



Integrated Safeguards Data Sheet Restructuring Stage

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Note to Task Teams: The following sections are system generated and can only be edited online in the Portal.

I. BASIC INFORMATION

1. BASIC PROJECT DATA

Project ID	Project Name
P152799	Health System Strengthening and Support Project
Task Team Leader(s)	Country
Nadwa Rafeh	Turkey
Approval Date	Environmental Category
21-Sep-2015	Partial Assessment (B)
Managing Unit	
HECHN	

PROJECT FINANCING DATA (US\$, Millions)

SUMMARY

Total Project Cost	134.40
Total Financing	134.40
Financing Gap	0.00

DETAILS

World Bank Group Financing

International Bank for Reconstruction and Development (IBRD)	134.40
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2. PROJECT INFORMATION



Current Program Development Objective

The Project Development Objective (PDO) of the HSSSP is to improve primary and secondary prevention of selected NCDs, increase the efficiency of hospital management, enhance the capacity of the MoH for evidence-based policy making, and strengthen the Government's capacity to respond to COVID-19.

Note to Task Teams: End of system generated content, document is editable from here.

3. PROJECT DESCRIPTION

Project Components

Component 1: Primary and Secondary Prevention (EUR 39.39 million)

Component 1 of the project aims to raise awareness (among both the population and health care providers) about the risk factors associated with NCDs and to promote healthy lifestyles and behavior change. A four-pronged approach is pursued: (i) Take reliable (and internationally comparable) stock of NCD-related health data to assess the current status (and disease burden) of NCDs in the country and provide robust evidence for future policy making; (ii) Increase population and health human resource awareness about NCDs, with a focus on hypertension, healthy diet, excessive salt consumption, physical activity (exercise), weight control, and diabetes mellitus; (iii) Implement a concrete population-based intervention strategy by strengthening the Healthy Living Centers, which are led by a multi-disciplinary team (in eight provinces) that will promote healthy lifestyles; and (iv) Develop clinical guidelines and training modules on renal disease, CVD, diabetes mellitus, and obesity control as part of the preliminary efforts toward standardized primary health care service for NCDs and conduct training.

The component will finance consulting services (such as for national campaigns), medical and other equipment (such as IT and distance-learning equipment), technical assistance, and training. Minor refurbishing or rehabilitation of existing Healthy Living Center facilities is foreseen, though these will include only small paint jobs and/or space reconfiguration to allow for physical activities. All component 1 activities will be accompanied by studies and evaluations supported under component 3.

Subcomponent 1 (EUR 25.32 million): Increase national awareness and behavior change with regard to the risk factors of chronic disease and addiction: unhealthy dietary habits and excessive salt consumption, physical inactivity, active and passive smoking, alcohol consumption, aging in general, and substance addiction. The key activities supported under this subcomponent include (i) the promotion of physical activity by piloting such activities in Healthy Living Centers, including some minor rehabilitation of CHCs to reconfigure space for physical activities and exercise equipment, where needed; (ii) the development and application of public outreach materials; methodologies and training materials for health workers and citizens; and



targeting to raise popular awareness about healthy living through campaigns, public events, training programs, and health care visits and at Healthy Living Centers ;and (iii) implementation of a nationwide campaign to deal with substance addiction and strengthened infrastructure to provide services in the Treatment Centers for People Suffering from Alcoholism and Substance Addiction (AMATEMs) and the Treatment Centers for Children and Adolescents Suffering from Substance Addiction (ÇEMATEMs).

Subcomponent 2 (EUR 3.76 million): Ensure effective screening for the early detection of cancer through improving access to quality primary care services and monitoring efforts at all levels. The key activities supported under this subcomponent include: (i) operate and improve capacity in postscreening diagnosis centers (second-level diagnostics); (ii) introduce the national cancer registry software by improving physical and technical infrastructure and training health workers in its use; and (iii) develop guidelines, standards, and training modules for palliative care.

