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Environmental & Social Review Summary

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Project Description

The proposed investment is an A-loan of US$ 24.0 m to help finance a greenfield general hospital (161 bed) in Erbil, Kurdistan Region in Iraq (KRI), (the “Project” or “SEEMA”) through the project company, MACROM FOR GENERAL TRADE LLC. The sponsor is Mr. Yaseen Taha Albazzaz (the “Sponsor”), an Iraqi engineer started to work in healthcare sector in 2006 where he built one of the most advanced eye care hospitals in KRI - SEEMA Eye Hospital.
and has been operating it successfully. At present the hospital is treating 800-850 eye patients monthly and providing internal medicine and general surgery services. Since its establishment, Seema hospital recorded about 400,000 inpatients and conducted 50,000 surgeries and build up reputation of being amongst best considered eye disease treatment hospital in the country. It also provides health check-ups for employees of foreign companies and performing early eye diseases investigation among students within age group 6-10 years free of charge. This is conducted with cooperation of the education department in Erbil and performed free of charge.

The Sponsor plans to close the operations in the existing eye hospital and move its operations under the new SEEMA hospital once completed.

Project is at an advanced stage with license to operate obtained and the construction of the new facilities almost completed. At the time of appraisal field visit civil works were 100% complete and electrical & Mechanical jobs were reported 80-85% complete. Project will be ready for operations in 15-18 months from financial close. IFC financing will go towards its completion and for purchasing medical equipment. The Project was designed by a reputable hospital contracting consulting company, MS Mimarlik (Turkey ). The design was reviewed by JCI (Joint Commission International) and is expected to demonstrate best practice standards in design and operations and thereby contribute to raising industry standards in (and around) Erbil/Kurdistan.

The Project is constructed on a leased plot of approximately 11,400 square meters with a total built up area of 32,000 square meters separated into 5 buildings. The total number of beds will be around 161 beds, including 69 single patient rooms. The hospital plans to be a full service facility providing 35 specialties including cardiology, pediatric care, neurology, nuclear medicine, dentistry, neurosurgery, ophthalmology, plastic surgery, radiotherapy, brachytherapy, audiometry & ENT, gynecology, nephrology, cystoscopy, internal medicine, orthopedic, oncology, and emergency services with ambulatory care. The hospital is planned to have 21 functional departments and 11 support areas. The functional departments will have 2 diagnostic departments, 12 treatment department and 7 departments with both functions. The support areas would include administration section, utilities rooms, car parking areas, doctors residence, etc.

Overview of IFC's Scope of Review

The IFC review of this project consisted of appraising technical, environmental, health, safety and social information submitted by the project sponsor, and a field visit in July 2018 and includes the following:

- Discussions / meetings with the project sponsor, senior management and staff of other departments at existing SEEMA Eye Hospital.
- Sites visits of existing SEEMA Eye hospital, under construction new General SEEMA Hospital and 2 operational hospitals in Erbil.
- Meeting with head of Kurdistan Health Department.
- Review of documents provided by the sponsor, including JCI report, KPMG report, Mechanical Systems report, wastewater management plans, fire safety plan, etc.

E & S Project Categorization and Applicable Standard

Identified Applicable Performance Standards

While all Performance Standards are applicable to this investment, IFC’s environmental and social due diligence indicates that the investment will have impacts which must be managed in a manner consistent with the following Performance Standards

PS 1 - Assessment and Management of Environmental and Social Risks and Impacts
PS 2 - Labor and Working Conditions
PS 3 - Resource Efficiency and Pollution Prevention
PS 4 - Community Health, Safety and Security

https://disclosures.ifc.org/#/projectDetail/ESRS/39533
PS5 (Land Acquisition and Involuntary Resettlement) is not applicable because the project has been constructing on a land leased by the government for the project and there was no physical or economic displacement. The project sites are located well-developed urban areas, therefore, impacts related to PS6: Biodiversity and Natural Resource Management, PS7: Indigenous Peoples and PS 8: Cultural Heritage are not expected.

