

Environmental and Social Management Framework

INTERNAL

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Sri Lanka: Strengthening Integrated Health Care and Governance for Universal Health Coverage Program

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CURRENCY EQUIVALENTS

(as of 24 April 2025)

Currency Unit	–	Sri Lanka rupee/s (SLRe/SLRs)
SLRe1.00	=	\$0.0033
\$1.00	=	SLRs299.66

ABBREVIATIONS

ADB	–	Asian Development Bank
CEA	–	Central Environmental Authority
DLI	–	disbursement-link indicators
DMF	–	design and monitoring framework
EPL	–	Environmental Protection License
GRM	–	grievance redress mechanism
IEE	–	initial environmental examination
MRI	–	Medical Research Institute
NEA	–	National Environmental Act
O&M	–	operation and maintenance
PPE	–	personal protective equipment
PDHS	–	Provincial Director of Health Service
RDHS	–	Regional Director of Health Service
RBL	–	results-based lending
SPS	–	Safeguard Policy Statement

NOTE

In this report, "\$" refers to United States dollars.

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I. INTRODUCTION

A. Background

1. The proposed results-based lending (RBL) program aims to strengthen the country-wide network of first referral hospitals that provide secondary health care services to the population of Sri Lanka and strengthen good governance in the central and provincial health ministries of the country. The program will improve the integration between the primary and first referral health services and will support results achieved to: (i) standardize the service capacity and quality of the secondary health care hospitals including climate resilience and environmental sustainability measures, gender responsive initiatives, elder-friendly services, targeted support services for other vulnerable groups to enhance universal health coverage (UHC); (ii) enhance the country capacity in disease surveillance, diagnosis, and management as part of pandemic prevention, preparedness, and response; and (iii) strengthen transparency and efficiency of pharmaceutical supply chain, health procurement and financing systems. The proposed RBL program will benefit Sri Lankans living in all provinces and will particularly improve access to secondary health services of poor people, non-communicable diseases associated elders (cardiovascular diseases (including heart disease, stroke, and hypertension), diabetes mellitus, chronic respiratory diseases, and cancers), persons with disabilities, women and children, adolescents, and other vulnerable population groups. With the adoption of Sustainable Development Goals (SDGs) and UHC in 2015, the government realigned the Sri Lanka National Health Policy (SLNHP) in 2016 and developed the National Strategic Framework for the Development of Health Services (NSFDHS) 2016–2025 (extended to 2030).

2. The scope of the RBL program will finance the component under NSFDHS 2016–2025,¹ supporting provision of integrated secondary health care. The RBL program is aligned with the geographic scope and implementation arrangements of the government program. With respect to implementation arrangements, as the secondary hospitals are managed and delivered within the nine provincial councils,² the RBL program will support results achieved at both the central and provisional levels and strengthen the government program to improve coordination and integration at the local level within health sector (primary care and tertiary care levels) and with non-health stakeholders for providing elderly care including palliative and rehabilitation care, disease surveillance, and prevention of diseases. The RBL program will also leverage the priority afforded over the past decade by the government for a results-based approach, using key performance indicator-based planning and monitoring at the provincial level. As the pharmaceutical, finance, and procurement related measures to ensure better governance requires initiatives to be addressed at the province levels as well as the Ministry of Health (MOH) levels, the RBL program will support in parallel, results achieved by all provinces and the MOH.

B. Purpose of Environmental and Social Management Framework

3. The main purpose of this Environmental and Social Management Framework (ESMF) is to identify potential environmental and social impacts of any physical interventions that will be undertaken by the RBL program. The ESMF provides broad guidelines outlining measures, processes, institutional arrangements, procedures, tools, and instruments that need to be adopted by the project executing agency during the implementation of program activities to avoid, minimize or mitigate any adverse environmental or social impacts.

¹ Government of Sri Lanka. 2015. [National Strategic Framework for the Development of Health Services 2016 to 2025](#).

² The nine provincial councils in Sri Lanka are: Central, Eastern, Northern, North Central, North Western, Sabaragamuwa, Southern, Uva, and Western.

4. The ESMF outlines both the relevant national standards and Asian Development Bank (ADB) Safeguard Policy Statement, 2009 (SPS 2009) for the implementation of safeguard measures. It outlines due diligence mechanisms from environmental and social: involuntary resettlement and Indigenous Peoples screening and categorization to safeguard instrument preparation to management and monitoring of activities financed under the RBL program. Based on environmental categorization, the activities will proceed without any further environmental examination, the preparation of a site-specific environmental and social management plan (ESMP) or carrying out an initial environmental examination (IEE) inclusive of an ESMP. The program will exclude any activity that would generate any involuntary resettlement impacts or impacts on Indigenous Peoples, from its activities.

5. This ESMF is the principal document for undertaking environmental and social safeguards for all physical interventions funded under the RBL program. While the location, scope, and nature of the construction, repair, and renovation activities were not identified at the preparatory stage, the ESMF document was prepared to ensure that proper due diligence on environmental and social aspects is undertaken. It will serve as a guide for all program-based activities during implementation once the scope and designs have been identified.

6. The ESMF outlines the implementation arrangements for environmental and social safeguards implementation, monitoring, and reporting. It will also outline any actions required for sustainable implementation of safeguards, including the grievance redressal mechanism (GRM) and any capacity needs to be strengthened.

7. The key objective of ESMF is to assist executing and implementing agencies of the program to identify potential environmental and social impacts early in proposed activities, and to guide them in activity level safeguard planning and implementation. It also guides executing and implementing agencies in monitoring safeguard compliance of the program which, in turn, will help identify improvements in safeguard compliance of the program, and its weaknesses, if any, that need further attention. ESMF will also help raise the performance level of the country safeguard systems which is one of the key objectives of the RBL modality.

8. The ESMF is based on the government's environmental laws, regulations, and environmental assessment procedures found in the country's main environment related legislation, the National Environmental Act of 1980 (NEA),³ its amendments of 1988 and 2000, and the Gazette Extraordinary No. 772/22 of 24 June 1999 and No. 1104 of 5 November 1999. These legal instruments provide guidelines and directions on the screening of projects, their categorization into "prescribed" and "non-prescribed" projects, scoping their environmental impacts, formulation of terms of reference (TOR) for environmental assessment, obtaining environmental clearance, and environmental compliance monitoring during project construction and operation phases. ESMF also draws best safeguard practices from the environmental safeguard policy of ADB. ESMF also fills in gaps found in the local environmental safeguard requirements when compared with ADB's environmental safeguard policy principles and best practices. As an RBL program, the program must satisfy applicable safeguard policy principles of ADB, while using local delivery processes and implementing procedures.

³ Except for the jurisdiction of the North Western Province (NWP), where the NWP Provincial Council has enacted a separate environmental statute - North Western Province Environmental Statute No. 12 of 1990 - in accordance with the provisions of the 13th Amendment to the Constitution of Sri Lanka, all other provinces operate under the central environmental regulatory framework of NEA. The NWP Environmental statute provides regulatory provisions on: (i) the Environmental Impact Assessment (EIA) process; (ii) the Environmental Protection License (EPL) procedure; and (iii) the Scheduled Waste Management License procedure, which are largely aligned with those under the NEA.

9. The ESMF outlines safeguard best practices that will be applied to the program: (i) provides a screening and categorizing system to screen potential environmental, involuntary resettlement impacts of the program, and its potential impacts on Indigenous Peoples; (ii) helps identify activities with potential and significant adverse environmental impacts to exclude them from the program; (iii) helps finding whether avoidance or minimization or mitigation of environmental impacts and risks meet requirements of environmental laws and regulations of the government and ADB's environmental and social safeguards requirements; (iv) creates awareness among executing and implementing agencies and participating local government agencies about the program's safeguards requirements; (v) guide executing and implementing agencies of the program in conducting meaningful consultations with all activity stakeholders; (vi) guides program personnel in initial screening of activities and preparing ESMPs and their implementation; (vii) guides program personnel in disclosing environmental information to all stakeholders; (viii) outlines institutional arrangements for implementing safeguard planning instruments, GRMs, monitoring, and reporting, and undertaking corrective action plans, if any; and (ix) helps enhance institutional capacity for safeguard compliance at executing and implementing agencies and local government agencies, and among program contractors.

II. DESCRIPTION OF ACTIVITIES PROPOSED UNDER THE RBL PROGRAM

A. Program Scope

10. The RBL program aims to foster a healthier nation, contributing to the economic, social, mental, and spiritual development of Sri Lanka. This goal aligns with the vision of the SLNHP, the NSFDHS, their supporting policies, and the 2023 reform recommendations. The outcome is that the program seeks to improve the quality, efficiency, and accessibility of integrated healthcare and management services for high-burden diseases at community, primary, and first referral care levels. The outcome will be measured by two disbursement-linked indicators (DLIs):⁴ (i) the average waiting time of patients for 3 elective surgeries (cataract, hernia by sex and hysterectomy) at first referral hospitals (base hospital A&B⁵) reduced by 30% from baseline (DLI 1), and (ii) Surgical site Hospital hospital-Acquired Infections_(HAI) per 10,000 admissions (disaggregated by sex) at first referral hospitals (BHs A&B) reduced by 40%ⁱⁱ (DLI 2). The RBL program consists of three outputs (footnote 4) as follows: (i) output 1: First referral care services enhanced; (ii) output 2: pandemic prevention, preparedness, and response enhanced; and (iii) Output 3: Health sector technical capacity and pharmaceutical supply chain management improved.

B. Outputs and Activities

11. Each output encompasses various hardware and software activities aimed at strengthening and expanding health service development as described below:

12. **Output 1:** Integrated curative care services via first referral hospitals enhanced are (i) **DLI 3:** planning, monitoring, budgeting and human resource management capacity of health sector strengthened; (ii) **DLI 4:** patient-centered secondary care services with quality, safety, climate

⁴ Disbursement-Linked Indicators, Verification Protocols, and Disbursement Schedule (Annex 1).

⁵ Secondary care hospitals, as known as first referral hospitals, refers to health care facilities that provide four basic specialties (medicine, surgery, pediatric, obstetrics and gynecology) and other defined specialties psychiatry, orthopedic, ear, nose, throat (ENT) and eye care to manage patients needing specialist care that are not available in primary medical care institutions (PMCI), while tertiary hospitals provide added specialties. Based on the treatment capacity, the secondary care hospitals are further classified by Based Hospital Type A and Type B.

resilience measures enhanced; and (iii) **DLI 5:** care pathways linking first referral hospitals for selected high burden diseases formalized.

13. **Output 2:** Pandemic prevention, preparedness, and response enhanced will address identified gaps in pandemic prevention, preparedness, and response related activities. There is one DLI under this output, **DLI 6:** Notifiable disease surveillance and quality assurance of public health laboratories improved.

14. **Output 3:** Health sector technical capacity and pharmaceutical supply chain management improved are (i) **DLI 7:** Logistics capacity and quality assurance of the pharmaceuticals enhanced; and (ii) **DLI 8:** Procurement management capacity enhanced.

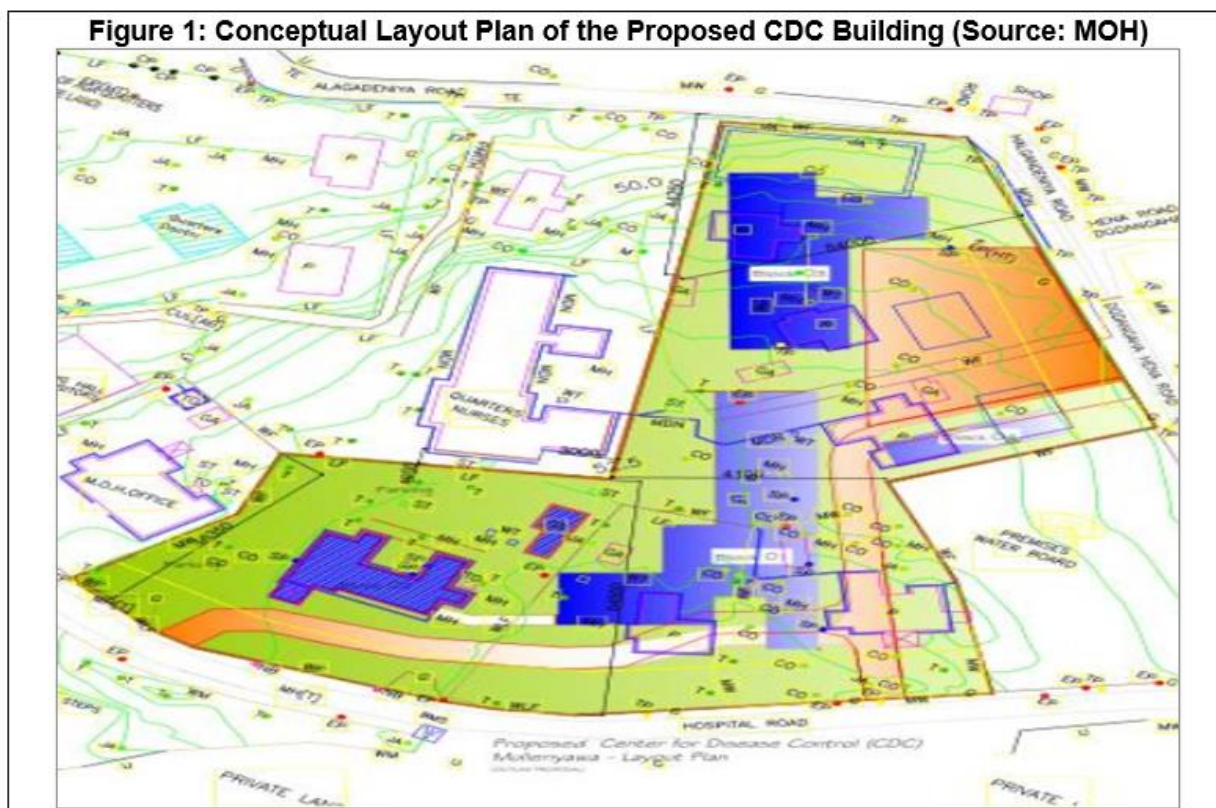
C. Details of Program Activities

15. Out of the activities planned under the proposed RBL program, the following activities are expected to trigger environmental risks.

16. **New Centre for Disease Control.** Under this activity, it enhances the pandemic preparedness, prevention, and response capacity by setting up of a new Centre for Disease Control (CDC) under DLI 6. The proposed CDC is a 5-storey building and its main components based on the current available conceptual designs are:

- (i) BLOCK 01-Main Building (1500m²x G+4)
- (ii) ground floor – entrance, main lobby, reception, waiting area, VIP area, emergency operation rooms, restaurant associate facility
- (iii) first floor – Administration Divisions, Account Divisions, IT Divisions, General Store Mini-Conference Hall etc.
- (iv) second floor – Consultant Office 08, Auditorium
- (v) third floor – Consultant Office 07, Library
- (vi) fourth floor – public health laboratories
- (vii) fifth floor – gym, roof Slab

Figure 1: Conceptual Layout Plan of the Proposed CDC Building (Source: MOH)



17. **Scaling up the capacity of apex public health laboratory in the Medical Research Institute (MRI).** The MRI building renovation (includes the air quality improvement) needs to include the replacement of flooring, roof, ceilings, power transformers and electric wiring systems, fire safety measures, decontamination facilities, access control mechanisms, and negative and positive pressure areas, laboratory fittings to provide a non-hazardous and safe environment and to replace and upgrade the MRI air quality system with High Efficiency Particulate Air (HEPA) filters, animal health center and virology laboratories required air pressures, to ensure a high-level of biosafety in the laboratory and to ensure it can carry out its routine day-to-day operations.

18. **Renovating and scaling up the capacity of base hospitals A&B:** It will renovate and scale up the capacity of base hospitals A&B to enable the provision of standardized integrated first referral care services for managing identified high burden diseases, patient and staff friendly facilities, improved surgical service capacity, and enhanced climate resilience against landslide, flood, and other climate-related extreme weather (DLI 4). Base hospitals A&B in all nine provinces will benefit with this activity.

19. Further under this DLI 4, the base hospitals A&B will be introduced with at least five of the nine climate resilience measures for the premises, buildings, equipment or processes. Climate proofing is defined as - if any five or more of the following nine aspects are addressed in selected base hospitals (i) reducing greenhouse gas emissions; (ii) improving water management; (iii) sourcing food locally and reducing food waste; (iv) improving water, sanitation, and hygiene measures; (v) improving energy efficiency by purchasing energy efficient appliances and lighting systems, utilizing renewable energy sources like solar power, conducting energy audits to identify inefficiencies, and investing in building renovations to enhance insulation and ventilation; (vi)

building stronger infrastructure to withstand extreme weather; (vii) relocating infrastructure from vulnerable areas are considered; (viii) availability of a disaster response plan for activating during a climate related disaster situation affecting the hospital; and (ix) promoting behavioral changes among staff.

20. Introduction of new and/or replacement equipment within MOH guidelines and infrastructure development and/or enhancement and/or repairing and/or expanding clinic areas, wards, out-patient department areas related to the care pathways will also be undertaken under DLI 4. Functioning digital information systems will be introduced to base hospitals A&B under DLI 5.

21. **Renovating and/or expanding and/or repairing the staff quarters of identified base hospitals A&B:** The staff quarters renovated and/or expanded and/or repaired needs to be guided by the currently available staff facilities by staff category and should ensure that staff accommodation is available for four specialist consultants, for intern medical officers (in relevant base hospitals), for house officers, nurses, supplementary staff and support staff as guided by circulars available from MOH and/or provinces. New constructions for staff quarters will not be approved and only existing staff quarters can be renovated and/or expanded and/or repaired (DLI 4).

22. **Renovating pharmaceutical storage facilities.** Under this, pharmacy drug stores that need to be repaired and/or renovated or expanded will be identified and carried out the required works including for the Family Health Bureau. The National Medicines Quality Assurance Laboratory of the National Medicine Regulatory Authority will be renovated and developed to meet the ISO 17025 standard (DLI 7).

III. ENVIRONMENTAL & SOCIAL SAFEGUARDS REQUIREMENTS

A. Local Environmental Social Policy and Legal Framework

1. Environmental Policy and Legal Framework

23. A summary discussion of the policies, laws, regulations, standards, and guidelines that directly apply or relate to the project's environmental issues at the national and local level and donor requirements (if any), should be presented. This explains the context of the project on factors such as project siting and design, approval requirements, mitigation measures, emission/discharge or ambient standards, monitoring, and reporting.

24. In Sri Lanka, there are over 70 laws that directly or indirectly relate to protecting and conserving the natural environment and human health. While most of these laws address specific issues pertaining to environment in the respective sector, it was the introduction and enactment of the National Environmental Act (NEA) that provided the overarching legal basis for regulation of pollution and protection of the environment in a comprehensive manner. The clearance or approval or concurrence whichever is applicable to implement the project, or program shall be obtained before implementing the project. The relevant regulations related to environmental clearance are indicated below and the relevant laws are summarized in Annex 1.