Subcomponent 3 (EUR 10.31 million): Strengthen the capacity of primary health care workers to consolidate the results achieved under the HTP and introduce better services related to NCDs. The key activities to be supported under this subcomponent include: (i) support to strengthen the Family Physician Training Program, including expanding the infrastructure and hardware of the current 23 distance-learning system to nationwide coverage and adapting the current face-to-face training modules for family physicians to a distance-learning approach to increase efficiency and coverage; and (ii) conduct a thorough workload analysis and standardize work procedures to allow for more effective service delivery and better quality of care by family physicians.

Component 2: Increasing the Efficiency of Public Hospital Management and Operations (EUR 41.65 million)

This component will support two major initiatives: (i) a program to strengthen hospital management and operations through technical assistance and implementation support; and (ii) support to the Health Investments Program through capacity building of the MoH's General Directorate of Health Investments (GDHI) and the PHol in contract and facility management. The component will finance large technical assistance contracts and consulting services to assist the PHol in developing and applying the micro-level reforms. It will also finance the relevant equipment, especially IT, and a significant amount off training at the central and facility levels.

Subcomponent 1 (EUR 25.50 million): Strengthening public hospital management and clinical operations. This subcomponent aims to strengthen public hospital efficiency through interventions in four different areas: (i) clinical engineering,⁷ (ii) drug and medical supplies management, (iii) clinical care processes, and (iv) administrative and financial information systems. In each of these four areas, the MoH is planning to (i) provide training to public hospital staff, (ii) develop national guidelines and classifications, (ii) support public hospital teams to implement guidelines and standards, and (iv) strengthen information systems.



Subcomponent 2 (EUR 2.59 million): Introducing architectural and technical standards for health facilities. The key activities supported under this subcomponent include: (i) developing architectural and technical standards for health facilities of various profiles (public hospitals, oral and dental health centers, family health centers, etc.); and (ii) supporting the implementation of developed standards for health facilities.

Subcomponent 3 (EUR 13.56 million): Providing technical support to the PPP program implementation unit under the MoH by strengthening the capacity of the GDHI in managing and administering PPP projects in engagement with the relevant stakeholders, including the Treasury and the Ministry of Development and in developing in-house capacity in the legal, financial, operational, and structural aspects of contract management.

Component 3: Improving the Effectiveness of Overall Health Sector Administration (EUR 38.96 million)

This component facilitates the first two components and will build on earlier World Bank support provided through the APLs. One key prerequisite for greater efficiency and effectiveness in the health sector is to institutionalize a better system of collecting, processing, validating, and using information for policy decisions. This component therefore supports the development of the evidence-based policy-making capacity of the MoH, as well improvements in its M&E capacity aimed at more efficient, effective, and high-quality health service provision and more reliable and consolidated data available at all levels. The component also includes support for sharing Turkey's reform experience worldwide.

Subcomponent 1 (EUR 27.26 million): A well-functioning Health Management Information System (HMIS). This involves enhancing the evidence-based policy and decision-making capacity of the MoH. The key activities that will be supported under this component include: (i) institutionalizing health sector performance assessments and harmonizing health sector data in line with international standards; (ii) developing and adopting national e-health standards and legislation to improve the quality of health data and ensure the interoperability of HMIS's nationwide and internationally; (iii) developing and implementing a computerized decision support system (HMIS) for decision makers on various levels, based on the integration of reliable and consolidated data from existing systems; and (iv) enhancing the technical audit capacity and widening the use of evidence-based medical practice (at the primary and secondary levels) to improve the quality of health service provision.

Subcomponent 2 (EUR 2.85 million): Sharing Turkey's Experience. The key activities that will be supported under this subcomponent include developing a model for sharing experiences in the health sector (including country-specific analysis and training) and disseminating HTP products.

Subcomponent 3 (EUR 3.52 million): Building Capacity in Health Technology Assessment (HTA). The key activities that will be supported under this subcomponent include the preparation of the HTA strategy and related legislative documents.



