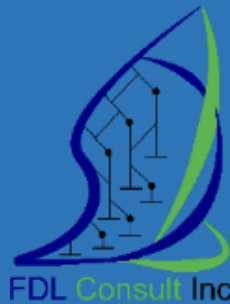


Economic Planning Division/Ministry of Finance, Economic Planning and Information Technology

Environmental and Social Management Plan Byera Clinic

FDL Consult Inc



MAY 2025

Project Information

Assignment Title & Location:	Consultancy Services for the Design and Supervision of Selected Facilities to be Upgraded to SMART Facilities, St. Vincent and the Grenadines	
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	Approved by:	Gilbert Fontenard (Project Director, FDL)
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	Submitted to:	Recardo Frederick Director of Economic Planning Ministry of Finance, Economic Planning, and Information Technology Email: cenplan@svgcpd.com

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Abbreviations

Acronym	Meaning
CBO	Community Based Organisation
CO₂	Carbon Dioxide
CWSA	Central Water and Sewerage Authority
ESHS	Environmental, Social, Health and Safety
ESIA	Environment and Social Impact Assessment
ESMP	Environment and Social Management Plan
ESS/s	Environmental and Social Standard/Standards
EU	European Union
GoSVG	Government of St. Vincent and the Grenadines
GRC	Grievance Redress Committee
GRM	Grievance Redress Mechanism
ILO	International Labour Organisation
MOHWE	Ministry of Health, Wellness and the Environment
MTW	Ministry of Transport and Works
NEMO	National Emergency Management Organisation
NGO	Non-government Organisation
OHS	Occupational Health and Safety
OP	Operational Policy
PPA	Project Affected Persons
PPE	Personal Protective Equipment
PPU	Physical Planning Unit
PSIPMU	Public Sector Investment Project Monitoring Unit
PWD	People with Disability
SVG/VCT	St. Vincent and the Grenadines
SWMU	Solid Waste Management Unit
ToR	Terms of Reference
WB	World Bank

1 INTRODUCTION

St. Vincent and the Grenadines (SVG) has received funds from the World Bank to support the Organisation of East Caribbean States (OECS) Regional Health Project (ORHP –SVG). Within the ambit of the ORHP-SVG Project, the Byera Health Centre is one of multiple health facilities targeted to be upgraded, to improve its resilience to climate change and extreme weather conditions as well as become universally accessible to all users, including persons with disabilities. The project is being implemented by the Public Sector Investment Project Monitoring Unit (PSIPMU) within the Ministry of Finance, Economic Planning, and Information Technology with technical support from the Ministry of Health, Wellness, and the Environment (MOHWE) to improve the country's preparedness in dealing with Public Health Emergencies.

A critical aspect of strengthening national emergency management and response capacities is the ability to respond swiftly and effectively to outbreaks, threats, manmade and natural disasters exacerbated by climate change. In this regard the government desires to strengthen the health facilities to reduce the country's vulnerability to natural disasters while reducing its health carbon footprint by ensuring that the health facilities are 'SMART' – more resilient, safe, and 'GREENER'.

FDL Consult Inc. has been awarded a consultancy services contract for the design and supervision of the Byera Health Centre upgrading works to meet the SMART (A70) standard as defined by PAHO's SMART Health Facility guidelines and SMART Hospital Toolkit. FDL's services [Terms of Reference- 3. Scope of Work, Phase 1 f)], include the development of an Environmental and Social Management Plan (ESMP) for the project.

1.1 Objectives of the ESMP

This Environmental and Social Management Plan (ESMP) outlines the agreed measures to be taken during project implementation, the actions required for implementation, the allocation of institutional responsibilities, cost and implementation schedule showing links with the overall project implementation plan as well as the associated, performance monitoring and reporting procedures. The ESMP is intended to:

1. Align the project with applicable national environmental and social legal requirements and the World Bank's Safeguards Requirement.
2. Outline the mitigating/enhancing, monitoring, consultative and institutional measures required to prevent, minimize, mitigate, or compensate for adverse environmental and social impacts, or to enhance the project's beneficial impacts.
3. Address capacity building requirements to strengthen occupational health and safety (OHS) requirements where necessary.
4. Provide guidance on how to manage environmental, social, health and safety (ESHS) risks in all phases of the project cycle.
5. Ensure that construction activities comply with legal requirements and the WB's Safeguard Policy OP 4.01.
6. Ensure the safety of persons living and working in proximity to the project area.

1.2 Project Description

1.2.1 Byera Health Centre - Location

Byera Health Centre is located on the north-eastern side of the island of St. Vincent in the Parish of Charlotte. This health clinic is approximately 300m from the sea and about 150m from the main windward highway to the east. The clinic has a wall enclosure that separates it from the cemetery to the east, access road to the north and community housing on the west (**Figure 1**).

1.2.2 Building and Site Condition

The existing building is aged and its poor orientation limits natural lighting. In addition to the restrictive space on the site, the building's proximity to the sea has catalysed extensive corrosion of window frames, ironmongery, and roof sheeting among other components. Major defects exist in the structure, windows, roof, ceiling, floors, and internal and external walls. Other support infrastructure and services such as drainage, plumbing, HVAC, and the electrical system are either inadequate, dated, dysfunctional and damaged to varying degrees, while telecommunication and fire protection are non-existent.

Additionally, the spaces within the building fall well below the minimum room requirements for healthcare facilities. The single entry/exit route accessed by motorists and pedestrians does not conform to the NFPA standards and poses life safety issues during an emergency.

Figure 1: Byera Health Centre- Site Layout



1.2.3 Proposed Project Activities

To meet the SMART A70 standard as defined by PAHO and considering the significant defects and limitations within the structure and the site, a new structure is proposed. The main activities comprise:

1. demolition of the existing building, site clearance, and site preparation works;
2. construction of a new building including the roof and building finishes on the existing site: a two-storey structure comprising a reinforced concrete beam and column framing system, enclosed with masonry block walls, hurricane resistant windows and hospital grade doors along with improved features in consideration for user health and safety, environmental sustainability, energy conservation, structural resilience, inclusive user accessibility, water resource management

including wastewater and rainwater harvesting, space layout and optimisation to align with healthcare facility and SMARTING standards;

3. external works including pavement, fencing, walkways, ramps, etcetera;
4. new building services- mechanical, electrical, plumbing, HVAC, fire prevention and telecommunication.

2 LEGAL AND REGULATORY FRAMEWORK

Development projects in St. Vincent and the Grenadines fall under the purview of the Project Unit in the Ministry of Finance, Economic Planning, and Information Technology which has safeguards and fiduciary responsibilities. Other Ministries of government have varying roles and responsibilities guided by the laws of St. Vincent and the Grenadines. This section of the report presents a synopsis of the roles and responsibilities of ministries relevant to this project and the laws that guide the execution of their duties. By virtue of the financing provided by the World Bank for this project, its Operational Safeguards Policy OP 4.01 is triggered and, therefore, applicable to this ESMP.

2.1 National Legislation

The laws of St. Vincent and the Grenadines that are relevant to this project are distilled in **Table 1**.