- The Constitution of Sri Lanka
- National Environmental Act No. 47 of 1980 (and its subsequent amendments)
- Coast Conservation Act No. 57 of 1981
- North Western Province Environmental Statute No. 12 of 1990 (and its subsequent amendments)

- Pradeshiya Sabha Act No. 15 of 1987
- Flood Protection Ordinance, Act No. 22 of 1955
- Soil Conservation Act, No. 25 of 1951
- Mines and Minerals Act No. 33 of 1992
- Fauna and Flora Protection Ordinance, Act No. 49 of 1983
- Forest Ordinance, No 17 of 1907 (and amendments)
- National Water Supply and Drainage Board Law of No. 2 of 1974
- National Policy for Rural Water Supply and Sanitation of 2001
- Prevention of Mosquito Breeding, Act No. 11 of 2007
- The Urban Development Authority, Law, No 41 of 1978
- Municipal Council Ordinances and Acts – Urban Council Ordinance 61 of 1939, Act 29 of 1947, Act 18 of 1979, and Act 13 of 1979
- Sri Lanka Land reclamation and development cooperation Act No. 15 of 1968, Act No. 52 of 1982, Act, Act No. 35 of 2006
- National Heritage Wilderness Areas Act (No. 3 of 1988)
- Water Resources Board Act No. 29 of 1964, Amendment No.42 of 1999

a. The Constitution of Sri Lanka

25. The Constitution of Sri Lanka contains several provisions relating to the environment such as Article 28 (*"It is the duty of every person of Sri Lanka to protect nature and conserve its riches"*) and Article 27 (14) (*"The state shall protect, preserve and improve the environment for the benefit of the community"*). The 13th Amendment to the Constitution created a new institution at the provincial level for environmental protection and management. Each provincial government under this Amendment has legislative and executive powers over environmental matters (Articles 154G (5) (b)). Using such provincial legislative and executive powers, the Northwestern Provincial Council has passed a separate environmental statute - Northwestern Province Environmental Statute No 12 of 1990 – in accordance with the provisions under the above-mentioned 13th Amendment to the Constitution of Sri Lanka. The statute provides for the establishment of the Northwestern Province Environmental Authority, to make provision with respect to the powers, functions and duties of that authority and to make provision for the protection, management and enhancement of the environment and for the regulation maintenance and control of the quality of the environment.

b. National Environmental Policy of Sri Lanka Of 2003

26. The Constitution of Sri Lanka makes it "the duty of every person in Sri Lanka to protect nature and conserve its riches." The National Environmental Policy (NEP) acknowledges this duty and seeks to provide the direction according to which steps will be taken to conserve and manage Sri Lanka's environment in all its aspects.

27. The NEP renews the commitment of government, in partnership with the people, to effectively manage the environment for the benefit of present and future generations. The aim of NEP is to ensure sound environmental management within a framework of sustainable development in Sri Lanka. NEP is supported by many other policies and strategies for other sectors.

28. The NEP emphasizes that caring for the environment is the bounden duty of any institution, government, or non-government, and of any individual that uses, or otherwise carries out, an activity that has an impact on environmental resources.

29. The NEP binds all organizations and individuals who use environmental resources or otherwise have an impact on the resources to exercise due care to avoid environmental degradation. The Implementation of the Policy will pave the way for sustainable development.

30. The NEP objectives are to:

- promote the sound management of Sri Lanka's environment in its entirety without compromise, balancing the needs for social and economic development and environmental integrity, to the maximum extent possible while restricting inimical activities;
- manage the environment by linking together the activities, interests, and perspectives of all groups, including the people, nongovernment organizations (NGOs), and government at both the central and the local levels; and
- assure environmental accountability.

31. The NEP principles are:

- The guiding principles of environmental management will be "polluter pays" and the need to reduce consumption and recycle and reuse materials to the maximum extent possible.
- When natural resources are used, it will be ensured that such use is wise, sustainable, and consistent with the integrity of ecosystems and evolutionary processes.
- When non-living resources are used, it will be ensured that such use is consistent with environmental best-practice, bearing in mind the need to provide also for future generations.
- Traditional knowledge and practice will be respected in the development of environmental management systems.
- Effective governance will be ensured through the decentralization of environmental management services to the maximum extent possible.

32. The NEP statements are:

- Resources such as land, water, air, minerals, and biodiversity will be managed in a manner consistent with the viability of ecological processes.
- Environmental management will be through participatory, transparent, predictable and accountable decision-making processes at all levels.
- In addition to protecting the environment from abuse, management systems will consider the need to restore environments damaged in the past.
- Environmental management systems will be encouraged to be flexible so as to adapt to changing situations and adopt the precautionary principle.
- The economic value of environmental services will be recognized so as to assure the sustainability of such services for the benefit of the people.
- The state of the environment will continuously be assessed and reported on, through an appropriate institutionalized monitoring framework based on a comprehensive set of indicators
- The institutional framework for sound environmental management will be strengthened through capacity building, legislative enactments and improved interinstitutional coordination and linkages.
- "Life cycle" and "cleaner production" principles will be applied to improve the efficiency of natural resource use and to improve environmental quality.

c. National Environmental Act No 47 of 1980

33. The National Environment Act, No. 47 of 1980 (NEA) is the primary national legislation for environmental protection and with its amendments the Act provides a framework for sustainable development with the management of natural resources such as water, air, soil, forests, flora, and

fauna in Sri Lanka. The Central Environmental Authority (CEA) is the key regulatory body, established under the NEA. The NEA includes key regulatory provisions implemented by the CEA to assess, mitigate, and manage the environmental impacts of development activities. Those that are relevant to the RBL program are, (i) The Environmental Impact Assessment (EIA) procedure for major development projects; (ii) The Environmental Protection License (EPL) procedure for the control of pollution; (iii) Scheduled Waste Management License (SWML) procedure for the management and control of hazardous waste disposal; (iv) Other regulations related to pollution control enacted under the provisions of the NEA. Apart from the regulatory provisions of the NEA, there are other relevant legislation and regulatory provisions for pollution control, environmental perseverance, and protection, which are enacted by State-sector entities.

34. The laws, rules, and procedures for environmental assessment (including IEE, EIA, EPL, SWML, etc.) of any project are found in the NEA and its implementing regulations. These are executed by the CEA except for coastal areas which is under Coast Conservation Department (CCD) and within Northwestern Province which comes under Provincial Environmental Authority of North Western Province. These laws, rules and procedures are supported and elaborated by sector specific laws and their regulations adopted by the relevant ministries and departments.

35. **Environmental impact assessment.** The Government of Sri Lanka recognizes EIA as an effective tool for integrating environmental considerations with development planning. The application of this technique is considered as a means of ensuring that the likely effects of development projects on the environment are fully understood and considered at an early stage of the project and throughout the project cycle. The environmental assessment is primarily concerned with assessing direct and indirect impacts of a project on the biophysical and human environment and ensuring that these impacts are addressed by appropriate environmental protection and enhancement measures. The environmental assessment system supports project proponents in incorporating environmental considerations in project planning and in determining environmental impacts of their projects.

36. The NEA of 1980 recommended the adoption of environmental assessment for development projects. The amendment to NEA in 1988, environmental assessment was made mandatory for projects with significant environmental impacts. The types of projects that need EIA are listed in the Gazette Extraordinary No. 772/22 and No. 1104 of 1993. The project approving agencies are listed in Gazette Extraordinary No. 859/14 of 1995 in which ministries with 14 subject areas (e.g., forest, energy, etc.) and eight statutory bodies have been identified. This legislation prescribed 31 categories of projects ("prescribed projects") that need environmental assessment. These projects irrespective of size if located in the coastal zone will undergo the approval process that is laid down in the Coast Conservation Act. However, projects located totally outside the Coastal zone will be subjected to the approval process laid down in the NEA. All program activities expected to be categories as un-prescribed due to minimal civil works associated with refurbishment and renovation. Such activities will not require adoption of EIA/IEE assessment, however, will require an initial screening and preparation of an environmental social management plan under ADB safeguards policy requirements as defined in this ESMF.

37. Regulations pertaining to EIA process are published in Government Gazette Extraordinary No.772/22 dated 24 June 1993 and in several subsequent amendments. According to Section 23AA (1) under Part IV C (Approval of projects) of the NEA all "Prescribed Projects" that are being undertaken in Sri Lanka by any Government Department, Corporation, Statutory Board, Local Authority, Company, Firm or an Individual will be required to obtain approval under this Act for the implementation of such prescribed projects. The prescribed projects are set out in the Schedule of the Order under Section 23Z published in the Gazette (Extraordinary) No.772/22 of

24 June 1993 and in subsequent amendments in 1995. The procedure stipulated in the Act for the approval of projects provides for the submission of two types of reports Environmental Impact Assessment (EIA) report and Initial Environmental Examination (IEE) report. The EIA process is implemented through designated Project Approving Agencies (PAAs) as set out in the Schedule of the Order under Section 23Y published in the Gazette (Extraordinary) No. 859/14 of 23 February 1995 and in subsequent amendment in 2004. PAA's are those organizations that are directly connected with such a prescribed project. At present, 23 state agencies have been recognized as PAAs. A Project Proponent should submit Preliminary Information (P to the CEA regarding the nature, location, and impacts of a proposed project to determine whether the project/activity requires an EIA/IEE. The CEA has developed a Basic Information Questionnaire (BIQ)⁶ for submission of Preliminary Information. The BIQ may also be obtained from the EIA Unit of the CEA Head Quarters or the Provincial / District offices of the CEA. The best time for a Project Proponent to submit the preliminary information on a proposed project/activity is immediately after its concept is finalized for a given location is decided. The need for an environmental assessment and the level of analysis required (EIA or IEE) for a proposed activity is screened by the CEA based on the submitted Basic Information Questionnaire by the Project Proponent. There are two possible screening outcomes. (i) Categorical Exclusion: the activity does not fall under the prescribed category or located in a sensitive area as defined in the regulations, and it is clear that the project will have no significant environmental impacts. Environmental Clearance is granted (with or without conditions – in the form of environmental recommendations) and the project may proceed; (ii) EIA/IEE required: the activity falls under the prescribed category, has potentially serious environmental impacts and/or is in a sensitive area. With the screening decision, the CEA establishes a scoping committee to decide on the level of study (IEE or EIA) and prepare Terms of Reference. Alternatively, if the project falls within the jurisdiction of a government authority which is an appointed project approving authority the CEA will then determine which will be the appropriate PAA for administering the EIA process. Upon submission of the EIA/IEE report, a Technical Review Committee appointed by CEA/PAA reviews the completed IEE or EIA report and recommends whether Environmental Clearance should be granted; the final decision is made by CEA.

38. Environmental Protection License. The Environmental Protection License (EPL) is a regulatory and/or legal tool under the provisions of the NEA that has been introduced to (i) prevent or minimize the release of discharges and emissions in compliance with national discharge and emission standards; (ii) provide guidance on pollution control for polluting processes; and (iii) encourage the use of pollution abatement technology such as cleaner production, waste minimization etc. The "prescribed activities" for which EPL is required are stipulated in the Gazette (Extraordinary) No. 2264/18 dated 27 January 2022. The specified categories of 'prescribed projects' need to comply with the regulations and discharge and emission standards depending on the type of activity as well as the receiving environment stipulated in the Gazette (Extraordinary) No. 2264/17 dated 27 January 2022. The EPL regulation classifies activities into four categories, namely, A, B, C and D based on the polluting potential of the relevant activity discharging/emitting waste into the environment. While EPL for A and B categories are directly administered by the CEA, issuing EPL for category C and D are delegated to the local authorities. CEA has published standards for various parameters such as effluent quality, air quality, noise, and interim standards for vibration. For prescribed activities, project proponents shall apply for the EPL and CEA has developed an EPL application form⁷ for submission. The application may also be obtained from the Pollution Control Unit of the CEA Head Quarters or the Provincial / District offices of the CEA. A duly filled application with supporting documents shall be submitted

⁶ Government of Sri Lanka, Central Environmental Authority. [Basic Information Questionnaire](#).

⁷ [Environmental Protection License Application](#).

for the prescribed activity to the relevant Provincial Office / District Office of the CEA or relevant Local Authority 30 days prior to the commencement of the operation.

39. **Disposal of scheduled waste.** As stipulated through National Environmental (Protection & Quality) Regulations as published in Gazette Notification No. 1534/18 (dated 25.01.2008), which deals with hazardous waste from specific and nonspecific sources and these wastes are called scheduled waste. Handling of scheduled waste (generate, collect, transport, store, recover or recycle and disposal of waste or establish any site or facility for the disposal) should conform to the said regulations. Part II of the regulation deals with the issue of license for the management of scheduled waste, which is commonly called as Scheduled Waste Management License (SWML) and Part III on general matters including definitions of terms etc. Five Schedules⁸ under the regulation include the application forms for scheduled waste management and operating a facility for scheduled waste management (Schedule IV), format for maintaining records (Schedule V) format for the reporting of details of waste disposal operations and environmental surveillance (Schedule VI), format for reporting accidents (Schedule VII) and categorization of non-specific and specific scheduled waste (Schedule VIII).

40. Discharge of HCW during operation falls within the prescribed category for pollution control, and as such, is required to obtain an SWML. The HCW types applicable for the proposed activities are specified in the schedule VIII the National Environmental (Protection and Quality) Regulations No.1 of 2008, (Gazette No. 1534/18, 2008.02.01).

Table 1: Scheduled Waste Classifications applicable for the Project

Waste Code	Scheduled Waste
PART I - Scheduled Wastes from Non-Specific Sources	
26. N 261	Pathogenic and clinical waste and quarantined materials Pathogenic and clinical waste and quarantined materials
28. N 282	Mixtures of scheduled wastes A mixture of scheduled and non-scheduled wastes
PART II - Scheduled Wastes from Specific Sources	
4. S 041	Clinker, slag and ashes from scheduled wastes incinerator Clinker, slag and ashes from scheduled wastes incinerator
28. S 281	Bio Medical and Health Care Waste from Health Care Institution including Medical Laboratories and Research Centres Infectious health care waste including laboratory cultures; waste from isolation wards; tissues (swabs), materials or equipment that have been in contact with infected patients; Human tissues or fluids
S 282	Sharps including needles and scalpels
S 283	Biological and Anatomical waste including tissues, organs, body parts, human fetuses and animal carcasses, blood, and body fluids
S 284	Outdated and discarded drugs including cytotoxic drugs and chemical reagents
S 285	Materials and containers contaminated with the above specified waste

41. **Environmental regulations under NEA.** Environmental standards stipulated under the NEA and its regulations apply to ambient water quality, effluent quality, air quality (both ambient and stationary sources), noise, and vibration. The following table provides a summary of the regulations applicable to this program.

⁸ Government of Sri Lanka. 2008. [The Gazette of the Democratic Socialist Republic of Sri Lanka, Part 1.](#)

Table 2: Most Common Environmental Regulations that are Applicable to the Proposed Program Activities

Environmental Component	Relevant Regulations
Ambient water quality	National Environmental (Ambient Water Quality) Regulations No. 1 of 2019 published in Gazette (Extraordinary) No. 2148/20 dated 05 November 2019
Discharge of wastewater / effluents	National Environmental (Protection and Quality) Regulations, No. 1 of 2008 published in Gazette (Extraordinary) No. 2264/18 dated 27 January 2022
Discharge of HCW (Scheduled waste)	National Environmental (Protection and Quality) Regulations No.1 of 2008, published in Gazette No. 1534/18 dated.01 February 2008
Ambient air quality	National Environmental (Ambient Air Quality) Regulations, 1994, published in Gazette (Extraordinary), No. 850/4 of December 1994 and amendment gazette (Extraordinary) No. 1562/22 of 2008
Air emissions	National Environmental (Stationary Sources Emission Control) Regulations, No. 01 of 2019 under the Gazette (Extraordinary) No. 2126/36 dated 05 June.2019
Noise	National Environmental (Noise Control) Regulations No.1 1996 published in the Gazette (Extraordinary) No. 924/12 dated 23 May1996
Vibration	Proposed Interim Air-Blast Over Pressure and Ground Vibration Standards for Sri Lanka, Pollution Control Division, CEA dated 04 December 2008

d. Health Care Waste Management

42. **Draft National Policy on Health Care Waste Management.** In 2001, the Government of Sri Lanka drafted a comprehensive national policy on Health Care Waste Management (HCWM). It has three main sections covering: (i) General considerations on HCWM and the institutional mechanism for policy implementation that should be set up at national level. (ii) Provisions for the safe management of HCW in medical Institutions, including regulations and HCW management plans. (iii) Provisions for the implementation of and the monitoring of HCW management plans at national and provincial levels including legislation, provision of human and financial resources, training and awareness, and participation of the private sector.

43. Some salient features of the draft policy are highlighted below.

- Health care waste generated by the medical institutions of the public and private sector must be safely handled and disposed of. HCWM is an integral part of hospital hygiene and infection control. Hence each Health Care Facility (HCF) is legally responsible for the proper management of waste that it generates until its final disposal.
- Major hospitals must prepare specific HCWM plans outlining needs, objectives, and strategies, procedures for approved management and disposal of HCW and timeframe for implementation. The Provincial Director of Health Services (PDHS) must set up the annual Provincial, and District HCWM plans to present the strategy for HCWM that should be developed at the regional level.⁹ The provincial/regional plan shall be a compilation of individual HCWM plans of each HCF the province is responsible for. All plans need to be validated and supported by the Central or Provincial Health Services before implementation.
- Specific budget lines need to be developed relating to hospital hygiene and HCW management in the National Accountancy of the Health System to ensure sufficient human and financial resources are allocated to implement the HCWM plans in medical institutions.
- Policy implementation needs to be monitored based on specific objectives defined in the National Action Plan (the plan developed to implement the policy country wide - see the section below) and that institutionally, the National Steering Committee on Clinical Waste

⁹ Existing HCWM practice include source separation and disposed of through private HCWM service providers such as Insee and Sisili Hanaro or onsite incineration.

Management is responsible for the overall monitoring and evaluation and the PDHS for the implementation of monitoring procedures in HCFs within their area of jurisdiction.

- Other key aspects highlighted relate to approved HCWM practices, equipment for treatment and disposal, training and awareness, involvement of civil society and private sector participation.

44. The institutional mechanism for implementing the national policy is envisaged under three levels of management:

- At the central level, coordination and development of strategies and mechanisms to implement policy commitments in accordance with national requirements have been vested with the National Committee on Clinical Waste Management (NCCWM). In addition, the development of training and capacity building packages, training implementation supervision, setting up of HCW monitoring protocols, overall monitoring and evaluation have been assigned to the NCCWM. The central health services are responsible for technically backstopping HCFs under its management purview.
- At the provincial level, implementation of the policy has been vested with the Provincial Councils. The PDHS is responsible for setting up provincial HCWM plans, synthesized by individual hospital HCWM plans coming under its area of jurisdiction, developing financial resources, and implementing HCW monitoring/auditing procedures.
- At the local level, the setting up of HCWM plans that outline needs, objectives, strategies, procedures, and timeframes for medical institutions has been vested with the hospital management.

45. The national policy on HCW management to this date remains a draft as all attempts for its formal adoption in the past have not been successful.

46. **National Guidelines on Health Care Waste Management.** In 2001, the government drafted national guidelines for healthcare waste management with the aim of (i) providing a better understanding of the fundamentals of HCW management planning and (ii) directing HCFs in setting necessary procedures and standards to comply with policy and legislative requirements. These have been drafted in a form that provides all fundamental elements that should be integrated into future legislation specific to HCW. Although guidelines were reviewed by the NCCWM as well as the MOH, it did not receive formal endorsement by the government.












47. The draft national guidelines contain both practical and conceptual information on HCW management covering four main sections: (i) Definition and categorization of HCW, including potential harmful effects that can result from its improper management; (ii) Procedures for segregation, packaging, labelling, collection, storage, transportation, and disposal (including the selection of appropriate treatment and disposal technologies for HCW that should be applied and followed by all HCFs in the country; (iii) Instructions for the implementation of healthcare waste management plans, including detailed description of duties and responsibilities of healthcare provider at various levels; and (iv) Instruction for personnel of Central and Provincial Health Services who oversee HCW management to ensure smooth implementation of the guidelines and to set up regular monitoring mechanisms.

48. In 2007, concise guidelines for HCW management were prepared under the Hospital Efficiency and Quality component of the Sri Lanka Health Sector Development Project based on the detailed draft guidelines prepared in 2001. The concise guidelines which mainly contain sections in waste categorization and healthcare waste management procedures have been formally adopted and incorporated into the Handbook of Infection Control.

49. **Code of Hygiene.** Management of HCW is an integral part of hospital hygiene and infection control that must be reinforced with internal rules. In 2008, the government developed a comprehensive Code of Hygiene that completed the existing Infection Control Handbook. The national code of hygiene contains recommended HCWM procedures and is seen as part of an overall set of actions to control the hygiene conditions within the hospital. It sets out duties and responsibilities of medical and non-medical staff regarding hygiene procedures to be applied, recommended practices to maintain a high level of hygiene and ongoing management and managerial activities to be carried out in the hospital. The code of practice must be implemented along with the HCWM guidelines.