Subcomponent 4 (EUR 5.33 million): Project Management. A Project Management and Support Unit (PMSU) will mainly be responsible for coordinating the project with several different units of the Ministry as well as implementing its own part under the Project with, procurement, disbursement and fiduciary arrangements.

Component 4: Strengthening capacity of MoH to respond to COVID-19 (EUR 27.03 million)

This component will finance procurement activities for: (i) pharmaceuticals and equipment necessary for COVID-19 treatment; (ii) specific equipment for the vaccine production center of MoH (Public Health General Directorate, or PHGD); (iii) recruitment of individual consultants; and (iv) Bio Safety Level 4 training activities of the vaccine production personnel. Specific procurement practices have been designed for Component 4 to both support timely implementation of this component in response to the COVID-19 outbreak, and to ensure alignment with the new World Bank Procurement Regulations for IPF Borrowers (dated July 2016, revised November 2017 and August 2018).

Note to Task Teams: The following sections are system generated and can only be edited online in the Portal.

4. PROJECT LOCATION AND SALIENT PHYSICAL CHARACTERISTICS RELEVANT TO THE SAFEGUARD ANALYSIS (IF KNOWN)

The project locations cover (i) Ankara province, where the ABSL-3 vaccine production center is being constructed, (ii) Istanbul province where ABSL-2 and 3 laboratories are being established; and (ii) across the country where medicines to treat COVID-19 will be distributed to hospitals.

5. ENVIRONMENTAL AND SOCIAL SAFEGUARDS SPECIALISTS ON THE TEAM

Gulana Enar Hajiyeva, Environmental Specialist
Arzu Uraz Yavas, Social Specialist
Ayse Merve Kocabas Yurtkuran, Environmental Specialist

6. SAFEGUARD POLICIES TRIGGERED

Safeguard Policies	Triggered	Explanation
Environmental Assessment (OP) (BP 4.01)	Yes	The second restructuring triggered OP 4.01 and change of the project category from C to B because it envisaged procurement of equipment for the ABSL 2 and 3 laboratory facilities in Istanbul, and for the ABSL-3 vaccine production center to be constructed by the Borrower in Ankara. The environmental aspects are associated with the following: (i) safe operation of the labs and vaccine



production center; (ii) proper management of medical/laboratory wastes; (iii) animal testing procedures and safety; (iv) OHS of medical personnel. Those aspects shall be in line with WB EHSGs and GIIP, and WHO laboratory biosafety manual, and are addressed by the ESMF and Istanbul labs site-specific ESMP (disclosed, approved and consulted), and ESIA to be developed by MoH for the Ankara VPC. MoH will update the approved ESMF and SEP for the project to reflect the current changes in Ankara VPC and its impacts and mitigation measures as well as will revise the environmental and social risk sections respectively. MoH is expected to finalize and disclose the revised ESMF and SEP no later than one month after the restructuring approval.

Social risks and impacts will also be considered in environmental and social assessments, including but not limited to community health and safety, labor conditions, and any restrictions on access for the surrounding businesses and potential land acquisition requirements. For example, community health and safety risks during construction and operation works, health and safety conditions of the laborers and stakeholder engagement risks for the surrounding businesses, if any, will be considered and mitigated in the relevant E&S instruments. The project will utilize MoH's upgraded grievance redress mechanism as per its updated SEP template for COVID19 operations under the Project's ESMF.

Performance Standards for Private Sector Activities OP/BP 4.03	No
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Natural Habitats (OP) (BP 4.04)	Yes
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This policy is triggered for precautionary purposes. The new proposed site for Ankara VPC is close to a surface water, Cubuk stream. The baseline and impact assessment studies and management mitigation measures will include possible impacts on biodiversity features in Çubuk stream wetland habitat. The ESIA to be prepared by third party consultants for MoH will also provide information on the stream, including why it is or might be an ecologically (or socially) sensitive site, whether it has any legal protections or relevant regulations, and whether there are specific potential impacts that the ESIA should focus on.