Table 1: National Legislation

Legislation	Description and Relevance
Town and Country Planning Act, 1992	Guides planning in St. Vincent and the Grenadines. Under this Act, the Physical Planning Unit (PPU) has the legal authority for environmental management in general, including the evaluation of the need for and level of EIA requirements. The PPU is also responsible for the orderly development of lands.
Land and Surveyors Act, 1973	Mandates that each parcel or piece of land for which a survey plan has been prepared be registered with the Department of Lands and Surveys. The Act authorises the Chief Surveyor to manage the rental and sale of all state/crown lands and to prepare and publish official land maps of SVG.
Central Water and Sewerage Act, 1978, amended in 1992	Makes provision for the conservation, control, apportionment, and use of water resources of SVG.

Legislation	Description and Relevance
Waste Management Act, 2000	Established the Solid Waste Management Unit (SWMU) in November 1999, which is responsible for the management, including collection and disposal, of solid waste in SVG.
Public Health Act, 1977	Regulates environmental health issues, including monitoring of communicable diseases in SVG and provides remedies for same.
Public Health (Amendment) Act, 2020	Revises and strengthens the powers of health officers regarding communicable diseases and remedies to be enacted in the case of non-compliance.
Litter Act, 1991	Makes provisions for the control of indiscriminate disposal of waste
Wages Councils Act, 1953	Provides for the establishment of wages councils and the making of wages council orders. Wages regulations address: minimum wage, hours of work, overtime wages, vacation and sick leave, maternity leave, health, and safety.
Accidents and Occupational Diseases (Notification) Act, 1952	Places a legal obligation on the employer to inform the Labour Commissioner in writing on the prescribed form, any accident involving any worker that arises out of and in the course of employment and which causes loss of life or serious bodily injury or disables a worker. The employer is also obligated to inform the Labour Commissioner of any occupational disease which he/she reasonably believes or suspects to have occurred among workers employed by him. The Act also provides protection for the employee against arbitrary dismissal or refusal to hire worker based on race, colour, sex, marital status, pregnancy, religion, political opinion, nationality, or social origin.
Protection of Employment Act, 2003	Provides for the maintenance and promotion of good employment relationships between employers and employees. It also addresses matters of severance and settlement of disputes.
Equal Pay Act, 1994	Provides for the removal and prevention of discrimination, based on the sex of the employee, in the rates of remuneration for males and females in paid employment, and for all incidental matters.
Employment of Women, Young Persons and Children Act, 1935	Regulates the employment of women, young persons, and children in industrial undertakings and on ships in accordance with the following International Labor Organization (ILO) Conventions: Minimum Age (Industry) Convention (Revised) 1937; Night Work of Young Persons (Industry) Convention 1919; and the Night Work (Women) Convention 194.

Legislation	Description and Relevance
The Employers and Servants Act, 1937	Requires wages to be paid by the employer to the worker only in money and the payment of wages is to be made at intervals not exceeding fourteen days.
National Insurance Act, 1986	Regulates employees' contributions to the National Insurance Services (NIS) for workers' benefits.
Wages Regulations (Industrial Workers) Order, 2008	Sets out the minimum wage to be paid to a security worker and specifies the hours of work, overtime, vacation leave, sick leave and maternity leave in the Schedule to the Order. Repeals the Wages Regulation (Industrial Workers) Order, 2003.
Wages Regulation (Workers in Offices of Professional Order, 2008	Sets out the minimum wage to be paid to a worker in the office of a professional (doctors, lawyers, accountants, architects, contractors, engineers, tax consultants, data entry firms, shipping agencies, custom brokers, insurance companies, secretarial services etc.) and specifies the hours of work, overtime, vacation leave, sick leave, and maternity leave in the Schedule to the Order. Repeals the Wages Regulation (Workers in Office of Professionals) Order, 2003.

2.2 World Bank Safeguard Policy OP4.01

This Project is funded by the World Bank (WB) and implemented by the Public Sector Investment Project Monitoring Unit (PSIPMU) within the Ministry of Finance, Economic Planning, and Information Technology, with technical support from the Ministry of Health, Wellness, and the Environment (MOHWE).

The WB's Safeguards Policies are the mechanisms for addressing environmental and social issues in project design, implementation and operation, and they provide a framework for consultation with communities and for public disclosure. These policies aim to ensure that the people and the environment are protected from potential adverse impacts. This is done through policies that identify, avoid, and minimize harm to people and the environment. These policies require the borrowing governments to address certain environmental and social risks in order to receive World Bank support for investment projects. Examples of these requirements include conducting environmental and social impact assessments, consulting with affected communities about potential project impacts, and restoring the livelihoods of displaced people. The safeguard Policy triggered by this sub-project is OP 4.01 – Environmental Assessment.

2.3 International Treaties and Conventions

St. Vincent and the Grenadines is signatory to and participates in several international conventions and treaties designed to formalise international cooperation on regional and global social protection strategies and protection of the environment. The conventions and treaties most relevant to this project are presented in **Table 2**.

Table 2: International Treaties and Conventions

Treaty/Convention	Purpose/Relevance
Convention concerning the Discrimination in Respect of Employment and Occupation	To declare and pursue national policy designed to promote, by methods appropriate to national conditions and practice, equality of opportunity and treatment in respect of employment and occupation, with a view to eliminating any discrimination in respect thereof.
Convention of the Elimination of All Forms of Discrimination against Women	To end discrimination against women in all areas of life. It defines what constitutes discrimination against women and sets up an agenda for national action to end such discrimination.
Convention on the Rights of Persons with Disabilities	To promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to provide respect for their inherent dignity.
United Nations Convention on Biological Diversity (UNCBD)	Conceived as a practical tool for translating the principles of Agenda 21 into reality, the convention recognizes that biodiversity is more than plants, animals and micro-organisms and their ecosystems – it is also about people and our need for food security, medicine, clean air and water, shelter, and a clean healthy environment in which to live.
United Nations Framework Convention on Climate Change (UNFCCC)	The Convention seeks to stabilize greenhouse gas concentrations "at a level that would prevent dangerous anthropogenic (human induced) interference with the climate system. Such a level should be achieved within a time-frame sufficient to allow ecosystems to adapt naturally to climate change, to ensure that food production is not threatened, and to enable economic development to proceed in a sustainable manner."
United Nations Convention to Combat Desertification (UNCCD)	A Convention to combat desertification and mitigate the effects of drought through national action programs that incorporate long-term strategies supported by international cooperation and partnership arrangements.

2.4 Roles and Responsibilities (Institutional Frameworks)

Built-in redundancy and misunderstanding of legal mandate may appear as overlapping of responsibilities in the execution of environmental duties in St. Vincent and the Grenadines. For this reason and to facilitate seamless execution of this project the following roles and responsibilities are delineated.

The **Ministry of Finance, Economic Planning, and Information Technology** through its Public Sector Investment Project Monitoring Unit (PSIPMU) is responsible for project implementation, specifically safeguards and fiduciary responsibilities.

The Town and Country Planning Act # 45 of 1992 makes the **Physical Planning Department** of the Ministry of Housing, Informal Human Settlement, Lands and Surveys responsible for the orderly development of lands including subdivision and the construction of infrastructure. The Physical Planning Board will review the planning applications including engineering drawings and environmental and social impact assessments (ESIA) and authorise for the execution of the project if the plan is approved.

