Additional Financing Appraisal Environmental and Social Review Summary

Appraisal Stage

(AF ESRS Appraisal Stage)

Date Prepared/Updated: 10/08/2021 | Report No: ESRSAFA246

BASIC INFORMATION

A. Basic Project Data

Country	Region	Borrower(s)	Implementing Agency(ies)
Ukraine	EUROPE AND CENTRAL ASIA	Ministry of Finance of Ukraine	Ministry of Health of Ukraine

Project ID	Project Name
P177894	AF to Ukraine Emergency COVID-19 Response and Vaccination project

Parent Project ID (if any)	Parent Project Name
P175895	Ukraine Emergency COVID-19 Response and Vaccination Project

Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	10/25/2021	12/14/2021

Proposed Development Objective

The Program Development Objective is to prevent, detect and respond to the threat posed by COVID-19 and strengthen the national system for public health preparedness in Ukraine.

Financing (in USD Million)	Amount
Current Financing	0.00
Proposed Additional Financing	0.00
Total Proposed Financing	0.00

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

Yes

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

The proposed AF of US$150 million will increase the totals amount of the project to US$240 million to support the implementation of the COVID-19 vaccination campaign, vaccine procurement costs, deployment of COVID-19 vaccines

to eligible groups of the population, and support concurrent activities to strengthen the COVID-19 response. To effectively prepare and support the country in the first phase of vaccine roll-out, the project will invest in procurement of COVID-19 vaccines and logistics, will help set up the cold chain, information and waste management system at national, regional, and facility levels, and support service delivery by reimbursing costs associated with the delivery of COVID-19 vaccination through the deployment of additional staff hours or additional staff, and covering related recurrent costs. Concurrently, the project will support activities to further expand COVID-19 testing capacity. Strong testing is essential as vaccine coverage will be incomplete and focused on priority populations, hence prevention will continue to be critical in the interim. Together, these investments will increase the capacity of the Ukrainian government to prevent new COVID-19 cases and reduce COVID-19 related complications, respond to the pandemic (as well as prepare for future pandemics), and, ultimately, decrease COVID19-related morbidity and mortality in the country.

Activities supported by the project will be organized into 2 components:
Component 1 Strengthen public health system for COVID-19 response (will be increased to US$210 million). This component will support the procurements necessary to achieve the PDO and PDO indicators. Specifically, it will cover COVID-19 vaccine procurement for at least 10 million people and any associated costs (storage, in-country logistics), procurement of goods to prepare health system for COVID-19 vaccination deployment (cold chain, storage, logistics, waste management), support elements of vaccination campaign, development and essential vaccine management information systems. It will also support activities to further expand COVID-19 testing capacity.

Component 2 COVID-19 vaccination deployment (US$30 million). This component will finance payments to providers for completion of COVID-19 vaccination for individuals of priority populations and will be organized as reimbursement for agreed performance-based conditions (PBCs). It is expected that the Government of Ukraine will finance the delivery of COVID-19 vaccines to the eligible population by introducing a separate package into the Program of Medical Guarantees (PMG) administered by the National Health Service of Ukraine (NHSU). This package will provide resources to cover the additional costs (beyond the actual vaccines) associated with the rollout of the COVID-19 vaccination program, including “surge staffing” (i.e. additional staff time or additional staff needed to provide COVID-19 vaccination), hazard pay, additional PPEs, fuel, small consumables, etc. Based on compliance with agreed requirements endorsed by the MoH and set up in NHSU contracts, public providers will be contracted by NHSU for the provision of COVID-19 vaccination to target groups and will be paid agreed fees.