50. **National Color Code.** In 2006, the MOH developed a national color code for implementing a uniform system for separating HCW streams based on the type of waste, treatment, and disposal methods. The code recommends technical specifications for bags and bins to be used for different waste types. The national color code identifies seven specific categories.

Table 3: National Color Code for Segregation of Health Care Waste

Color		Category	Contents
	Yellow	Infectious waste	Cultures or stocks from microbiology, tissues from surgeries/autopsies, material or equipment in contact with blood or body fluids, soiled linen, dialysis equipment such as tubing and filters
	Yellow with red stripes	Sharp bin	Sharps, needles and IV sets contaminated with body fluids
	Orange	Clean plastic waste	Uncontaminated plastic medicine bottles, saline bottles without IV sets, plastic bags
	Purple	Cytotoxic waste	Chemotherapy drugs and their residues
	White	Pharmaceutical waste	Expired medications, discarded drugs, and unusable pharmaceutical products
	Black	Non-infectious / non-hazardous waste	General or municipal waste that is uncontaminated
	Green	Discarded food / biodegradable waste	Garden, kitchen and food waste
	Red	Clean glass	Uncontaminated drink bottles, water bottles
	Blue	Clean paper	Paper, cardboard and office stationery
	Brown	Metal	Metal packaging (cans, aluminum foils etc), uncontaminated metal components
	Gray	Electrical and electronic waste (e waste)	Discarded computers/accessories, printers, cartridges, batteries, fluorescent tubes

51. The national policy on HCWM to this date remains a draft as all attempts at its formal adoption in the past have not been successful. As a result, there have been no legal enactments made to operationalize the policy. As such, to this date, the national policy, and guidelines on HCW management serve as a broad guideline only with no mandatory binding legal requirement. The only legal requirement for HCW in Sri Lanka stems from the National Environmental Act, as explained above.

2. Social Policy and Legal Framework

52. Sri Lanka's social policy and legal framework encompass a broad range of areas, including social welfare, labor rights, human rights, and socioeconomic development. These policies are designed to address the needs of the population, particularly vulnerable and marginalized groups, while promoting inclusive development. The framework is shaped by both national laws and international commitments, including those under United Nations (UN) and International Labour Organization (ILO) conventions. The key aspects of Sri Lanka's social policy and legal framework are outlined as follows:

53. The Constitution of Sri Lanka (1978, amended) provides the foundation for the country's legal framework and guarantees certain social rights. Articles 10 to 16 of the Constitution ensure fundamental rights such as equality before the law, freedom of speech, and the right to be free from discrimination based on race, religion, language, caste, sex, or place of birth.

54. Sri Lanka has a relatively well-established social welfare system, which includes social security benefits and various programs such as old-age pensions, disability benefits, and survivor benefits. The National Social Security Board (NSSB) and the Samurdhi Program aim to alleviate poverty by providing financial assistance to low-income families. The Disability Pension Scheme offers financial aid to disabled individuals unable to work, ensuring their dignity and the government's obligation toward disabled persons. Similarly, welfare programs for the elderly provide care and financial assistance to senior citizens, particularly those without family support.

55. Sri Lanka has a number of labor laws that address workplace issues such as worker rights, wages, working conditions, and industrial relations. Key labor-related legislation includes the Factory Ordinance, the Employment of Women, Young Persons, and Children Act, the Industrial Disputes Act, the Wages Board Ordinance, the Workmen's Compensation Ordinance, and the Sri Lanka Bureau of Foreign Employment (SLBFE) Act, which regulates overseas employment and protects the rights of migrant workers.

56. There are several legal provisions in Sri Lanka aimed at protecting human rights. The Human Rights Commission of Sri Lanka, established by an Act of Parliament, is an independent body responsible for promoting and protecting human rights. It has the authority to investigate human rights violations and provide remedies.

57. The government enacted the Prevention of Domestic Violence Act in 2005, which provides legal protection for individuals facing domestic violence, enabling them to seek protection orders and other remedies. The Right to Information Act, passed in 2016, grants citizens the right to access public information, excluding national security-related or confidential information, thereby promoting transparency and accountability.

58. The Constitution of Sri Lanka includes anti-discrimination clauses that prohibit discrimination based on ethnicity, religion, gender, or social status. Additionally, Sri Lanka is a signatory to various international conventions, including the International Convention on the Elimination of All Forms of Racial Discrimination and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).

59. In 1998, Sri Lanka established the National Child Protection Authority through an Act of Parliament, creating a robust legal framework for the protection of children's rights. The Child Abuse Act of 1998 safeguards children from abuse, neglect, and exploitation and outlines penalties for related offenses. The Children and Young Persons Ordinance (1952) provides protection for children regarding employment, welfare, and rights. Additionally, the Penal Code prohibits child labor, abuse, and exploitation.

60. Sri Lanka's Constitution guarantees equal rights for men and women. The country is a party to the CEDAW, which requires it to take measures to eliminate discrimination against women. The Maternity Benefits Ordinance ensures maternity leave, benefits, and job protection for female workers. The law addressing sexual harassment of women in the workplace, enacted in 2003, provides procedures for victims to seek redress.

61. The legal framework also includes provisions for the protection of the rights and welfare of Indigenous People, although some limitations exist in their land rights and hunting and gathering activities under the Forest Ordinance and the Antiquities Ordinance. A National Policy on Indigenous People is being developed to address the needs of these communities, particularly in terms of land rights, cultural preservation, and social welfare.

62. The government of Sri Lanka has implemented various programs aimed at promoting inclusive social development and improving citizens' living standards, with a focus on poverty reduction, rural development, education, and health. Notable programs include the Janasaviya Program, the Janasavi Trust Fund for poverty alleviation, the Mahinda Chintana policy framework, the Samurdhi Movement, and the Aswesuma Program. The National Human Development Report focuses on achieving the Sustainable Development Goals (SDGs), addressing issues such as inequality, poverty, education, and healthcare. The National Policy on Social Protection aims to provide comprehensive social protection services, particularly for the most vulnerable populations, including the elderly, children, and people with disabilities.

63. Sri Lanka is a signatory to numerous international conventions and agreements that influence its social policy and legal framework. These include various International Labour Organization (ILO) conventions relating to labor rights, including those on child labor, forced labor, and discrimination. Additionally, Sri Lanka is a party to several United Nations (UN) conventions concerning human rights, economic, social, and cultural rights, and the rights of women and children.

64. The relevant regulations related to social aspects are indicated below.

- The Land Acquisition Act No. 9 of 1950
- The Land Acquisition Regulations of 2008
- The Land Development Ordinance No. 19 of 1935
- The State Lands Act No. 13 of 1949
- The State Lands (Recovery of Possession) Act No. 7 of 1979
- The Crown Lands Ordinance
- National Involuntary Resettlement Policy 2001

C. ADB Environmental and Social Safeguards Policy Principles

65. The ADB has a set of Environmental and Social Safeguards Policy Principles aimed at ensuring that projects funded by ADB are socially inclusive, environmentally sustainable, and beneficial to the communities they impact. All projects funded by ADB must comply with SPS, 2009. SPS, 2009 includes operational policies that seek to avoid, minimize, or mitigate adverse environmental and social impacts, including protecting the rights of those likely to be affected or marginalized by the development process. It sets out the policy objectives, scope and triggers, and principles pertaining to the three safeguard requirements on: (i) environment, (ii) involuntary resettlement, and (iii) Indigenous Peoples. All three safeguard requirements involve a structured process of impact assessment, planning, and mitigation to address the adverse effects of projects throughout the project cycle from project preparation, implementation, and monitoring. The

safeguard policies require that impacts are identified and assessed early in the project cycle, plans to avoid, minimize, mitigate, or compensate for the potential adverse impacts are developed and implemented and affected people are informed and consulted during project preparation and implementation. The three existing safeguard requirements set out the responsibilities of the borrowers/clients to undertake social and environmental assessments, carry out meaningful consultations with affected people and communities, prepare and implement safeguard plans, monitor the implementation of these plans, and prepare and submit monitoring reports.

66. **Environmental safeguards.** All projects funded by the ADB are first screened and categorized into one of the following categories in the early stages of project preparation. Screening and categorization are undertaken to (i) reflect the significance of potential impacts or risks that a project might present; (ii) identify the level of assessment and institutional resources required for the safeguard measures; and (iii) determine disclosure requirements.

- **Category A.** A proposed project is classified as category A if it is likely to have significant adverse environmental impacts that are irreversible, diverse, or unprecedented. These impacts may affect an area larger than the sites or facilities subject to physical works. An environmental impact assessment is required.
- **Category B.** A proposed project is classified as category B if its potential adverse environmental impacts are less adverse than those of category A projects. These impacts are site-specific, few if any of them are irreversible, and in most cases mitigation measures can be designed more readily than for category A projects. An initial environmental examination is required.
- **Category C.** A proposed project is classified as category C if it is likely to have minimal or no adverse environmental impacts. No environmental assessment is required although environmental implications need to be reviewed.

67. **Categorization for environment safeguards.** With respect to the RBL program, ADB's environment safeguards are triggered for the activities namely, DLI 4: improvement of healthcare infrastructure of secondary hospitals (base hospitals A&B), introducing climate resilience measures for base hospitals A&B in climate moderate or high risk areas, DLI 6: construction of new CDC at National Institute of Infectious Diseases (NIID), Angoda, and MRI building renovation and air quality improvement. The overall environmental risk is moderate. The program will exclude any Category A activities on the environment from the financing. The potential environmental impacts due to the program's interventions are less severe, manageable and site-specific. All the program activities will be located within the respective existing healthcare facility premises and are not located within an environmentally sensitive area. Program activities are well known, and manageable with existing processes/procedures. The impacts are reversible, and mitigation and management measures are more predictable and readily available. Program interventions are expected to provide positive long-term health benefits to beneficiaries. The RBL program will help increase access to primary healthcare and maintain high levels of service quality covering environmental and safety provisions. No investment supported through the program will have adverse impacts on natural habitats, physical cultural property, natural resources, or people's livelihoods. Therefore, because the above, the proposed RBL program is categorized as category B for environmental safeguards. As such, the RBL program will establish an environmental review process commensurate with the level of anticipated impacts and policy requirements of category B to ensure that it is environmentally sound and are designed to operate in compliance with applicable regulatory requirements.

68. The new CDC is to be constructed on the land owned by the NIID, Angoda. The facilities to be renovated within the MRI are also located with the premises of MRI. Acquisition of private land is not envisaged for the above two activities and there are no encroachers on these lands.

Therefore, involuntary resettlement and Indigenous Peoples safeguard policies will not be triggered. All the provincial Health Care Facilities (HCFs) earmarked for renovation works are located within government land and these lands also do not have encroachments. However, the involuntary resettlement and Indigenous Peoples screening checklists will be administered with all these HCFs. Only the HCF with IR/IP category C will be considered for renovation works.

B. Compatibility Between Local Framework and ADB Policy Framework Environment

69. The National Environmental Policy and Statement comprehensively addresses environmental protection, sustainability, and enforcement. It aligns with the environmental safeguard policy principles of SPS 2009. The NEA, along with its amendments and sectoral legislation, has effectively translated this policy into a robust regulatory framework.

70. The government's environmental clearance process is broadly consistent with ADB's environmental assessment and public disclosure requirements. The NEA mandates EIA/IEEs for prescribed projects based on their type, scale, and potential environmental impact. Over the years, the CEA and PAAs have developed technical expertise to review and approve these assessments.

71. Each proposed activity under the program will be screened and categorized using the Rapid Environmental Assessment (REA) checklist and categorization forms, as outlined in the Environmental and Social Management Framework (ESMF). Under the NEA all prescribed projects will undergo the EIA/IEE process, initiated with a Basic Information Questionnaire (BIQ), followed by the preparation of the required assessment.

72. As per the ADB SPS, 2009, category B projects must conduct environmental assessments.

73. The construction activities, including new buildings and renovations, will take place within existing healthcare facility premises. For each activity with environmental impacts, an ESMP will be prepared before the procurement process. The MOH and Provincial Health Authorities will oversee implementation. While the national regulatory framework does not mandate ESMPs for non-prescribed projects, the program will ensure compliance with national and international environmental standards and best practices.

74. Stakeholder consultations will continue throughout the program implementation, with a grievance redress mechanism in place. Environmental assessments and monitoring reports will be published online on websites of MOH, Provincial Hospital and offline through brochures, leaflets, or booklets, written in plain language understandable (local languages), though this is not a local regulatory requirement. There is no established institutional mechanism within MOH or Provincial Health Authorities for this type of project to facilitate stakeholder consultation. Therefore, developing such a stakeholder consultation framework should be prioritized as part of capacity-building efforts at the early stages of the program. Further the consultation framework should ensure that the meaningful consultation is gender responsive.

75. ESMP provisions will be integrated into construction contracts, with responsibilities divided among the MOH, Provincial Engineering Departments, and contractors. Unlike standard local practice, these ESMPs will be site-specific, covering pollution prevention, health and safety, waste management, and emergency response.

76. Pollution prevention and control measures will align with NEA regulations on water, air, noise, waste management, and hazardous waste. International guidelines such as those from WHO, the World Bank Group, and US-EPA will be applied where relevant. Health and safety requirements, including the mandatory use of Personal Protective Equipment (PPE) and emergency response systems, will be enforced at all sites.

77. Detailed Gap Analysis of Local System and ADB's SPS Environmental Safeguard Requirements which are relevant to this RBL program are provided in Annex 2.1.

78. **Social safeguards.** Sri Lanka's Social Safeguards Policy Framework (SSPF) and ADB's SPS 2009 are largely aligned, both prioritizing the rights and well-being of affected communities, including informal settlers, and focusing on the restoration of their livelihoods, especially for vulnerable populations. While they are consistent in many areas, there are some differences in their provisions. Aligning Sri Lanka's framework more closely with ADB's provisions on indigenous peoples' rights, and labor standards could further enhance its effectiveness. This integration would ensure greater social inclusiveness and compliance with both national and international standards.

79. Key areas of compatibility between the two frameworks include:

- Minimizing involuntary resettlement impacts, ensuring compensation and rehabilitation, with both frameworks offering land-based and non-land-based compensation options.
- Protection of indigenous peoples and vulnerable groups, with both frameworks emphasizing consultation and participation.
- Grievance redress mechanism, providing accessible processes for affected individuals to voice concerns.

80. Differences include:

- ADB's stronger emphasis on broad community support (BCS) for indigenous peoples, which is not explicitly mentioned in Sri Lanka's framework.
- ADB's more comprehensive focus on social and environmental safeguards, whereas Sri Lanka's framework primarily addresses social impacts.
- ADB's detailed implementation guidelines for monitoring, including roles for executing agencies and third-party evaluators, compared to Sri Lanka's periodic reviews.

81. Detailed Gap Analysis of Local System and ADB's SPS Involuntary Resettlement and Indigenous Peoples Safeguard Requirements which are relevant to this RBL program are provided in Annex 2.2 and Annex 2.3 respectively.

IV. ANTICIPATED ENVIRONMENTAL & SOCIAL IMPACTS AND MITIGATORY MEASURES

A. Environmental Impacts and Mitigation

82. Out of the activities planned under the proposed RBL program namely, DLI4: improvement of healthcare infrastructure of secondary hospitals (base hospitals A&B, introducing climate resilience measures for Base hospitals A&B in climate moderate or high-risk areas, DLI6: construction of new CDC at NIID, Angoda, and MRI building renovation and air quality improvement are expected to trigger environmental risks. However, these impacts are expected to be not significant and are reversible, short term, site specific, and are easily mitigable (scale shall not be of category A). The impacts are short term except the issues like HCW due to increased number of patients to first referral hospitals during operation but could be managed

through existing HCW management procedures. Therefore, the overall environmental risk is rated as moderate.

83. The construction of new facilities and renovation works will involve activities such as clearing and grubbing, demolition of parts for existing buildings/ structures, land formation, piling, excavation, building construction (substructures and superstructures), finishing, painting, MEP works, transportation, installation and commissioning of medical equipment, etc. During construction, impacts due to disposal of demolition and construction waste (likely including asbestos cement waste mainly from roofing sheets), disposal of accumulated clinical waste (likely), construction vibration and noise (mainly at proposed CDC building), dust generation, supply of construction material, machinery and equipment transportation, drainage issues, soil erosion, disturbances to existing amenities such as water, sewerage, electricity and telecommunication etc., occupational safety risks and temporary access issues can be anticipated. Such impacts can be avoided and/or minimized through proper planning and construction site management including noise and dust barriers, protection fencing, proper traffic management during construction material movements, avoiding interference and interruptions of utilities during construction. Solid waste will be managed with the assistance of respective local authorities. Hazardous components will not be mixed with other wastes and will be collected and disposed as per the Guidelines for the Management of Scheduled Waste in Sri Lanka in accordance with the National Environmental (Protection & Quality) Regulation No. 01 of 2008. All the contractors (and subcontractors) will plan and implement environmental and social management plan, site safety management plan, complaints handling and information disclosure etc. A summary of Environmental and Social Impacts and Risks and mitigating strategy is given in Table below.

Table 4: Summary of Environmental & Social Impacts / Risks and Mitigating Strategy

E&S Impacts / Risks	Mitigating strategy
Impacts due to disposal of demolition and construction waste (likely including asbestos cement waste)	Demolition waste shall either be used for filling of prior identified land under approval of relevant authorities or disposed of to a designated disposal site. Disposal of asbestos waste (mainly from roofing sheets) if any shall be done according to Guidelines for the Management of Scheduled Waste in Sri Lanka with the consultation of CEA.
Disposal of accumulated healthcare waste (likely)	Accumulated healthcare waste will not be mixed with other wastes and will be collected and disposed as per the Guidelines for the Management of Scheduled Waste in Sri Lanka with the assistance of registered hazardous (scheduled) waste management service provider.
Construction noise and vibration	Noise shall be kept within the applicable national standards (National Environmental (Noise Control) Regulations No.1 1996 published in the Gazette (Extraordinary) No. 924/12 dated 23 May 1996) to prevent any inconvenience. The equipment used on site shall be in good serviced condition. Noise barriers shall be installed where applicable. The pile driving activities could result in high vibration levels causing damage to nearby buildings as well as causing inconvenience to public. The number of pile driving machines used at tandem (if required) will be managed to avoid generating vibration levels over the acceptable limits (Proposed Interim Standards for Air-Blast Over Pressure (ABOP) and Ground Vibration Control published by Pollution Control Division of CEA on 04 th December 2008). A property condition survey shall be conducted, and regular monitoring shall be done during piling operations to manage the vibration levels.
Dust generation	Materials such as gravel and soil shall be covered during transportation. Dust generating surfaces shall be kept dampened and covered to minimize the emission of dust. Dust screens will be installed where applicable. Water shall be sprayed on exposed areas and access roads at a suitable frequency.
Drainage issues and soil erosion	No drains paths will be obstructed in any way during construction activities. To prevent soil being washed away, materials will be stored to minimize erosion. Silt traps shall be placed where appropriate to minimize sedimentation of nearby

E&S Impacts / Risks	Mitigating strategy
	waterways. A stormwater drainage management plan shall be prepared and implemented.
Supply of construction material	Construction material such as sand, soil, metal and rubble shall be sourced from licensed sites. Timber shall be sourced from agencies that have obtained the required licenses.
Machinery and equipment transportation	Machinery and equipment shall be transported with the relevant approvals and with the implementation of a traffic management plan.
Disturbances to existing amenities	Alternative access will be provided if relocating affected amenities such as water, sewage, electricity, and telecommunications is not possible.
increased solid waste	Proper waste bins shall be placed at construction sites and labor camps. The contractor shall prepare and implement a waste recycling plan to minimize waste. Construction sites will be cleaned and cleared regularly through designated cleaning days. Workers' knowledge of good housekeeping practices will be enhanced through frequent awareness sessions.
Occupational Safety risks	During construction, a Safety Management Plan will be implemented. Safety measures against fire, lightning, etc., will be enforced. Contractors will follow safety regulations to minimize risks. Necessary barriers, warnings, and signs marking unsafe areas will be installed according to standard construction practices. Safety nets will be used to cover sites and prevent injuries to patients, staff members, and visitors.
Temporary access issues	In case of regular access paths are interrupted, temporary access shall be prepared with proper safety arrangements.

