



Combined Project Information Documents / Integrated Safeguards Datasheet (PID/ISDS)

Appraisal Stage | Date Prepared/Updated: 28-Jul-2017 | Report No: PIDISDSA21823



BASIC INFORMATION

A. Basic Project Data

Country Brazil	Project ID P162033	Project Name Brazil-Salvador Social Multi-Sector Service Delivery Project	Parent Project ID (if any)
Region LATIN AMERICA AND CARIBBEAN	Estimated Appraisal Date 14-Aug-2017	Estimated Board Date 28-Nov-2017	Practice Area (Lead) Social Protection & Labor
Financing Instrument Investment Project Financing	Borrower(s) Prefeitura Municipal de Salvador	Implementing Agency Casa Civil	

Proposed Development Objective(s)

The Project's objective is to improve social service delivery in the Municipality of Salvador, through education quality, health care system efficiency, and social protection effectiveness.

Components

Support for Strategic Actions to Improve Service Delivery with Fiscal Responsibility
Technical Assistance

Financing (in USD Million)

Financing Source	Amount
Borrower	125.00
International Bank for Reconstruction and Development	125.00
Total Project Cost	250.00

Environmental Assessment Category

B - Partial Assessment

Have the Safeguards oversight and clearance functions been transferred to the Practice Manager? (Will not be disclosed)

Yes

Decision

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B. Introduction and Context

Country Context

After growing at 3.6 percent between 2006-2013, Brazil's social and economic gains are jeopardized by the recent economic slowdown and fiscal tightening. Brazil's economy suddenly fell into a deep recession between 2014 and 2016, where an estimated 2.9 million formal jobs were lost with particularly strong impact on youth employment. The crisis has hit subnational government finances hard as federal transfers to states and municipalities dropped by 8.9 percent in real terms between 2014 and 2016. Some subnational governments have been forced into defaulting on their financial obligations given revenue declines and expenditure rigidities due to mandatory expenditures such as salaries and retirement benefits. Strong fiscal consolidation and aggressive structural reforms are deemed necessary for Brazil to regain a sustainable growth trajectory. However, this scenario threatens gains in poverty and inequality reduction since the early 2000s, unless complementary measures are taken to strengthen those expenditure programs to become more effective and efficient in protecting the poor and the vulnerable.

The Municipality of Salvador is the third most populous municipality (2.9 million people in 2014) and despite important progress, remains one of the poorest and most unequal. Salvador is the twelfth largest municipal economy in Brazil driven by the service sector (70 percent of GDP) through tourism, transport, and construction, in addition to the municipal and state public administrations that operate in the city. Although poverty declined 73 percent between 2001 and 2013 (compared to a national 52 percent reduction), it remains high (7.2 percent) compared to cities like Belo Horizonte (2.8 percent), although better than other capital cities in the Northeast. Salvador is also the second most unequal city in Brazil in terms of income distribution, with a Gini coefficient of 0.57 in 2012. Addressing poverty and inequality in Salvador requires improved delivery of social services as key factors in human capital accumulation and productivity.

The ongoing administration of Salvador is implementing an ambitious plan to accelerate the pace of poverty and inequality reduction in the city. The Salvador Strategic Plan (SSP) "Salvador-Building a new future 2013-2016" prioritized investments to expand the supply of basic social services as well as improvements in urban mobility and infrastructure, tourism and public management. While Salvador requires additional investments in selected areas to ensure adequate service coverage in specific sub-sectors (e.g., pre-primary education, basic social assistance), the administration is now complementing its primary coverage focus toward efforts to improve quality and sustainability of these social services.

Sectoral and Institutional Context

In Brazil, municipalities are tasked with basic social service delivery such as pre-primary and fundamental education (grades 1-9), primary health care as well as some higher-complexity health interventions, and face-to-face social assistance services. Municipalities often follow federal (and sometimes state) policies and guidelines in delivering these services, and receive fiscal transfers, both tied and untied to specific service responsibilities and performance. Municipalities therefore are at the institutional frontline of Brazil's rights-based social policy system, and capable municipal administrations are fundamental for effective delivery of these social services. In addition to managing networks of health and education facilities, both under their direct administration and through service contracts,



municipalities also implement programs and mandates that are legally assigned to the federal government. These include the conditional cash transfers program, *Programa Bolsa Família* (PBF), and the social pension program, *Benefícios Prestação Continuada* (BPC) for which municipalities are responsible for maintaining the social registry (*Cadastro Único*, *CadÚnico* hereafter) information updated.

Until 2012, Salvador's social service delivery showed low coverage and poor quality due to years of under-investments. In addition to the lack of sufficient basic service facilities, many of the existing facilities, such as early childhood education (ECE) centers, schools, health facilities, or social assistance centers, were in suboptimal physical and functioning conditions. For example, some of the *Centros de Referência de Assistência Social* (CRAS) failed to meet the Federal Government (FG) standards and as a result, the Municipal Secretariat of Social Promotion and Fight against Hunger (SEMPS) was at risk of losing some of the fiscal transfers from the FG. Salvador was at the bottom of a Brazil state capitals ranking in the Basic Education Development Index (IDEB) in both 2011 and 2013 and its infant mortality rate (16.7 percent) was higher than comparable cities in the Northeast like Fortaleza (11.2 percent) and Recife (12.2 percent).

Starting in 2013, the Municipal Administration increased investments in the social sectors as part of the SSP. The investments included the construction of 26 new schools, eight new emergency care units (*Unidade de Pronto Atendimento*, *UPA*), four new secondary health care Multi-centers (*Multicentros*) for specialized medical consultations, and seven new CRAS, as well as reforms of other existing facilities. These investments not only expanded Salvador's physical capacity to offer these social services but also contributed to their improved quality. This resulted in increased coverage indicators. In education, the proportion of children attending daycare centers increased from 12.4 percent of children aged 0-3 in 2012 to 16.7 percent in 2016, and primary health care coverage expanded from 18.6 percent in 2012 to 44.2 percent in 2016. In social assistance, the PBF covered only 62.2 percent of the eligible population in 2012 (estimated by the federal Ministry of Social Assistance, MDSA), and reached to 95.8 percent by 2015. In 2012, only 45 percent of the registries in *CadÚnico* had updated information, and by 2015 it reached 66 percent thanks to the city's effort to increase the number of *CadÚnico* service points from 12 in 2013 to 35 by late 2016.