In addition to the above applicable Performance Standards the project is required to comply with applicable parts of the WBG/IFC General Environmental, Health and Safety (EHS) Guidelines and EHS Guidelines for Health Care Facilities.

**Environmental and Social Categorization and Rationale**

This is a Category B project according to IFC’s Policy on Environmental and Social Sustainability as the E&S impacts are mostly site specific and localized and can be avoided or mitigated by adhering to generally recognized performance standards, guidelines or design criteria and adequately managed through the implementation of site specific Environmental and Social Management Plan.

Project land was leased for 25 years from Erbil city but the ownership is in process of being transferred to the project company. All civil construction and mechanical, electrical and plumbing (MEP) works of the project are complete and other finishing and furnishing jobs required for a hospital are under planning. Project site is located within urbanized areas and no significant or major adverse impacts on biodiversity or natural resources are anticipated at this stage. Mitigation measures for the potential environmental and social impacts are identified and incorporated into the attached Environmental and Social Action Plan (ESAP).

Specific environmental and social issues identified include: i) Sponsor’s policy and a plan for establishing and monitoring Environmental, Health and Safety and Social (EHS&S) management systems at project level, ii) Sponsor’s HR policy and procedures and contracts with 3rd party services providers to comply with IFC PS 2 provisions, iii) E&S due diligence for establishment of hospital waste incineration facility, and iv) adequacy of the Life and Fire Safety (LFS) systems at the constructed hospital buildings/facilities to comply with the WBG EHS guidelines.

**Information on IFC’s Policy and Performance Standards on Environmental and Social Sustainability can be found at www.ifc.org/sustainability**

**Environmental and Social Mitigation Measures**

IFC’s appraisal considered the environmental and social management planning process and documentation for the Project and gaps, if any, between these and IFC’s requirements. Where necessary, corrective measures, intended to close these gaps within a reasonable period of time, are summarized in the paragraphs that follow and (if applicable) in an agreed Environmental and Social Action Plan (ESAP). Through implementation of these measures, the Project is expected to be designed and operated in accordance with Performance Standards objectives.

**PS 1: Assessment and Management of Environmental and Social Risks and Impacts**

Land and natural environment:

SEEMA Hospital has been constructed on a land being leased for 25 years on annual rental basis through a contract dated Nov 2013 with the city of Erbil. Sponsors has applied for a 2 years of additional grace period to compensate for effects of war on the business activities. The land and what has been constructed on it shall be returned to the lessor at the end of the contract’s duration; however, it has been informed that transferring land title to the project company is currently in process. The Project sponsor is familiar with the local regulation relating to
project development and has experience of managing construction of four healthcare projects. No land acquisition is required for the project or any of its components and, being located in urbanized areas, no direct adverse impacts are anticipated on natural environment from the project.

Environmental and Social Assessment:

While constructing the project no environmental and social assessments was carried out as was not required by Ministry of Health or any regulatory department. However, the land was provided to the sponsor for the only purpose of establishing Seema private hospital for which sponsor acquired investment license from the Investment Board of the Ministers Council Presidency in May 2008.

To design Seema hospital project, the sponsor hired services in 2010 of a highly reputable contracting and consulting company called MS MIMARLIK based in Turkey having experience of designing several hospitals in Iraq. The design followed highest standards that support the functionality of the hospital. The sponsor approached JCI during planning period to integrate the new Seema hospital with latest world healthcare standards in terms of design to guarantee top safety system for patients, visitors and the staff. JCI reviewed the hospital design for patient safety and quality improvements, to ensure the hospital is complying with safe health design system. The Sponsor worked in collaboration with the designer on the concerns raised in JCI review report of July 2014 and adjusted the Seema design layout to comply with JCI standards.

KPMG feasibility report of October 2016 mentions that the regulatory environment in KRI is still under development. The report also mentions that the security stability has resulted in growth of healthcare sector and Government plans to encourage the private sector to provide support in the healthcare sector. Kurdistan Regional Government (KGR) provided approvals for hospital building permits and provided land to the investors at nominal value.