84. As the new and expanded healthcare facilities become operational, they will be able to accommodate and treat more patients. This increase in patient numbers will naturally lead to generate higher volume of HCW. However, no significant risk is anticipated due to this as the HCW management capacity will be enhanced through awareness programs with the support of the RBL program. The HCW will be handled and disposed through established standard practices and mechanisms according to the Guidelines for the Management of Scheduled Waste in Sri Lanka in accordance to the National Environmental (Protection & Quality) Regulation No. 01 of 2008 with the assistance of registered hazardous (scheduled) waste management service provider/s. Non-clinical solid waste and sewage will be disposed via existing systems with the assistance of relevant local authorities.

85. The proposed land for the CDC building is located within the hospital premises at Angoda. The buildings and utility systems (e.g. air conditioning system) to be renovated in the MRI are also located within the institute land. All small-scale renovations and repairs proposed under the program will be located within respective existing health care facility premises. None of these sites are located within any environmentally sensitive area.

B. Social Impacts and Mitigation

86. Preliminary consultations with MOH officials confirmed that all sites are located on MOH-owned land and within the hospital premises. Therefore, no acquisition of private land is required. All construction sites (hospital lands) are free from encroachments and commercial activities; and, therefore, the proposed activities shall not trigger any involuntary resettlement impacts of Category A or B nature.

87. It is confirmed that there are no adverse impacts on Indigenous People or any other ethnic minority groups, as all proposed RBL activities are concentrated within hospital premises across all regions. Additionally, the proposed development takes place in urban or semi-urban areas where Indigenous Peoples are not present. Therefore, the program scope will not trigger the Indigenous Peoples /ethnic minorities safeguards as they are not located within the program

areas. However, all populations, including ethnic group communities living in these areas, will equally benefit from the program results.

88. The RBL program focuses on enhancing access to medical services through various development activities, including the renovation and improvement of first referral hospitals 80 type A and B Based Hospitals across all provinces, upgrades, and rehabilitation of deteriorated facilities at the MRI, and the construction of new buildings for the CDC at the NIID in Angoda. Additional activities include the renovation of storage facilities for medicine and equipment and capacity building for medical staff, including coordination and data management. These activities will take place within the existing premises of provincial hospitals and on land owned by the Health Ministry.

V. ENVIRONMENTAL ASSESSMENT REQUIREMENTS AND PROCEDURES

A. Environmental and Social Safeguards Screening and Categorization

89. It is recognized that program activities i.e. construction of new facilities, renovation and repair works required under the program may generate some environmental and social impacts to varying degrees depending on the scale and the nature of the activity. The MOH and relevant provincial health authority will conduct scoping of each proposed activity to determine its potential environmental and social impacts. For each proposed activity under the program, screening and categorization will be undertaken using ADB's REA checklist and categorization forms (Annex 3.1). Based on the screening, the MOH/Provincial Health Authority will propose the environmental categorization for each activity and submit to the ADB Sri Lanka Resident Mission (SLRM) for the review and approval. Environmental category A activities will be excluded from ADB financing. Category B activities will require the preparation of an IEE including an ESMP while Category C activities will require an ESMP.

90. Screening for the presence, scale, and impact of involuntary resettlement and Indigenous People on all proposed activities, both at the MOH and provincial levels, is necessary. For this, the screening and categorization system adopted from SPS 2009 (Annex 3.2 and Annex 3.3) will be used to identify significant potential environmental impacts of activities. MOH / Provincial Health Authorities will propose the environmental categorization for each activity and submit to the ADB SLRM for the review and approval. For environment, Category A activities will be excluded from ADB financing. For Category B activities, it will require an IEE including an ESMP while Category C activities will require an ESMP. For involuntary resettlement and Indigenous Peoples, significant impacts are unlikely, and all activities will be Category C and location specific proposed actions if any will be incorporated to the ESMP.

91. Once the activity concepts are determined and finalized, safeguard screening and categorization will be conducted: (i) separately for each individual activity under the MOH, and (ii) combined screening and categorization form per province for activities planned within that province. This process is expected to be completed within the first year of the program. Considering the practical aspects of defining the scope of provincial activities, if the exact scope of certain proposed interventions is to be determined in later years, it is recommended that screening and categorization for such activities be submitted for the ADB clearance as and when they are ready.

92. Parallel to the above-mentioned ADB screening and categorization exercise, BIQs for each activity will be submitted to the relevant CEA office (Head Office / Provincial Office or District Office) by the MOH or provincial health authority to determine the need for an environmental

assessment and the level of analysis required (EIA or IEE) for each development activity. The procedures for EIA/IEE are defined in the EIA Regulations Gazette No. 772/22 (1993) and the procedure in detail is discussed in Section 3.1.1. The BIQ will be screened by the CEA based on the submitted preliminary information. There are two possible screening outcomes.

- (i) **Exclusion from EIA/IEE** – the activity does not fall under the prescribed category or located in a sensitive area as defined in the regulations. CEA shall provide environmental recommendations for the construction / renovations of the proposed activity.
- (ii) **EIA/IEE required** – the activity falls under the prescribed category, has potentially serious environmental impacts and/or is in a sensitive area. With a positive screening decision, the CEA appoints a scoping committee to decide on the level of analysis and prepare the TOR, or if the project falls within the jurisdiction of government authority which is an appointed project approving authority to administer the EIA process, the CEA will hand over the process to the said authority.

B. Environmental Assessment

93. Once the activity's category is confirmed, an IEE shall be prepared by the MOH or the respective Provincial Health Authority if it falls under Category B. The key steps in formulating an IEE for an activity with potential environmental impacts include assessing site-specific issues, determining their significance, and evaluating the scale, sensitivity, and magnitude of potential impacts. Any activity listed in the List of Prohibited Activities in Annex 4¹⁰ will be excluded, as it does not qualify for ADB support. An outline of an IEE is provided in Annex 5.

C. Environmental and Social Management Plan

94. The ESMP translates proposed mitigation measures into practice. The ESMP defines desired outcomes and actions to address the identified impacts and risks and meet applicable requirements as measurable events to the extent possible.

95. With finalizing the scope and having identified the potential environmental impacts of an activity, the next step is the preparation of appropriate measures to eliminate, mitigate, reduce, or offset those environmental impacts, guided by environmental best practices. This is done through the formulation of an ESMP for the activities. An ESMP provides a link between the impacts predicted and mitigation measures specified to address them. ADB's environmental safeguard policy principles state that a detailed ESMP is essential for Category A (which are not applicable for this RBL program as Category A activities will be excluded from funding) and Category B projects (ESMP is a mandatory part of the IEE), but for Category C activities (anticipated to be majority identified under the program), a simplified ESMP would suffice (Annex 6). ESMPs are to be prepared after considering comments and recommendations from all activity stakeholders. The type, scale, and magnitude of new constructions, renovations / repair works under the program will vary from activity to activity.

96. An ESMP clearly indicates different phases of an activity's physical activities. For each phase, it includes proposed mitigation measures against adverse environmental and social impacts and risks, monitoring program including monitoring indicators/parameters, frequency, monitoring location etc., implementation and monitoring responsibilities, cost estimates where possible, and reporting requirements. The ESMP will define expected outcomes as measurable

¹⁰ Asian Development Bank. 2009. [Safeguard Policy Statement](#).

events to the extent possible and will include performance indicators or targets that can be tracked over a defined period.

97. The project executing / implementation agencies will prepare the ESMP and the level of detail and comprehensiveness of an ESMP should be commensurate with the anticipated risks and impacts of the project. The contents of an ESMP can be arranged in different ways, but the following information shall be normally covered and an outline of an ESMP (For category B projects, the contractor shall prepare a site specific ESMP and an outline is given in Annex 6):

- Identification of impacts and description of mitigation measures
- Monitoring program
- Institutional arrangements
- implementing schedules
- Reporting procedures
- Cost estimates and sources of funds

98. **The final ESMP will be included as a separate annex in all bidding documents, ensuring that contractors are fully aware of their obligations to implement the ESMP.** They will be required to budget for ESMP implementation costs in their bids and develop site management plans that align with the ESMP. For activities involving new construction, renovation, or repair work, contract documents, including the Bill of Quantities, must explicitly state that the contractor is bound to fully implement the approved ESMP. The program will be responsible for ensuring this requirement is included in the contracts and that contractors are informed of their obligations before awarding the contract.

99. A general ESMP has been developed as part of this ESMF (Annex 6), considering the proposed activities under the RBL program based on available information. This ESMP serves as a foundational document and can be referenced as needed for the development of specific ESMPs throughout project implementation.

VI. IMPLEMENTATION ARRANGEMENTS

A. Institutional Arrangements

100. **Program Implementation.** The RBL program will be implemented from mid-2025 to mid-2030. The program implementation will follow the existing government structure of the health sector; no special arrangements are envisaged to be put in place for the program except for providing a few experts and coordinating officers as a Program Coordination Office under the DGHS. The executing agency of the program will be MOH, and the implementing agencies will be the MOH and the nine provincial councils. Finance Commission, as the government entity that is mandated for ensuring equitable resource allocation across provinces, will coordinate with 9 Provincial Councils on program implementation.

101. **RBL program oversight mechanism.** The RBL program will be steered by a committee at national level, which will be co-chaired by the Secretary of Health and the Secretary of Finance Commission. The steering committee will have Chief Secretaries of all nine provinces, representatives of the Ministry of Provincial Councils and Local Government, the Ministry of Finance (Departments of National Planning, External Resources, Budget, Treasury Operations and Project Management and Monitoring), the DGHS, relevant DDGS, CFOs, and Director Budget as its members. The steering committee will review the implementation progress of all DLIs and the DMF indicators of the RBL Program on a quarterly basis in the first month of each quarter. An integrated secondary health care and governance strengthening program

coordination committee will also be established at each province. The provincial committee will be chaired by Chief Secretary of each Provinces with relevant provincial level officers as its members.

102. Implementation of program activities at MOH/central-level. The Director General of Health Services (DGHS) will provide overall stewardship on MOH program activity implementation. Concerned MOH units responsible for implementing MOH-level activities will submit their annual cost action plans including environment and social screening for DGHS' approval before February of each implementing year. At the Ministry of Health, Additional Secretary Procurement, CFO and DDGs will develop their respective annual costed RBL Action Plans in consultation with relevant stakeholders and will submit to DGHS for approval prior to implementation each year.

103. The construction works of the activities under MOH, including the new CDC, and renovations/repairs of MRI and other national-level healthcare institutions, will be managed and supervised by the MOH's Engineering Division. The activities IEE/ESMP will be incorporated into each work contract to ensure the contractor is responsible for implementing the E&S recommendations. Site-level environmental and social safeguard measures will be implemented by the respective contractors under the supervision of the Engineering Division.

104. Implementation of program activities at provincial level. A technical committee for RBL program planning and implementation will be established at each PDHS Level: (i) to lead the development of the 5-year and the annual costed plans in collaboration with the MOH and other province level stakeholders and (ii) to direct implementation of the approved plans. The PDHS of each province will submit a 5-year (2025-2030) action plan on cost as well as an annual costed RBL program action plan for investments in secondary hospital development (base hospitals A&B) in following consultation with DGHS, all relevant DDGs and Directors of MOH, and other relevant stakeholders in provinces. The 5-year plan and the annual plan, including environmental and social screening for 2025, will be submitted to the DGHS by August 2025. Subsequently, the annual plan will be submitted by February of each implementation year, for no-objection by DGHS before proceeding to submission to Provincial Health Secretary and Chief Secretary for endorsement. The endorsed plans will be submitted by the Chief Secretary to Finance Commission for concurrence and budget recommendation. Annual inter-provincial fund allocation will be determined by a resource allocation formula issued by Finance Commission prior to loan effectiveness.

105. In provincial hospitals, all the construction and/or renovation and repair works are managed and supervised by the help of the respective Provincial Engineering Department. Site-level environmental and social safeguard measures, as identified in the IEEs/ESMPs, will be implemented by the respective contractors who are obliged through work contracts under the supervision of the respective Provincial Engineering Department.

106. Program coordination. The DGHS will be the Program Director of the RBL program. A Program Coordination Office (PCO) comprising of a hired program manager, a hired program coordinator, and two-three hired program assistants (safeguards, finance, monitoring) will be established under DGHS.¹¹ PCO will facilitate overall coordination with the Finance Commission and via them with the nine provincial councils and within the MOH directorates and with the MOF. The PCO will annually arrange a two-day residential Central-Provincial Technical Dialogue each year during the month of August starting from 2025 to 2029. The objectives of the consultation

¹¹ Aide Momore, Fact Finding Mission March, 2025

would be to (i) share best practices of efficiency and quality enhancement measures carried out by the provinces in the secondary health level; (ii) update provinces on relevant new/revised policies, plans, guidelines related to RBL program; (iii) discuss governance strengthening measures; and (iv) review RBL program implementation program. The PCO will consolidate reports, review program implementation progress, monitor fund flow, disbursement, DMF and DLI results reporting and safeguard issues. A draft Terms of Reference for the program assistants to be recruited by the Program Coordination Office for the safeguards requirements is provided in Annex 7.

B. Existing Institutional Capacity

107. The MOH and provincial councils will ultimately be responsible for managing the environment related matters with support from Central Environmental Authority, Provincial Environmental Authority in case of activities planned in Northwestern Province. The MOH and Program's provincial focal point liaise with the district environmental officers attached to the district offices of environmental authority as applicable.

108. Drawing on their prior knowledge and experience with the safeguard requirements of ongoing and completed Multilateral Development Bank (MDB) projects—such as the JICA-funded Health & Medical Service Improvement Project, the World Bank-funded Primary Health Systems Strengthening Project (PSSP), and the ADB-funded Health System Enhancement Project (HSEP) — the Ministry of Health (MOH), provincial health authorities, and respective Engineering Divisions are well-positioned to effectively manage safeguard requirements.

109. However, the in-house staff and the capacity to manage environmental requirements of the Provincial Engineering Department staff, particularly for construction-related activities and registered hazardous waste service providers, could be further strengthened. It is recommended to conduct training sessions for MOH program staff responsible for environmental management. The training will cover key topics, including environmental screening and categorization, IEE and ESMP preparation, incorporation of ESMP provisions into bidding documents and construction contracts, ESMP implementation and monitoring during construction and operation phases, public engagement and information disclosure, GRM and complaints handling, and the country's environmental regulations applicable to the program.

VII. CONSULTATION, PARTICIPATION, AND INFORMATION DISCLOSURE

A. Consultation and Participation

110. Meaningful stakeholder consultation is essential during project preparation and will continue throughout project implementation. The key stakeholders to be consulted during project screening, assessment and implementation under the program include staff of the MOH (PCO), staff of provincial health services, health workers, patients seeking treatment in these hospitals, other government bodies, NGOs (if any) and local communities. Consultations must be carried out in a free and friendly environment in a culturally appropriate manner and could be done through formal/informal meetings, focus group discussions, and interviews as deemed suitable. It is important for consultations to encourage participation of women and vulnerable persons and engage as many relevant stakeholders as possible. It is also important to document outcomes of all consultations and stakeholders met, time and location. Gender disaggregated information will be collected. The information obtained, where relevant, has been incorporated into the ESMP and the IEE.

111. Stakeholder consultations allow opportunities to incorporate the needs/views of the stakeholders, including the vulnerable, in the final sub-project design and mitigation measures, raise implementation issues and enhance the 'ownership of the project'. Meaningful stakeholder involvement and participation in decision making contributes to project sustainability.

B. Information Disclosure

112. Disclosure of relevant information about the proposed RBL program and its potential impacts will help stakeholders to understand the impacts, risks, and opportunities of the project. Relevant information, including those documented in environmental assessment reports, should be provided in a place, language, and form that is accessible and understandable to affected people and other stakeholders. This process commences early in the project cycle and continues throughout the life of the project.

113. The EIA process stipulated in the NEA requires that the environmental impact assessment report should be open for public comments giving 30 working days after publication of the notice in the newspapers. Several copies of translations of EIAs in all three languages are made available at the relevant places for public inspection. The project proponent needs to respond to the public comments received.

114. Lengthy and highly technical EIA or IEE reports may not meet the information needs of the stakeholders. Key findings of the environmental assessment (including the proposed project facilities and activities and their locations and duration, any impacts or risks to affected people, and relevant mitigation measures, consultation process, and grievance mechanisms) may best be communicated in summary form through printed materials such as brochures, leaflets, or booklets, written in plain language understandable to the stakeholders and communities near the proposed facilities. In areas where some communities and stakeholders may be illiterate, non-written communication methods such as verbal presentations in community meetings, pamphlets, and signs with pictorial illustrations may be utilized.

115. The program assistants (safeguards) in the PCO will support the effective implementation of the ESMP as follows:

- assess the projects' environmental readiness before implementation;
- update the ESMP including mitigation measures, monitoring program, institutional arrangements, and training plan as necessary, to reflect the final project scope;
- support the MOH and/or PDHS to ensure that the bidding documents and civil works contracts contain provisions requiring contractors to comply with the mitigation and monitoring measures in the EMP and that relevant sections of the project EMP are incorporated in the bidding and contract documents;
- support the MOH and/or PDHS in reviewing and approving contractors' Site Management Plans and conducting periodic environmental site inspections;
- assist the MOH and/or PDHS to establish a GRM and provide training;
- monitor implementation of and compliance with, ESMP requirements. Undertake site visits as required, identify any environment-related implementation issues, propose necessary corrective actions, and reflect these in a corrective action plan;
- Conduct periodic ESMP compliance review, as agreed;
- support to the MOH and/or PDHS in the development of periodic ESMP monitoring reports;
- provide training to MOH and/or PCO and/or PDHS staff, and contractors on environmental laws, regulations and policies, ESMP implementation, and GRM under the training plan defined in the ESMP.

VIII. GRIEVANCE REDRESS MECHANISM

116. A GRM is an arrangement for receiving, evaluating, and facilitating the resolution of affected people's concerns, complaints, and grievances about the social and environmental risks, impacts, and performance of a project. A GRM is important for development projects where adverse impacts or risks are ongoing or anticipated. Affected people need a trusted way to voice and resolve project-related concerns, and the project needs an effective way to address affected people's concerns.

117. A GRM will be established, at least 2 months before the commencement of project implementation, as part of the project ESMP, to receive and manage any public environmental issues that may arise due to the Project. The GRM will follow two-tier arrangement: at the site, divisional level, and PDHS level in provinces, and at the national level, it will be established at site, Divisional, and DGHS/MOH levels. The MOH/Provincial Health Authorities will ensure that potentially affected persons/community groups are informed about the GRM at an early stage of the project implementation. During the project preparation phase, the Project Coordinating Office (PCO), the Provincial Engineering Department staff, and the contractor's staff will be trained on the GRM by the PCO Consultant and if needed, the donor agency.

IX. MONITORING AND REPORTING

118. The activities supported by ADB's RBL program should ensure that social and environmental safeguard impacts and risks are adequately addressed. Periodic monitoring by MOH of activity's safeguard compliance, and ADB's assistance in program action plans to address weaknesses will help to enhance country safeguard system's application to the program. MOH will develop a mechanism with ADB's assistance to reduce safeguard risks through credible results verification mechanism built into the program. The exclusion of category A activities for environmental, category A and B for involuntary resettlement activities and activities that would impact Indigenous Peoples will result in minimal safeguard risks of activities.

119. To ensure that provincial councils are able to comply with social and environmental safeguards requirements, the PCO of the MOH will be responsible to review, collect and maintain completed checklists, ESMPs and periodic monitoring reports. The appointed focal person (Head of the Engineering Department of the Provinces) will be responsible for carrying out the safeguard's requirements. The focal person will be responsible for the provision of technical assistance regarding safeguards to any district offices. MOH will directly monitor any other activities under the purview of the MOH at the national level.