Despite these efforts, Salvador social indicators lag behind other comparable cities. The gaps in social delivery indicators appear larger on the efficiency and quality front. For example, even though Salvador's IDEB performance improved between 2013 and 2015, its score (47) still compares poorly against Fortaleza (54). In health, although Salvador has the 13th lowest infant mortality rate among State capitals, its infant mortality rate at 16 percent is still higher than 11.5 percent in Fortaleza and 12 percent in Recife. In parallel, the demographic and epidemiologic transition resulting from aging and higher life expectation, showed an increasing role of non-communicable diseases (NCD): about 70 percent of all deaths were attributable to cardiovascular diseases, chronic respiratory diseases, diabetes, cancer, and others. In social assistance, the updating rate of *CadÚnico* in Salvador (66 percent) is lower than those in Fortaleza and Recife (75 and 70 percent respectively). The update of *CadÚnico* is a critical instrument as it is the gateway that allows poor families to access a range of programs and policies.

The Salvador Strategic Plan 2017-2020 continues the commitment to improvement in social service delivery. The SSP 2017-20 addresses social service delivery in two pillars, Social Development and Quality of Life, and Human Development. The SSP maintains the effort in addressing coverage gaps (e.g.



early childhood education), while placing greater emphasis on measures to improve service quality and efficiency/cost-effectiveness of these services. The proposed operation is aligned to the efforts to close the remaining service coverage gaps and improve service quality in education, health and social assistance. The priority in education is on quality dimensions focusing on quality of teaching and learning outcomes that requires the establishment of quality standards, measurement instruments, feedback mechanisms as part of an effective monitoring and evaluation (M&E) system. Quality assurance and learning outcomes are particularly important in Salvador where large increases in investment and recurrent expenditures increased in recent years.

In the health sector, the key objective is to enhance the efficiency of service provision such that the population seeking care should be covered at any level of care and referred to the other levels when the complexity exceeds the service level's capacity. This hinges on a stronger interdependence and referral processes across different levels of care to optimize patient flows and on and improve the quality of care by improving information systems. This interdependence is particularly relevant in the care of patients with chronic conditions that require coordination across different settings and providers. While completing the ongoing projects for facility improvement and expansion, the Municipal Secretariat of Health (SMS) has developed an information management system (*Sistema de Regulação Vida*, or *Sistema VIDA*) to regulate and manage patient flows between the different levels of care (i.e., types of facilities), including the facilities outside the municipal network (e.g., state-run facilities) and to modernize some of its management processes and systems. SMS plans to upgrade and expand the use of Sistema VIDA over the next few years. This strategy should improve disease prevention and health promotion activities, clinical quality and users' satisfaction, while reducing overall healthcare systems costs, due to a higher emphasis on primary health care as the main entry point to the health system.

The SEMPS has the largest needs for strengthening its service delivery to ensure effectiveness of services to carry out Federal and local policies. SEMPS needs to ensure that its network of social assistance centers meets minimum operational and quality standards, adjust the secretariat's organizational structure in line with the enhanced responsibilities and increased workload, recruit qualified professionals for both policy management and service delivery functions, institute an effective program of ongoing staff training, and modernize its management systems and practices. This, in turn, would allow Salvador to access additional federal transfers as the MoS would meet the minimum federal standards for CRAS, for example.¹

C. Proposed Development Objective(s)

Development Objective(s) (From PAD)

The Project's objective is to improve social service delivery in the Municipality of Salvador, through improvements in education quality, health care system efficiency, and social protection effectiveness.

Key Results

The following indicators are proposed to track progress toward the PDO.

¹ In 2015, Salvador improved its monitoring of conditionalities of PBF and started receiving on average R\$470 thousand per month from federal sources, and could ensure a federal monthly transfer of R\$1 million if improves its efficiency in managing CadÚnico.



- Proportion of students at adequate level of literacy and numeracy at the end of the second grade in municipal schools (quality of education).
- Proportion of admissions for ambulatory care sensitive conditions (ACCS), as a measure of adequate level of care for the patient health condition (system efficiency).
- Number of families supported or monitored by the Integrated Family Support Program at CRAS (effectiveness of social assistance services).

D. Project Description

The Federal Government approved Salvador to access World Bank financing to implement this Project for US\$125 million Investment Project Financing (IPF). The Project will have two components, one supporting the implementation of activities to improve social service delivery, and a second one to finance technical assistance. The first Project component (US\$120 million) will provide support for the implementation of the MoS key strategic actions in education, health and social assistance. Financing for the first component would be triggered by achievements of result targets with specific disbursement-linked indicators (DLIs) and disbursed against verified execution of eligible expenditure programs (EEPs). The second Project component (US\$5 million) will provide technical assistance to facilitate the MoS efforts to achieve the results supported under the first component, as well as additional measures of institutional strengthening to ensure quality and sustainability of social services.

Component 1. Support for Strategic Actions to Improve Service Delivery (US\$120 million). This component will support the achievement of social service results that reflect improvements in social service delivery, with emphasis on quality services in education, efficiency of the health care system, and effectiveness of social assistance. These results will be reflected in a set of disbursement-linked indicators (DLIs) and other intermediate indicators, the latter of which would not be linked to disbursements of Bank financing. This component will be implemented by the municipal secretaries of education, health, and social promotion under the coordination of Casa Civil of the MoS.

Sub-component 1.1: Education. This Sub-component would support the Municipal Secretariat of Education (SMED) in adopting measures that enhance quality of early childhood education and fundamental education. Improving learning outcomes through the provision of quality education hinges on developing quality standards, a monitoring and evaluation system, and an accountability system that ensure feedback is received by service providers. This Component would focus on two results areas: ensuring quality of ECE and improving quality of fundamental education. The activities described below will support better learning outcomes to be reflected in the PDO-level indicator Proportion of students at adequate level of literacy and numeracy at the end of the second grade in municipal schools (quality of education).

Results Area 1: Ensuring quality of early childhood education. In Salvador, ECE is provided by municipal-run centers (Centros Municipais de Educação Infantil, CMEI) and covenant ECE schools.² Salvador has invested in expanding and improving the quality of early childhood education, mainly through the development of an early childhood curriculum and the development of monitoring and evaluation

² Covenant schools are non-for-profit religious, community, and philanthropy schools that are eligible to receive funds from the governments because provide free education. The Federal Ministry of Education considers them as private providers of education.



components. The objective of this results area is to increase the number of ECE centers subject to an enhanced quality assurance system. To address this challenge, the Project would support SMED to (i) formally establish the ECE M&E system; (ii) support the implementation of the ECE M&E system; and (iii) develop an ECE quality assurance program. During the early phase of the M&E system development, SMED's efforts will be focused on ensuring that an increasing share of the municipal-run ECE centers will be monitored. Therefore, the DLI1 will capture the implementation of the M&E system and its subsequent application to an increasing share of municipal-run ECE centers. Other intermediate indicators that the Project will monitor include the: (i) the institutionalization and launch of the M&E system, (ii) training of SMED personnel in the use of the new M&E system, and (iii) provision of regular M&E feedback to individual schools that will be used as a DLI2 (increasing the percentage of ECE centers receiving M&E feedback following a standard format to be developed by SMED).