For the disposal of infectious waste from Seema Hospital, the sponsor plans to establish a dedicated waste incineration facility on a piece of land located in suburbs of Erbil city and owned by the sponsor. However, the facility will be designed and established at later stage of the project and sponsor would conduct an environmental and social due diligence of the incineration facility as described in the ESAP item # 6.

Identification of Risks and Impacts:

The hospital was constructed using the latest technology of structural design, taking into consideration natural risks such as earthquakes and energy conservation by isolating the buildings. Expert engineers assured maintaining a high level of quality assurance/quality control (QA/QC) standards at project design and, during the construction, high level safety standards were followed to assure the safety of the construction workers. No fatal incident is reported by the sponsor during the project construction phase lasted for almost 325 thousand man-hours. All the structural material (such as Steel & Concrete) were tested by a third-party laboratory and reportedly met the ASTM standards (American Society for Testing and Materials) and the approved structural design standards by the local governorate organization, as well as independent consultancy engineering firms.

The JCI review report identified a few areas for improvement in facility design to mitigate and reduce potential occupational health and safety related risks including: provision of hand-washing sinks for clinical staff in most care areas; installation of sanitation hand gel dispensers in every patient room; provision of docks and areas for receiving supplies and removal and storage of wastes; safety measures for gas cylinder storage area; maintaining negative airflow that exhaust dirty side of the laundry to the outside duct; and, separating entrances for ambulance, automobile and ambulatory access.

The sponsor will develop and implement, as described in ESAP items # 1, procedures for conducting health and safety risk assessment as part of ESMP for each departmental activity on quarterly basis for first year of operations and later on annual basis. The activities for risk assessment would include, but not limited to, safety of staff/patients/visitors, management of hazardous materials and wastes, emergency preparedness and response, fire safety, safety of medical equipment and utility system, project security and management of security forces.

HSE policy and Management:
Present Seema Eye hospital has no formal and documented EHS Policy or E&S Management System in place. Practices relating to wastes management, hazardous materials control, sanitation, housekeeping, etc. were observed in place, however, lacking documentation.

The Sponsor plans to engage a qualified professional to do the EHS&S risk assessment of the Seema hospital and formulate EHS Management System specific to the project. As described in ESAP item #1, the sponsor will develop an EHS & Social Policy to develop an Environment, Health, Safety (EHS) and Social Management Plan (EHS&S MP) to respond to the management and mitigation actions, identified by risk assessment process, in accordance with the requirements of IFC Performance Standards, applicable WBG EHS Guidelines and applicable local legislation.

The sponsor will build its capacity to implement the ESMP as described in ESAP # 2.

Organization and HSE Team:

The Sponsor is familiar with all local regulations (KRG) to get project approvals and is capable of replicating his success in the specialized healthcare hospital on a larger scale. The Sponsor has sought IFC advice on the initial project feasibility/plan and based on IFC requirements appointed KPMG to complete a more detailed market assessment and feasibility study. The Sponsor will also engage with IFC Corporate Governance (CG) to advise on proper CG set up and succession planning, demonstrating a commitment to implement best practice.

During project operational phase, the EHS section would be responsible for monitoring of EHS and social performance and implementation of EHS&S management plan.

As described in ESAP item # 2, the Sponsor will develop and implement a plan for establishing and capacity building of EHS Section defining organogram, roles and responsibilities, functions, etc. The sponsor will appoint a well-qualified EHS&S manager in charge of the implementation of the EHS&S related policy and procedures. The EHS Section will be responsible to implement project specific EHS&S policy, management plan and procedures developed therein during project’s operational phase in compliance with the IFC PSs, applicable WBG EHS Guidelines and local legislation.

Training, Monitoring and Reporting:

Quality and safety related trainings are conducted for the staff of Seema Eye hospital. quarterly basis for SIH staff. Sponsor ha an agreement with JCI for training of 30 key persons, including EHS personnel for operational phase of the new hospital. The sponsor will develop training plan for the EHS team in consultation with IFC and will extend the scope of trainings to cover the important 3rd party service providers such as security management, waste management contractors, etc.