The Physical Planning Unit (**PPU**) also has a monitoring role, which includes conducting site visits to ensure compliance with the approved development plan.

The **Ministry of Health, Wellness and Environment** (MOHWE) has the overall mandate for the management of public health issues in St. Vincent and the Grenadines including monitoring communicable diseases. Its role in this project also includes providing technical support to the PSIPMU, on matters not limited to the internal space layout and schedule of accommodation in the new facility and temporary relocation of the clinic's services during construction. MoHWE will also be involved in monitoring along with the PPU to ensure compliance with emergency requirements as per the national emergency plan and will guide the environmental, social, health and safety (ESHS) officer/s designated by the Contractor, including responding to reported or suspected matters of public health risks.

The **Ministry of Agriculture, Forestry, Fisheries, Rural Transformation, Industry and Labour** is responsible for the formulation, articulation and implementation of all policies and plans relating to agriculture, forestry, fisheries, rural transformation, industry, and labour.

Ministry of Transport, Works, Urban Development and Local Government (MTW) is the lead agency within the GoSVG for the planning, construction, and operation of all government infrastructure projects. Maintenance of road infrastructure is the responsibility of the **Roads, Buildings, and General Services Authority (BRAGSA)**.

Land and Surveys (and Physical Planning) is responsible for the approval of plans and preparation of GIS hazard maps as well as regulation of land tenure.

The **National Emergency Management Organization (NEMO)** is a statutory agency with responsibility for “coordinating disaster management in the state”. The National Emergency Council, the National Emergency Executive Committee and District Disaster Management Committees are the key organs of NEMO. In the event of major accidents like landslides or flooding in the project area, NEMO will be a key response agency.

The **Central Water and Sewerage Authority (CWSA)** is the statutory agency responsible for the production and distribution of potable water in Saint Vincent and for waste management in SVG, and advises on the improvement, preservation, conservation, and utilisation of the country’s water resources.

3 POTENTIAL ENVIRONMENTAL AND SOCIAL IMPACTS

3.1 Impact Rating

In evaluating the impacts, consideration is given to the magnitude of the impact, its duration and receptor sensitivity (defined in **Table 3**) and a rating of **low**, **moderate** or **high** is assigned. Impacts that last for periods less than one month are considered **short term**, impacts that last for the duration of the project (less than one year) are considered **medium term** and any impact that persists beyond the construction phase is considered **long term**.

Table 3: Impact Rating Matrix

		Impact Magnitude (degree of change)				
		No change	Negligible	Minor	Moderate	Major
Receptor Sensitivity Value	High	Neutral	Low	Moderate	Moderate or High	High
	Moderate	Neutral	Neutral to Low	Low to Moderate	Moderate	Moderate to High
	Low	Neutral	Neutral	Low	Low to Moderate	Moderate
	Negligible	Neutral	Neutral	Neutral to Low	Neutral to Low	Low

3.2 Potential Physical Impacts

The building under consideration is located in the village of Byera on the north-eastern side of St. Vincent. Based on the classification of the volcanic hazards, the project area is in Zone 3, an area of moderate hazard. It means in the event of a volcanic eruption this clinic is less likely to be affected than the Georgetown Hospital and may, therefore, be required to take some of the load from the Georgetown Hospital.

The proposed work programme/project activities include demolition of the existing structure and replacement with a new two-storey reinforced concrete structure on the existing site, installation of new electrical, HVAC, plumbing (for wastewater management, potable water and rainwater harvesting) systems, reconstructing the existing perimeter fence and the installation of fire safety, security and telecommunication systems.

On examination of the site location vis-à-vis the proposed work programme, the environmental impacts identified below and summarised in **Table 4** are likely to occur.

1. Demolition works will produce a variety of **waste** including wood, glass, tile and concrete fragments of various sizes, **dust, and noise**.
2. Demolition and site clearance could generate biomedical waste as some equipment, tools and expired or exposed chemicals may need to be discarded.
3. Excavation works have similar effects to demolition producing **dust, noise, and loose topsoil/spoil as well as the inadvertent damage to archeological or historical resources**.
4. **Traffic impacts** may be manifested as **degradation of the surrounding road infrastructure and traffic delays**. The clinic is adjacent to a community road that leads to farmlands in the interior of the island. This community road abuts the main Windward Highway about 150 m from the project site. These roads are in very good condition having been constructed less than ten years ago but asphalt roads without proper lateral reinforcement breaks easily under pressure; the breaking is accompanied by **dust and smoke/exhaust fumes**.
5. The anticipated concrete works could produce **dust and consume significant quantities of water** for mixing of concrete, washing of tools and machinery and possibly for mitigation of dust.
6. Because the perimeter wall abuts the community access road, demolition of the wall and the movement of heavy equipment to the project site could result in **temporary road closure** with its attending inconveniences.

Table 4: Potential Physical Impacts

Project Activity	Impact	Description and Consequence of Impact	Level of Impact	Duration
Demolition works	<ul style="list-style-type: none"> ■ Waste generation ■ Air pollution ■ Noise 	Breaking walls and floor, removing windows and doors, repairing perimeter fence will generate copious amounts of waste, dust and	Moderate	Short term

Project Activity	Impact	Description and Consequence of Impact	Level of Impact	Duration
		noise. Waste disposal must meet national standards.		
Excavation for new structure, septic systems and appropriately sized drains and footing for fencing walls	<ul style="list-style-type: none"> Dust Noise Waste generation Occupational health and safety (OHS) challenges Possible /archeological historic artifacts 	Excavation works for the septic tank will be significant in relation to the overall project. If not properly contained it may be carried away by storm water causing sedimentation in the street or the sea. There also may be possibilities of discovering historic artifacts	Moderate	Short term
Sourcing aggregate and building materials	<ul style="list-style-type: none"> Erosion Sedimentation of stream Dust Noise Increased traffic OHS challenges 	Quarrying has significant erosion potential and situations that can result in OHS challenges.	Major	Medium term
Transporting construction material	<ul style="list-style-type: none"> Greenhouse gas (CO₂) production. Traffic increase Damage to road infrastructure Noise Dust 	Trucking from outside of the project area would require a traffic management plan to reduce or avoid traffic impact especially crossing school zones.	Moderate to Major	Medium term
Mixing Cement	<ul style="list-style-type: none"> Dust Water consumption 	Concrete for the floor, walls, and parking area likely come from a batching plant; location unknown at this time. The location will determine the impact.	Low to Moderate	Short term
Transporting construction material and, waste and demolition and construction of perimeter fence.	<ul style="list-style-type: none"> Disruption to community traffic and farmers moving inputs and produce to and from their farms. 	Traffic disruption hinders normal flow of traffic and including the movement of farmers and farm produce.	The traffic disruption will have a negative impact. Impact rated as low	Medium term

3.3 Potential Social Impacts

The school community, community residents, farmers, workers, and visitors to the area may be impacted by the project activities. These social impacts are captured in the following paragraphs and in **Table 5**.

The proposed project activities made it necessary to relocated to a temporary location in the same community. Vehicular and pedestrian traffic may experience some disruption due to demolition works and/or construction-related traffic.