The Project will support the establishment of the current ECE M&E system by carrying out the: (i) design and implementation of a quality monitoring instrument for both the physical facilities of the ECE centers and pedagogical practices of teachers, and (ii) development of measurement tools for child development and learning. The resulting M&E system will support the Municipality in developing specific interventions to improve the quality of ECE centers, such as ECE facilities improvement, teacher training, and restructuring the ECE curriculum. The Project would also support the implementation of a quality assurance program for the municipal-run and covenant ECE centers to monitor the ECE services provided by both types of ECE schools. This would include: (i) setting minimum quality standards; (ii) developing curriculum; (iii) strengthening current student and center assessments and developing on-line evaluations; (iv) creating assessments that measure student-teacher interaction; (v) setting minimum schooling input standards (teacher qualifications, student-teacher ratio, and facilities); (vi) providing relevant feedback to centers; among others. These activities would also support the alignment of quality requirements and performance monitoring between public and covenant ECEs. First, the quality assurance program is expected to incorporate a pedagogical dimension into the SMED requirements for covenant schools. Second, the monitoring and evaluation of child development and learning would be comparable between public and covenant ECE schools.

Results Area 2: Improving quality of fundamental education. The Project will support improvements in quality assurance of early grades of fundamental education through integrated actions for students, teachers, and schools. These activities include: (i) strengthening the student assessment system (external and formative evaluation), (ii) expansion of scripted pedagogical materials, and (iii) implementation of a results-based management model for schools, among others.

The strengthening of the student assessment system for municipal schools will combine: (i) an external annual standardized assessment of literacy and numeracy skills called PROSA (*Programa Salvador Avalia*) for students in grades 2, 3, 5, and 9, and (ii) a formative and online quarterly assessment of literacy and numeracy skills for students in grades 2, 3, and 5. The fraction of schools with adequate implementation of PROSA will be used as DLI3. The formative assessment will allow SMED to check how the curriculum is effectively being used and provide timely feedback on low performing students and schools. SMED also will develop targeted-training for low performing teachers and provide support for students with low-test scores.



The expansion of scripted pedagogical materials will include subjects of science, history, and geography that will complement the existing materials for literacy and numeracy skills for grades 1 through 3.³ The scripted pedagogical materials include both, the booklets for students and teachers and the written literacy formative assessment used to provide support for students.

The Project will also support SMED's plans to introduce a results-based management model for schools by: (i) creating a training program for school management staff; (ii) improving of the current certification program for candidates to School Principal positions; and (iii) creating a school rewards program, among others.

The expected result is to improve student learning, measured as increased pass rates in the early years of fundamental education and increased average scores on the national standardized tests (*Prova Brasil*) in math and Portuguese. Since the external assessment is critical to develop all the activities to improve the quality of the fundamental education, the DLIs will measure fraction of municipal and covenant ECE schools monitored, the rate of ECEs with adequate, and the coverage of PROSA as a dimension of measurement quality. The Project will also monitor intermediate indicators such as: (i) percentage of schools in on-line formative/classroom assessments; (ii) percentage of teachers in the teachers' professional development; (iii) launch of the meritocratic certification system of school principals; (iv) percentage of schools monitored under the new results-based management system; and (v) percentage of schools with signed results agreement.

Sub-component 1.2: Health. This sub-component would support activities that improve the efficiency of health care delivery system by supporting: (i) pertinent access to primary, secondary and tertiary care through improved referral system; and (ii) use of technologies to improve the quality of care management.

Results Area 1: Pertinent access to primary, secondary and tertiary care. Salvador is implementing an expansion of health care services at different levels that need to be aligned to adequately address the evolving needs of the population. While primary health coverage increased from 18.6 percent in 2012 to 44.2 percent in 2015, the secondary and tertiary levels emerged as bottlenecks in the population's access to quality healthcare. Unmet demand for high-complexity care is overwhelming the municipality's existing secondary care facilities such as the Health Multi-centers and intermediate emergency care units (*Unidades de Pronto Atendimento*, UPAs). The SMS has been strengthening the existing capacity through physical refurbishments of existing facilities, building a new municipal hospital, and expanding primary care coverage, through expansion of mobile Family Health units.

This Results Area will support additional strengthening of the primary and tertiary levels to alleviate the burden on the secondary level, and a system to regulate patient flows (referral and counter-referral system) between different health facilities at different levels of care. This Results Area will finance: (i) ongoing and planned refurbishment of the existing facilities; (ii) service fee payments to privately-run facilities; and (iii) the implementation of the SMS's management information system, *Sistema Vida+*, to reorganize patient flows. The use of the Sistema Vida+ will optimize the use of private healthcare providers who constitute a complementary network of care.⁴

³ In 2013, the PROSA external assessment evidenced that only 26.2 percent of 2nd grade students had adequate literacy skills.

⁴ Currently, SMS has little control or leverage to make full use of the capacity offered by these private providers.



Results Area 2: Using Technologies to Improve the Quality Assurance of Care Management. To address the challenge related to the quality of care, SMS plans to introduce an electronic medical records system and biometric registrations of the patients. A new electronic system of medical records would allow SMS to connect patient data from all the facilities in the municipal network, identify patients who are due for preventive visits and screenings, and monitor patients under certain protocols, enhancing efficiency and effectiveness in the system. These changes will manage patient information more reliably, facilitate audits, and improve patient care, by ensuring each patient is accurately identified and tracked regardless of where in the municipal network they show up for care. The Project will support SMS' plan to gradually increase the number of health facilities that make use of the electronic medical records system and the biometric patient registration system. Health sector DLIs will include: coverage of primary health care (DLI4), number of municipal health facilities with electronic record management system installed (DLI5), and with patient identities registered with biometric data (DLI6).

Sub-component 1.3. Social Assistance. This sub-component would support efforts by SEMPS to enhance the effectiveness of key social assistance functions such as: (i) monitor and strengthening basic social assistance network; (ii) improving data quality of *CadÚnico*; and (iii) enhancing SEMPS' organizational capacity.

Results Area 1: Strengthening basic social assistance network. The basic social assistance network in Salvador consists of the CRAS network, through which the MoS offers a range of services following the Unified Social Assistance System (*Sistema Único de Assistência Social, SUAS*). A critical service offered through CRAS is the Integrated Family Support Program (*Programa de Atenção Integral a Família, PAIF*), that includes face-to-face social work services responsible for coordinating interventions for the vulnerable population and for developing case management for extremely poor families. PAIF services include home visits to monitor sources of vulnerability, referral of specific family members to appropriate interventions, if needed, and facilitating the family's access to other available services and programs. CRAS, along with other available facilities run by SEMPS or its institutional partners, also serve as *CadÚnico* registration points and provide implementation support for federal cash transfer programs such as PBF and BPC. Federal and subnational governments are currently integrating BPC and *CadÚnico* to improve the efficiency of social assistance programs, which will require a strong coordination by CRAS.