The EHS management plan, being developed under ESAP item #1 will include detailed procedures for routine EHS inspections, monitoring and internal audits conducted for each ward/section level and 3rd party external audits for overall hospital. A procedure will also be developed for reporting and review of all audits, monitoring, inspections and performance reports at senior management levels.

Sponsor will submit E&S performance reports to IFC on quarterly basis for first two years of operational phase and later on annual basis.

PS 2: Labor and Working Conditions

Seema hospital is expected to create 770 employments in healthcare sector by 2022. The project would initially depend upon expat staff for commencement of hospital operations, as the Sponsor is negotiating with reputable and experienced international firms/companies for managing overall technical operations of the hospital. Nonetheless, there is a training component that would result in the training and employment of local staff to contribute up to 75% of total project workforce by 2022 versus 25% hired in hospital's initial operational years. The project would therefore, positively contribute to increased trained healthcare manpower in the country.
One of the main challenges that led to failures of other health projects in Iraq is the housing of staff. The Project includes a separate block consisting of six floors to host 24 apartments for doctors’ residence, whereas another block includes accommodation for 30 nursing staff, to attract and retain quality staff. Provision of accommodation is perceived as a requirement for success of projects involving expat staff.

Human Resource Policies and Procedures:

Sponsor will develop an HR management process for staffing the hospital and sustaining high employee performance. The HR process would include management function that handles recruitment, compensation, employee development, career & succession planning, benefits and employee relations related activities.

The HR manual would include detailed procedures which specify the terms of employment and working conditions at SEEMA hospital would include procedures for hiring and recruiting, salary and compensation, lay-off and retiring, leave and vacation, accommodation (for expats), competency assessment and promotion, orientation or new employees, trainings and capacity building, grievance redressal, and insurance in line with IFC PS and KRG labor laws. HR manual would also include staff health and safety program and employees health services.

As described in ESAP item # 3, the Sponsor will develop an HR policy statement specifying scope and applicability of HR policies and procedures for all its employees, contract staff/workers and 3rd party staff performing services within the hospital. Based on the policy statement a detailed HR manual will be developed which would include all the required procedures and protocols necessary for implementation of HR process at the hospital.

Communication and Update:

HR policy and procedures will be communicated to all employees at hiring. All concerned could refer to HR procedures through internal web portal as well. Employees would be issued written appointment letters/contracts at the time of joining which mentions essential information related to their rights including, working hours, remuneration, probationary period, notice period, compensation & benefits, code of conduct, etc.

A procedure will be developed on orientation of new employees through a mandatory session which enables them to get acquainted with HR/HSE policies and employment terms are clearly communicated in writing. HR Department will keep the policies updated time to time as per local labor and employment laws and IFC performance standards.

HR Management:

Sponsor will ensure that HR Department is adequately staffed, trained and had all necessary resources to implement the HR management system. Core functions of HR department would also include collaboration and interaction with relevant organization/institutes for recruitment/development of capable and talented technicians, nurses and physicians; ensuring staff engagement and participation by maintaining respectful and healthy working relationship between the employees and management; and encouraging staff retention and succession planning.

As desired under ESAP item# 4, the Sponsor will develop an HR manual reflecting the terms and conditions of the employment and engaging 3rd party workers and service providers. The Sponsor will engage an experienced and qualified professional to conduct HR audits to verify implementation status of HR management system at completion of first quarter and fourth quarter in operational phase and later after 2 years into operations.

Workers’ Organization:

The Sponsor has no registered labour union for collectively bargaining for both employees or contract workers at existing Seema Eye Hospital, however, does not impede employees/workers from exercising freedom of association and collective bargaining. The management engages with the employees through grievance redressal processes described in the following paragraphs.

Non-Discrimination and Protecting the Workforce:
Sponsor is committed to provide equal opportunities for its employees and keep all the hiring and promotion process free of ethnic, religious and/or gender biases and are strictly on merit and performance basis. Hiring processes would be carried out under the Project's procedure of recruitment developed under HR process. The HR manual would include policies on prevention of sexual harassment, non-discrimination and competency assessment, besides a procedure on prevention of engaging child or forced labour in Seema hospital operations. HR process would include a policy for medical monitoring of the employee and staff welfare.