120. The MOH and provincial councils will be required to ensure that the environmental and social mitigation measures contained in the ESMPs for any identified projects are budgeted for in the overall civil works estimates for renovation and maintenance of health facilities and training facilities. Copies of finalized Social/Environmental checklists, ESMPs and environmental screening for all national hospital sites that are financed through the RBL program will be retained by the PCO of the MOH. For sites financed at the Provincial Level, the originals of checklists and any ESMPs will be retained by the focal person. Copies of the checklists and any ESMPs will be sent to the PCO of MOH.

121. The MOH will submit the safeguards screening check lists (environment, involuntary resettlement, Indigenous People) and ESMPs for ADB review and clearance, from each of the Provinces and National Level, that will be renovated prior to initiation of the bidding process.

122. The MOH and ADB will have their own safeguard compliance monitoring systems. At the national level, the PCO of the MOH will develop a safeguard monitoring methodology for the program. The MOH and provincial councils will conduct a minimum of two visits to monitor compliance with environmental safeguards per year or at commencement and completion if less than 6 months. During the ADB implementation support missions, compliance will be monitored. Lessons learnt in implementation of ESMF, which will work with a mainstreamed PCO within MOH will help to have a better safeguard management framework within MOH. The monitoring methodology will be a contributing component of the ESMF's monitoring and evaluation, and reporting of program activities. The PCO will:

- establish and maintain procedures to monitor the progress of implementation of safeguard implementation plans.
- verify activities' compliance with safeguard measures and their progress toward intended outcomes, by the MOH;
- document and disclose monitoring results and identify necessary corrective and preventive actions in semi-annual monitoring reports (Outline for a Semi-Annual Environmental and Social Monitoring Report is given in Annex 8). Submit monitoring reports on safeguard measures, as agreed with ADB; and
- follow-up on these actions to ensure progress toward the desired outcomes.

123. The monitoring data of each activity will be fed into the safeguard database maintained at MOH. Such data will be the baseline for verification of results in the sphere of environmental safeguard application, adequacy, and sustainability.

124. Consolidated environmental and social compliance reports will be submitted to ADB on a semi-annual basis. During program review missions, ADB will monitor safeguard compliance of selected activities of the program and work with program authorities to develop corrective action plans, if significant lapses in safeguard compliance are noted.

ANNEXS

ANNEX 1: Relevant National Regulations

ANNEX 2: Gap Analysis of Local System and ADB's SPS Principles

ANNEX 3: Environmental, Involuntary Resettlement, and Indigenous Peoples Screening
Checklists and Categorization Forms

ANNEX 4: ADB Prohibited Investment Activities List

ANNEX 5: Outline of an IEE

ANNEX 6: General ESMP

ANNEX 7: Terms of Reference for the Program Assistants (Safeguards), Program
Coordination Office (PCO)

ANNEX 8: Outline for a Semi-Annual Environmental and Social Monitoring Report

ANNEX 1: RELEVANT NATIONAL REGULATIONS

National Environmental Act No. 47 of 1980 (and its subsequent amendments)

The NEA provides conservation and development guidelines for natural resources management including water, forest, flora, and fauna in Sri Lanka. The 1988 amendment appointed the Central Environmental Authority (CEA) as the enforcement and implementing agency of the Act. CEA has special powers to assess and monitor critical environmental conservation programs and to advise the government on environmental protection, conservation, management, and development issues.

Types of projects that need mandatory environmental clearance ("prescribed projects") were made public after the amendments to NEA was approved in 1988. The Act 1988 states that all prescribed projects undertaken by any government department, corporation, statutory board, local authority, company, firm, or an individual will be required to obtain approval under this Act before their implementation. The approval will have to be obtained from the appropriate project approving agencies (PAAs) who are concerned or connected with such prescribed projects. At present, there are 31 such PAAs to deal with review and approval of environmental plans. This unit will also be responsible for monitoring progress.

Activities of SSDP could come under the purview of the following sector level Acts according to the specific circumstances. However, screening, scoping, formulation of initial environmental examination (IEE), environmental management plan (ESMP) and procedures for IEE and ESMP disclosure and public comments will be governed by NEA of 1980 and its subsequent amendments of 1988 and 2000, and by environmental regulations.

Coast Conservation Act No. 57 of 1981

The Coast Conservation Act provides for the preparation of coastal zone management plans, regulates and controls development activities within the coastal zone, formulates and executes schemes of work for coast conservation within the coastal zones of the country. This act becomes relevant to projects located wholly or partly within the coastal zone (the area lying within a limit of three hundred meters landwards of the Mean High-Water line and a limit of two kilometers seawards of the Mean Low Water line) must undergo the approval process that is laid down by the CCA irrespective of its size. Therefore, any development work taking place within this zone falls under the jurisdiction of CCD. Section 6 of the Act created a Coast Conservation Advisory Council. It advises on all development activities proposed in the coastal zones, reviews coastal zone management plans, and environmental impact assessments (EIA) of projects that fall within its purview. The current Coastal Zone Management Plan states that the Director of Coast Conservation Department will call for an EIA when such activities may have potential impacts on the coastal zone.

According to the CCA, Director of the CCD has the discretion to request for an EIA/IEE from the project proponent if the initial screening reveals significant impacts in the coastal areas by the project. The process is very much similar to the NEA except that the Director of the CCD reserves the right to request for an EIA/IEE and also to make the final decision.

Any person desiring to engage in a development activity within the Coastal Zone will be required to obtain a permit issued by the Department prior to commencing the activity. Engaging in any development activity prior to obtaining a permit issued by the Director, and/ or noncompliance with conditions stipulated in the permit are contravention. The CCA specifies penalties for contravention of the provisions of the Act. Penalties may include fines and imprisonment and/or confiscation of equipment and machinery and /or demolishing of unauthorized structures.

North Western Province Environmental Statute No 12 of 1990 (and its subsequent amendments)

The NWP Provincial Council has passed a separate environmental statute - North Western Province Environmental Statute No 12 of 1990 – in accordance with the provisions under the 13th amendment to the Constitution of Sri Lanka (So far, under the said constitutional provision, only the North Western Provincial Council has enacted legislation on environmental protection and management). The statute to provide for the establishment of the North Western Province Environmental Authority, to make provision with respect to the powers, functions and duties of that authority and to make provision for the protection, management and enhancement of the environment and for the regulation maintenance and control of the quality of the environment. There are three main regulatory provisions in the NWP Environmental Statute, through which impacts on the environment from the process of development are assessed, mitigated and managed which are applicable to this project. These are namely; i) Environmental Impact Assessment (EIA) Process; ii) Environmental Protection License (EPL) Procedure; iii) Scheduled Waste Management License Procedure. Details are discussed below;

i) Environmental Impact Assessment (EIA) Process for Development Projects

Any government department, corporation, statutory body or government agency or Local Authority, Non-Governmental Organization, Business Organization, Company or Individual proposing to commence any specified project / industry as per Gazette Notification No. 1020/21 dated 27.03.1998 issued under the Provincial Environment Statute (PES) of the North Western Province shall obtain the approval in accordance with the regulations set forth in the said Gazette Notification and Environmental Impact Assessment (EIA) is carried out on the project. Depending on the magnitude of the industry/project the relevant project approval process is followed as EIA or an Initial Environment Examination (IEE).

ii) Environmental Protection License (EPL) Procedure for the Control of Pollution

Environmental Protection is an important component in environmental management. The Provincial Environmental Authority of the North Western Province executes a massive role in implementing the concept of sustainable development through proper environmental protection practices in the North Western Province. The Main duty of the Provincial Environmental Authority of the North Western Province (PEA-NWP) is issuing of Environmental Protection Licenses (EPLs). EPL is an environmental protection permit that allows the industry to operate in a manner that does not violate the environmental equilibrium, but also allows the release of solid, liquid and gaseous wastes into the environment within the norms and regulations gazetted by the Authority. The legal provisions in this regard have been published in the Gazette Notification No. 1685/11 of 21/12/2012 published under Section 20 & 21 of the Provincial Environment Statute (PES) No. 12 of 1990.

iii) Scheduled Waste Management License (SWML) Procedure

In terms of the gazette notification No. 1685/11 and dated 21.12.2010 gazetted under the Provincial Environment Statute (PES) No. 12 of 1990 no person shall generate, collect, transport, store, recover, recycle or dispose waste or established any site or facility for the disposal of any scheduled waste (hazardous waste) except under the authority of a license issued by the PEA-NWP.

Pradeshiya Sabha Act No. 15 of 1987

Section 12 (2) of the Pradeshiya Sabha Act authorizes the appointment of a committee at the divisional level to advise on environmental matters. Section 105 of the Act prohibits polluting water or any streams, while Section 106 refers to pollution caused by industry and related offences. The Pradeshiya Sabha grants permission for construction activities within its jurisdiction. Such construction will have to comply with environmental requirements stipulated with permits. It also ensures that public health issues are efficiently dealt with and solid waste collection and disposal are appropriately done under this Act.

Flood Protection Ordinance, Act No. 22 of 1955

This ordinance provides necessary provisions to acquire land or buildings or part of any land or building for the purpose of flood protection.

Soil Conservation Act, No. 25 of 1951

The Soil Conservation Act provides for the conservation of soil resources, prevention or mitigation of soil erosion, and for the protection of land against damage by floods and droughts. Under the Act, it is possible to declare any area defined as an erodible area and prohibit any physical construction. The following activities are also prohibited under Act:

- (i) weeding of land or other agricultural practices that cause soil erosion;
- (ii) use of land for agriculture purposes within water sources and banks of streams; and
- (iii) exploitation of forests and grassland resources and setting fire in restricted areas.

Mines and Minerals Act No. 33 of 1992

Under this Act, mining falls within the purview of the Geological Survey and Mines Bureau (GSMB). Mining of minerals including sand must be done with a license issued by the GSMB. Mining is not permitted within archaeological reserves or within specified distances from such monuments. New mining licenses are subject to the EIA process, if the type and extent of mining is listed under the EIA regulations. Additionally, GSMB has the power to stipulate conditions including cash deposits and insurance policy for the protection of environment. Regulations made by GSMB under the Act cover a variety of environmental stipulations, criteria and conditions for licensing and operating mines. This also covers the disposal of mine wastes. The Act also deals with the health, safety, and welfare of miners. Mining rights on public and private land are subject to licensing by GSMB, and all minerals wherever situated belonging to the State. The right to mine public land parcels are subjected to the EA procedures.

Fauna and Flora Protection Ordinance, Act No. 49 of 1983

The Act provides for the protection, conservation, and preservation of the fauna and flora of Sri Lanka. Under the Ordinance, five categories of protected areas are established, namely, strict nature reserves, national parks, nature reserves, jungle corridors, and intermediate zones. The Section 9 (a) states that "no person or organization, whether private or state, shall within a distance of 1 mile of the boundary of any national reserve declared by an order issued under Section 2 of the Ordinance carry out any development activity of any description whatsoever, without obtaining the prior written approval of the Director". Each application for a development activity has to follow the procedures stipulated under NEA. An application falls within the meaning of Section 9(a) has to be supported by an environmental impact assessment (EIA) or initial environment examination (IEE) according to the significance of environmental impacts.

Forest Ordinance, No 17 of 1907 (and amendments)

The Forest Ordinance of Sri Lanka is the law for conservation, protection and management of forest and forest resources. It regulates tree felling, transport of timber, and other forest related matters. The Forest Ordinance was amended by several Acts - Act 34 of 1951, No. 49 of 1954, Act 13 of 1966, Act 56 of 1979, Act 13 of 1982, and Act 84 of 1988. The Act 23 of 1995 replaced the old Ordinance. Under Section 4 of Act 23 of 1995, the Minister who is in charge of forests can declare any specified area of government land or the whole or any specified part of any reserve forest which has unique ecosystems, genetic resources or a habitat or rare and endemic species of flora, fauna, and microorganisms and of threatened species which need to be preserved in order to achieve an ecological balance in the area by preventing landslides and fire hazards. Under Section 5 of the Act, a Forest Officer has powers to stop any public or private watercourse

which goes through a reserved forest. It shall be lawful for the District Secretary to determine the amount of compensation to be paid in case that the water course adversely affects the interests or one or more individuals.

Under Section 6 of the Act, the following activities are prohibited:

- (i) trespassing or permits cattle to trespass;
- (ii) damage by negligence in felling any tree, cutting or dragging any timber;
- (iii) willfully strips off the bark or leaves from, or girdles, lop, taps, burns or otherwise damages any trees; poisons water; mine stone, burns lime or charcoal, or collects any forest produce; and
- (iv) extracts coral or shells or digs or mines for gems or other minerals.

National Water Supply and Drainage Board Law of No. 2 of 1974

The National Water Supply and Drainage Board (NWSDB) is the principle water supply and sanitation agency in Sri Lanka. It was established in January 1975 under the Law No. 2 of 1974. NWSDB develops, provides, operates, and controls water supply and distributes water for public, domestic and industrial purpose.

National Policy for Rural Water Supply and Sanitation of 2001

The National Policy for Rural Water Supply and Sanitation, approved by the cabinet in 2001, has laid down a framework for water supply and sanitation services to the rural sector, which is defined as any Grama Niladhari Division within a Pradeshiya Sabha area except for those in former town council areas. It provides guidelines on the delivery of minimum water requirements to ensure health, and on levels of service in terms of quantity of water, haulage distance, adequacy of the source, equity, quality, flexibility for upgrade, and acceptable safe water supply systems.

The Policy prescribes ventilated, improved pit latrines as basic sanitation facilities and defines other acceptable options that include piped sewer with treatment, septic tanks with soakage pits, water-sealed latrines with disposable pits. For rural water supply and sanitation, the Policy defines the roles and responsibilities of the government, provincial councils, local authorities, community-based organizations (CBO), non-governmental organizations (NGOs), private sector, and international donors. It also sets the scope of regulations for which the provincial councils and local authorities can enact statutes and by-laws.

Prevention of Mosquito Breeding, Act No. 11 of 2007

This Act was enacted to prevent and eradicate mosquito-borne diseases such as dengue. Under this Act, it shall be the duty of every owner or occupier of any premises to remove and destroy open tins, bottles, boxes, coconut shells, split coconuts, used tires, or any other article or receptacle found in such premises, and to maintain water wells in such premises to prevent breeding of mosquitoes. People are also bound to ESMP any artificial pond or pools at least once in a week. Shrubs, undergrowth, and all other types of vegetation other than ornamental vegetation and food plants are to be removed.

The Urban Development Authority, Law, No 41 of 1978

The Urban Development Authority (UDA) promotes integrated planning and implementation of social, economic and physical development of areas which are declared as urban development areas under the UDA Act. UDA provides technical support to local councils who require assistance in developing plans. It has the authority to develop plans when local authorities fail to do. The UDA monitors urban areas, including 1 km. inland from the coasts in all areas of the coastal zone, and develops land use policies for designated development areas.

Municipal Council Ordinances and Acts - Urban Council Ordinance 61 of 1939, Act 29 of 1947, Act 18 of 1979, and Act 13 of 1979

The Municipal Councils and Urban Councils share with Pradeshiya Sabhas powers regarding the approval of buildings plans, control of solid waste disposal, sewerage and other public utilities. Under these laws, new constructions and modifications to current buildings require approval of Municipal or Urban Council or Pradeshiya Sabha. Municipal and Urban councils follow planning and building guidelines of UDA.

Sri Lanka Land reclamation and development cooperation Act No. 15 of 1968, Act No. 52 of 1982, Act, Act No. 35 of 2006

This act provides powers to establish Sri Lanka Land Reclamation and Development Corporation. It is responsible for the reclamation and development of low-lying marshy areas while recognizing the need to have adequate retention areas for flood waters. It has powers to undertake construction work and consultancy assignments in the field of engineering; and for matters connected with wetland management. The Corporation also undertakes reclamation and development of lands on a commercial basis to solve the problem of the lack of developed lands essential for development programs.

As per the recent amendment to the act, by act no. 35 of 2006 the corporation will be empowered to take legal action against unauthorized reclamation activities and pollution of inland water bodies as well.

National Heritage Wilderness Areas Act (No. 3 of 1988)

This act declares a National Heritage Wilderness Areas while it protects and preserves such areas and its resources. Focuses on declaring and protecting wilderness areas.

Water Resources Board Act No. 29 of 1964, Amendment No.42 of 1999

Control, regulation, and development (including conservation and utilization) of water resources; prevention of pollution of rivers, streams, and other water resources; formulation of national policies relating to control and use of water resources.

The Land Acquisition Act No. 9 of 1950

The acquisition of land for public purposes is guided by the provisions and procedures outlined in the Land Acquisition Act No. 9 of 1950 (LAA) and its subsequent amendments. The Act provides a framework for land acquisition and guarantees that no one can be deprived of land except under the provisions of the LAA, and it entitles Affected Persons (APs) to a hearing before acquisition. The acquisition of land for public purposes is a time-consuming process and can take anywhere between a few months to about 2-3 years to complete. The main features like the minimum time period for the tasks, and the procedures involved in acquiring land for public purposes are set out in Annex 2.1. The Act discourages unnecessary acquisition and lands that have been acquired for one purpose cannot be used for a different purpose and lands that remain unused have to be returned to the original owners.

The Land Acquisition Regulations of 2008

Several progressive provisions have been made to modify the LAA. The 2008 Regulations, issued under Section 63 (2) (f) of LAA 1950, were passed in Parliament on March 17, 2009 and were made effective by Government Gazette No. 1596/12 of April 7, 2009. They provide revised guidelines for the statutory payment of compensation that go beyond the depreciated value of a land or structure and consider the principle of current market value, and provide for payment of compensation for injurious affection and severance, equivalent to the full cost of the damage, based on the market value of the land to be acquired. They were designed to incorporate the

concept of replacement cost in the valuation of land and other assets. The regulations require compensation for land to be paid at market rates, along with the cost of reconstruction for houses and other structures, without taking into account depreciation of the buildings. The 2008 Regulations also provide for the valuation and compensation of the whole plot of land when determining the proportional cost of the affected land parcel, and include provision to compensate for loss of business income, as well as relocation assistance and other benefits.

The 2008 Regulations provides for affected persons to be entitled for a hearing before their land is acquired. However, the level of compensation can only be determined by the Valuation Department. The Regulations stipulate minimum time periods for specific tasks, elements and the procedures for land acquisition.

The Land Development Ordinance No. 19 of 1935

This ordinance deals with the systematic development and alienation of Crown Land of Ceylon and comprises 12 chapters.

Chapter 7 of the Land Development Ordinance (LDO) sets out the procedure for cancellation of a right to state land given on permit or grant due to non-compliance of the conditions of permit. Section 106 gives notice to the permit holder where there has been a breach of the condition of permit. If a person fails to appear before the inquiring officer, provision is made under Section 109 to cancel the permit. Section 110 lays down the procedure where the permit holder appears and shows cause for the failure to develop the land as per provision of the permit given to him. Section 112 prescribes the order of Government Agent to be served on the permit holder and to be posted on land. Section 113 provides for an appeal to the Land Commissioner against the order of the Government Agent.

The State Lands Act No. 13 of 1949

This Act provides for the grant and disposition of state lands in Sri Lanka; for the management and control of such lands and the foreshore; for the regulation of the use of the water of lakes and public streams; and for other matters incidental to or connected with the aforesaid matters.

The State Lands (Recovery of Possession) Act No. 7 of 1979

The provisions for the recovery of possession of State lands from persons in unauthorized possession or occupation thereof are contained in the State Lands (Recovery of Possession) Act No. 7 of 1979. Furthermore, Section 10 stipulates that no appeal is maintainable against an order of eviction by a Magistrate. Section 13 provides for reasonable compensation for damages sustained by reason of the affected person having been compelled to deliver up possession of such land.

The Crown Lands Ordinance

The ordinance makes provision for the grant and disposition of Crown lands in the country; for the management and control of such lands and the foreshore; for the regulation of the use of the water of lakes and public streams; and for other matters incidental to or connected with the matters aforesaid.