During the construction phase, homes, businesses, and institutions in proximity to the clinic would be exposed to **health and safety impact** including noise, dust, and increased waste generation. Project employees may also experience **occupational health safety impacts** due to inadequate and/or improper use of personal protective equipment (PPE), mishandling of equipment, unsafe working conditions, continuous exposure to high levels of noise, fumes, and dust.

Some **livelihood Impacts** are likely to result from the project. Residents of the community may gain employment directly from the project and or indirectly through linked industries such as suppliers of construction materials and protective gear. Community members may also have an opportunity to supply (sell) food and drinks to workers on the project.

Table 5: Potential Social Impacts

Project Activity	Impact	Description and Consequence of Impact	Level of Impact	Duration
General works	<ul style="list-style-type: none"> Accidents, trip and fall. OHS challenges Waste generation 	<p>Construction works expose workers to heavy equipment, uneven work surfaces which can result in injury, loss of life and limb.</p> <p>A variety of waste including biomedical waste would be generated.</p>	<p>Negative impact.</p> <p>Moderate to Major</p>	Medium term

Project Activity	Impact	Description and Consequence of Impact	Level of Impact	Duration
Employing workers	<ul style="list-style-type: none"> Increased livelihood opportunities Income generation 	Job creation improving the circulation of money in the area.	Positive impact. Moderate	Medium term
Construction works – excavation, building activities erecting walls, installing roof and windows.	<ul style="list-style-type: none"> Traffic disruption Dust Noise 	<p>Disruption to vehicular and foot traffic caused by demolition/construction activities</p> <p>Dust and noise creating a nuisance.</p>	Negative impact. Low to Moderate	Medium term

4 MITIGATION MEASURES AND MONITORING PLAN FOR ENVIRONMENTAL AND SOCIAL IMPACTS

4.1 Environmental Impacts- Mitigation Measures & Implementation Schedule

In **Table 6** below, mitigation measures are identified for the environmental impacts presented in section 3; the implementation guidelines for these mitigation measures - i.e. who is responsible, how, when, and where to undertake the monitoring - are provided in **Table 7**.

Table 6: Mitigation Measures & Implementation Schedules for Environmental Impacts

Potential Environmental Impact	Mitigation Measure	Schedule of Implementation	Responsible Party
Generation of solid waste	Waste generation is inevitable since this project includes demolition works. Some construction waste will be reused, and the remainder taken to an approval disposal site. Waste must be stored in a designated container/area until used or disposed of at regular intervals.	When demolition begins, and during construction	Contractor
Biomedical waste	Risk assessment should be done by a designated representative of the MoHWE (as part of MoHWE's technical support) before waste is removed. Waste must be segregated and disposed of in accordance with international standards. Workers must be appropriately dressed as specified by the MoHWE.	During construction	Contractor with the supervision of MoHWE
Dust pollution	Cover and or sprinkle all dust source.	During demolition and construction	Contractor
Noise pollution	All construction equipment must be fitted with appropriate abatement devices. There must be no idling of trucks or equipment on the project site.	All project phases	Contractor
Sedimentation	Contain all excavated soil. Construct sediment traps in water courses, if applicable.	During excavation	Contractor
Traffic disruption	Institute a traffic management plan and station traffic wardens at strategic locations, if	All project phases	Contractor

	applicable.		
Damage to road infrastructure	Trucks must carry load appropriate to their axel weight and not use road shoulders.	During construction	Truck driver
Increased water use	Implement daily checks for leaks on pipes, hoses, and or any other metered sources.	During construction	Contractor

Selected Facilities to be Upgraded to SMART Facilities: Byera Health Centre (SVG)
(Draft) Environmental & Social Management Plan
(Version ID: v00-Feb-2023)



Table 7: Environmental Monitoring Plan

Environmental Parameter to be Monitored	Mitigation Measure	Location	Measurement	Frequency	Responsible Party
Air Quality	<ul style="list-style-type: none"> Apply water spray to construction surface. Cover dust source (fines). Trucks carrying aggregate or similar material should have their sides secured and the cargo securely covered. 	Along the road	<ul style="list-style-type: none"> Site inspection Monitoring particulate matter in air using monitoring equipment 	Weekly	Contractor's designated Environmental Officer
Noise level	<ul style="list-style-type: none"> Select equipment with recommended noise level. No idling of vehicle on site. Ensure vehicles are fitted with manufacturers mufflers and silencers. 	Along the road and at the construction site.	Measuring of noise level using Noise meter	Fortnightly	Contractor's Environmental Officer
Soil erosion where aggregate is extracted	<ul style="list-style-type: none"> Use only approved borrow pits. Keep drains clear. 		<ul style="list-style-type: none"> Site inspection Visual observation Check project log. 	During construction	PSIPMU and Contractor's Health and Safety Officer
Solid waste management	<ul style="list-style-type: none"> Implement waste management plan - proper containment and disposal of all waste. Maintain a disposal log and use only certified/approved waste management contractors. 		Visual observation	Weekly	Contractor's Environmental Officer
Biomedical waste	<ul style="list-style-type: none"> Store in colour coded bags. Practice waste management protocol contained in SVG biomedical waste plan (proper storage, workers safety 	At the clinic and during transportation	Disposal log inspection.	As necessary	MoHWE's Waste Management Officer and Contractor's Health and Safety Officer

Environmental Parameter to be Monitored	Mitigation Measure	Location	Measurement	Frequency	Responsible Party
	using PPE, inspection and logging of waste, disposal at appropriate site).				
Traffic delays	<ul style="list-style-type: none"> Trucking services should avoid peak hours traffic. No parking of project related vehicles on the road in the community. 	On the connecting roadway	Visual observation	Daily	Contractor's Environmental Officer
Water consumption	<ul style="list-style-type: none"> Practice rainwater harvesting Store water to avoid competing with domestic users. 	On the project site.	Site inspection	Weekly	Contractor

Mitigation measures for social impacts identified in **section 3** are presented in **Table 8** along with the implementation schedule. The monitoring plan for the implementation of these mitigation measures is outlined in **Table 9**.

4.2 Social Impacts- Mitigation Measures & Implementation Schedule

Table 8: Mitigation Measures and Implementation Schedules for Social Impacts

Potential Social Impact	Mitigation Measure	Schedule of Implementation	Responsible Party
Loss of access to medical services	<ul style="list-style-type: none"> Provide temporary clinic facility in the community. Redirect some procedures to the Georgetown Hospital – transportation must be provided. 	Prior to closure of existing facility	Ministry of Health, Wellness and the Environment
Livelihood impacts: job creation, opportunities for food vendors	<ul style="list-style-type: none"> Seek to manage employment expectations by explaining the number and type of opportunities in advance to local communities and by explaining the skills required for each post. Prioritise recruitment from the community in which the project is located (Affected Communities). Create safe space for vending. 	Prior to commencement of project activities.	Ministry responsible for Labour. Contractor
Occupational Health and Safety	<ul style="list-style-type: none"> Provide PPE for workers. Conduct on the job training for workers. Emphasise safety during daily toolbox talk. 	All project phases	Contractor
	Follow established health protocols for infectious (communicable) diseases, not limited to COVID-19.	All project phases	Contractor
Traffic disruptions	<ul style="list-style-type: none"> Develop traffic management plan. Assign traffic wardens at critical junctions. 	During construction	Contractor
Biomedical waste disposal	<ul style="list-style-type: none"> Only licensed workers dressed appropriately should handle bio-waste Use colour coded bags for disposal 	As needed	Contract's ESHS officer
New and improved health care facility	<ul style="list-style-type: none"> New and improved physical structure and structural resilience Increased access for PWDs 	Operational phase	Positive major impact