D. Environmental and Social Overview

D.1. Detailed project location(s) and salient physical characteristics relevant to the E&S assessment [geographic, environmental, social]

Ukraine is a country in Eastern Europe bordered by Russia, Belarus, Poland, Slovakia, Hungary, Romania, Moldova, and the Black Sea to the south. Ukraine has an area of 603,628 km2 and a population of about 41.4 million people. The COVID-19 pandemic has severely affected the population of Ukraine. As of September 26, 2021, Ukraine had 2.4 million cases and 55,720 cumulative deaths, ranking as the eighth most affected country in the region in terms of deaths per million population and an absolute number of deaths. Multiple lockdowns and adaptive quarantine measures continuing from the beginning of the COVID-19 pandemic in Ukraine were restricting movements and economic growth. The COVID-19 pandemic has had severe health and economic impact in Ukraine, a country facing a

difficult economic situation when the outbreak started; in this context, any sustainable recovery will be closely linked to the effectiveness of the vaccination campaign. To mitigate the negative consequences of the COVID-19 pandemic, the Government has invested significant resources to finance COVID-19 measures. In response to the emerging global recommendations precipitated by the emergence of more contagious and virulent variants, the Government plans to vaccinate 70 percent of the population. To date, it has invested US$ 352 million to finance the procurement of vaccines in 2021 – a total of 39,239,466 doses – in addition to the planned allocation of 8,154,800 doses through COVAX. This will make a total of 47.3 million doses expected in 2021, which will be enough to vaccinate approximately 23.6 million people, or 57.5% of the population. Looking ahead, the Government plans to finance additional procurement of 5 million doses of COVID-19 vaccines in 2022 with the aim of increasing vaccine coverage to 70% of the population, as well as procuring any necessary booster doses to those fully vaccinated in 2021.

The Parent Project - Ukraine Emergency COVID-19 Response and Vaccination Project (P175895), with total funding of US$90 million, was prepared as part of the emergency response under the COVID-19 Strategic Preparedness and Response Program using the Multiphase Programmatic Approach. It was approved on May 10, 2021, signed on May 17, 2021, and declared effective on July 30, 2021. The Parent Project seeks to support the Government of Ukraine to purchase and deploy COVID-19 vaccines and scale-up testing through financing investments and eligible deployment expenditures once associated performance-based conditions (PBCs) have been met. The parent Project deals with acquisition of goods (medical equipment, cold chain and waste management equipment, testing supplies, vaccines) and payment for results through performance-based conditions. The parent Project supports the initial rollout of COVID-19 vaccines and associated supplies. It will also provide emergency financial support for the procurement of laboratory equipment and tests as well as other necessary materials that will be necessary for effective COVID-19 response.

Both parent and AF projects are implemented nation-wide.

The Project is not expected to have any activities at natural habitats or cultural sites.

D. 2. Borrower's Institutional Capacity

The environmental assessment of activities is governed by the national legislation, in particular, the Law of Ukraine 'On Environmental Impact Assessment'. The Law lists the types of projects that require EIA, procedures for EIA scoping, development, disclosure and consultation, as well as monitoring and reporting. The Ministry of Environmental Protection and Natural Resources (MEPNR) is responsible for review and approval of EIA reports, as well monitoring of activities both on national and regional levels. All EIAs are published on a public online registry maintained by the MEPNR.

The Project will be delivered through the Project implementation unit (PIU) that currently implements the parent project as well as Serving People, Improving Health Project (P144893) and Additional Financing to Serving People, Improving Health Project (P170740) (closing date of the Project is March 31, 2023). The PIU has a designated environment and social focal point, who will be responsible for the preparation of environmental and social instruments during the project preparation and will ensure coordination with MoH staff on environmental and social risk management during the project implementation, including supervision of waste management practices and OHS issues related to COVID-19 risks. Given the scale of the current project, the requirement for specialized risk management expertise around OHS and medical waste management, and the need for extensive community outreach (in addition to the PIU's current duties), for AF scale up the Borrower will supplement the PIU's capacity to support the national vaccination implementation campaign by hiring additional consultants to work alongside the environmental and social specialist. This commitment is reflected in the ESCP. The hiring process for the waste management specialist has been launched and expected to be completed shortly.

Institutional and implementation arrangements for the AF will remain unchanged. The PIU will implement the activities financed by the AF under the direction of the MOH. The PIU consists of MOH technical, fiduciary,

administrative staff, and local experts at the central level who manage the implementation of Project activities, including M&E. The PIU relies heavily on the cooperation with other international (WHO, UNICEF, UNDP etc.) and national partners (Center for Civil Health of Ukraine) who cover many issues related to vaccination (information campaign, capacity building trainings etc.)
Implementation of the citizen engagement activities will be carried out by the PIU team in collaboration with third-party independent non-government organization financed by the Bank. The full details on operational procedures that guide Project implementation are outlined in the POM. The POM will be updated to include the proposed AF activities.