Forests (OP) (BP 4.36)	No	
Pest Management (OP 4.09)	No	
Physical Cultural Resources (OP) (BP 4.11)	No	
Indigenous Peoples (OP) (BP 4.10)	No	
		<p>This policy is triggered for precautionary purposes. The restructuring includes finance to envisaged procurement of equipment and refurbishment for the ABSL 2 and ABSL 3 laboratory facilities in Istanbul, and for the BSL-3 vaccine production center to be constructed by the Borrower in Ankara.</p> <p>The ABSL 2 and 3 laboratory facilities in Istanbul are located in the existing plot of the Istanbul Experimental Research Center (IDEA) within the Mehmet Akif Ersoy Thoracic and Cardiovascular Surgery Training and Research State Hospital (MAESH) in Kucukcekmece District in Istanbul Province. Therefore, there are no involuntary land take in this subproject.</p>
Involuntary Resettlement (OP) (BP 4.12)	Yes	<p>Whereas, for BSL 3 Ankara VPC, due to construction activities considered as an associated activity, Bank's safeguards policies will apply. The proposed site for Ankara VPC is in Akyurt district of Ankara province. The land is state treasury land with no informal users on it. The site is surrounded by businesses mainly functioning in automotive and other pharmaceutical sectors. The proposed land has already available infrastructure and the MoH does not foresee any additional infrastructure need at the moment. However, since the final design and siting studies for the VPC are ongoing, for precautionary purposes the policy is triggered in case there is need for additional land take for associated facilities that might lead to potential economic displacement. The need for a Resettlement Action Plan will be determined during the ESIA studies.</p> <p>The social risk and impact mitigation section of the ESMF will also be revised to reflect the changes in</p>



Ankara VPC and will be redisclosed no later than one month after the approval of restructuring.

As per OP 4.12, a detailed outline and ToR for a RAP were incorporated in the Ankara VPC ESIA ToR to include all potential involuntary land acquisition and/or restrictions arising from the planned activities, and related associated facilities (energy transmission line, water-wastewater transmission line, etc.). The RAP will clearly identify land-based impacts, the groups impacted by the projects land take requirements, define the entitlements for each impact group, prepare an Entitlement Matrix that includes additional measures to bridge gaps between national law and Bank’s safeguard policies, outline the process and institutional arrangements for land acquisition, provide a budget and timeline for the implementation of RAP.

The MoH will use the project resources for undertaking the ESIA for Ankara VPC and preparing site-specific ESMP, SEP and RAP (tbd) and other sub-management plans, which should cover the design, construction, and operation phases of the center. The ESIA, ESMP, SEP and RAP will be subject to public consultations in a manner acceptable to the Bank and will be incorporated into the bidding package for the center construction.

Safety of Dams (OP) (BP 4.37)	No
Projects on International Waterways (OP) (BP 7.50)	No
Projects in Disputed Areas (OP) (BP 7.60)	No

II. KEY SAFEGUARD POLICY ISSUES AND THEIR MANAGEMENT

A. SUMMARY OF KEY SAFEGUARD ISSUES

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

As part of the second restructuring, the MoH implements, inter alia, the design, procurement and installation of the Istanbul IDEA certified ABSL-2 and ABSL-3 laboratory facilities and the provision of the medical equipment and supplies to the Ankara VPC to be constructed by MoH. The environmental and social risks of the establishment and