Our Ref: 2207.14-VCT-DS-SMART Facilities

Selected Facilities to be Upgraded to SMART Facilities: Byera Health Centre (SVG)
(Draft) Environmental & Social Management Plan
(Version ID: v00-Feb-2023)

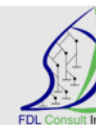


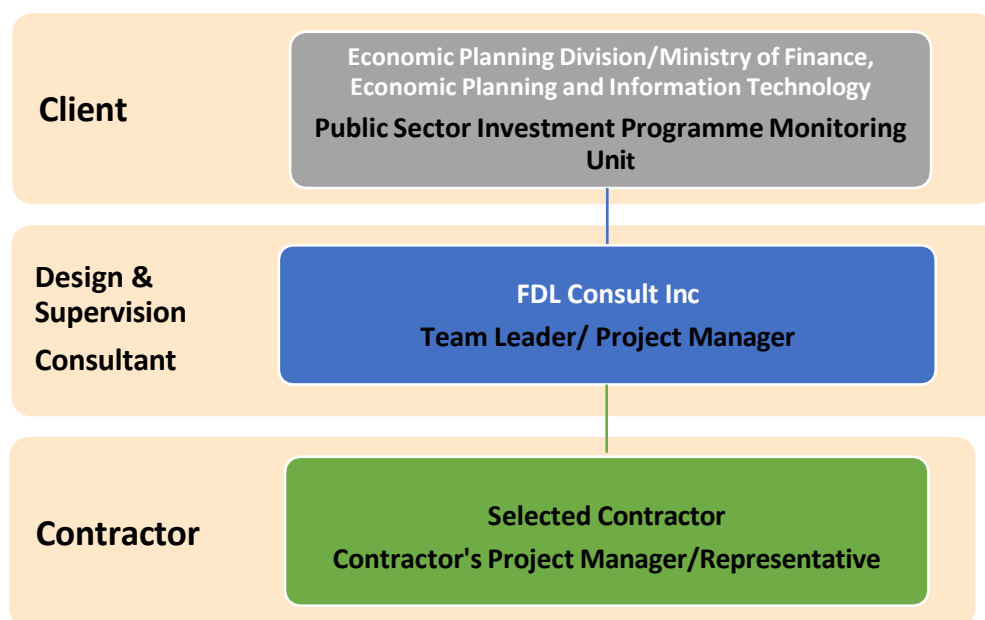
Table 9: Social Monitoring Plan

Social Parameter to be Monitored	Mitigation Measure	Location	Measurement	Frequency	Responsible Party
Access to medical services	<ul style="list-style-type: none"> Establish temporary clinic. Provide transportation to Georgetown hospital where applicable. 	In the community.	Visual observations and recorded grievances	Daily	PSIPMU's Safeguard Officer. MoHWE
Increased livelihood opportunities – job creation, vending opportunities	<ul style="list-style-type: none"> Equal employment opportunity Equal pay for equal work No discrimination 	At the job site	<ul style="list-style-type: none"> Payroll Employment register 	Weekly	PSIPMU's Safeguard Officer. Contractor
Noise level	<ul style="list-style-type: none"> Select equipment with recommended noise level Ensure equipment are fitted with manufacturer's acoustics – silencers and mufflers 	Along the road and at the construction site.	Measuring noise level using noise meter	Fortnightly	Contractor's Environmental Officer
Dust in air	<ul style="list-style-type: none"> Cover dust source. Install sprinklers 	At project site and in the adjacent community	Measurement of particulate matter in air using handheld monitors	Fortnightly	Contractor's Environmental Officer
Occupational health and safety protection	<ul style="list-style-type: none"> Ensure proper safety measures- use of PPEs and implementation of health and safety plan and procedures. 	At the construction site	<ul style="list-style-type: none"> Site inspection Visual observation 	Weekly	MoHWE & Contractor's Health and Safety Officer
Traffic delays	<ul style="list-style-type: none"> Park construction vehicles only in designated areas where they cause no obstruction to the traffic. 	At the construction site	Visual observation	Weekly	Contractor

5 PROJECT MANAGEMENT AND INSTITUTIONAL ARRANGEMENTS

This section of the report outlines the project management structure and the institutional arrangement in place for the execution of the project. It identifies the persons/institution responsible for ensuring the implementation of the mitigation measures. **Figure 2** shows the project management structure/hierarchy while **Table 10** sets out the roles and responsibilities of all parties involved.

Figure 2: Project Management Structure/Hierarchy



The Ministry of Finance, Economic Planning, and Information Technology representing the Government of St. Vincent and the Grenadines (GoSVG) is the Client. The Public Sector Investment Programme Monitoring Unit (PSIPMU) within this Ministry is responsible for implementing this Project. Managing the budget, monitoring and evaluation including spot checks/site visits will constitute part of their role. PSIPMU as the implementing agency will spearhead the organisation of community consultation(s) in conjunction with the Design and Supervision Consultant (in the capacity of Project Manager), to update the community on the activities being undertaken as well as any notifications regarding modification of working hours, etcetera.

The Design and Supervision Consultant (DSC) is responsible for preparing the ESMP during the design phase, and any modifications during the construction phase, in the event of any significant design changes and the attendant potential environmental and social impacts during construction. During construction the DSC's role will include oversight of the Contractors' implementation of the ESMP, to ensure compliance with the requirements.

The Contractor is responsible for complying with the ESMP and all contractual requirements while undertaking the works. The general responsibilities of the Contractor including standard environmental and social measures to avert and mitigate adverse impacts, are described in the works contract.

Table 10: Roles and Responsibilities

Organisation	Responsibility
Client/Client's Implementing Agency	<ul style="list-style-type: none"> ▪ Spearhead the organisation of, and participation in public and stakeholder consultation. ▪ Approval of changes to the ESMP ▪ Representing the Project during community meetings ▪ Overall responsibility for the environmental and social performance of the project ▪ Review of environmental & social management and monitoring reports and taking the necessary action ▪ Review of ESMP performance and implementation of corrective actions or stop procedures in the event of breaches of the ESMP
Design and Supervision Consultant (DSC)	<ul style="list-style-type: none"> ▪ Oversight supervisory/ monitoring of the implementation of the ESMP during the construction phase ▪ Ensuring effective communication and dissemination of the ESMP to the selected contractor ▪ Documenting any adverse incidents or Contractor's non-compliance with the ESMP and exercising the appropriate authority as Client's Project Manager (during construction) geared towards the Contractor's compliance. ▪ Preparing monthly reports on the supervision/monitoring of the implementation of the ESMP as well as Contractor's compliance with the ESMP.
Contractor	<ul style="list-style-type: none"> ▪ Adherence to the principles and policies set out in the ESMP ▪ Implementation of the mitigation measures identified in the ESMP ▪ Monthly reports on any environmental and social mitigation and monitoring issues; special reports will be made for exceptional circumstances ▪ Keeping records related to the environmental and social performance

Organisation	Responsibility
	<p>of the works</p> <ul style="list-style-type: none"> Ensuring that all environmental and social mitigation and monitoring requirements are known and implemented by Contractor's personnel and sub-contractors
Local authorities, civil society	<ul style="list-style-type: none"> Monitoring environmental and social impact mitigation measures and reporting any adverse effects, example, through the community meeting and or the grievance redress mechanism.