Under this Results Area, the Project will support SEMPS' plan to upgrade the 28 CRAS so that they will meet the minimum standard of adequate operational functionality in line with federal guidelines. The definition of the minimum standard includes specific parameters of a CRAS' physical space (e.g., number and types of rooms), internet connectivity and types of information technology equipment, and the types and the number of professional staff at each center. The DLI for this Results Area is the number of CRAS that meets the minimum standard of operational functionality (DLI7). The target by the end of the Project will be to have all 28 CRAS meet the minimum standard while currently none meets this standard.

Results Area 2: Improving data quality of CadÚnico. *CadÚnico* is a potent tool to ensure the all the poor across municipalities are identified and included in appropriate social assistance programs, while relevant information is made available for analysis by other targeted programs. Accurate and up-to-date *CadÚnico* data, then, could be used to improve targeting of a range of social programs within Salvador. As of 2016, SEMPS has kept 65 percent of the data up-to date but, because *CadÚnico* relies on self-



reporting by families, it is necessary to conduct regular verification of data to ensure accuracy. Salvador is still behind with only 0.3 percent of data verified every year against the prescribed norm of 20 percent, or the national average of 6 percent. The recent plan of adding BPC beneficiaries to CadÚnico will also require household visits to register, audit and verify the data of CadÚnico.

Under this Results Area, the Project will support quality improvements of *CadÚnico* data through enhanced capacity for data collection and verification through CRAS and mobile services, and through household visits. SEMPS' existing registration points manage 120,000 transactions a year (both capturing new data and updating existing data) and *CadÚnico* currently holds data for 328,253 families. Assuming half of these families will be updated and a few thousands are added each year, the registration capacity needs to process at least 165,000 per year. SEMPS plans to achieve this capacity through additional registration points, including 12 CRAS that do not manage *CadÚnico*, and acquisition of equipment to expand mobile services. SEMPS also plans to expand the reach of household visits by mobile teams of specialists dispatched from CRAS for both initial registrations of new entrants and subsequent verification of household data. Under this Results Area, the Project will monitor SEMPS' increase of the number of household visits by the *CadÚnico* team (DLI8) as a measure of effective data quality assurance.

Results Area 3: Enhancing SEMPS' organizational capacity. The strengthening the basic social assistance services and sustained improvements in *CadÚnico*'s data quality, will require continued investments in strengthening SEMPS' organizational capacity. SEMPS will need to build additional capacity to manage the federal social pension program, BPC, given the decision to transfer some of the implementation responsibilities (e.g., beneficiary identification/intake) to municipalities. SEMPS will benefit from a cadre of public policy analysts (*gestores*) for policy management functions and a recurrent training program for skills upgrading of all staff both at the Secretariat and the service delivery units. Key activities are to reorganize its own structure to ensure adequate organizational basis for each of the major functions and, adapt the supply of technical personnel to ensure minimum quality of services through the network. The Project will measure results in this area through the recruitments of up to 190 professionals to strengthen SEMPS' various core mandates (DLI9).

Component 2. Technical Assistance (US\$5 million). This Component will provide technical assistance to three Municipal Secretariats that are responsible for delivering the agreed targets under the Component 1 (Education, Health, and Social Promotion), as well as to Casa Civil that will play critical roles in coordinating and leading the municipal administration's cross-cutting policy agenda. Technical assistance activities will support the achievement of PDO objectives by including actions and measures that are complementary to DLI targets. This component will finance consulting and non-consulting services, equipment and materials, and operational costs.

This component will also support other cross-cutting priorities of the municipal administration on areas related to Project objectives. The MoS is also supporting the coordination of different policy actors in Salvador through the development of specific multisectoral protocols. First, the MoS will develop an intersectoral protocol to identify and address family obstacles affecting their participation in PBF and PAIF programs. The integrated action will be developed in a pilot area, defined based on criteria such as the existence of social assistance, education and health facilities, in addition to a strong presence of PBF beneficiaries. Second, the MoS will develop a protocol for identifying gender based violence within the social service delivery system. An intersectoral committee composed of representatives from each of



the secretariats will monitor human development dimensions that could be related to different forms of gender based violence such as detailed reports on injuries due to external causes (health), school dropout and non-enrolment among teens and youth (education), among others. The development of a protocol for CRAS visitors, including PBF beneficiary families, aims to enable identification of potential cases in these facilities, and organize relevant referrals for violence cases.

1. E. Implementation

2. Institutional and Implementation Arrangements

The overall Project implementation will be coordinated by Casa Civil, the institution responsible for policy advice, management of intersectoral projects, monitoring of the implementation of the Strategic Plan, and management of external financing. Specifically, the MoS has set up a project management unit exclusively for the implementation of the Project (Unidade Gestora do Projeto, UGP) in Casa Civil (Decree No. 28.919, September 26, 2017). The UGP will be headed by a General Director and will include specialists to handle financial management, procurement, social and environmental issues, and monitoring and evaluation - including DLI verification. The UGP will work with the Directorate for Strategic Projects (DSP, *Diretoria de Projetos Estratégicos*) and the Directorate for Strategic Planning (DPE, *Diretoria de Planejamento Estratégico*) to exploit the capacity for policy coordination and sectoral monitoring of implementation of the Strategic Plan. DPE has a strong experience in coordination of sectoral policies, verification of sectoral compliance with SSP 2013-2016, monitoring of sectoral policy targets, and revision of policies and targets. As Project objectives and indicators are aligned with the SSP 2017-20, the implementation will use the existing capacity in Casa Civil.

Component 1 (DLI related activities) will be implemented by the Municipal Secretariats of Education, Health, and Social Promotion which are the entities responsible for the execution of sectoral eligible expenditure programs (EEPs). Casa Civil will oversee the technical monitoring of Component 1 indicators and ensure verification of DLIs. Component 2 will be implemented by the UGP while SMED, SMS, and SEMPS will provide inputs for technical assistance activities (technical specifications, terms of reference, etc). The MoS has also created a Special Multisectoral Procurement Commission (*Comissão Especial Mista de Licitação*, CEML) in Casa Civil to carry out procurement activities of Component 2 (Decreto No. 28.933, September 28, 2017). The CEML will also contribute to increase the harmonization of procurement processes across sectors as the MoS increasingly uses external financing in different sectors.

F. Project location and Salient physical characteristics relevant to the safeguard analysis (if known)

The Project will be located in Salvador, capital of the state of Bahia, which is the third largest city (2.9 million people in 2014, IBGE) and the twelfth largest municipal economy in the country (R\$38.8 billion in 2011, IBGE).