operation of the ABSL-2 and 3 laboratory facilities have been addressed under the site-specific ESMP prepared and disclosed by the MoH in October 2020. MoH has also revised the Environmental and Social Management Framework (ESMF) and Stakeholder Engagement Plan (SEP) to accommodate the E&S aspects of the second restructuring. The Ankara VPC has initially been referred as BSL-4 facility and then qualified as ABSL-3, based on the detailed additional information provided by MoH on the types of pathogens to be handled and produced in the VPC. The MoH carried out further revisions to the E&S documents to cover appropriately the risks relating to the ABSL3 laboratory. Not later than thirty (30) days after the date of the Amendment Effective Date, the Borrower shall, after proper public consultation, adopt and publicly disclose an updated ESMF and SEP for Part IV of the Project, all of which shall be in form and substance satisfactory to the Bank, and the finalized ESMF furnished to the Bank along with the detailed consultation summary. The project remains Substantial risk at this stage, and the EA category of the Project remain unchanged from the second restructuring and is agreed to be kept as Category B due to the following reasons: (i) the ESMF excludes High risk project activities, and (ii) and the Ankara BSL-3 facility is expected to fall under Category B. The EA category of the Project would be reconsidered based on the results of the ESIA studies, if need be. However, in the unlikely event that the ESIA indicates that the construction of the facility is a Category A project then the sub-project (procurement of goods for Ankara VPC) will be dropped from Bank financing.

While project resources will not be used for the construction of the Ankara VPC, it is considered an associated activity to the procurement process under the project and accordingly, the construction and operation must comply with Bank environmental and social safeguard procedures and should be subject to environmental and social due diligence. Given that Ankara VPC is new construction on a greenfield whereas Istanbul ABSL 2 and 3 facilities were a refurbishment in an existing building, this facility will require the preparation of an ESIA along with management plans as relevant within the scope of the ESIA, a SEP, a RAP (to be determined during ESIA studies) and triggers Bank's operational policies on Natural Habitats (OP) (BP 4.04) and on Involuntary Resettlement (OP 4.12) for precautionary purposes. The new proposed site for Ankara VPC is close to Cubuk stream and hence, impacts and mitigations measures will be assessed during the ESIA studies. The proposed site is state treasury land free of informal use and is currently utilized by MoH. In case there is need for additional associated facilities that might occur in involuntary land take a Resettlement Action Plan (RAP) will be prepared. The ToR for a comprehensive ESIA revised and updated by MoH, was cleared by the Bank on August 12, 2021. The TOR has been published by MoH on August 31, 2021 as part of the Request for Expression of Interest (REOI).

Potential environmental and social risks are associated with construction and operation of the facilities, disposal of various streams of wastes, including medical and hazardous, air pollution due to dust, noise and vibration, storage and use of laboratory reagents and infectious samples, use of laboratory equipment, land acquisition and resettlement, OHS/personal protection of health workers, and contextual risks related to contractor safety and community safety as well as potential impacts on Cubuk stream wetland and limited land take that may lead to involuntary resettlement to a limited extent. In addition, during the operation of the facilities in Istanbul (ABSL-2 and 3 laboratories) and Ankara (ABSL-3 vaccine center), there will be risks associated with the need to handle infectious materials and ensure infection containment as well as risks associated with animal testing/welfare. Although MoH does not foresee any additional associated facilities (electric power transmission lines, connecting/access roads, water/wastewater networks, labor camps, storage areas etc.) to be built, the ESIA studies along with the final design studies will determine the need for any auxiliary facilities and hence, cumulative impacts will be fully addressed within the scope of the assessments. Social risks and impacts will also be considered in environmental and social assessments, including but not limited to community health and safety, labor conditions, and any restrictions on access for the surrounding businesses and potential land acquisition requirements. For example, community health and safety risks during construction and operation works, health and safety conditions of the laborers and stakeholder engagement risks for the surrounding businesses, if any, will be considered and mitigated in the relevant E&S instruments.