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

A. Environmental and Social Risk Classification (ESRC) — Substantial

Environmental Risk Rating — Substantial

The environmental risk rating for the AF remains substantial as per the parent project . Similar to the parent project, the AF will have long-term positive environmental and social impacts as it will strengthen the public health system overall and specifically improve COVID-19 surveillance, monitoring, prevention and containment. However, In the short-term, there could be some environmental risks during the AF implementation. The COVID-19 vaccination rollout poses a lot of uncertainties, that may need ad hoc decisions and adjustments. The main environmental risks identified are: (i) the Occupational Health and Safety issues related to testing and handling of supplies during vaccination; (ii) the logistical challenges in transporting vaccines across the country in a timely manner, adhering to the recommended temperature and transportation requirements; (iii) production and management of medical healthcare waste; (iv) community health and safety issues related to unforeseen effects of vaccination, traffic/road safety risks associated with transporting vaccines as well as with handling, transportation and disposal of hazardous and infectious healthcare waste. These risks are covered by ESS 1, ESS 2, ESS 3, ESS 4, and ESS 10.

Social Risk Rating — Substantial

The project social risks for the AF remain substantial as per the parent project given there may be substantial gaps in coverage of the program for the most vulnerable and disadvantaged groups. Other social risks are related to community health and safety-related outcomes, especially associated with labor management, ensuring proper conditions of work for workforce, management of worker relationships, potential Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH) and provision of adequate support. Given the available information on detailed vaccines distribution protocol followed by the country at this stage, measures will need to be taken to address key drivers of their exclusion by modifying COVID-19 assistance programs. There is no land acquisition or involuntary resettlement envisaged under the AF to the Project. However, other social dimensions including risks of exclusion, unequal access to vaccination programs for most vulnerable and disadvantaged groups, and gender aspects will need to be further analyzed and incorporated into project design and implementation . The parent project has designed a comprehensive social engagement strategy including robust communication outreach measures, GRM and stakeholder engagement plan that will be rolled out for the AF activities. The Government with the assistance of donor partners, including the Bank, has prepared a vaccine readiness assessment framework and elaborated a National Plan of COVID-19 Vaccination Deployment that outlines detailed procedures and protocols for implementation of COVID-19 vaccination and proposes measures for effective vaccination procedures for the population.

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

B.1. General Assessment

ESS1 Assessment and Management of Environmental and Social Risks and Impacts

Overview of the relevance of the Standard for the Project:

This standard is relevant.
As per parent project, the AF is expected to result in positive environmental and social impacts as it seeks to improve planning, processes and on-the-ground service delivery for COVID-19 containment and response through support of COVID-19 vaccination and testing, and including strengthened surveillance, and monitoring.
However, project activities also present significant environmental, social, health and safety risks for the project workforce and communities. Given the nature of how the disease spreads, the medical requirements and resources needed to address the issue, health-care workers, community members, beneficiaries of the Project, and the environment are likely to be exposed to risks from medical, solid and liquid wastes generated from the health facilities (if not properly treated and managed) and the interaction among the potential COVID-19 cases and general public.
To manage these risks, MoH has prepared, disclosed and consulted upon the Environmental and Social Management Framework which includes procedures relevant to the screening and assessment of associated environmental and social risks and impacts and identification of appropriate mitigation measures and plans. Mitigation measures are mainly based on relevant National legislation, WHO guidance, World Bank Group EHS Guidelines and other good international industry practices (GIIP). The ESMF includes criteria for screening for infection prevention and healthcare waste management; Labor Management Procedures (LMP) for PIU and the engaged workforce to ensure proper working conditions and management of worker relationships; occupational health and safety and COVID-19 specific risks; measures to prevent potential Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH) risks; guidelines for establishing and managing an accessible multichannel grievance mechanism establishment; and capacity strengthening for social, environment, health and safety management.
Healthcare waste and chemical wastes (including wastewater, disposed of vaccines, reagents, infected materials, etc.) can have a substantial impact on the environment and human health. Wastes that may be generated from health facilities/ labs could include liquid contaminated waste, chemicals and other hazardous materials, and other waste including sharps used in diagnosis and treatment. All of this requires special handling and disposal as it may pose a risk to health care workers from occupational infections and to the communities if not disposed off properly. Medical, solid and liquid wastes need to be treated as per accepted standards for which an Infection Control and Waste Management Plan (ICWMP) was prepared for the project interventions, as a part of the ESMF. It considers national and international protocols for infectious disease control and up-to-date provisions on medical waste management. The “cold chain” storage, handling, and transportation of the vaccines also require adhering to stringent health and safety standards and practices to minimize associated risks.
First stages of the project implementation show that COVID-19 ICWMP are usually well-recognized and followed by the medical staff: COVID-19 waste is disinfected (mostly, with chemical solutions) and stored on HCF site before transportation to the landfill by licensed companies, in some cases (when appropriate equipment is available to the HCF) COVID-19 waste is incinerated; medical staff follows OHS rules for use of PPE, handing of vaccines etc. However, general waste management practices (concerning medical waste outside of vaccination campaign) are not as consistent with national regulations throughout the country (better in urban areas with bigger HCFs and somewhat