National Involuntary Resettlement Policy 2001

The National Involuntary Resettlement Policy (NIRP 2001) set out in Annex 2.2, was approved by Cabinet to address the shortcomings of the LAA and is designed to treat affected people in a fairer and more equitable manner. It calls for a protective framework for people displaced by development projects, to ensure that their rights are respected and that they are not impoverished or do not suffer unduly as a result of public or private project implementation. Under the NIRP, displaced people are assured of a living standard comparable to that at the time of displacement.

The main principles or features of NIRP include the minimization and mitigation of negative impacts. This means steps must be taken to avoid involuntary resettlement by reviewing alternatives to the project. NIRP guarantees that affected persons are adequately compensated in a timely manner. Compensation is based on full replacement value, including transaction costs, and is calculated to include loss of land, and loss of structures and other assets, and income. Compensation is not limited to persons that have documentary evidence of their rights to land. The policy provides for the authorities to re-establish the livelihoods and income of affected persons and to include them in the design and implementation of the relocation and resettlement process.

The policy provides guidelines for resettlement plans of varying levels of detail, depending on the numbers of people being displaced. The plans have to be published and made available to the public. A comprehensive resettlement plan is prepared for any project requiring the displacement of 20 or more families. If the number of families affected is less than 20, a RP with less detail can be prepared. The NIRP provides for affected persons to be fully involved in the selection of relocation sites and to be stakeholders in the development and implementation of the resettlement plan.

The Policy is intended to guarantee that: (i) project affected persons are adequately compensated, relocated and rehabilitated; (ii) delays in project implementation and cost overruns are reduced; and (iii) better community relations are restored. It aims at ensuring that people affected by development projects are treated in a fair and equitable manner and are not impoverished in the process. The Policy also enables a framework for project planning and implementation that is comparable with international best practices in involuntary resettlement. The responsibility for reviewing and approving the resettlement plans is vested with the Ministry of Lands.

NIRP has yet to be formally incorporated into law, and implementing agencies are not under obligation to apply the principles enshrined in NIRP. Therefore, affected persons cannot rely on NIRP principles as a matter of right if their land is acquired. Full compliance would require the government to amend the existing laws. However, NIRP is official and workable, and is capable of offering effective solutions to the ethical and practical dilemmas involved in land acquisition and involuntary resettlement.

ANNEX 2: GAP ANALYSIS OF LOCAL SYSTEM AND ADB'S SPS PRINCIPLES

Annex 2.1: Gap Analysis of Local System and ADB's SPS Environmental Safeguard Principles

ADB policy principles	Triggered by the program	Gap Analysis	
		Congruence between Local System and SPS Environmental Safeguard Requirements	Assessment of Implementation Capacity
PP1. Use a screening process for each proposed project, as early as possible, to determine the appropriate extent and type of environmental assessment so that appropriate studies are undertaken commensurate with the significance of potential impacts and risks.	Yes	<p>For each proposed activity under the program, screening and categorization will be undertaken using Rapid Environmental Assessment (REA) checklist and categorization forms. The ESMF will provide necessary guidelines for the screening¹².</p> <p>Under the National Environment Act (NEA), No. 47 of 1980 and its subsequent amendments and regulations, for the prescribed projects shall be undergo through project approval process and conduct an EIA or IEE if the activity is listed as a prescribed project. The process is initiated through the submission of a filled Basic Information Questionnaire (BIQ).</p>	<p>The screening and categorization using the REA checklist, filling the BIQ and submission to ADB and Central Environmental Authority (CEA) will be performed by MOH and nine provincial councils.</p> <p>the project executing agency (MOH) and implementation agencies (MOH and 9 Provincial Councils).</p> <p>In general, the technical committees appointed at national level are capable of carrying out the screening and categorization process based on their experience with international donor-funded projects.</p> <p>However, there may be lapses at the provincial level, resulting in inconsistent application of these procedures.</p> <p>Therefore, training and capacity-building efforts are necessary for MOH and engineering department staff at provincial level at the beginning of the program.</p>
PP2. Conduct an environmental assessment for each proposed project to identify potential direct, indirect, cumulative, and induced impacts and risks to physical, biological, socioeconomic (including impacts on livelihood through environmental media, health and safety, vulnerable groups, and gender issues), and physical cultural resources in the context of the project's area of influence. Assess potential transboundary and global impacts, including climate change. Use strategic environmental	Yes.	<p>Under the ADB SPS, as a category B project, the activities proposed under the program will have to prepare environmental assessments as identified and guidance provided in ESMF.</p> <p>Under the NEA, there may be prescribed activities which require to undergo the project approval process (EIA/IEE process) as described above. Hence, there may be requirement for EIA or IEE for some activities.</p>	<p>Healthcare staff are not specialized in environmental assessments, and conducting them in-house is not advisable.</p> <p>Preparation of IEE and ESMPs shall be carried out by hired consultants through MOH or relevant Provincial Health Authority.</p> <p>However, it would be beneficial for the program to provide training on the EIA/IEE process under the National Environmental Act (NEA) and ADB Safeguard Policy Statement (SPS, 2009) for healthcare staff, as they serve as the primary focal points for the initial review of reports and represent the project developer before the CEA throughout the approval process.</p>

¹² Each sub activity under the program will be screened using ADB's rapid environmental assessment checklist Categorization forms. Based on the screening, the MOH/Provincial Health Authority will propose the environmental categorization for each subproject and submit for ADB Sri Lanka Resident Mission (SLRM) review and approval. Category A activities will be excluded from ADB financing. Category B activities will require the preparation of an IEE including an EMP while Category C activities will require an EMP.

assessment where appropriate.			Further awareness on occupational health and safety and medical waste management would be beneficial to respective healthcare staff.
PP3. Examine alternatives to the project's location, design, technology, and components and their potential environmental and social impacts and document the rationale for selecting the particular alternative proposed. Also consider the no project alternative.	Not applicable.	The program's construction activities (new buildings and renovation of existing facilities) will be located within respective existing healthcare facility premises.	-
PP4. Avoid, and where avoidance is not possible, minimize, mitigate, and/or offset adverse impacts and enhance positive impacts by means of environmental planning and management. Prepare an environmental management plan (EMP) that includes the proposed mitigation measures, environmental monitoring and reporting requirements, related institutional or organizational arrangements, capacity development and training measures, implementation schedule, cost estimates, and performance indicators. Key considerations for EMP preparation include mitigation of potential adverse impacts to the level of no significant harm to third parties, and the polluter pays principle.	Yes.	For each activity with environmental impacts, an ESMP will be prepared. This will be carried out by the project executing agency (MOH) and/or implementation agencies (Provincial Health Authorities) prior to the procurement process of respective contracts. The ESMF will provide a comprehensive guidance in this regard. There are no ESMP requirements for non-prescribed projects under the national environmental laws and regulations.	Since healthcare staff lack specialized expertise in developing ESMPs, it is not recommended to prepare them in-house. Instead, the preparation of ESMPs should be outsourced to qualified consultants through the MOH or the respective Provincial Health Authority. Furthermore, training on ESMP preparation shall be incorporated into the said EIA/IEE training programs, as outlined in Item No. 2, to ensure a comprehensive understanding of environmental safeguards and compliance.
PP5. Carry out meaningful consultation with affected people and facilitate their informed participation. Ensure women's participation in consultation. Involve stakeholders, including affected people and concerned nongovernment organizations, early in the project preparation process and ensure that their views and concerns are made known to and understood by decision makers and taken into account. Continue consultations with stakeholders throughout project implementation as	Yes.	Consultations with stakeholder will be continued throughout the program implementation as necessary to address issues specially related to those that are identified by ESMF and subsequent environmental assessments. A grievance redress mechanism will be established to receive and facilitate resolution of the affected people's concerns and grievances regarding the project's environmental performance. There is no mandatory requirement under the national environmental laws or any other local regulation.	There is no established institutional mechanism within MOH or Provincial Health Authorities for this type of projects to facilitate stakeholder consultation. Therefore, developing such a stakeholder consultation framework should be prioritized as part of capacity-building efforts at early stages of the program. Further the consultation framework should ensure that the meaningful consultation is gender responsive.

necessary to address issues related to environmental assessment. Establish a grievance redress mechanism to receive and facilitate resolution of the affected people's concerns and grievances regarding the project's environmental performance.			
PP6. Disclose a draft environmental assessment (including the EMP) in a timely manner, before project appraisal, in an accessible place and in a form and language(s) understandable to affected people and other stakeholders. Disclose the final environmental assessment, and its updates if any, to affected people and other stakeholders.	Yes.	All environmental assessment and monitoring reports, once approved, will be published on the ADB website, MOH website, Provincial Council's website and the program's website (if any), and. However, this is not a mandatory requirement nor a common practice under the local regulatory framework.	This is standard practice for international donor-funded projects, and healthcare staff at the national and provincial levels are familiar with and capable of meeting this requirement, with no additional training needed. Improved coordination is essential between the personnel managing the MOH website, project staff, and website administrators at the provincial level to ensure seamless implementation.
PP7. Implement the EMP and monitor its effectiveness. Document monitoring results, including the development and implementation of corrective actions, and disclose monitoring reports.	Yes.	<p>The ESMP for each activity under the program will be incorporated into the relevant construction works contracts. The Engineering Division of the Ministry of Health (MOH) will supervise the construction works of National hospitals, while the Provincial Engineering Department/Unit will oversee construction at the provincial-level base hospitals. The contractor will be responsible for implementing the ESMP, while the implementing agency will be responsible for supervising and monitoring ESMP implementation.</p> <p>Under the local system, specific ESMPs are not typically included as part of construction contracts. However, contracts generally cover relevant areas in a non-site-specific manner, including health and safety, insurance, compensation, waste management, facilities for staff, lighting, security, and other related aspects.</p> <p>For submitted BIQs, in case of the projects are not prescribed, the CEA issues environmental recommendations, which include essential requirements under the NEA for compliance during construction.</p>	The construction works will be supervised by the Engineering Division of the Ministry of Health (MOH) for the construction of the CDC, and MRI renovations, while the Provincial Engineering Department/Unit will oversee renovations and repair works at provincial-level Base Hospitals. Accordingly, site-level supervision of the ESMP implementation will also be the responsibility of these institutions, with healthcare staff having the capacity to oversee the process. Therefore, training on environmental and social safeguards, pollution control, waste handling, health and safety, regulatory requirements, and approval conditions will be crucial for the Engineering Division of the MOH, the Provincial Engineering Department/Unit, and relevant healthcare staff.
PP8. Do not implement project activities in areas of	Not applicable.	The program's construction activities (new buildings and	-

<p>critical habitats, unless (i) there are no measurable adverse impacts on the critical habitat that could impair its ability to function, (ii) there is no reduction in the population of any recognized endangered or critically endangered species, and (iii) any lesser impacts are mitigated. If a project is located within a legally protected area, implement additional programs to promote and enhance the conservation aims of the protected area. In an area of natural habitats, there must be no significant conversion or degradation, unless (i) alternatives are not available, (ii) the overall benefits from the project substantially outweigh the environmental costs, and (iii) any conversion or degradation is appropriately mitigated. Use a precautionary approach to the use, development, and management of renewable natural resources.</p>		<p>renovation of existing facilities) will be located within respective existing healthcare facility premises.</p>	
<p>PP9. Apply pollution prevention and control technologies and practices consistent with international good practices as reflected in internationally recognized standards such as the World Bank Group's Environmental, Health and Safety Guidelines. Adopt cleaner production processes and good energy efficiency practices. Avoid pollution, or, when avoidance is not possible, minimize or control the intensity or load of pollutant emissions and discharges, including direct and indirect greenhouse gases emissions, waste generation, and release of hazardous materials from their production, transportation, handling, and storage. Avoid the use of hazardous materials subject to international bans or phaseouts. Purchase, use, and manage pesticides</p>	<p>Yes.</p>	<p>The executing / implementation agencies will apply pollution prevention and control measures throughout the program's construction and operation stages. NEA provides sufficient regulations this regard. The regulations and guidelines related to pollution control include, water quality, air quality, noise, vibrations, waste management including scheduled (hazardous) waste management etc. International guidelines such as WHO, World Bank Group's Environmental, Health and Safety Guidelines and US-EPA will be used where applicable.</p> <p>The ESMF will provide further elaboration on this matter.</p>	<p>HCW will be handled according to Sri Lanka's Guidelines for Scheduled Waste Management, with registered hazardous waste management service providers. Non-clinical solid waste and sewage will be managed through existing systems with local authorities. The DDG/E&OH and Director E&OH coordinate HCW management with hospital directors under the central government. Environmental and HCW management issues are coordinated with stakeholders such as the CEA and local authorities. All base hospitals fall under the RDHS, with the Director E&OH coordinating HCW management at that level. It is recommended</p> <p>The general recommendation for increased training and capacity-building for all involved stakeholders is also applicable to this item, and ensure regular monitoring of collection and disposal of hazardous waste.</p>

based on integrated pest management approaches and reduce reliance on synthetic chemical pesticides.			
PP10. Provide workers with safe and healthy working conditions and prevent accidents, injuries, and disease. Establish preventive and emergency preparedness and response measures to avoid, and where avoidance is not possible, to minimize, adverse impacts and risks to the health and safety of local communities.	Yes.	Health, and safety clauses will be incorporated into works contracts. Using Personal Protection Equipment (PPEs) is mandatory at sites and required PPEs will be provided to the workers. Emergency-response systems (fire, accidental spillages and other natural disasters) will be established in accordance with national /international requirements during operation and construction. This practice is also followed under the local system, although there are some gaps.	Health and safety clauses are included in works contracts under the local system, though some gaps still exist. However, it is essential to provide training on health and safety for the Engineering Division of the MOH and the Provincial Engineering Authority.
PP11. Conserve physical cultural resources and avoid destroying or damaging them by using field-based surveys that employ qualified and experienced experts during environmental assessment. Provide for the use of "chance find" procedures that include a pre-approved management and conservation approach for materials that may be discovered during project implementation.	Yes.	There are structures in some hospitals which are more than 100 years old. Excavations and trenching can uncover and/or damage archaeological and historical resources. Obtaining prior approval from Department of Archaeology will require in case of renovation/repair works are involved in hospital building which are more than 100 years old.	All the staff and laborers of the contractor should be informed about the possible items of historical or archaeological value, which include old stone foundations, tools, clayware, etc. If something of this nature is uncovered, the Department of Archaeology shall be contacted, and work shall be stopped immediately. The chance finds procedure of archaeological and cultural artefacts should be established. it is essential to provide training on relevant local regulations and ADB safeguards requirement and chance find procedure etc.

Annex 2.2: Gap Analysis of Local System and ADB's SPS Involuntary Resettlement Safeguards

ADB policy principle	Triggered by the program	Gap Analysis	
		Congruence between Local System and SPS Involuntary Resettlement Safeguard Requirements	Assessment of Implementation Capacity
PP1. Screen the project early on to identify past, present, and future involuntary resettlement impacts and risks. Determine the scope of resettlement planning through a survey and/or census of displaced persons, including a gender analysis, specifically related to resettlement impacts and risks.	Yes Screening for the presence, scale, and impact of involuntary resettlement (IR) on all proposed activities, both at the national and provincial levels, is necessary.	The National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement (SPS) are aligned and compatible	The MOH's Environment Unit and PDHS have the necessary capacity to screen and assess the impact of involuntary resettlement (IR) on the proposed activities. If land acquisition is required, the Divisional Secretary (DS) is the authorized person to acquire or recover possession of land.

<p>PP2. Carry out meaningful consultations with affected persons, host communities, and concerned nongovernment organizations. Inform all displaced persons of their entitlements and resettlement options. Ensure their participation in planning, implementation, and monitoring and evaluation of resettlement programs. Pay particular attention to the needs of vulnerable groups, especially those below the poverty line, the landless, the elderly, women and children, and Indigenous Peoples, and those without legal title to land, and ensure their participation in consultations. Establish a grievance redress mechanism to receive and facilitate resolution of the affected persons' concerns. Support the social and cultural institutions of displaced persons and their host population. Where involuntary resettlement impacts and risks are highly complex and sensitive, compensation and resettlement decisions should be preceded by a social preparation phase.</p>	<p>Yes</p> <p>Community consultation is a prerequisite for reaching an agreement on compensation with the shop owners.</p>	<p>The National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement (SPS, 2009) are aligned and compatible</p>	<p>The MOH's Environment Unit and PDHS have the necessary capacity to conduct meaningful consultation with stakeholders including affected persons (if any as identified during screening and categorization).</p>
<p>PP3. Improve, or at least restore, the livelihoods of all displaced persons through (i) land-based resettlement strategies when affected livelihoods are land-based where possible or cash compensation at replacement value for land when the loss of land does not undermine livelihoods, (ii) prompt replacement of assets with access to assets of equal or higher value, (iii) prompt compensation at full replacement cost for assets that cannot be restored, and (iv) additional revenues and services through benefit sharing schemes where possible.</p>	<p>No</p>	<p>However, the National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement (SPS, 2009) are aligned and compatible</p>	
<p>PP7. Ensure that displaced persons without titles to land or any recognizable legal rights to land are eligible for resettlement assistance and</p>	<p>No</p>	<p>However, the National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement</p>	

compensation for loss of nonland assets.		(SPS, 2009) are aligned and compatible	
PP8. Prepare a resettlement plan elaborating on displaced persons' entitlements, the income and livelihood restoration strategy, institutional arrangements, monitoring and reporting framework, budget, and time-bound implementation schedule.	No	-Do-	
PP9. Disclose a draft resettlement plan, including documentation of the consultation process in a timely manner, before project appraisal, in an accessible place and a form and language(s) understandable to affected persons and other stakeholders. Disclose the final resettlement plan and its updates to affected persons and other stakeholders.	No	A PSSA and ESMF developed and disclosed as per RBL Policy, 2019.	
PP10. Conceive and execute involuntary resettlement as part of a development project or program. Include the full costs of resettlement in the presentation of project's costs and benefits. For a project with significant involuntary resettlement impacts, consider implementing the involuntary resettlement component of the project as a stand-alone operation.	No	However, the National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement (SPS, 2009) are aligned and compatible	
P11- Pay compensation and provide other resettlement entitlements before physical or economic displacement. Implement the resettlement plan under close supervision throughout project implementation.	No	However, the National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement (SPS, 2009) are aligned and compatible	
PP12. Monitor and assess resettlement outcomes, their impacts on the standards of living of displaced persons, and whether the objectives of the resettlement plan have been achieved by taking into account the baseline conditions and the results of resettlement monitoring. Disclose monitoring reports.	No	However, the National Involuntary Resettlement Policy Framework (NIRP) in the country and ADB's Safeguard Policy Statement (SPS, 2009) are aligned and compatible	

Annex 2.3: Gap Analysis of Local System and ADB's SPS Indigenous People Principles

ADB policy principle	Triggered by the program	Gap Analysis	
		Congruence between Local System and SPS Indigenous People Safeguard Requirements	Assessment of Implementation Capacity
PP1. Screen early on to determine (i) whether Indigenous Peoples (IP) are present in, or have collective attachment to, the project area; and (ii) whether project impacts on Indigenous Peoples are likely	Yes No indigenous people are directly or indirectly having an impact due to project implementation both in the central and the Uva provinces	<p>The rights of Indigenous Peoples (specifically the Veddha community) are safeguarded under existing legal protections, similar to those of other communities. However, certain, which are sometimes politically motivate, are introduced from time to time. These policies, though, well-intentioned, are limited in scope, effectiveness, and implementation. Over time, the recognition of their inherent rights has been undermined due to the small size of the population and their gradual integration into the mainstream society, particularly in areas like education, employment, and marriage</p> <p>It is important to note that the marginalized population (MPs), particularly Indian-origin Tamils working in the plantations, is much larger than the Indigenous Peoples (IPs) in the country. The majority of them live in line rooms, which expose them to significant health risks due to their living conditions and habits. Additionally, many plantation workers live in large plantations, where they are unable to speak in Sinhala, further distancing them from the mainstream population and access to service.</p>	<p>IPs often face significant barriers to accessing healthcare services. These barriers are rooted in a variety of factors, including geographic isolation, limited awareness of available health services, cultural differences, and systemic neglect.</p> <p>Addressing these issues requires tailored approaches, such as orientation and training for healthcare staff to ensure better care delivery to Indigenous communities and marginalized communities</p>

ANNEX 3: ENVIRONMENTAL, INVOLUNTARY RESETTLEMENT, AND INDIGENOUS PEOPLES SCREENING CHECKLISTS AND CATEGORIZATION FORMS

Note: All three checklists need to be completed for all activities and submitted to ADB for approval before commencement of bidding process for the respective activity.

