312 32-38-69 или по электронной почте: erik.mes.kg@gmail.com.

По итогам обсуждения решили:

1. Принять к сведению представленную информацию.
2. Представленный ПОМ, ПУОСС, включая ПВЗС считать приемлемым для финансирования проекта “Экстренного реагирования на чрезвычайные ситуации”

Председатель общественного обсуждения



Ж.Токторбаева

Секретарь совещания



Н.Абдыласова

**Minutes of
the public discussion of the Environmental and Social Management Plan of the World
Bank's Contingent Emergency Response Project**

Date: Aug 22,
2025

Time: 15.00-16.30

Venue: Bishkek, Jumabek st. 101/1, MoES KR building

Agenda:

1. Project information
2. ESMP project presentation
3. Question and answer session

Speakers:

Toktorbaeva Zh. A. – Director of the PIU MoES KR

Abdylasova N. – Safeguard specialist of the PIU MoES KR

The director of the PIU MES KR, Zhyldyz Aitbekovna Toktorbaeva, delivered a welcoming speech. In her speech, the director spoke about the work of the PIU MES KR, the World Bank projects being implemented by the PIU, its achievements, the background to the new project, the work done to agree on the goals and objectives of the planned project with stakeholders, the visits of the World Bank mission and their official meetings, the meetings held with government authorities, scientific organizations, the population, local authorities, international development organizations, etc.

She also briefly described the principles followed by the specialists involved in the project development process when selecting the “Positive List of Goods, Services, Works, and Operational Expenses” and asked for any wishes and possible comments on the draft document.

Next, the word was given to security specialist Nazira Abdylasova.

Abdylasova N. introduced herself and began her presentation of the ESMP, in which she described the components of the project and focused in detail on the disclosure of information concerning the 10 new environmental and social standards of the WB, specifically 8 of them that are applicable in KR.

Abdylasova then moved on to discussing the forecasts of potential environmental risks associated with possible emergency situations. The difficulty of forecasting at the ESMP development stage is the uncertainty of possible emergency situations, their scale, location, and damage.

It was precisely because of the lack of a clear forecast of the environmental and social impacts of the project that the forecast values of the project's impact were proposed based on the ‘Positive List.’

At the same time, depending on the possible emergency situation, the ESMP will be adjusted by a safety specialist, who will be hired by the PIU under a simplified system from a prearranged list of selected specialists.

Abdylasova then spoke about the applicable tools for eliminating, minimizing, or mitigating risks, namely environmental and social screenings and a refined ESMP with a risk mitigation action plan and a monitoring plan.

Abdylasova also focused on the GRM , LMP, SEP, and the Code of Conduct.

After the presentation, the participants moved on to the “questions and answers” section.

The participants actively participated and asked questions about the project work. The PIU specialists tried to answer all the questions.

The public discussion was attended by representatives of key ministries and representatives of structural divisions of the MoES. Total number of participants: _people.

The public discussion took place in a friendly atmosphere. At the end of the discussion, all participants expressed their gratitude to the Project, wishing it success in its implementation and in its contribution to resolving issues related to the elimination of hazardous areas in the field.

At the end of the meeting, the experts shared their contact details for questions or comments regarding the work being carried out: 0312 32-38-69 or by email: erik.mes.kg@gmail.com.

Following the discussion, it was decided:

1. To take note of the information presented.
2. To consider the POM, ESMP, including SEP, presented as acceptable for financing the **Contingent emergency response project**

Chair of the public discussion:

Zh. Toktorbaeva

Secretary of the meeting:

N. Abdylasova

Attachment 3: Summary of Q&A session

Question and Answer Session

Question:

Do you have an estimate monitoring of emergency expenses? Where and in what amount are the funds going? Have similar projects been implemented before?

Answer:

At the moment, this mechanism is new to both us and the World Bank. We are relying on the country's existing experience in responding to emergencies.

Each emergency situation has its own characteristics. For example, in one case, it may be necessary to restore engineering networks, while in another, medical assistance may be required. In some cases, bridges need to be built, in others, power lines need to be restored or the population needs to be provided with life support.

Thus, the areas and amounts of expenditure will be determined depending on the type of emergency situation and the needs of the relevant services.

If the CERP is activated, the Government of KR will be able to use up to 10% of the total portfolio of WB projects in KR that have not been used at the time of activation. The specific projects to be included in the list will be discussed and determined by the MoF KR and the WB.

Question:

What is the project implementation period?

Answer:

The project will last for six years, during which the Government of the KR may activate it several several times if necessary. All project documents will be reviewed annually and updated as necessary.

Question:

Have you had similar experience before?

Answer:

Yes, we had similar experience during the COVID-19 pandemic. At that time, US\$9 million was reallocated from the current PIU project to the Ministry of Health of KR. In emergency situations, the World Bank applies simplified mechanisms, including direct procurement. These procedures have already been tested during the pandemic.

Attachment 4: Photos





Attachment 5: Public disclosure notices of the consultation on the official MoES website

Details of the consultation were also disclosed on the official MoES website:

<https://www.mchs.gov.kg/ky/news/krizistik-kyrdaaldarga-dayardyk-koruu-dolbooru-zharandyk-korgonuu-kyzmattary-tarabynan-koldoo-tapty/>

<https://www.mchs.gov.kg/ru/news/mchs-kr-vynosit-na-obshestvennoe-obsuzhdenie-pervonachalny-draft-proekta-ekstrennogo-reagirovaniya-na-chrezvychainye-situacii>

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