lacking in rural areas) and mostly depend on available funds and traditional (sometimes outdated) practices. It is expected that AF will increase support to strengthen cold chain and waste management capacity. AF will provide for a scale up for the modernization of waste management systems – PDO Indicator 1: Number of health care facilities participating in the COVID-19 vaccination program that have functional cold chain and waste management equipment – has been revised under the AF: the target of the PDO Indicator 1 will be increased from 200 facilities to 1000 facilities. A total of 1,034 primary health care facilities (3,100 cabinets of immunization) will benefit from upgraded cold chain equipment (procurement of refrigerators and uninterruptible power sources (UPSs) is envisaged under the project).

The Project is not expected to fund any civil works. If minor improvement works to install different equipment and to upgrade cold-chain and storage facilities are deemed necessary, these works will be funded by the healthcare facility and/or state budget. Relevant ESMP Checklist will be prepared for such works and will be included in the contract document. The Environmental and Social Specialist of the PIU will monitor these activities.

The Borrower continuously engage with stakeholders as an integral part of the Project's environmental and social assessment and project design and stakeholder engagement will continue through implementation. This scale-up of Project activities will focus on the GoU's vaccination efforts to respond to the threat posed by COVID-19 and will play a critical role in enabling equitable access by the Ukrainian population to COVID-19 vaccines, which is essential to protect lives and enable the country to fully reopen in a timely and orderly manner. Furthermore, this AF will contribute to gender equality by ensuring equality in the immunization efforts and in equitable access to vaccines financed by the AF.

ESS10 Stakeholder Engagement and Information Disclosure

This standard is relevant.

The Stakeholder Engagement Plan (SEP) has been developed for the parent project and will cover AF activities and will be implemented by the Borrower with the participation of potentially affected parties to ensure the adequacy of the project design, and inform stakeholders about the Project and its potential environmental and social risks and impacts including how the Project would address potential exclusion risks. The Project will ensure that stakeholder engagements is conducted on the basis of timely, relevant, understandable and accessible information. The SEP also includes other interested parties (OIPs), various beneficiaries and directly impacted Project affected persons (PAPs), including disadvantaged and vulnerable groups. The SEP will be updated, as necessary, throughout the project cycle (preparation and/or implementation). If major changes are made to the SEP during Project preparation or implementation, a revised SEP will be publicly disclosed.

Project preparation included detailed mapping of the stakeholders. Individuals and groups likely to be affected (direct beneficiaries) have been identified. Mapping of other interested parties such as government agencies/authorities, NGOs and CSOs, and other international agencies have also been completed.

Implementation of the citizen engagement activities outlined in the SEP will be carried out by the PIU team in collaboration with third-party independent non-government organizations financed by the Bank to cover AF activities.