Salvador faces a number of environmental challenges related to low capacity for urban planning and natural resources management at the administrative level as well as weak capacity for environmental enforcement. Fast and unplanned urban development has led to the occupation by the low-income families of at-risk and environmentally vulnerable areas (landslides and flooding). The environmental quality of Salvador is gradually depreciating as the urban rivers are degraded and polluted by sewage, the dunes and mangroves are impacted by the expansion of urban dwellings, the



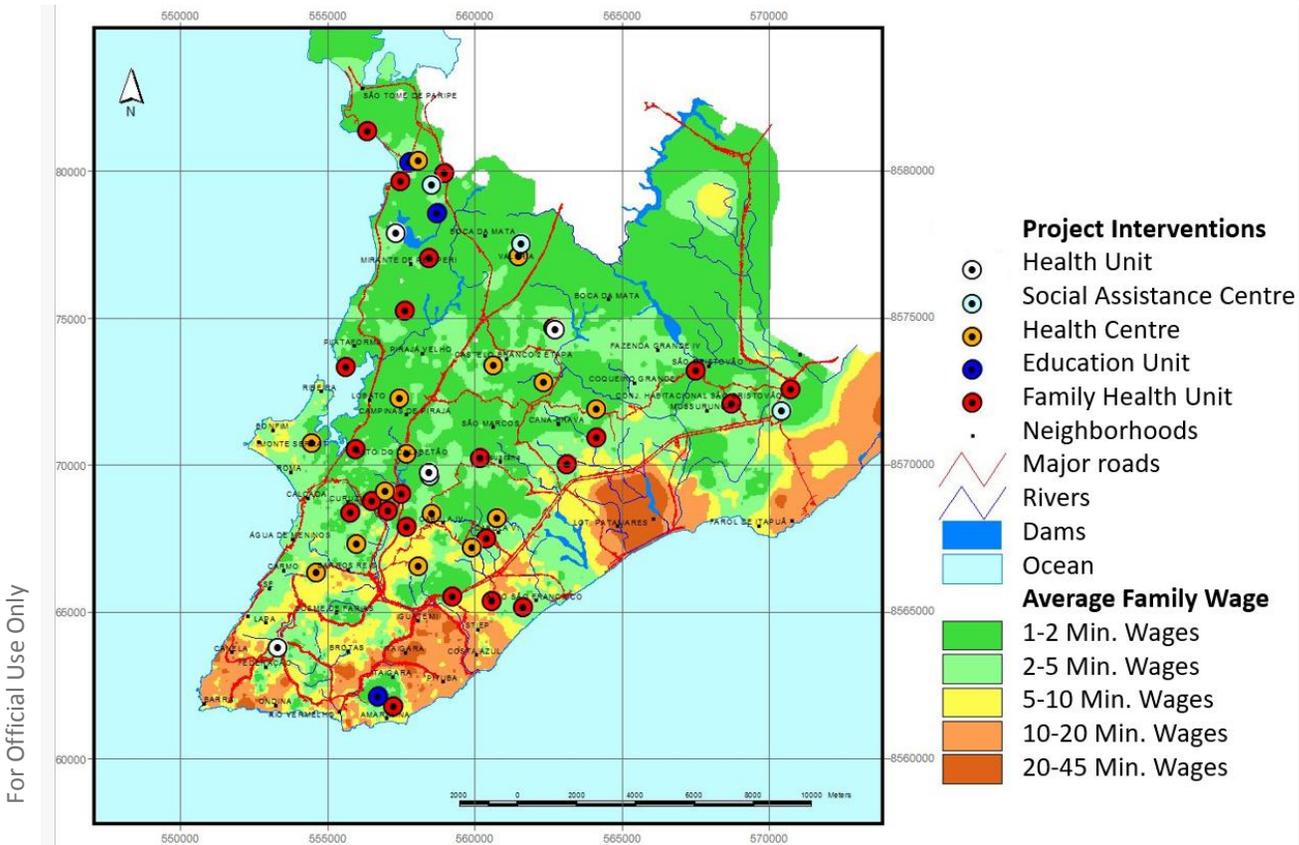
loss of vegetation cover interferes with the temperature and air humidity and there is no systematic monitoring of air quality. Protected areas in the city are not well managed and no ecological corridors exist between them. Only recently has been established a municipal environmental policy and a register of potentially degrading or resource-depleting activities been considered. Despite all these threats, Salvador has a unique richness of historical sites declared Cultural Patrimony of Humanity by Unesco in 1985. The urban and architectural complex contained in the polygonal of the historic center of Salvador is one of the most important examples of Portuguese overseas urbanism. The density of monuments makes it the colonial city *par excellence* in the Brazilian northeast. The Historic Centre of Salvador de Bahia is protected by laws enacted by the three levels of government.

Salvador is the second most unequal city in the country in terms of income distribution, with a Gini of 0.57 in 2012. Space and social segregation is a characteristic feature of the city of Salvador. Better economic and living standards are found at the eastern coastline, whereas low income families occupy mostly the west side of the city. In these poor areas (mostly concentrated at the southwestern region known as Suburbio Ferroviario and in the north-central region known as Miolo Urbano), precarious conditions prevail in public infrastructures as well as in the provision of public services. In these neighborhoods, a large part of the city's population lives in households located in slums (32 percent). Poverty rates are higher among them (72 percent have an average monthly per capita income up to one minimum wage). These areas tend to also be underprovided by public services.

Gender and race have a strong correlation with poverty and determine individuals' abilities to climb the social ladder. The incidence of moderate and extreme poverty in households led by women is 10 percent higher than those led by men. Poverty among Afro-descendants – who comprise most of the city's population – is 35 percent higher than among whites. The average monthly income of 61 percent of the population equals one minimum wage or less; this rate rises to 63 and 71 percent among “pardos” and “blacks”, respectively. A share of 37 percent of the total population has not completed the fundamental school; this rate rises to 39 and 43 percent among “pardos” and “blacks”, respectively and drops to 25 percent among the “white” people. This population with low school achievements, informal jobs and low incomes is over-represented in the city's poorest areas, where they live in slums and face high levels of victimization, crime and violence.

During the past 20 years, Salvador has made concerted efforts to reduced poverty and extreme poverty. While extreme poverty fell from 9.9 percent in 2001 to 3.6 percent in 2012, poverty fell from 26.8 to 7.2 percent in the same period, remaining high when compared to more affluent cities in the country. In the same period, Salvador saw a faster pace of decline in poverty (73 percent) than the national average (52 percent). These gains are attributed to both the growth in employment and the expansion and improvement of social service delivery, which showed low coverage and poor quality due to years of under-investments until 2012. Although the Project is expected to benefit the general population of the Salvador who utilize public education, health and social assistance services, most of the social facilities that are being considered for receiving project support are located at the low-income “informal city” (as evidenced by the map of interventions by location presented below).