Although precautionary, as per OP 4.12, a detailed outline and ToR for a RAP were incorporated in the Ankara VPC ESIA ToR to include all potential involuntary land acquisition and/or restrictions arising from the planned activities, and related associated facilities (energy transmission line, water-wastewater transmission line, storage areas, camps etc.). The RAP will clearly identify land-based impacts, the groups impacted by the projects land take requirements, define the entitlements for each impact group, prepare an Entitlement Matrix that includes additional measures to bridge gaps between national law and Bank's safeguard policies, outline the process and institutional arrangements for land acquisition, provide a budget and timeline for the implementation of RAP. The preliminary E&S screening conducted by the MoH PMSU's E&S specialists indicate no presence of any informal users on the impacted land in Ankara province, Akyurt district as it is a state treasury land currently utilized by MoH and has available infrastructure. During the ESIA preparation studies, should a need for involuntary land take appears for the auxiliary/associated facilities of the center (ie. additional water network, storage facilities, additional access roads, and other utilities network lines) then the ESIA consultant will prepare the RAP on behalf of MoH and MoH will be responsible to implement the RAP and compensate any potentially impacted people or businesses before handing over those lands to contractors for the associated facilities.

The MoH has upgraded its grievance mechanism and has made it functional during implementation, to address grievances both under the Health Systems Strengthening and Support Project (HSSSP) and for the COVID 19 Emergency Health project. The MoH will use the project resources for undertaking the ESIA for Ankara VPC and preparing site-specific ESMP, SEP and RAP (if need be) and other sub-management plans, which should cover the design, construction, and operation phases of the center. The ESIA, ESMP, SEP and RAP (tbd) will be subject to public consultations in a manner acceptable to the Bank and will be incorporated into the bidding package for the center construction.

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

The impacts related to the operation of ABSL-2 and 3 laboratory facilities in Istanbul include those related to the management of medical wastes, infection containment, OHS of laboratory workers, health and safety of neighboring communities and laboratory animals welfare. The impacts associated with the operation of the Ankara VPC will be identified and assessed under the comprehensive ESIA study, and might include air pollution and odor, pollution of soil and water due to improper management of medical and hazardous wastes, improper OHS and infection control.

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

The initial project site proposed for Ankara VPC was in a rural area, with no infrastructure and was hitting agricultural land and impacting informal users. MoH had proposed an alternative site, a state treasury land that is free of informal use and had already available infrastructure. This has reduced the cost of siting as well as resettlement costs.

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 MOH has upgraded the health care quality standards through integration of proper medical waste management and occupational health and safety practices through establishment of relevant regulations which are based on stringent measures managed/overseen by the Ministry of Environment and Urbanization (MoEU) and Ministry of



Labor and Social Security. The local governmental authorities and MoH are responsible for implementation of the Regulation on Medical Waste Management which includes provisions based on international good practices. The MoH also has quality standards for monitoring the performance of the healthcare facilities and audits undertaken both internally and third parties. Health sector workplaces are classified as “highly hazardous” according to the national OHS Law.

MoH also has stringent measures in place for personal protective equipment (PPE) usage, regulating working hours and improving working conditions in line with international standards. As part of COVID19, the Ministry has published a detailed guidance on PPEs for all types of workers handling cases with COVID19 which is also in line with the WHO guidelines. However, the established capacity of the MoH is challenged by the exponential increase of COVID19 cases, when the existing equipment, tools, medical staff and PPE might not be sufficient to respond efficiently.

Animal welfare is regulated through Regulation on Welfare and Protection of Animals used for Experiments and Other Scientific Purposes in Turkey. Accordingly, there are established protocols regulating type of animals used, handling the animals (the origin, breeding, marking, care and accommodation and killing), licensing of the animal producers, suppliers and research institutes, the quality of personnel, and the technical, health and hygienic protocols for establishment and operation of such institutes and means to ensure animal welfare and safety, record keeping and audits by the Ministry.

The second and third restructuring will support ABSL-2 and 3 training to the personnel of the Istanbul labs and Ankara vaccine production center. The BSL regulations are being developed by MOH, as per the WHO laboratory biosafety manual. Because the national regulations on BSL-3 laboratories are not expected to be adopted before the labs become operational, an external certification process will take place prior to becoming operational, and on a recurrent basis until the national laws/regulations for certification and/or monitoring are in place.