As part of the ongoing stakeholder engagement activity under the parent project, the initial stakeholder activities are being conducted under the project AF preparation with both government and non-government stakeholders and other interested parties. Those primary stakeholders formed comprehensive feedback for the ongoing Stakeholder Engagement Plan that will guide all outreach and communication for both the health and social protection activities to target beneficiary groups going forward with AF activities. Participants drew special attention to the shortcomings

in the system of hazardous medical waste management, the need for medical institutions to obtain an equipment for provision of disinfection and utilization of medical waste. Also, broader outreach technics on vaccination dissemination campaign were brought up during the consultations. The participants noted that further visualization of vaccination centers and necessity of being vaccinated is very important for the stakeholders especially for the vulnerable group and elderly. Based on the feedback received, AF will include among proposed activities that are necessary to support Ukraine's health system for a successful deployment of the vaccines additional activities for communication and capacity building and upgrades of information technology. The AF will also further support the increase of the cold chain and waste management capacity.
Accessible grievance mechanism for the parent project has been established, publicized, maintained and operated in a transparent manner that is culturally appropriate and readily accessible to all Project-affected parties, at no cost and without retribution, including concerns and grievances filed anonymously, in a manner consistent with ESS10 and will be applied to the AF activities. The grievance mechanism shall also receive, register and address concerns and grievances related to sexual exploitation and abuse, sexual harassment in a safe and confidential manner, including through the referral of survivors to gender-based violence service providers.
The updated SEP covering AF activities was redisclosed by the Borrower on their official website prior to the appraisal.

B.2. Specific Risks and Impacts

A brief description of the potential environmental and social risks and impacts relevant to the Project.

ESS2 Labor and Working Conditions

The standard is relevant.
Given the planned project activities and exposure of the frontline healthcare workers to COVID-19, their immediate contact with COVID-19 patients as well as risks the contaminated wastes and infected materials may pose, environmental and social risks/impacts related to OHS are expected to be substantial
As per the parent project, the Project workers in AF will include civil servants, direct workers (MoH staff (that are not civil servants) and consultants), and contracted workers (employees of medical health facilities, laboratories, workers of the waste disposal companies, and providers for transportation and storage of vaccines). The Borrower, as part of the Environmental and Social Management Framework, has prepared the Labor Management Procedures (LMPs) applicable to the Project. The provisions of LMP will apply to the AF. The LMPs describes (i) procedures relevant to each category of workers involved, including the process for hiring experienced consultants if necessary to provide "hands-on" technical assistance and capacity-building programs; (ii) overview of key potential labor risks (if any); (iii) overview of Ukraine's labor legislation; (iv) description of grievance redress mechanism or mechanisms available for all direct workers and contracted workers; (v) procedure for incorporating labor requirements into the ESHS specifications of the procurement documents; and (vi) implementation of adequate occupational health and safety measures (including emergency preparedness and response measures); (v) definition and procedures for "surge staffing". The LMP will be applicable to all workers engaged directly by the project or provided from other sources to support project activities. These measures will include: procedures for entry into health care facilities (strict checks before entering); procedures/ precautions for the protection of workers against infection; provision of immediate and periodic training on the procedures to all categories of workers; posting signage in all public spaces mandating hand hygiene and PPE; and ensuring adequate supplies of PPE (particularly facemask, gowns, gloves, goggles,

handwashing soap and sanitizer); nondiscrimination and equal opportunity; clauses aginsts forced or child labor. The Project will also regularly integrate the latest COVID-19 guidance and best practices by WHO as it evolves.
The Project Operational Manual for the project will be revised to add AF activities and will include the labor management provisions and the requirement for contractors to have Codes of Conduct, including measures to prevent SEA/SH.