Workers’ Grievance Mechanism:

HR manual will include a documented procedure for grievance redressal mechanism and communicated to the employees through internal web portal and contract agreements. Employees would be encouraged to discuss grievances with immediate supervisors and department heads to resolve. Complaint boxes would be placed at prominent location for receiving written grievances and a registered maintained to record redressal actions and decisions.

Occupational Health and Safety:

Sponsor will ensure that the project (new Seema Hospital) has an Occupational Health & Safety Management Program (OHSMP), as part of the overall management system, in place to take actions to maintain a safe and healthy environment and comply with local laws, JIC requirements and IFC EHS Guidelines for Healthcare Facilities. The OHSMP would be applicable on entire hospital operations including all facilities, people, contractors, processes and equipment of operation. The program would include a process for identification of workplace hazards.

Considering the severity and exposure of certain job roles, the OHSMP would include a post medical monitoring program for examinations of workers to detect adverse health effects which could possibly be related to workplace exposures. The policy focuses on early detection of symptoms to help plan earlier treatment and prevent additional exposures that could aggravate a potentially serious medical threat to employee and patients. OHSMP would include a procedure to acquire work permits designated senior management for performing jobs involving hot works, radiation & chemical exposure, infection hazards, energy isolation, confine space, pressurised gases, toxic emissions and fumes, etc.

No Lost Workdays (LWD) have been reported in existing Seema Eye Hospital operations by the sponsor.

OHSMP would be develop as part of project specific EHS&S management plan being developed for the operational phase under ESAP item # 1.

Workers Engaged by Third Parties:

The Sponsors plans engage third party to support main functions of the upcoming Seema Hospital Project which may include technicians, nursing staff, physicians, etc. Some of the routine operations may also be outsources to third party contractors such as security, laundry services, janitorial services, housekeeping, etc. HR manual would include a policy on 3rd party contracts and daily wages employment, and part-time employment. As described in ESAP item #5, the Sponsor will ensure that the contractual terms with companies providing outsourced services comply with the Project’s HR policy relating to, but not limited to, minimum wages, working hours, overtime, procedure for termination, grievance mechanism, etc.

PS 3: Resource Efficiency and Pollution Prevention

Resource Consumption:

Water Supply: The operations of Seema hospital require approximately 45 m3 of water per day and is mainly used for laundry, canteens, cleaning, washing, and in washrooms. Project developed a well for extraction of underground water for construction purpose. The well is 290 meters deep with dynamic water level at 120 m and 490 liters/minutes of water drawing capacity. This underground source would be used for meeting raw water demand of the hospital. An RCC tank of 50,000 liters capacity for raw water storage and a 76,000 liters capacity for soft water storage have been already been constructed at the Project. Raw water will be treated through a water softening
system for usage in the hospital areas. Water for use in hemodialysis unit will be treated through a Reverse Osmosis unit of 1.0 m³/h capacity operated on 10-12 bar pressure. Project considers municipality supply as a secondary raw water source, which is presently under upgradation phase.

As part of the ESMS, the Sponsor will develop a procedure for adequate disinfection of the well water prior to supply into the hospital network and for checking water quality inhouse on daily basis and through 3rd party laboratory on monthly basis.

Energy: Project requires 5 MW of electricity for hospital operations which will be acquired from electricity grid of local government. Five generators of 1 MW each and two generators of 500 KVA operated on diesel fuel would be installed as secondary source and backup power supply. Use of power generators would need 1500 liters of diesel on daily basis. The Project will use LPG for hot water generation and in kitchens for cooking and natural gas for space heating.

Pollution Prevention:

Wastewater Treatment: The wastewater generated mainly from canteen, washing, cleaning, laboratory and washrooms discharged, after proper treatment, into storm-water drainage system of the area as no public sewerage network/infrastructure is in place for the entire project neighborhood from the local municipality. The project has already constructed a package wastewater treatment plant having capacity of handling 200 m³ of wastewater daily. The wastewater system also includes a 7 days delay tank for holding effluent from chemotherapy unit. A Chlorine dosing tank has been included in the treatment system to disinfect the treated wastewater, however, it is also passed through a UV-units for further disinfection prior to discharging into the area drainage.