Rapid Environmental Assessment (REA) checklist

Activity name:

Province/ district:

Screening Questions	Yes	No	Remarks
A. Project Siting Is the Project area adjacent to or within any of the following environmentally sensitive areas?			
▪ Cultural heritage site			
▪ Legally protected Area (core zone or buffer zone)			
▪ Wetland			
▪ Mangrove			
▪ Estuarine			
▪ Special area for protecting biodiversity			
B. Potential Environmental Impacts Will the Project cause...			
▪ impairment of historical/cultural areas; disfiguration of landscape or potential loss/damage to physical cultural resources?			
▪ disturbance to precious ecology (e.g. sensitive or protected areas)?			
▪ Alteration of surface water hydrology of waterways resulting in increased sediment in streams affected by increased soil erosion at construction site?			
▪ Deterioration of surface water quality due to silt runoff and sanitary wastes from worker-based camps and chemicals used in construction?			
▪ increased air pollution due to project construction and operation?			
▪ noise and vibration due to project construction or operation?			
▪ involuntary resettlement of people? (physical displacement and/or economic displacement)			
▪ disproportionate impacts on the poor, women and children, Indigenous Peoples or other vulnerable groups?			

Screening Questions	Yes	No	Remarks
▪ poor sanitation and solid waste disposal in construction camps and work sites, and possible transmission of communicable diseases (such as STI's and HIV/AIDS) from workers to local populations?			
▪ creation of temporary breeding habitats for diseases such as those transmitted by mosquitoes and rodents?			
▪ social conflicts if workers from other regions or countries are hired?			
▪ large population influx during project construction and operation that causes increased burden on social infrastructure and services (such as water supply and sanitation systems)?			
▪ risks and vulnerabilities related to occupational health and safety due to physical, chemical, biological, and radiological hazards during project construction and operation?			
▪ risks to community health and safety due to the transport, storage, and use and/or disposal of materials such as explosives, fuel and other chemicals during construction and operation?			
▪ community safety risks due to both accidental and natural causes, especially where the structural elements or components of the project are accessible to members of the affected community or where their failure could result in injury to the community throughout project construction, operation and decommissioning?			
▪ generation of solid waste and/or hazardous waste?			
▪ use of chemicals?			
▪ generation of wastewater during construction or operation?			
Environment Category <input type="checkbox"/> Category A <input type="checkbox"/> Category B <input type="checkbox"/> Category C			
Required Assessment: <input type="checkbox"/> IEE <input type="checkbox"/> ESMP			
Prepared by: Date:		Approved by: Date:	

Involuntary Resettlement Screening Checklist

Activity name:

Province/ district:

Probable Involuntary Resettlement Effects	Yes	No	Not Known	Remarks
1. Will there be land acquisition?				
2. Is the site for land acquisition known?				
3. Is the ownership status and current usage of land to be acquired known?				
4. Will easement be utilized within an existing Right of Way (ROW)?				
5. Will there be loss of shelter and residential land due to land acquisition?				
6. Will there be loss of agricultural and other productive assets due to land acquisition?				
7. Will there be losses of crops, trees, and fixed assets due to land acquisition?				
8. Will there be loss of businesses or enterprises due to land acquisition?				
9. Will there be loss of income sources and means of livelihoods due to land acquisition?				
Involuntary restrictions on land use or on access to legally designated parks and protected areas				
10. Will people lose access to natural resources, communal facilities and services?				
11. If land use is changed, will it have an adverse impact on social and economic activities?				
12. Will access to land and resources owned communally or by the state be restricted?				
Information on Displaced Persons:				
Any estimate of the likely number of persons that will be displaced by the Project? <input type="checkbox"/> No <input type="checkbox"/> Yes				
If yes, approximately how many?				
Are any of them poor, female-heads of households, or vulnerable to poverty risks? <input type="checkbox"/> No <input type="checkbox"/> Yes				
Are any displaced persons from indigenous or ethnic minority groups? <input type="checkbox"/> No <input type="checkbox"/> Yes				
IR categorization of activity	Cat. A	Cat. B	Cat. C	
Remarks/ recommendations:				
Prepared/ endorsed by (date):				

Indigenous Peoples Impact Screening Checklist

Activity name:

Province/ district:

KEY CONCERNS (Please provide elaborations on the Remarks column)	YES	NO	NOT KNOWN	Remarks
A. Indigenous Peoples Identification				
1. Are there socio-cultural groups present in or use the project area who may be considered as "tribes" (hill tribes, schedules tribes, tribal peoples), "minorities" (ethnic or national minorities), or "indigenous communities" in the project area?				
2. Are there national or local laws or policies as well as anthropological researches/studies that consider these groups present in or using the project area as belonging to "ethnic minorities", scheduled tribes, tribal peoples				
3. Do such groups self-identify as being part of a distinct social and cultural group?				
4. Do such groups maintain collective attachments to distinct habitats or ancestral territories and/or to the natural resources in these habitats and territories?				
5. Do such groups maintain cultural, economic, social, and political institutions distinct from the dominant society and culture?				
6. Do such groups speak a distinct language or dialect?				
7. Has such groups been historically, socially and economically marginalized, disempowered, excluded, and/or discriminated against?				
8. Are such groups represented as "Indigenous Peoples" or as "ethnic minorities" or "scheduled tribes" or "tribal populations" in any formal decision-making bodies at the national or local levels?				
B. Identification of Potential Impacts				
9. Will the project directly or indirectly benefit or target Indigenous Peoples?				

10. Will the project directly or indirectly affect Indigenous Peoples' traditional socio-cultural and belief practices? (e.g. child-rearing, health, education, arts, and governance)				
11. Will the project affect the livelihood systems of Indigenous Peoples? (e.g., food production system, natural resource management, crafts and trade, employment status)				
12. Will the project be in an area (land or territory) occupied, owned, or used by Indigenous Peoples, and/or claimed as ancestral domain?				
C. Identification of Special Requirements <i>Will the project activities include:</i>				
13. Commercial development of the cultural resources and knowledge of Indigenous Peoples?				
14. Physical displacement from traditional or customary lands?				
15. Commercial development of natural resources (such as minerals, hydrocarbons, forests, water, hunting or fishing grounds) within customary lands under use that would impact the livelihoods or the cultural, ceremonial, spiritual uses that define the identity and community of Indigenous Peoples?				
16. Establishing legal recognition of rights to lands and territories that are traditionally owned or customarily used, occupied or claimed by indigenous peoples?				
17. Acquisition of lands that are traditionally owned or customarily used, occupied or claimed by indigenous peoples?				

D. Anticipated project impacts on Indigenous Peoples

Project component/ activity/ output	Anticipated positive effect			Anticipated negative effect		
1. LIST ALL PROJECT COMPONENT / ACTIVITY / OUTPUTS HERE	---- INDICATE EFFECTS TO IPS OR PUT N/A AS NECESSARY					
2.						
3.						
IR categorization of activity		Cat. A	Cat . B	Cat. C		
Remarks/ recommendations:						
Prepared/ endorsed by (date):						

Note: The project team may attach additional information on the project, as necessary.

ANNEX 4: ADB PROHIBITED INVESTMENT ACTIVITIES LIST

The following investment activities will not qualify for ADB support:

- (i) production or activities involving harmful or exploitative forms of forced labor¹ or child labor;²
- (ii) production of or trade in any product or activity deemed illegal under host country laws or regulations or international conventions and agreements or subject to international phase outs or bans, such as (a) pharmaceuticals, pesticides, and herbicides, (b) ozone-depleting substances, (c) polychlorinated biphenyls and other hazardous chemicals, (d) wildlife or wildlife products regulated under the Convention on International Trade in Endangered Species of Wild Fauna and Flora, and (e) trans boundary trade in waste or waste products; 9
- (iii) production of or trade in weapons and munitions, including paramilitary materials;
- (iv) production of or trade in alcoholic beverages, excluding beer and wine; 10
- (v) production of or trade in tobacco; 10
- (vi) gambling, casinos, and equivalent enterprises; 10
- (vii) production of or trade in radioactive materials," including nuclear reactors and components thereof;
- (viii) production of, trade in, or use of unbonded asbestos fibers; 12
- (ix) commercial logging operations or the purchase of logging equipment for use in primary tropical moist forests or old-growth forests; and
- (x) marine and coastal fishing practices, such as large-scale pelagic drift net fishing and fine mesh net fishing, harmful to vulnerable and protected species in large numbers and damaging to marine biodiversity and habitats.

1. Forced labor means all work or services not voluntarily performed, that is, extracted from individuals under threat of force or penalty.

2 Child labor means the ESMPloyment of children whose age is below the host country's statutory minimum age of ESMPloyment or ESMPloyment of children in contravention of International Labor Organization Convention No. 138 "Minimum Age Convention" (www.ilo.org).

A list of pharmaceutical products subject to phaseouts or bans is available at <http://www.who.int>.

4 A list of pesticides and herbicides subject to phaseouts or bans is available at <http://www.pic.int>.

A list of the chemical compounds that react with and deplete stratospheric ozone resulting in the widely publicized ozone holes is listed in the Montreal Protocol, together with target reduction and phase-out dates. Information is available at <http://www.unep.org/ozone/montreal.shtml>.

A group of highly toxic chemicals, polychlorinated biphenyls are likely to be found in oil-filled electrical transformers, capacitors, and switchgear dating from 1950 to 1985.

7 A list of hazardous chemicals is available at <http://www.pic.int>.

A list is available at <http://www.cites.org>.

As defined by the Basel Convention; see <http://www.basel.int>.

10 This does not apply to investee companies who are not substantially involved in these activities. Not substantially involved means that the activity concerned is ancillary to an investee company's primary operations.

This does not apply to the purchase of medical equipment, quality control (measurement) equipment, and any equipment for which ADB considers the radioactive source to be trivial and adequately shielded.

12 This does not apply to the purchase and use of bonded asbestos cement sheeting where the asbestos content is less than 20%.

ANNEX 5: OUTLINE OF AN IEE

A. Executive Summary

This section describes concisely the critical facts, significant findings, and recommended actions.

B. Policy, Legal, and Administrative Framework

This section discusses the national and local legal and institutional framework within which the environmental assessment is carried out. It also identifies project-relevant international environmental agreements to which the country is a party.

C. Description of the Project

This section describes the proposed project; its major components; and its geographic, ecological, social, and temporal context, including any associated facility required by and for the project (for example, access roads, power plants, water supply, quarries and borrow pits, and spoil disposal). It normally includes drawings and maps showing the project's layout and components, the project site, and the project's area of influence.

D. Description of the Environment (Baseline Data)

This section describes relevant physical, biological, and socioeconomic conditions within the study area. It also looks at current and proposed development activities within the project's area of influence, including those not directly connected to the project. It indicates the accuracy, reliability, and sources of the data.

E. Anticipated Environmental Impacts and Mitigation Measures

This section predicts and assesses the project's likely positive and negative direct and indirect impacts to physical, biological, socioeconomic (including occupational health and safety, community health and safety, vulnerable groups and gender issues, and impacts on livelihoods through environmental media [Appendix 2, para. 6]), and physical cultural resources in the project's area of influence, in quantitative terms to the extent possible; identifies mitigation measures and any residual negative impacts that cannot be mitigated; explores opportunities for enhancement; identifies and estimates the extent and quality of available data, key data gaps, and uncertainties associated with predictions and specifies topics that do not require further attention; and examines global, transboundary, and cumulative impacts as appropriate.

F. Analysis of Alternatives

This section examines alternatives to the proposed project site, technology, design, and operation—including the no project alternative—in terms of their potential environmental impacts; the feasibility of mitigating these impacts; their capital and recurrent costs; their suitability under local conditions; and their institutional, training, and monitoring requirements. It also states the basis for selecting the particular project design proposed and, justifies recommended emission levels and approaches to pollution prevention and abatement.

G. Information Disclosure, Consultation, and Participation

This section:

- (i) describes the process undertaken during project design and preparation for engaging stakeholders, including information disclosure and consultation with affected people and other stakeholders;
- (ii) summarizes comments and concerns received from affected people and other stakeholders and how these comments have been addressed in project design and mitigation measures, with special attention paid to the needs and concerns of vulnerable groups, including women, the poor, and Indigenous Peoples; and

(iii) describes the planned information disclosure measures (including the type of information to be disseminated and the method of dissemination) and the process for carrying out consultation with affected people and facilitating their participation during project implementation.

H. Grievance Redress Mechanism

This section describes the grievance redress framework (both informal and formal channels), setting out the time frame and mechanisms for resolving complaints about environmental performance.

I. Environmental Management Plan

This section deals with the set of mitigation and management measures to be taken during project implementation to avoid, reduce, mitigate, or compensate for adverse environmental impacts (in that order of priority). It may include multiple management plans and actions. It includes the following key components (with the level of detail commensurate with the project's impacts and risks):

(i) Mitigation:

- (a) identifies and summarizes anticipated significant adverse environmental impacts and risks;
- (b) describes each mitigation measure with technical details, including the type of impact to which it relates and the conditions under which it is required (for instance, continuously or in the event of contingencies), together with designs, equipment descriptions, and operating procedures, as appropriate; and
- (c) provides links to any other mitigation plans (for example, for involuntary resettlement, Indigenous Peoples, or emergency response) required for the project.

(ii) Monitoring:

- (a) describes monitoring measures with technical details, including parameters to be measured, methods to be used, sampling locations, frequency of measurements, detection limits and definition of thresholds that will signal the need for corrective actions; and
- (b) describes monitoring and reporting procedures to ensure early detection of conditions that necessitate particular mitigation measures and document the progress and results of mitigation.

(iii) Implementation arrangements:

- (a) specifies the implementation schedule showing phasing and coordination with overall project implementation;
- (b) describes institutional or organizational arrangements, namely, who is responsible for carrying out the mitigation and monitoring measures, which may include one or more of the following additional topics to strengthen environmental management capability: technical assistance programs, training programs, procurement of equipment and supplies related to environmental management and monitoring, and organizational changes; and
- (c) estimates capital and recurrent costs and describes sources of funds for implementing the environmental management plan.

(iv) Performance indicators: describes the desired outcomes as measurable events to the extent possible, such as performance indicators, targets, or acceptance criteria that can be tracked over defined time periods.

J. Conclusion and Recommendation

This section provides the conclusions drawn from the assessment and provides recommendations.

ANNEX 6: GENERAL ESMP

Abbreviations: MOH-Ministry of Health; PDHS-Provincial Director of Health Services; PED-Provincial Engineering Department; PCO-Program Coordination Office;

Imp- Implementation responsibility; Mon- Monitoring responsibility; LA-Local Authority; DS-Divisional Secretariat

#This column should be filled (as Yes/No) by MOH/PDHS based on the activity proposed

Subject for concern	Environmental & Social impact	Mitigation measures	Relevance to the activity	Monitoring method
Pre-construction				
Removal of trees	Loss of trees and vegetation may lead to: <ul style="list-style-type: none"> ▪ Increase in disaster related issues (i.e. soil erosion, landslides); ▪ Lack of ventilation and shading; ▪ Reduction in aesthetic value and greening of area 	<ul style="list-style-type: none"> ▪ Explore alternative options to minimize the loss of trees and vegetation. ▪ Implement compensatory planting of trees and vegetation of the same or similar species for any trees removed. ▪ Minimize the use of wood for construction. ▪ Utilize locally sourced materials as much as possible. ▪ Incorporate innovative solutions into the design. 		Trees planted; Progress reports
Shifting of utilities: water supply & sanitation services, electricity, drainage structures etc.	<ul style="list-style-type: none"> ▪ Temporary disruption to water supply and sewer pipes, drainage structures, and electric poles and wires; ▪ Flooding, waterlogged conditions and may lead to increased erosion due to modification/alteration of drainage paths, canals and structures 	<ul style="list-style-type: none"> ▪ Plan the shifting of utilities and drainage structures well in advance of site clearing. ▪ Provide alternative or temporary supplies to minimize the impact on users. ▪ Ensure that the wastewater treatment plant, if located at the lowest elevation within the hospital site, is properly diverted to account for stormwater flow. 		Site inspections and reporting
Access interruptions to the patients, hospital staff and visitors	<ul style="list-style-type: none"> ▪ Movements of visitors to the hospital, including patients, vehicular flow (especially emergency vehicles) and parking facilities, may be affected during construction. ▪ Impacts are notable if routes for delivery and storage of construction materials and temporary blockages are not planned and coordinated properly. 	<ul style="list-style-type: none"> ▪ Coordinate and plan all activities thoroughly before commencing construction works. ▪ Ensure that no facility or service is discontinued due to construction or renovation works, and issue prior notices to hospital staff and users. ▪ Install temporary wayfinding boards to guide patients, hospital staff, and visitors. 		Site inspections and reporting
<div>(viii)</div> <div>(ix) Construction</div>				
Demolition of existing buildings: Waste management	Spoil material generated due to any demolition work, cutting, and grinding work (e.g. for electrical work) would obscure the landscape and may be a health risk to the	<ul style="list-style-type: none"> ▪ Dispose of solid waste and sewage in accordance with relevant guidelines and with the assistance of the local authority. ▪ Dispose of healthcare waste (HCW) following established guidelines and with the support of an authorized HCW service provider. 		Site inspections and reporting

	surrounding community and workers.	<ul style="list-style-type: none"> Identify disposal locations before commencing demolition activities. Demarcate a designated area within the construction premises for waste collection until disposal. Implement waste minimization practices, including reuse as filling material and recycling. Prohibit open burning of any demolished material, both on-site and off-site. 		
Demolition of existing buildings: Handling of asbestos waste	Health and safety hazards with loose asbestos fibers for the workers and hospital.	<ul style="list-style-type: none"> Follow the rules and guidelines outlined by the CEA under the NEA; Provide covers properly and temporarily store at the premises until taken away for the disposal 		Site inspections and reporting
Demolition of existing buildings: Health and Safety concerns for the workers and community	<ul style="list-style-type: none"> Unless precautions are taken during demolition it may lead to accidents of workers and in-house and nearby community. Unless safety measures are adoption it may lead to compromised health. 	<ul style="list-style-type: none"> Restrict the demolition area with barriers and install clear signage to prevent unauthorized access. Carry out demolition activities at a convenient time with minimal disturbance, in consultation with hospital management. Ensure that any electrical systems in the demolition area are switched off before commencing work. Require workers to adopt safety measures and wear appropriate protective gear. Erect dust screens if necessary, depending on the scale of the demolition. 		Site inspections and reporting
Site preparation activities: clearing and land preparation, cutting and levelling	Waste generation, emission of dust, and noise are direct impacts that can be expected due to site clearing. Such impacts may cause a nuisance to hospital staff, patients, visitors and the neighborhood	<ul style="list-style-type: none"> Implement erosion control measures during land preparation, cutting, and filling within the site. Avoid land clearing during rainy periods where possible. Divert surface runoff away from the site or construction area and channel drainage through silt traps if needed. Compact any loose soil as soon as possible. Cover all spoil, topsoil, demolition waste, and cut vegetation with secure tarpaulins when stored on-site or transported off-site to prevent wind dispersal. 		Site inspections and reporting
Slope instability due to exposed slopes, cutting and filling operations, altered landscape, removal of trees, roots, and trunks, drainage modifications, and modified flow patterns etc.	<ul style="list-style-type: none"> Slope instability may lead to loss of ground, causing damage to public and private land and built property in the neighborhoods. Soil erosion and sedimentation may occur during construction due to land clearing, earthworks (cutting/filling, trenching, excavating, reclaiming, and landfilling), diversion of existing drainage paths, transport and 	<p>For Slope Instability:</p> <ul style="list-style-type: none"> Obtain recommendations from the National Building Research Organization (NBRO) for constructions in landslide-prone or potential slope stability areas to minimize risk. Consider medium- to long-term slope stability when selecting sites for treatment plants and project interventions, particularly in sloping terrain. Avoid land clearing at sites with vertical relief to prevent slope instability, especially during rainy seasons. Implement slope reinforcement techniques, such as retaining walls or terracing, to enhance stability. 		Site inspections and reporting