ESS3 Resource Efficiency and Pollution Prevention and Management

The standard is relevant.
As per the parent project, pollution prevention and management – specifically medical waste management – will be of particular importance under the AF. Medical waste generated from labs, screening posts, vaccination centers and treatment facilities to be supported by the Project will likely include contaminated wastes and infected materials (e.g. blood and other body fluids, wastewater, lab solutions and reagents, vaccines, syringes, sharps, PPE equipment, etc.) that would require special handling and disposal , as they may pose risk to healthcare workers in contact with these wastes including those of the specialized waste disposal companies. Informal disposal may lead to contamination of soil and groundwater, and more importantly, to further spreading of the virus to nearby communities.
Ukraine generally lacks adequate solid waste disposal infrastructure and has few facilities for the permanent disposal of medical waste. While on-site separation, disinfection and collection of medical waste is mostly well-organized, its final disposal is a challenge, especially in rural areas. There are only 14 incinerators in Ukraine that cover a fraction of medical waste generated countrywide, the rest of medical waste is landfilled after disinfection on-site. In order to mitigate the risks associated with on-site management of medical waste, its transportation and disposal, the Project will invest in the purchase of medical equipment to neutralize COVID-19 associated waste (autoclaves, shredders and needle incinerators). AF will provide for a scale up for the modernization of waste management systems – PDO Indicator 1: Number of health care facilities participating in the COVID-19 vaccination program that have functional cold chain and waste management equipment – has been revised under the AF: the target of the PDO Indicator 1 will be increased from 200 facilities to 100 facilities. The AF will provide access to modernized waste management equipment for at least 1000 primary health care centers, to which COVID-19 vaccination points are affiliated. Waste management equipment procured under the project will be energy efficient.
The distribution of these equipment will be done based on the results of the in-depth country-wide waste management system needs assessment covering country waste management capacity including information on health/medical waste management facilities in Ukraine (existing service providers, waste transportation and disposal facilities, licensing, operational practices, and performance) and waste management needs of the vaccination/testing campaign. Also, the study will propose optimal waste management schemes (to define which waste streams should be disinfected at the healthcare facility level and which should be transported to a specialized facility) for all beneficiary healthcare facilities and outline staff training requirements. The study is under the preparation by the Borrower at this stage and expected to be completed by the end of 2021. This commitment is reflected in the ESCP.
Furthermore, the parent project ESMF that will apply to AF includes an Infection Control and Waste Management Plan (ICWMP), including specific requirements for waste management practices employed under the Project for the supported health facilities. The ICWMP covers: (a) anticipated medical waste quantity by regions; (b) existing medical, solid and liquid waste management system, including deviation and gaps from the relevant EHSGs, GIIP, WHO guidelines and other protocols; (c) existing regulatory framework and supervision / monitoring arrangements, as well as proposed changes to allow for a wider logistics for medical waste treatment; (d) plan for using the existing medical, solid and liquid waste management system, including any measures to upgrade or remedy identified gaps

and deviations; and (e) additional arrangements for supervision and monitoring of waste management. Site-specific ICWMP will be developed for each facility receiving waste management equipment under the project before equipment commissioning.
The PIU will ensure the execution of the ICWMP throughout the project implementation period.

ESS4 Community Health and Safety

This standard is relevant.
On December 24 of 2020, the GoU published its National COVID-19 Vaccination Deployment Plan (NDVP), which continues to be updated as the in-country pandemic situation and the supplies of vaccines evolves. The MoH worked with the Bank to update the NDVP to include information and requirements on cold chain requirements, waste management, and social safeguards. The NDVP defines the essentials of the COVID-19 vaccination deployment in the country, including the priority groups for vaccination, vaccine delivery scenarios, platforms, and modalities. The overall coordination of the Roadmap implementation falls under the responsibility of the MOH. The NDVP was confirmed acceptable by the Bank team after the changes were introduces and the revisions of the NDVP approved by the order of the MoH on July 12, 2021. The vaccination strategy and deployment will be closely coordinated with the GoU, UN agencies, and other international organizations that coordinate donations (EU and USAID). WHO and UNICEF have provided technical assistance to the MOH for the development of the NDVP and coordinate with the COVAX Facility. The NDVP implementation is being coordinated by the Task Force established under the MoU Ukraine, which included representations of national government, different ministries, international organizations (including WHO and UNICEF), National Immunization Technical Advisory Group, and non-government organizations. The Bank representatives participate in the work of the Task Force as observers.
As of September 27, 2021, 6,851,529 people (or 16.7 percent of the total population) have received at least one dose, and 5,508,212 people are fully vaccinated (13.4 percent of the total population). About 130,000 inoculations per day were administered during the last week of September 2021, which is ten times higher speed than before summer 2021, but still much lower than in, for example, neighboring Poland similar in population size to Ukraine with over 360,000 daily vaccinations during the peak months of vaccination rollout in June 2021. Protection of the key priority groups has improved recently after the targeted efforts of the MoH. The Ministry of Health (MoH), jointly with partners, is analyzing new options of how vaccination pace can be further improved to decrease the current 2.3 percent mortality in COVID-coded cases. The AF will play a key role in enabling affordable, safe, and equitable access to vaccines in the country, supporting the GoU in this effort.