The Sponsor will ensure that the treated wastewater quality comply with the effluent levels specified in Table 2 of IFC EHS Guidelines for Healthcare Facilities. The EHS&S Management Plans developed under ESAP # 1 will define monitoring and management plan for the wastewater.

Air Emissions: Air emissions sources at the project include stacks of secondary power generators and two diesel operated boilers. These generators are small and stack emissions will be monitored for the emission levels define in IFC EHS General Guidelines. All air flow ducts are of Stainless Steel and have a UV system and filters installed to disinfect and clean the indoor air quality. The EHS&S Management Plans developed under ESAP # 1 will define monitoring and management plan for the exhaust emissions.

Solid & Hazardous Wastes: The project will produce daily around 300 kg of hazardous/hospital waste besides the general solid waste from wards and other facilities in the hospital and food waste for kitchen operations. The general solid waste and food waste will be disposed of at municipality designated site through an approved waste contractor. Project includes refrigerated room for the storage of biohazardous/infections wastes. As there is no treatment/disposal facility for hazardous waste operated by the municipality or in private sector at Erbil, the Sponsor plans to develop an incinerator unit on its own land located in suburbs of the city after acquiring necessary approval from the local government for the safe disposal of infectious waste.

As described in ESAP item # 6, the Sponsor will submit the technical design for the incineration system, confirming that the it will comply with the stack emission levels specified in Table 3 of the IFC EHS Guidelines for Healthcare Facilities and that all operations such as transportation of hazardous waste and disposal of ash generated from the incineration process are properly managed in accordance to best practices.

As described in ESAP item # 1, the Sponsor will develop a system of at source segregation, handling and disposal of infectious and hazardous wastes with color coding as part of a hospital waste management plan in compliance with Table 1 of IFC EHS Guidelines for Healthcare Facilities.

Hazardous Materials Management:

Hazardous Materials: Hazardous chemicals will be used as scale/corrosion inhibitor, biocide, pH controllers, disinfectant, anti-germs, cleaner in Seema hospital routine operations. As described in the ESAP item # 1, sponsor will develop a procedure for hazardous materials and waste management that requires maintaining an inventory and identity, handle, use, and dispose of hazardous materials and waste in a manner that protects the employees,
patients, visitors and the environment. The procedure would be developed in compliance with the IFC EHS guidelines and the instructions mentioned in the Material Safety Data Sheets (MSDS) of the chemicals being handled and used. Under ESMS, the Sponsor will also develop a Radiation Safety Program to comply with the international regulatory requirements for radiation control and include equipment and waste disposal to ensure safety.

Medical Gases System: The design of medical gas system of the project is in accordance with HTM-220. Major components of the system include gas plants, piping network, zone serving units, monitoring and alarm system, gas outlets. The gas plants include oxygen system, nitrous oxide manifold plant, medical air plant, anesthetic gas scavenging (AGS) plant, and medical vacuum plant. High pressure bottled gases, namely oxygen, nitrous oxide, carbon dioxide are located in separate room. Oxygen generator plant is also in a separate room and design to deliver the oxygen gas to the system at 4.5 bar and min. 93% purity. AGS system consists of duplex pump group, remote switches, flow regulators and control equipment and designed in compliance with EN 737-2 standards. Medical gas system component are designed operate in compliance with the safety standard.

Energy Efficiency, Resource Conservation & GHG Emissions:

The Sponsor plans to design energy and resources conservation initiatives for the project and is using EDGE assessment as baseline. The analysis from EDGE shows 29.31% energy efficiency from the base case resulting in GHG savings of 642 tCO2/year with measures including insulation and reflective paints on roofs and walls, efficient glass, use of air cooled chillers, heat recovery from exhaust air, variable drives pumps, high efficiency boiler, energy saving lights, and use of occupancy sensors. The analysis shows 36.6% in water efficiency from base case with measures such as dual flows for water closets in bathrooms only and 44.75% from materials efficiency measures including energy efficient construction materials, floorings and wall insulations.