5.1 Reporting, Review and Verification Procedures

Mitigation requirements as well as implementation and verification procedures, are applicable during all phases of this project. Three implementation phases are recognised:

1. Pre-construction: Site preparation including demolition of the existing structure, clearing, hoarding, and placing project signs/boards (notices, warnings, directions, information), removal of solid waste, delivery of construction material and equipment.
2. Construction Demolition, excavation, construction of the walls and other components of the new building structure, constructing/ installing service infrastructure (plumbing, electrical, telecom, etc.), access road and fencing, etc.
3. Operations The use of the health care facility during the defects liability period

Pre-construction assessment: The PSIPMU's engineer ~~through their Safeguards Officer~~ (or Client's designate), the Civil Works Contractor (or Contractor's designed environmental, social, health and safety (ESHS) officer/s) and Client's Supervision Consultant (Project Manager) shall survey the project site prior to construction to document the condition of all work areas especially sensitive areas referenced in the ESMP. A pre-construction report, including photographs documenting the status of each project work area prior to project activities shall be prepared by the relevant parties (Contractor, Supervision Consultant) as project records.

Construction assessment: The Supervision Consultant shall continuously monitor the construction activities and the effects of the mitigation measures implemented. The PSIPMU/Safeguards Officer shall visit the sites as frequently as required but not less than twice per month to check progress and verify compliance at the site. Oversight agencies (Physical Planning and MTW) should also visit the site on an as needed basis at any time. A report documenting compliance with all contractual agreements and construction mitigation

measures shall be prepared at the completion of each site visit. The reports shall be submitted to the applicable party/parties named in the works contract.

Monitoring: Contractor (Contractor's ESHS Officer/s) would be on site daily to ensure their workers comply with all applicable mitigation measures for the work phase. The Contractor will keep a site log or journal to document any activity or event that has the potential to negatively impact the environment. The Supervision Consultant (SC) has oversight monitoring responsibility over the Contractor's implementation of the ESMP. The SC's assigned site staff will keep a log of all compliance and non-compliance issues and impact of the mitigation measures.

Incidents Reporting: The Contractor is responsible for preparing and submitting incidents reports to the Project Management Team (defined in the works contract) within 24 hours from discovery of the incident. The ESHS officer/s shall maintain a complete project record of incidents associated with their contract scope of work. The record shall be regularly updated and included with monthly reports submitted to the Employer and or Supervising Consultant (as mandated in the works contract reporting structure). An accident reporting form can be found in the appendix.

Corrective Action: The works contractor is responsible for responding to and addressing notices of non-compliance in a timely manner and to the satisfaction of the Supervision Consultant. Contractor will be responsible for the rehabilitation costs and work effort associated with any environmental damage that may occur due to non-compliance with mitigation measures and applicable laws. Any issues identified will be submitted in writing to the client for subsequent notification the WB.

5.2 Institutional Structure

Supervision, ESMP Monitoring, and Reporting Supervision for compliance with environmental and social safeguards policies will be managed by the PSIPMU's assigned officer who will conduct periodic inspections to assure environmental compliance as well as support the management of social risks and impacts, and implementation of social safeguards requirements.

The Contractor also has responsibility for on-the-ground compliance with the contract

clauses, recommendations, and mitigation measures and reporting any issues of ineffectiveness of the measures.

The Supervising Consultant will monitor the contractor's compliance with the ESMP, assess the risks associated with matters of non-compliance and enforce the relevant contract clauses to ensure the Contractor's realignment with the ESMP implementation requirements.

Reviews of the ESMP shall also be conducted by the Supervision Consultant during project implementation to verify the effectiveness of the mitigation measures. Results of monitoring and measurement of performance indicators will be reported on monthly during construction. This report will be reviewed by the PSIMU/Client and Supervision Consultant for deviations from expected outcomes, and to identify improvements for implementation.

Performance that falls below expected levels will be addressed as soon as reasonably practicable and corrective actions will be identified and implemented where the ESMP is found to be deficient, where measures are lacking, and/or when changing circumstances are encountered. The PSIMU shall record and report the results of these reviews and any other self-regulation processes to all concerned parties.

6 STAKEHOLDER ENGAGEMENT

The Access to Information requirements of the World Bank emphasises that effective stakeholder engagement can significantly improve the environmental and social sustainability of projects, enhance project acceptance, and make a significant contribution to successful project design and implementation. ESS 10 will guide the stakeholder engagement process for this project.

6.1 Objective of Stakeholder Engagement

The objective of the stakeholder engagement is to assess the level of stakeholder interest and support for the project and to ensure their views are considered in project design and implementation. This requires effective and inclusive engagement with project-affected parties, namely persons who utilise/access the services provided at the clinic, adjacent homeowners and users of the adjacent roads throughout the project life cycle providing them with timely and appropriate project information on environmental and social risks. This information should be provided in an appropriate manner and format; accessible and culturally appropriate, considering specific needs of groups that may be differentially or disproportionately affected by the project.

Local community and stakeholders will therefore be engaged during the mobilisation, construction, and operational stages of the project. Stakeholders will be identified and concerted effort made to build and maintain a constructive relationship guided by the following principles:

1. clear messages using simple language,
2. openness, honesty, credibility, and trust in all communication,
3. tailored to specific audiences,
4. content is relevant to the target audience,
5. use of multiple methods to get information to some audiences,
6. designed for two-way communication, with mechanisms for feedback clearly integrated,
7. accessible to all – including persons with disabilities.

Materials will be prepared and disseminated on topics including the following:

1. construction activities at the site(s),
2. hiring practices and employment opportunities,
3. transport/traffic in the community and related health, safety, and environment issues,
4. community health and safety awareness,
5. waste and environmental issues, particularly related to dust and noise,
6. grievance/complaints process and procedures.

Information dissemination and exchange will be in the following formats and used as applicable to the target audience/stakeholders:

1. Written material, such as fact sheets, flyers, and brochures
2. Websites and social media
3. Group and individual meetings
4. Media releases
5. Traditional media

6.2 Stakeholder Identification

The main project stakeholders are as follows:

Government Ministries, Departments/ Agencies, and local communities in the vicinity of the works.

Following are the key government stakeholders that will impact the project because of the technical, legal and regulatory roles they play in the execution of governance.

1. Ministry of Finance, Economic Planning, and Information Technology (Project Lead Agency/Client)
2. Ministry of Agriculture, Forestry, Fisheries, Rural Transformation, Industry and Labour
3. Ministry of Transport, Works, Lands and Surveys, and Physical Planning

4. Ministry of Health, Wellness, and the Environment
5. Ministry of Legal Affairs
6. Ministry of National Mobilisation, Social Development, Family, Gender Affairs, Youth, Housing, and Informal Human Settlement

Civil Society and Non-Governmental Organizations

Civil society includes but is not limited to the surrounding communities (Colonaire, South Rivers & Georgetown), farmers, Non- Governmental Organizations (NGOs), Community Based Organizations (CBOs).