After the second restructuring in May 2020 and the new emergency operation "Turkey Emergency COVID 19 Health" project, MoH had hired two external individual consultants, one environmental and one social specialist under its PIU. The same PIU is now also working with EBRD on another COVID 19 emergency project, and the PIU has formed a E&S impact assessment unit under its PIU. With additional ESF training by the Bank's E&S team, the MoH PIU has strengthened its capacity in house and will continue to benefit from independent environmental and social consultants to monitor the internationally financed projects. Due to the emergency nature and some changes in subprojects, the PIU was delayed in updating and disclosing its E&S instruments in a timely manner which actually cause implementation delays but with the additional support from the consultants and close supervision support by the Bank E&S team and by EBRD's teams, the E&S management of MoH is expected to enhance.

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

The ESMF has been prepared for the new component under the second restructuring. It includes a Stakeholder Engagement section in line with Bank's COVID 19 stakeholder engagement plan template. The ESMF has been revised to reflect the downgrade of the Ankara VPC's ABSL from 4 to 3 and updated on the social risks and impacts. It will be publicly disclosed and consulted with the most effective means to abide the social distancing measures under COVID19 pandemic. The finalization of the revised ESMF and SEP, alongside with the consultations summary, is expected to take place by MoH not later than thirty (30) days after the date of the Amendment Effective Date. The site-specific ESMP for Istanbul ABSL 2 and 3 facilities has been prepared, disclosed and consulted by the MoH, and cleared by the Bank, to address impacts associated with the construction and operation of the ABSL-2 and 3 laboratories in Istanbul. The site-specific ESIA will be prepared to assess and address environmental and social impacts of the Ankara VPC. It will be disclosed and consulted by MoH in due course, using virtual platforms as



appropriate, and reaching out to potentially affected people and the approved E&S instruments will take place in the bidding documents of the center.

B. DISCLOSURE REQUIREMENTS

Environmental Assessment/Audit/Management Plan/Other

Date of receipt by the Bank	Date of submission for disclosure
15-Mar-2021	15-Oct-2021

For Category 'A' projects, date of distributing the Executive Summary of the EA to the Executive Directors

"In country" Disclosure

Country	Date of Disclosure
Turkey	15-Oct-2021

Comments

The draft ESMF has been received and cleared by the Bank in March 2021, however, the MoH has carried out further revisions to the E&S documents to cover appropriately the risks relating to the BSL3 laboratory. The update and in-country disclosure is expected to be completed by October 15, 2021, after which will be disclosed by the Bank. Site-specific ESMP for the lab facilities in Istanbul was duly cleared and disclosed in October 2020.

Resettlement Action Plan/Framework Policy Process

Date of receipt by the Bank	Date of submission for disclosure
29-Apr-2022	02-May-2022

"In country" Disclosure

C. COMPLIANCE MONITORING INDICATORS AT THE CORPORATE LEVEL

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?	NA



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?	NA
OP/BP 4.12 - Involuntary Resettlement	
Has a resettlement plan/abbreviated plan/policy framework/process framework (as appropriate) been prepared?	No
If yes, then did the Regional unit responsible for safeguards or Practice Manager review the plan?	NA
The World Bank Policy on Disclosure of Information	
Have relevant safeguard policies documents been sent to the World Bank for disclosure?	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?	Yes
Have satisfactory implementation arrangements been agreed with the borrower and the same been adequately reflected in the project legal documents?	Yes



III. APPROVALS

Task Team Leader(s)	Nadwa Rafeh	
Approved By		
Safeguards Advisor	Agnes I. Kiss	28-Sep-2021
Practice Manager/Manager	Tania Dmytraczenko	28-Sep-2021

Note to Task Teams: End of system generated content