	stockpiling of construction material, residue, spoil, and dredged material.	<ul style="list-style-type: none"> ▪ Design proper drainage systems to manage surface water and prevent water-induced slope failure. <p>For Soil Erosion and Sedimentation:</p> <ul style="list-style-type: none"> ▪ Install silt fences and sediment traps to prevent sediment from reaching water bodies. ▪ Divert surface runoff away from disturbed areas to minimize erosion. ▪ Revegetate disturbed areas promptly to stabilize the soil and reduce erosion. ▪ Cover stockpiled materials to prevent them from being dispersed by wind or water. 		
Drainage issues	<ul style="list-style-type: none"> ▪ Impacts can occur from drainage obstruction during activities such as constructing access roads, land reclamation, diversion of drainage paths, trenching, filling, disposal of spoil, and material transport. These may lead to reduced water flow, surface water contamination, and potential flooding if not properly managed. 	<ul style="list-style-type: none"> ▪ Ensure that drainage systems are designed and implemented separately for construction activities, preventing wastewater and runoff from affecting existing hospital drainage. ▪ Maintain clear segregation of construction-related drainage and hospital drainage systems to protect the hospital's water quality and prevent cross-contamination. ▪ Regularly inspect drainage systems to ensure they are functioning properly and do not allow construction waste to enter hospital drainage or water sources. 		Site inspections and reporting
Water quality impacts	<ul style="list-style-type: none"> ▪ Untreated or partially treated wastewater, improper disposal of waste (both liquid and solid waste), silt materials, runoff from stockpiled materials, and chemical contamination from fuels and lubricants during construction works can contaminate nearby surface water quality. 	<ul style="list-style-type: none"> ▪ Minimize contamination of nearby surface water by preventing untreated or partially treated wastewater, improper disposal of liquid and solid waste, silt materials, runoff from stockpiled materials, and chemical contamination from fuels and lubricants during construction works. ▪ Ensure that drainage systems are properly designed to prevent contamination of water sources from construction activities. ▪ Monitor surface runoff and implement hydrological modifications to control water quality impacts. 		Site inspections and reporting
Impacts on Air quality	Emissions during site preparation, vehicles, equipment, and machinery used for excavation and construction may result in dust and air-borne pollutants.	<ul style="list-style-type: none"> ▪ Erect effective dust barriers to prevent dust from being blown towards other parts of the hospital. These barriers should also serve as noise/dust containment and fencing for safety. Louvres/ pergolas of nearby buildings must be temporarily covered with polythene sheets until construction work is completed. ▪ Clean the site daily, particularly surfaces affected by soil and dust. Carry out regular watering at least twice a day (mid-morning and mid-evening) for dust suppression on the construction site. ▪ Cover excavated soil temporarily stored on-site with tarpaulins or other suitable materials to prevent dust particles from becoming airborne. 		Site inspections and reporting; Checking the relevant certificates

		<ul style="list-style-type: none"> ▪ Store construction stockpiles and debris piles away from the functional areas of the hospital, where possible. ▪ Ensure that any equipment and machinery using diesel are properly maintained to control emissions. The contractor must ensure that vehicles entering the site have obtained Vehicle Emission Certificates. 		
Noise and vibration	<ul style="list-style-type: none"> ▪ Increased noise levels and vibrations may occur due to excavation, earth-moving, blasting (if any), and the transport of equipment, materials, and people. ▪ Installation of electro-mechanical components may emit high levels of noise. ▪ Operation of heavy equipment and machinery at night can cause a nuisance to the surrounding hospital environment and people. ▪ Damages to existing nearby structures, both inside and outside, due to vibration-causing activities such as piling, excavation etc. 	<ul style="list-style-type: none"> ▪ Ensure that construction work, vehicles, and equipment used in construction meet CEA standards for noise and vibration in Sri Lanka. ▪ Schedule high noise-generating activities after informing and obtaining consent from the hospital authorities. ▪ Erect noise barriers if needed to reduce high noise levels; alternatively, the contractor can use a delineated barrier that serves dual purposes of dust/noise containment and safety. ▪ Restrict the use of noisy machines and, where possible, implement noise-reducing measures for construction machinery. ▪ Conduct construction activity between 8:00 am and 6:00 pm daily to avoid discomfort caused by noise and vibration to in-patients and the surrounding neighborhood. ▪ If nighttime construction activities are unavoidable, ensure they are carried out using noise-reducing means or low-noise technologies. ▪ Schedule noisy construction machines/activities to coincide with non-clinic and non-OPD days/times or during periods of minimum patient visitation. ▪ Liaise with hospital authorities regarding work schedules and provide prior notices of noise-generating activities to avoid confusion. ▪ Conduct a condition survey (crack survey) of existing nearby structures, both inside and outside, to assess their condition prior to vibration-causing activities such as piling, excavation etc. ▪ Comply with the Interim Standard on Vibration Pollution Control for Sri Lanka. ▪ Ensure that if vibration causes structural damage to nearby structures, the contractor is responsible for rectifying such damage 		Site inspections and reporting
Waste generation: construction debris and waste generated from labor camps, officer's accommodations	Construction debris, spoil, and waste generated from labor camps, officer's accommodations may impose several negative environmental and social impacts to the activity affected area including impact on	<ul style="list-style-type: none"> ▪ Consult the Local Authority at the onset of the activity regarding waste collection and disposal. ▪ Seek approval from the DS for the storage and disposal of spoil material and other gravel. ▪ Ensure that the disposal site selected by the contractor is not located near public or environmentally sensitive areas. ▪ Reuse all debris and residual spoil materials generated from construction activities wherever possible. 		Site inspections and reporting

	ecology, public health and scenic beauty.	<ul style="list-style-type: none"> ▪ Provide proper solid waste disposal, sanitation, and sewerage facilities (drinking water, urinals, toilets, and washrooms) at the construction site and labour camps. ▪ Obtain approval from the Building Department Engineer for the location of labour camps, ensuring compliance with guidelines and recommendations issued by the CEA and LAs. ▪ Provide garbage bins at all worker-based camps and construction sites, and ensure regular disposal in a hygienic manner under the supervision of the Public Health Inspector (PHI). 		
Sourcing and supply of construction materials	Transportation of construction materials may block the access roads and may lead to accessibility problems	<ul style="list-style-type: none"> ▪ Purchase construction materials only from approved suppliers with the necessary approvals. ▪ Ensure that construction materials and machinery are placed in a manner that does not block roads, paths, or local access points. ▪ Unload construction materials in a way and at times that do not block roads, paths, or access. ▪ Prohibit the placement of waste on the road. 		Construction material sources inspections; Checking for required approvals; Site inspections and reporting
Occupational health and safety	Occupational hazards can arise during construction (e.g., trenching, falling objects, high levels of noise and vibration, accidents, etc.)	<ul style="list-style-type: none"> ▪ Ensure a safe construction site by: (i) Maintaining fully functional and well-kept equipment. (ii) Providing emergency equipment and safety warnings. (iii) Equipping workers with personal protective equipment (PPE) and enforcing strict safety practices with proper supervision, monitoring, and feedback. ▪ Provide workers with first-aid and health facilities. Train supervisors in first aid. ▪ Conduct occupational health and safety training programs for workers. ▪ Keep machinery and equipment prone to electrocution in a secure area within the site, under the supervision of an experienced worker. Conduct regular safety checks for vehicles, equipment, and labour huts. ▪ Assign responsibilities to relevant personnel. Enforce a strict prohibition on alcohol and narcotic substances that could impair workers' judgment during construction activities. ▪ Barricade excavated areas using barricading tapes and signboards. Ensure work at higher elevations is carried out and supervised by experienced workers 		Site inspections and reporting; Regular patrols to check unsafe areas; Checking accident reports
Community health and safety	<ul style="list-style-type: none"> ▪ Disturbances caused to accessing property and facilities (especially vehicular access) to hospital facilities and services can cause inconvenience to patients, hospital staff 	<ul style="list-style-type: none"> ▪ Demarcate the construction site from the rest of the hospital using barricading tape or other suitable materials to create a physical separation. ▪ Provide a safe pedestrian pathway to hospital buildings if regular access via the nearby gate and hospital access road is blocked. 		Site inspections and reporting; Regular patrols to check unsafe areas; Checking accident reports

	<p>and visitors during construction, trenching, and other construction activities.</p> <ul style="list-style-type: none"> Community hazards can arise during construction (e.g., open trenches, air quality, noise, falling objects, etc.). Trenching within hospital premises on pavements or any other paved road and areas using pneumatic drills will cause noise and air pollution. 	<ul style="list-style-type: none"> Place signboards and directional signs for detours and facility shifts in both local languages at prominent locations, using large-sized lettering. Ensure the safety of peripheral areas and access paths at all times by maintaining non-slippery surfaces, clearing obstructions, and keeping the site clean and well-managed. Install safety signs at appropriate locations to inform the public of potential dangers from construction activities. Ensure emergency access remains unobstructed at all times. Provide alternative access for ambulances and other vehicles when necessary. Implement strict entry controls to prevent unauthorized access to the site. Notify hospital staff and users about the construction schedule, highlighting particular hazards, noise, and dust episodes. Prohibit parking of concrete mixer trucks and other construction vehicles outside the hospital premises, especially on narrow or busy access roads. Display advance public notices to inform hospital users of any planned tree cutting. Strengthen all slopes with appropriate engineering interventions. Rehabilitate access roads and paths to their original conditions upon completion of construction. 		
Physical Cultural Resources	<p>There are structures in some hospitals which are more than 100 years old. Excavations and trenching can uncover and/or damage archaeological and historical resources.</p>	<ul style="list-style-type: none"> Obtain prior approval from Department of Archaeology in case of renovation/repair works are involved in hospital building which are more than 100 years old. All the staff and laborers of the contractor should be informed about the possible items of historical or archaeological value, which include old stone foundations, tools, clayware, etc. If something of this nature is uncovered, the Department of Archaeology shall be contacted, and work shall be stopped immediately. The chance finds procedure of archaeological and cultural artefacts should be established. 		Site inspections and reporting; Inspection of relevant reports / approvals
(x) Operation				
Healthcare waste (HCW)	<ul style="list-style-type: none"> The risks associated with operations and maintenance-related injuries must be effectively managed to ensure the safety of workers and the general public, while exposure to hazardous materials during the operation of healthcare waste 	<ul style="list-style-type: none"> Ensure the safe handling of healthcare waste (HCW) during collection, storage, transportation, treatment, and disposal according to the "Guidelines for the Management of Scheduled Waste in Sri Lanka" published by the CEA, according to the regulations published in the Gazette Extraordinary No. 1534/18 dated 01.02.2008 through licensed service provider/s for HCW disposal. Plan and design HCW management measures at an early stage. 		Site inspections and reporting; Checking records on generation and disposal of HCW

	<p>and wastewater treatment plants, as well as sanitation facilities, should be minimized</p> <ul style="list-style-type: none"> ▪ Inadequate waste management practices and unhygienic conditions within facilities can lead to public health concerns, particularly the spread of diseases. ▪ Leachate from healthcare waste transfer stations and storage chambers can contribute to environmental pollution and create a nuisance for nearby communities. ▪ Stagnant water resulting from inadequate stormwater drainage systems and poor waste management practices poses a significant health risk by providing breeding grounds for disease vectors such as mosquitoes, flies, and rats. 	<ul style="list-style-type: none"> ▪ Provide proper training for workers involved in the handling, storage, transportation, treatment, and disposal of HCW to ensure they follow safety protocols. ▪ Equip workers with personal protective equipment (PPE) such as gloves, masks, and protective clothing to minimize exposure to hazardous materials. ▪ Implement colour-coded waste segregation systems to clearly differentiate between hazardous and non-hazardous waste, reducing the risk of contamination. ▪ Ensure secure storage of HCW in designated, well-ventilated, and safe containers to prevent accidental exposure or leakage. ▪ Regularly monitor healthcare waste disposal sites to ensure compliance with environmental and health safety standards. ▪ Develop emergency response plans for accidents involving hazardous waste, including spill containment and decontamination procedures where applicable. ▪ Ensure proper transportation of HCW using dedicated, leak-proof vehicles that comply with regulatory safety standards. ▪ Minimize HCW generation by promoting waste reduction strategies, such as the use of reusable materials in healthcare facilities. ▪ Use environmentally sound treatment technologies such as autoclaving or incineration to reduce the environmental impact of HCW disposal. ▪ Conduct regular audits and inspections to ensure adherence to safe waste management practices and to identify areas for improvement. 		
Solid waste management	<ul style="list-style-type: none"> ▪ Lack of management of domestic waste water may cause health risks and obscure the landscape ▪ Since solid waste collection will not be on a daily basis, there is risk of solid waste piling up within the premises ▪ These can lead to an increase in vector population and health risks 	<ul style="list-style-type: none"> ▪ Dispose solid waste through the designated Local Authority in accordance with a pre-agreed collection and disposal schedule ▪ Adhere to CEA guidelines of solid waste collection and disposal ▪ Ensure demarcated solid waste storage area with source separation for organic waste and other domestic non-organic waste. 		Site inspections and reporting; Checking records on disposal
Sewage management	<ul style="list-style-type: none"> ▪ Leaking sewers and septic tanks can damage human health and contaminate soil and groundwater. 	<ul style="list-style-type: none"> ▪ Ensure that the domestic wastewater is directed to suitable collection / treatment facility such as soakage pits in conformance to local authority guidelines. 		Site inspections and reporting; Checking records on disposal

	<ul style="list-style-type: none">▪ Lack of disposal of the domestic waste water will result in health issues to the worker	<ul style="list-style-type: none">▪ Dispose of sewage in accordance with relevant guidelines and with the assistance of the local authority.		
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For category B projects, the contractor shall prepare a site specific ESMP including the following details

A. Identification of impacts and description of mitigation measures

Firstly, Impacts arising out of the project activities need to be clearly identified. Secondly, feasible and cost-effective measures to minimize impacts to acceptable levels should be specified with reference to each impact identified. Further, it should provide details on the conditions under which the mitigatory measure should be implemented (e.g., routine or in the event of contingencies). The EMP also should distinguish between the type of solution proposed (structural & non-structural) and the phase in which it should become operable (design, construction and/or operational).

B. Monitoring program

To ensure that the proposed mitigatory measures have the intended results and comply with national standards and donor requirements, and environmental performance monitoring program should be included in the ESMP. The monitoring program should give details of the following;

- Meaningful Monitoring indicators to be established and periodically measured for evaluating the performance of each mitigatory measure (for example, national standards, engineering structures, the extent of area replanted, etc.).
- Monitoring mechanisms and methodologies
- Monitoring frequency
- Monitoring locations

C. Institutional arrangements

Institutions/parties responsible for implementing mitigatory measures and for monitoring their performance should be clearly identified. Where necessary, mechanisms for institutional coordination should be identified as often monitoring tends to involve more than one institution.

D. Implementing schedules

Timing, frequency and duration of mitigation measures with links to the overall implementation schedule of the project should be specified.

E. Reporting procedures

Feedback mechanisms to inform the relevant parties on the progress and effectiveness of the mitigatory measures and monitoring itself should be specified. Guidelines on the type of information wanted, and the presentation of feedback information should also be highlighted.

F. Cost estimates and sources of funds

Implementation of mitigatory measures mentioned in the EMP will involve an initial investment cost as well as recurrent costs. The EMP should include costs estimates for each measure and identify sources of funding.

ANNEX 7: TERMS OF REFERENCE FOR THE PROGRAM OFFICERS/ASSISTANTS (SAFEGUARDS), PROGRAM COORDINATION OFFICE (PCO)

Environmental Safeguards Officer

1. Provide overall policy and technical direction for environmental safeguards management under the Project (as defined by the ESMF) and the ADB SPS 2009.
2. Carry out required due diligence activities (checklists and preparation of ESMPs for activities directly under RBL program)
3. Provide technical guidance and ensure environmental analysis is carried out for each activity as soon as conceptual technical design and scope have been defined to relevant officials in the provinces.
4. Gather information for environmental screening of project sites, via site visits, analysis of photographic evidence from sites, maps etc. bi-annually for activities directly under MOH and gather relevant documentation from the provinces.
5. Provide technical guidance as per the ESMF to project implementing entities on preparation of site specific Environmental Social Management Plans (ESMPs), Environmental Screening Reports and Due Diligence reports for activities, as necessary (depending on screening outcome and guidance provided in the ESMF and ESMPs); provide decision and coordination for hiring technical assistance in event IEEs are required and endorsement of these safeguard documents
6. Guide on ensuring consistency of safeguard documents with national environmental regulations; obtain necessary clearances from local environmental regulatory authorities for activities, where necessary.
7. Co-ordinate closely with the Engineers and Technical officers managing project implementation in the project areas at the provincial level; and provide necessary technical assistance to facilitate the implementation, management and monitoring of the ESMPs.
8. Ensure that applicable measures in the ESMP are included in the design, and condition on compliance is included in the bidding documents. Ensure compliance with ESMPs during the refurbishment/ renovation period and maintain close co-ordination with the site engineer of the implementing agency and the environmental focal point of the contractor via collecting samples on a quarterly basis from any physical interventions financed under the program.
9. Prepare a summary report on status of physical interventions under the program to ADB on the overall environmental performance of the project as part of periodic progress reporting.
10. Periodic capacity building/awareness activities on safeguards implementation for the Provincial Engineering Department staff, and registered hazardous waste service providers, as well as MOH level officers where capacity weaknesses are identified will be supported through the Technical Assistance on an intermittent basis as required.

Social Safeguards Officer

1. Provide overall policy and technical direction for social safeguards management under the Project (as defined by the ESMF) and the ADB SPS 2009.
2. Provide technical guidance and ensure social analysis is carried out for each activity as soon as the conceptual technical design and scope have been defined, in coordination with relevant officials in the provinces.
3. Gather information for social screening of project sites, through site visits, analysis of photographic evidence from sites, maps, etc., bi-annually for activities directly under MOH, and gather relevant documentation from the provinces.
4. Guide the conduct of social screening for each site and assist in collecting necessary data for the preparation of IEE/ESMPs.

5. Ensure compliance with social safeguard measures in the ESMP during the construction period, maintaining close coordination with the site engineer of the implementing agency and the contractor.
6. Coordinate closely with the Engineers and Technical officers managing project implementation in the project areas at the provincial level and provide necessary technical assistance to facilitate the implementation, management, and monitoring of the ESMPs.
7. Assist in preparing and submitting regular social monitoring and implementation progress reports to the Project Coordination Office (PCO).
8. Assist in ensuring that public complaints related to nuisance and inconvenience caused by sub-project implementation are addressed with corrective action and adequately documented.
9. Assist the PCO in developing and implementing training and awareness workshops on social safeguards.

ANNEX 8: OUTLINE FOR A SEMI-ANNUAL ENVIRONMENTAL AND SOCIAL MONITORING REPORT

1. Introduction
 - a. Overall project description and objectives
 - b. Details of site personnel and/or consultants for environmental monitoring
 - c. Description of activities and status of implementation
 - d. Approach and methodology for environmental monitoring of the project
2. Compliance status with national/state/local statutory environmental requirements
3. Compliance status with environmental and social loan covenants
4. Compliance status with the environmental and social management plan
5. Implementation of grievance redress mechanism and public complaints
6. Overall compliance with ESMP and EMOP
7. Monitoring of environmental impacts on project surroundings
8. Conclusions and recommendations