Vulnerable Individuals and Groups

These stakeholders include individuals in the affected community facing a range of limitations and obstacles to benefiting fully from project activities if not adequately engaged; particularly those who use the clinic on a daily or weekly basis. Vulnerable individuals and groups include the poor, women/pregnant women, youth, persons with disabilities (PWDs) and the elderly.

6.3 Stakeholder Engagement Register

The project team will establish a Stakeholder Engagement Register that will document all stakeholder engagement activities, log correspondence and consultation with stakeholders (including all meetings, presentations, feedback, and phone calls). This creates a record of engagements for institutional knowledge and reference if misunderstandings or questions arise in the future. Reports compiled from the register will be used to measure stakeholder perceptions about the project.

The Environmental and Social Safeguard Officer will be responsible for receiving and recording any queries, concerns, or comments regarding the project. Comments and decisions made on about them will be collated and reported to relevant stakeholders once the final decision is reached on the course of action related to the comment/s.

Monitoring and Review

The Stakeholder Engagement Plan and associated documents will be reviewed and modified as necessary throughout the life of the project. The stakeholders' registry and the information

documented will be reviewed and upgraded as necessary to ensure that the stakeholder plan is meeting project expectations.

6.4 Grievance Redress Mechanism

A Grievance Redress Mechanism (GRM) refers to methods and processes by which a redress to a grievance is sought and provided. GRMs are designed to benefit both the project and the project-affected persons (PAPs). A grievance protocol which target SEA/SH exists within the PSIPMU and will be utilized for this project. The blank form can be found in the appendix.

A grievance refers to an issue, concern, problem, or claim, whether actual or perceived, that affects individuals and communities' physical, social, and economic conditions in the project area of influence. Grievances can occur at different stages of the project cycle:

1. **Inception** – complaints at this stage are about the perceived macro impact (social, economic, environmental) of the Project.
2. **Implementation** – these complaints relate to the micro context of the Project emerging from its specific activities, for example, complaints related to construction noise or dust, displacement, compensation, etcetera.
3. **Close** – these are complaints about the non-fulfilment of project activities.

The GRM creates an opportunity for the public to voice their complaints or concerns and to seek clarification and resolve misconceptions about the project activities and implementation process. It provides a simple, transparent, and timely tool for the expression of opinions or grievances related to project activities and their execution.

Objectives of the GRM

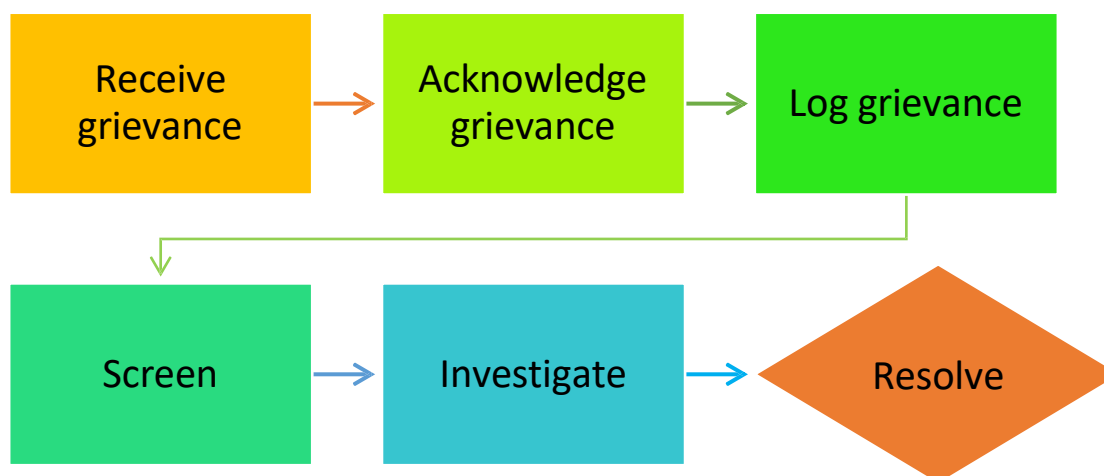
The objectives of the Grievance Redress Mechanism are to:

1. ensure that the Government of Saint Vincent and Grenadines' regulations and the World Bank's Safeguard Policies are adhered to in all project activities,
2. address any negative environmental and social impacts of all sub-projects and activities,
3. resolving all grievances emanating from the project activities in a timely manner.

6.5 Project Grievance Redress Procedure

A process approach (illustrated in **Figure 3**) will be utilised to ensure the grievances are reported and addressed effectively.

Figure 3: Steps in the Grievance Procedure



Receive grievance:

The PSIMU should receive all grievances. At the national consultation, stakeholders will be informed of various avenues through which the grievance redress mechanism can be accessed.

Acknowledge grievance:

All grievances will be acknowledged by telephone or in writing by the PSIMU using the Grievance Acknowledgment Form within 48 hours of receipt. The complainant will be informed of the approximate timeline for addressing the complaint if it cannot be immediately addressed. The PSIMU will work with the safeguards team (environmental and social safeguards officer/specialist to ensure the speedy resolution of the grievance. If the complaint cannot be resolved at this level, it is taken to the next level. Use of the GRM does not prevent the PAP from seeking legal counsel.

Register/log grievance:

After receiving and recording the grievance on the Grievance Intake Form (**Appendix A**), it will be registered in the Grievance Redress Registration Log. [Separate registration for labour and other general project grievances].

Screen:

The PSIMU reviews the complaint, classifies it, and assigns a grievance officer. The complaint will be forwarded to the Safeguard Team responsible for investigating the claim and liaising with both the aggrieved party and project technical team to reach a mutually acceptable resolution. The complainant will be given a specific timeline within which the claim will be resolved. Meetings with the grievant/complainant will be held, if necessary, with the objective of resolving the matter. All meetings must be recorded.

Investigate:

The grievance officer will investigate the complaint. This investigation will include but is not limited to meetings with the complainant, site visits, meetings and/or interviews with project staff and collection of relevant documentation and other forms of evidence. For meetings, the deliberations and decisions will be recorded on the Meeting Record Form. Community representatives or representatives of the complainant will be allowed to sit in on these meetings.

Classification of Grievance (see levels of Grievance)

- | | |
|---------|--|
| Level 1 | When an answer can be provided immediately and/or the safeguards team is already working on a resolution. |
| Level 2 | One-off event, a member of the Stakeholder Engagement Team & Project Coordinator, can provide a resolution. |
| Level 3 | If the complaint is repeated or if it's a high-profile grievance that, if not resolved promptly, may represent significant risks to the environment or community, the Grievance Redress Committee will address it. Additionally, the Grievance Redress Committee would address any complaint that indicates a breach of law or applicable policy/regulation. |
| Level 4 | The Court of Law - Violations of rights, Gender-Based Violence (GBV), all grievances that the Grievance Redress Committee cannot resolve. |

Resolution:

The resolution at the first tier should generally be completed within fifteen (15) working days of receiving the grievance and notified to the concerned party through the Disclosure Form **(Appendix B)**.