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G. Environmental and Social Safeguards Specialists on the Team

Alberto Coelho Gomes Costa, Marcio Cerqueira Batitucci

SAFEGUARD POLICIES THAT MIGHT APPLY

Safeguard Policies	Triggered?	Explanation (Optional)
Environmental Assessment OP/BP 4.01	Yes	The proposed Project foresees the construction, rehabilitation, expansion or repair of small buildings (Early Childhood Education Centers – CMEIs, primary health units, and Social Assistance Centers – CRAS, etc.), which may cause negative environmental impact. Although these impacts are expected to be minor, and mostly related to civil works' execution, the Environmental Assessment Safeguard Policy (OP/BP 4.01) is triggered and the Borrower is conducting an environmental assessment process. A Category B is proposed for this Project. As the exact circumstances related to the proposed works are not yet



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completely detailed, the Borrower has prepared an Environmental and Social Management Framework (ESMF). The ESMF identified the main environmental and social impacts and risks of the proposed Project and suggested mitigating measures. It also included references to the World Bank Group Environmental Health and Safety (EHS) Guidelines, and those for Healthcare Facilities. The ESMF was reviewed by the Bank and publicly consulted prior to Appraisal and in the external website of the Borrower.

As an integral part of the ESMF, the Borrower carried out a social assessment that considers the distributional impacts of the interventions. The social assessment incorporated broader issues related to gender and non-discrimination, particularly as it relates to the Afro-descendant population. Issues related to persons with disabilities were also incorporated in the construction standards of all social facilities.

The social assessment also considers issues related to potential (and at times hidden) barriers to access to education, health and social protection services for these most vulnerable people. The social assessment included a session describing the Borrower’s systems for citizen participation and grievance redress.

The ESMF also included screening criteria to assess the social and environmental risks related to any technical assistance activities supported under the project. It contained an institutional capacity assessment and plan to manage and mitigate social and environmental risks. Technical Assistance activities that have being discussed until now with the Borrower for receiving financial support of the Project under Component 2 focus on straight forward capacity building activities and are not expected to have potential adverse downstream implications or risks. According to the World Bank’s “Interim Guidelines on the Application of Safeguard Policies to Technical Assistance (TA) Activities in Bank-Financed Projects and Trust Funds Administered by the Bank,” These proposed activities may be classified as Type 1, would have an indicative EA category C, and would trigger none safeguard policies. Throughout preparation, the Team would continue to screen the proposed list of Technical Assistance activities, to assess their content and socioenvironmental implications and risk and to identify their typology, EA category, safeguard policies that may be triggered and the instruments to be prepared prior to appraisal or during implementation.

During project preparation, the Borrower carried out public consultations including representatives of potential project beneficiaries, organizations and leaderships representatives of the most vulnerable groups of the population as well as civil society organizations and experts working on issues related with public health, early childhood education and social protection in Salvador. The consultations relied on in presence meetings and a web-based platform to collect feedback on the project design and, specifically, the assessment of its potential risks and impacts.

Natural Habitats
OP/BP 4.04

Yes

Locations and field conditions of new buildings for Education, Health, and Social Assistance are not yet completely clear and the new constructions may occur in areas with presence of Natural Habitats and Protected Areas. The ESMF includes appropriate screening criteria to identify the presence of natural habitats and



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		<p>sensitive ecosystems, assess potential impacts, and determine appropriate measures to avoid, mitigate, or compensate for any possible direct or indirect impacts.</p> <p>Interventions previously completed that the Borrower may use as eligible expenditures for reimbursement by the Project were screened and, so far there is no evidence they have been built in or interfere with any sensitive area. Preventively, the ESMF includes the corrective or compensatory measures needed, in cases such evidences are found.</p>
Forests OP/BP 4.36	No	The Project will be executed in the urban area of Salvador. Therefore, no impacts on forests are expected.
Pest Management OP 4.09	Yes	Although the Project will not finance the use or disposal of pest control products, the appearance of urban pests during rehabilitation, repairs, maintenance and expansion works is usual and always requires the use of such chemicals. Therefore, the OP 4.09 is triggered. The ESMF evaluates the Project interventions in the context of this policy and proposes acceptable measures for pest management. The Project Operational Manual and Catalogue for contractors will explicitly follow these proposed measures for works and services financed by the Project.
Physical Cultural Resources OP/BP 4.11	Yes	<p>Negative impacts on physical cultural resources are not expected during project implementation due the envisaged location of the social facilities to be built. But, considering the richness of historical sites in Salvador, the construction, rehabilitation, repairs, maintenance and expansion works planned for Component 1 may affect physical cultural resources – PCR (historical and archeological), which implies triggering OP/BP 4.11. If any work interferes with PCR, the Project will follow specific procedures that are required to ensure compliance with this policy and the Brazilian legislation. Consequently, as an integral part of the ESMF, guidelines for the preparation of specific Physical Cultural Resources Plans are defined.</p> <p>"Chance findings" during works are possible, and to handle such findings, Brazil has a well-developed legislative and normative framework, which is under the oversight of the National Institute for Protection of Historical and Archeological Sites (IPHAN). These procedures are described in the ESMF and provisions for proper handling of the issue by contractors would be part of bidding documents and works contracts.</p>
Indigenous Peoples OP/BP 4.10	No	The Project will be executed in the urban area of Salvador. No indigenous lands are located within the project’s geographic area of intervention. According to the last 2010 Demographic Census conducted by IBGE, 7,563 people have identified themselves as an indigenous population. They count for 0.28% of the city’s population and are evenly spread in 161 out of the 163 neighborhoods found in the city. This population does not fulfill the criteria of identification of indigenous groups set by the Indigenous Peoples Policy OP/BP 4.10 (paragraph



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4). Essentially, due to the circumstances of their lives in the city, they do not hold any collective attachment to geographically distinct habitats or ancestral territories in the project area or to the natural resources in these habitats and territories. The social assessment carried out as part of the ESMF will address potential barriers to access to education, health services and social protection that may be particularly faced by these indigenous population due to (i) customary cultural, economic, social, or political institutions that are separate from those of the dominant society and culture that they may hold or to (ii) their use of an indigenous language different from the official language of the country or region.

This policy is triggered because some construction works are being considered to be supported by the Project under Component 1. They may require land acquisition and may lead to adverse impacts related with involuntary resettlement. Overall these social facilities – early childhood education community centers, small units of primary health care, and social services local offices – are small and site-specific and their potential adverse impacts related with land acquisition and involuntary resettlement tend to be site-specific, limited in scope and small in magnitude.