Protocols for adapting surveillance systems for surveillance of events attributable to vaccination are bein developed and will be duly disseminated. Reporting on adverse effects that will track immunization status of a person on an individual level will be done through IT solutions (an app). The Government is working on establishing the compensation schemes in the event that there are unintended health consequences resulting from vaccines.
Protecting the health of communities from infection with COVID-19 is a central part of the Project. Without adequate controls and procedures, project activities can contribute to the spread of the virus and may also contribute to social conflict. Medical wastes and general waste from the labs, testing facilities and health centers have a high potential of being contaminated with the coronavirus or other micro-organisms that can infect the community at large if they are not properly disposed of. There is a possibility for these infectious microorganisms to be transmitted to members of the public if not well contained within laboratories or appropriately isolated areas of hospitals and medical centers, or due to accidents or emergencies (i.e. a fire or natural hazards). The improper storage, transport, use and disposal

of vaccines could also pose health and safety risks if not adequately managed. The Project's ESMF and the Infection Control and Waste Management Plan (ICWPM) outlines procedures for project activities commensurate to the risk including (i) how project activities will be carried out in a safe manner with (low) incidences of accidents and incidents in line with Good International Industry Practice (WHO guidelines); (ii) measures in place to prevent or minimize the spread of infectious diseases; (iii) emergency preparedness measures. The engagement of security or military personnel in the implementation of project activities is not anticipated.

All vaccination points share refrigerators that are produced for domestic use and are not suitable for the storage of immunization products and has outdated temperature control systems. Old and outdated refrigerators containing ozone depleting substances must be safely disposed of in accordance with applicable national and international practices.

The AF will increase support to strengthen cold chain and waste management capacity. Initially the Project aimed at supporting modernization of the cold chain and waste management systems for at least 200 health care facilities providing vaccination. The MoH is finalizing the procurement of cold chain equipment for facilities providing COVID-19 vaccination. This procurement is be organized through UNICEF, which has demonstrated strong performance in supporting COVID-19 procurements within the ongoing Serving People, Improving Health Project (P144893). AF will provide for a scale up for the modernization of waste management systems – PDO Indicator 1: Number of health care facilities participating in the COVID-19 vaccination program that have functional cold chain and waste management equipment – has been revised under the AF: the target of the PDO Indicator 1 will be increased from 200 facilities to 500 facilities. A total of 1,034 primary health care facilities (3,100 cabinets of immunization) will benefit from upgraded cold chain equipment. Cold chain equipment procured under the project will be energy efficient, coolants that will be used in cold storage will not contain any ozone-depleting substances.

There are no project-related assets for which the engagement of security or military personnel is envisaged. The Project will ensure the avoidance of any form of Sexual Exploitation and Abuse by relying on the WHO Code of Ethics and Professional Conduct for all workers in the healthcare facilities and laboratories. The Project's risk communication and community engagement activities coupled with broader stakeholder engagement activities will ensure that clear information is provided to the public. The PIU will oversee the implementation of the GM with the aim of addressing concerns or grievances early.

The project ESMF will be updated to cover Bank's EHS Guidelines for Life & Fire Safety requirements - life and fire safety measures will be included in the ESMP Checklists. The ESMF will also be updated to include Emergency and Preparedness Response measures to anticipate a safe evacuation in case of an incident - these measures would be included in the ESMP Checklists.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement

The Standard is not currently relevant to the Project.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources

The Standard is not currently relevant to the Project.

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

The Standard is not currently relevant to the Project.

ESS8 Cultural Heritage

The Standard is not currently relevant to the Project.

ESS9 Financial Intermediaries

The Standard is not currently relevant to the Project.

C. Legal Operational Policies that Apply

OP 7.50 Projects on International Waterways	No
OP 7.60 Projects in Disputed Areas	No

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

Is this project being prepared for use of Borrower Framework?	No

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

Use of Borrower Framework is not envisaged for this Project

IV. CONTACT POINTS

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Implementing Agency(ies)

Implementing Agency: Ministry of Health of Ukraine

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VI. APPROVAL

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