If the grievance is not being resolved within this period, it can be referred to the Grievance Redress System's next level. However, once it is determined that progress is being made towards a resolution, the grievance will be retained at this first level. The complainant will be informed of this decision, and an estimated time for the resolution of the matter will be given either verbally or in writing. If the issue cannot be resolved within twenty-five (25) working days, it will be transferred to the next level. Once a resolution has been agreed and accepted, the complainant's acceptance will be obtained on the Disclosure Form. If the proposed resolution is not accepted, the grievance will be escalated to level 2.

The complainant will be informed in writing of the measures taken to address the grievance by the Project Manager or the Social Specialist if the complaint is against the Project Manager.

7 OTHER MANAGEMENT PLANS AND PROTOCOLS

The Contractor's Project Site Manager should be responsible for the implementation and oversight of all project management plans to ensure that workers are properly instructed and that the plans are successfully implemented. These plans should be developed before the project commences and be upgraded throughout the project life cycle. The contents in 7.1, 7.2 and 7.3 are the building blocks from which the works contractor will develop these working documents.

7.1 Community Health and Safety (CHS)

A community Health and Safety Plan is designed to help project managers prioritise and monitor CHS controls. It identifies potential health impacts such as communicable diseases, accidents and injury, and environmental health impacts and proposes management intervention. The plan should be developed in consultation with the Ministry of Health, Wellness and the Environment and should do the following:

1. Anticipate and avoid impacts on the health and safety of the project affected community during the project life cycle.
2. Promote quality, safety and climate change consideration in infrastructure design and construction.
3. Avoid or minimise community exposure to project related traffic and hazardous material and have in place effective measures to address emergencies.

7.2 Occupational Health and Safety Protocols

Health and safety protocols are designed to avoid or minimise accidents or incidents to workers from project related activities. The following are mandatory requirements:

1. All persons on the project site must wear PPE appropriate to the job/task being executed.
2. Always use equipment and machinery safely, observing manufacturers' guidelines.
3. Keep work areas clean.

4. Clean up spills immediately.
5. Report unsafe conditions to supervisors or health and safety personnel.
6. No alcohol or illegal drugs are allowed or to be used on the work site.
7. Report all injuries promptly.
8. Do not take shortcuts; all accidents are preventable.
9. If you are not trained – do not do it.
10. Under no condition are workers to place themselves in danger.
11. Scaffolding should be properly anchored, have proper guard rails and fully covered deck. Workers must use harnesses and belts as appropriate.

7.3 Waste Management Plan

7.3.1 Objectives

The objectives of the waste management plant are to:

1. encourage sustainable use of materials,
2. reduce waste disposal cost,
3. improve workplace and public health safety,
4. reduce or eliminate legal and financial liabilities,
5. Improve community trust and relationships.

7.3.2 Waste Management Practices

Waste management practices to be implemented must be guided by the principles of:

1. Prevention
2. Reduction
3. Reuse
4. Recycle
5. Disposal

7.3.3 Waste Classification and Disposal Methods

Non-hazardous waste:

Domestic waste: Organic degradable waste would go to the landfill.

Inorganic non-biodegradable waste will go to the landfill.

Construction Waste: Concrete and tile fragments, glass, electrical wire etcetera. will go to the site designated by the national solid waste authority.

Hazardous waste: Liquid waste will go to septic tanks then to seepage pit.

Biomedical waste:

Biomedical waste includes sharps (items that could cut or puncture); cultures and stocks; human blood, blood products and body fluids; pathological waste; animal waste and selection isolated waste. Personal Protective Equipment (PPEs) should be made available to all persons who handle, transport, and treat biomedical waste; this includes thick gloves, industrial boots or safety shoes and protective clothes such as coveralls.

Handling and disposal of biomedical waste must conform to generally accepted international standards that safeguard public health, enhance occupational safety of health care workers. A cradle-to-grave approach is required, meaning that the standard of care observed in the health care institution must continue until final disposal of the waste. This requires record keeping, and provision relating to inspection to enforcement of applicable laws and regulations.

It would be necessary to have some estimate of the quantity of waste to be generated so that appropriate space could be allotted for disposal.

APPENDIX

SAMPLE GRIEVANCE FORM

See next page

REGISTRATION OF A GRIEVANCE

Grievance No.: _____

Please use capitals: (Note that using your full name is optional)

Name: _____ Contact No: _____

Address: _____ E-mail Address: _____

National ID No: _____ NIS Number: _____

Age Group: _____

(5-19) (20-39) (40-59) (60 +)

Gender: _____

Name of Project Site:

As per the Operational Procedures of the Project, Grievance Redressal, I register my grievance as detailed:

"Details of Grievance"

- a. Outline reasons why and how you are affected by the Project. (overleaf if necessary)

- b. If land or other properties are being affected e.g. (agriculture), include copies of relevant documentations you have to support your claim.

List documents: attach copies

- | | |
|-----|-----|
| (a) | (b) |
| (c) | (d) |

Undertaking: I hereby certify that statements made in my Grievance and documentation enclosed are true and complete to the best of my knowledge. If at any time any part of the Grievance or the documentation is found to be false, I will be liable for any legal action that the Government of St. Vincent and the Grenadines may deem necessary.

Date: _____ (Signature of aggrieved person) _____

Name of Recording Officer: _____ (Signature) _____
(Please print)

National ID No: _____ (Signature) _____

Witness _____
(Please print)

APPENDIX B

SAMPLE ACCIDENT FORM

See next page

B1: Incident / Accident Details

Project Site:			
Date of Incident / Accident:	Time:	Date Reported:	Time Reported:
Reported by:	Reported to:	Notification Type:	Email/'phone call/media notice/other
Full Name of the Contractor:		Full Name of Subcontractor:	

B2: Type of incident / Accident (please check all that apply)

Fatality ☐ Lost Time Injury ☐ Displacement Without Due Process ☐ Acts of Violence/Protest ☐ Disease Outbreaks ☐
☐ Forced Labor ☐ Unexpected Impacts on heritage resources ☐ Unexpected impacts on biodiversity resources ☐
Environmental pollution incident ☐ structure failure ☐ Other ☐

B3: Description/Narrative of Incident / Accident**I. Details of the Incident / Accident**

II. <i>What were the conditions or circumstances under which the incident occurred (if known)?</i>
III. <i>Are the basic facts of the incident clear, or are there conflicting versions? What are those versions?</i>
IV. <i>Is the incident still ongoing, or is it contained?</i>
V. <i>Have any relevant authorities been informed? Who was informed?</i>

B4: Actions taken to contain the incident / Accident			
Short Description of Action	Responsible Party	Expected Date	Status
Have the works been suspended? Yes <input type="checkbox"/> ; No <input type="checkbox"/> ;			

Please attach a copy of the instruction suspending the works.

B5: What support has been provided to affected people**B6: Injury Information****Injured Employee****Name:****Job Title:****Job at time of Injury:****Type of Employment**Full – time ☐Part – time ☐Temporary ☐Other ☐**Length of time employed with the Company:****Length of time in current position at the time of the incident:****Description and severity of injury:****Location at the time of the incident/accident****Date and time of incident / Accident:**