Not only the specific locations of these construction works have not been chosen, but also the final list of eligible expenditures has not been completed yet and will not be defined before Project’s appraisal. Consequently, the Borrower is preparing a Resettlement Policy Framework (RPF), describing the principles, guidelines and procedures to be followed for addressing the adverse impacts of land acquisitions required for the site-specific construction works of social facilities.,

Involuntary Resettlement OP/BP 4.12 Yes

OP/BP 4.12 is also triggered because the Project will also consider social facilities already built and/or under construction by the Borrower as eligible expenditures. Land acquisition for these works may have occurred before or after the beginning of Project preparation. In such situations, the substantive aspects of OP 4.12 apply retroactively on the basis of an inventory of the processes of land acquisition and an assessment of the acceptability and/or equivalence of the procedures followed by the Borrower with regards to the requirements of the Bank policy. Thus, a RPF was prepared by the Borrower that includes the criteria, principles and procedures to be followed to conduct an inventory and identify the situations in which there was no adverse impacts related with involuntary resettlement, or land acquisition processes and involuntary resettlement impacts have been addressed in a manner acceptable and/or equivalent to Bank requirements. The RPF required that the inventory (i) takes into consideration how potentially adverse impacts related with land acquisition leading to involuntary resettlement have been addressed, (ii) identifies the number of affected people and the adverse impacts they faced, (iii) assesses the degree of acceptability/equivalence of the measures taken to avoid, minimize and/or mitigate these adverse impacts and adequately compensate the affected population and (iv) identifies (a) the situations without adverse impacts related with involuntary resettlement and (b) the ones in which



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these adverse impacts have been treated in a manner acceptable and/or equivalent to Bank policies.

If these procedures and its implementation fall short of the Bank policy standards, the Bank can discuss and agree with the Borrower on measures to mitigate the impacts of these shortcomings in accordance with the guidance provided in the RPF. If complementary measures cannot be agreed between the Bank and the Borrower, then the social facilities already built or under construction that does not fit the conditions under iv.a and iv.b (above) will be screened out of the list of eligible expenditures.

This approach would not apply to social facilities that (i) may be used to carry out Project supported activities, but (ii) have been constructed many years before the beginning of the Project preparation. In such cases, it would make no practical sense to attempt to review land acquisition procedures undertaken in the distant past. Nevertheless, the RPF includes provisions to identify outstanding legal disputes, which, if significant, will make such social facilities ineligible for Bank-financing or subject to remedial measures.

The Borrower has conducted the inventory from a list of 17 recently constructed facilities and 18 facilities undergoing renovations and extensions whose eligibility will be considered for retroactive financing. The inventory indicates that 15 of the facilities under construction and 14 facilities under renovation belonged to the municipality or were acquired through donations and terms of assignment of use. Another facility under construction included in this list (USF São Cristóvão) was acquired through a friendly expropriation process and therefore had no adverse impacts of involuntary resettlement.

Information on one of the facilities under construction (USF Vila da Fraternidade) and four facilities under reform (CSU Pernambués, CS Arenoso, CRAS Valéria and Escola Municipal de Paripe) have not yet been obtained. Documentation on these facilities will be obtained and presented as a condition to verify their eligibility for retroactive financing.

The RPF was submitted to the Bank, and is publicly disclosed at the World Bank’s external website and at the Borrower’s website.

Safety of Dams OP/BP 4.37	No	Not applicable. The Project would not finance the construction or any other intervention related to a dam nor will rely on the operations of existing dams.
Projects on International Waterways OP/BP 7.50	No	Not applicable. None of the Project activities are expected to have any impacts on international waterways.
Projects in Disputed Areas OP/BP 7.60	No	Not applicable, because the activities financed by the Project are not located in disputed areas.



KEY SAFEGUARD POLICY ISSUES AND THEIR MANAGEMENT

A. Summary of Key Safeguard Issues

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

Large scale, significant and/or irreversible impacts are not expected due to the small-size and site-specific nature of all the interventions. Overall the social facilities – early childhood education community centers, small units of primary health care, and social services local offices – that may be constructed and considered as eligible expenditures are small in size and site-specific. Their potentially adverse environmental and social impacts tend to be site-specific, limited in scope, small in magnitude and reversible. Most of the environmental and social impacts associated so far to these construction works are related with the construction stage and related with temporary raise of noise levels, increased flux of heavy motorized vehicles, solid waste generation and pest management within the working sites. During operation, potential adverse impacts of primary health facilities are especially related with the management of solid wastes and wasted waters but there will also be an increase in the flow of people and vehicles and changes in the urban dynamics, related to the use and occupation in the surroundings of these equipment. The social impacts of the operation of these social facilities are overwhelmingly positive and pro-poor as they are mostly located in low-income and underserved neighborhoods and will contribute to cover gaps in the provision of essential public services.

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

The main indirect impact that may be expected from Project interventions is related with potential changes in the urban dynamics of the beneficiary neighborhoods that may also increase pressures over conservation areas, intensify the informal occupation of hillsides and flooding areas or lead to gentrification. The technical assistance component will support the mapping of actual demands for social facilities in low-income areas and planning the interventions accordingly and considering the cumulative environmental and social impacts of these interventions in the process of urban planning.

3. Describe any project alternatives (if relevant) considered to help avoid or minimize adverse impacts.

When considering site location for the construction of social facilities, the municipality of Salvador considers possible alternatives that cause the least impact on legal protected areas, physical cultural resources and involuntary resettlement, looking mostly for vacant lands and consulting the local population about the most appropriate sites.

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

The Borrower has prepared an Environmental and Social Management Framework and a Resettlement Policy Framework. These instruments include screening criteria to identify social facilities built before and after Project Appraisal that may be considered as eligible expenditure insofar as (i) the land acquisition they require follow the principles of the Bank OP/BP 4.12 Involuntary Resettlement policy and (ii) their site location, construction and



operation comply with the relevant Brazilian legislation and the principles set by the Bank OP/BP 4.01 Environmental Assessment, OP/BP 4.04 Natural Habitats, OP/BP 4.09 Pest Management and OP/BP 4.11 Physical Cultural Resources policies.

With regards to compliance with safeguard policies, there are two main risks associated with the project. First, the Borrower may present social facilities already built and/or under construction as possible eligible expenditures. Environmental and social impacts related with these facilities – such as, for instance, adverse impacts related with involuntary resettlement due to the process of land acquisition for the construction of these facilities and/or its location within environmentally sensitive areas – may have occurred before the beginning of the Project preparation. To mitigate this risk, the ESMF and RPF the Borrower is preparing will include a set of guidelines and procedures to be followed when screening these activities. These procedures will sort the social facilities in three possible types: (i) the ones in which construction and operation have no adverse impacts related with involuntary resettlement and environmental requirements, (ii) the ones in which construction and operation may have potentially adverse social and environmental impacts that have been treated in an acceptable manner according to Bank policies and (iii) the ones in which construction and operation may have potentially adverse social and environmental impacts that have not been properly addressed according to the Bank policies and may no longer be minimized, mitigated and/or compensated. The first two types of social facilities will be included in the list of eligible expenditures; the third one will be screened out.

Second, the Borrower has never worked with the World Bank before and may lack knowledge and previous experience with Bank safeguard policies. To mitigate this risk, an assessment of the Borrower’s institutional capacity for the management of social and environmental risks was carried out by the Bank team. The assessment – included as part of the ESMF – concluded the Borrower has good capacity to manage social and environmental risks related with pest management as well as to carry out environmental licensing, to promote citizen engagement and to handle complaints. It will be necessary to strengthen the Borrower’s capacity to handle issues related with involuntary resettlement, protection of protected areas and natural habitats, and protection and preservation of physical cultural resources. A senior specialist will be integrated on the Project’s Management Unit. This specialist will be responsible for the application of the procedures set in the ESMF and RPF to screen activities, ensuring compliance with social and environmental safeguard policies, and providing training for staff on the three implementing agencies. The Term of Reference for this senior safeguard specialist has been discussed with the Borrower.

The municipality has in place a number of instruments to receive, register and respond in an effective and timely manner to complaints, which are accessible to the most vulnerable population and the potentially affected people.

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

The key stakeholders include:

- (i) The direct beneficiaries of the project, who will mostly be the residents of low-income neighborhoods in which new social facilities – early childhood education community centers, small units of primary health care, and social services local offices – will be constructed and the users of these facilities, who comprise mostly low-income families;
- (ii) The public servants working on these sectors as their labor conditions may improve with the strengthening of the education, health and social assistance systems and the technical assistance provided to improve their efficiency;



- (iv) The general population of Salvador who utilize public education, health and social assistance services;
- (v) The municipal agencies and public providers of early education, primary health and social assistance services.

An online consultation platform remains available to the city's population by the Municipality of Salvador since August 16, accessible through the following websites: <http://projetosalvadorsocial.salvador.ba.gov.br/layout/pdf/marco.pdf> and <http://projetosalvadorsocial.salvador.ba.gov.br/layout/pdf/marco.pdf>. The documents have been visualized by 118 people. There was a problem with the IT system and the municipality has not been able to receive all contributions. The Municipality answered by *e-mail* the comments received.

A public audience was held in September 5, 2017, in the Gregório de Matos Theater located in Salvador downtown. The public audience was disseminated through an institutional electronic message sent to all public servants, the official site of the municipality of Salvador and official letters sent by Casa Civil to the implementing Municipal Secretariats (SMS, SME and SEMPS) for invitation of the members of the respective sectoral Municipal Councils. There were 68 participants, who included forty representatives of community councils, community associations, artisanal fishermen, religious leaders and community representatives in the municipal instance of decentralized administration ("*Prefeitura-Bairro*").

During the public audience, the project and its safeguard documents were explained. Comments emphasized the importance of interventions in health, education and social assistance. They focused most on the needed to integrate Project activities with other investments in sanitation and public safety, health, social assistance and environmental protection under implementation by state, municipal and civil society organizations in high vulnerable neighborhoods. The participants pointed out some drivers (such as the contamination of beaches by sewage and increased urban violence and crime) of adverse impacts on the public health system. Participants also pointed out the importance of rescuing the historical, cultural and religious identity of the neighborhoods within the Project's area of intervention. A final point often mentioned referred to responsibilities of municipal and state agencies in addressing these issues of environmental and social sustainability.

During implementation, three main channels will be available for collecting feedback from beneficiaries, citizens and civil society organizations about social and environmental impacts by the Project. First, the Environmental and Social Management Framework and the Resettlement Policy Framework will continue to be publicly available through the official website of the Municipality of Salvador (and/or the official website of the Salvador Social Project). The Project Management Unit will continue to receive comments on these safeguard documents through this website, ensuring that they will be periodically updated during the Project's life cycle. The second channel for receiving community feedback on the Project and its social and environmental impacts and benefits will be the *Prefeitura-Bairros*, which are the main channel of communication of the public administration and the population. The third main channel will be the Grievance Redress Mechanism that will be used by the Project, as part of the *Ouvidoria Geral de Salvador*. The Socioenvironmental specialist in the Project Management Unit will regularly make assessments of the community and citizen feedback received through these two channels – as well as part of their routine tasks and report on them. The Social Communication Plan of the Project will include guidelines and procedures on how to obtain community/citizen feedback about the Project and its activities.

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B. Disclosure Requirements (N.B. The sections below appear only if corresponding safeguard policy is triggered)

Environmental Assessment/Audit/Management Plan/Other

Date of receipt by the Bank	Date of submission to InfoShop	For category A projects, date of distributing the Executive Summary of the EA to the Executive Directors
September 12, 2017	September 19, 2017	

"In country" Disclosure

September 15, 2017

Resettlement Action Plan/Framework/Policy Process

Date of receipt by the Bank	Date of submission to InfoShop
September 12, 2017	September 19, 2017

"In country" Disclosure

September 15, 2017

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C. Compliance Monitoring Indicators at the Corporate Level (to be filled in when the ISDS is finalized by the project decision meeting) (N.B. The sections below appear only if corresponding safeguard policy is triggered)

OP/BP/GP 4.01 - Environment Assessment

Does the project require a stand-alone EA (including EMP) report?

Yes

If yes, then did the Regional Environment Unit or Practice Manager (PM) review and approve the EA report?

Yes

Are the cost and the accountabilities for the EMP incorporated in the credit/loan?

Yes

OP/BP 4.04 - Natural Habitats

Would the project result in any significant conversion or degradation of critical natural habitats?

No

If the project would result in significant conversion or degradation of other (non-critical) natural habitats, does the project include mitigation measures acceptable to the Bank?



OP/BP 4.12 - Involuntary Resettlement

Has a resettlement plan/abbreviated plan/policy framework/process framework (as appropriate) been prepared?

YES,

If yes, then did the Regional unit responsible for safeguards or Practice Manager review the plan?

Yes

Is physical displacement/relocation expected?

No

Is economic displacement expected? (loss of assets or access to assets that leads to loss of income sources or other means of livelihoods)

ves

The World Bank Policy on Disclosure of Information

Have relevant safeguard policies documents been sent to the World Bank's Infoshop?

Yes

Have relevant documents been disclosed in-country in a public place in a form and language that are understandable and accessible to project-affected groups and local NGOs?

Yes

All Safeguard Policies

Have satisfactory calendar, budget and clear institutional responsibilities been prepared for the implementation of measures related to safeguard policies?

Yes

Have costs related to safeguard policy measures been included in the project cost?

Yes

Does the Monitoring and Evaluation system of the project include the monitoring of safeguard impacts and measures related to safeguard policies?

Have satisfactory implementation arrangements been agreed with the borrower and the same been adequately reflected in the project legal documents?

Yes

CONTACT POINT

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