Through of a strong IT based management system, the hospital will be “paperless” working environment. All information, data and diagnostic records will be maintained in a fully-integrated and automated system operating on a Hospital Management Information System (HMIS)).

GHG Emissions: GHG emissions for the Seema hospital would be mainly from operations of power generators and boilers, grid supplied electricity and fuel consumption by company owned vehicles/ambulances. Maintaining paperless working will also help reduce the Project’s GHG footprint. Based on electricity consumption estimates, emissions will be below 25,000 tonnes of CO2-equivalent annually, therefore GHG reporting requirements does not apply to this project.

PS 4: Community Health, Safety and Security

Community Health & Safety:

The Seema Hospital project has been designed by reputable international firms in compliance with internationally acceptable standards being reviewed by JCI. Project construction has been carried out by experienced contractors. Healthcare facilities have minimal health and safety risks to the surrounding communities. Seema building design include parking facility for 300 vehicles to avoid any traffic disruption on the adjoining roads in the neighbourhood.

Life and Fire Safety (L&FS):

The project has designed and installed a firefighting system to provide for a safe environment protecting patients, visitors, staff and property from fire and smoke. It consists of prevention, early detection, suppression, abatement, and safe exit from the facility in response to fires and non-fire emergencies.

The fire water system consists of a water tank, separate sets of firefighting pumps (consisting of main pump and jockey pump) serving the buildings and external hydrants, fire hose cabinets, automatic smoke detectors, wet and dry type automatic fire suppression systems and facilities include sprinkler system (at sensitive locations). Water tank capacity is 180 cubic meters and designed for service time of 60 minutes. Fire pump has capacity to meet water flow demand of 158 m3/h at 13 Bar pressure whereas jockey pumps have flow rate of 2 m3/h at 14 bar. Firefighting system also includes trolley type mobile foam units, portable fire extinguishers, halocarbon gas type fire extinguisher and alarm installed at sensitive locations. Suppression system at cooking appliances include...
automatic dual agent wet chemical system. All firefighting, detection, suppression and alarm units are connected to a Building Management System (BMS) for centralized monitoring and control. The pressure in the pipes, operations of the pumps, water levels in tanks are monitored at the BMS. Fire system has provision of starting manually or through automatic detection system. The system includes auto alarms for tank water levels and equipment starters and designed to maintain a constant pressure at all time. In case of pressure drop to a pre-set limit, the pressure sensor will activate the jockey pump to operate until the pressure is re-established. The building design also includes elevator and staircase pressurization fans and an automatic activation control connected to BMS for activation in case of fire emergency. Pressurizing of escape routes enabling people to leave the building safely in case of a fire is one of the trivets of fire scenario and smoke control. For preventing smoke getting into the escape routes and staircase and elevator shafts, the design includes pressurization of two scape shafts in the main hospital building and 1 patient elevator and 1 bed elevator to serve all floors as emergency elevators. The project’s firefighting system design follows NFPA standards.

The EHA&S Management System would include a plan for firefighting training, drills and inspections. As described in ESAP item # 7, the company will engage a suitably qualified and experienced LFS professional who will conduct a review, as part of project completion test, at the time of the L&FS systems testing and commissioning and will certify that these systems are in compliance with an international L&FS standard (e.g. NFPA) as described in the initial design or, alternatively, that the L&FS risks are properly addressed by the installed systems.

Disaster Management:

The Sponsor will also develop, as part of EHS&S Management System, an Emergency Response Plan to document procedures to respond to natural and manmade disasters/emergencies in a manner that protects health and safety of its patients, visitors, staff and community around. The plan would provide a structure, with roles and responsibilities, for disaster/emergency response, identify resources needed, and reviewed on annual basis or as needed as result of drills/real emergencies.

Security Management:

The security management at the project includes controlling access at the gates and entrances of the hospital premises and keeping premises under CCTV surveillance 24/7 by security personnel. The Sponsor will develop a Security Management Plan (SMP), as described in ESAP item # 8, to secure the Seema Hospital premises and to provide a safe environment to all its users, patients, visitors, employees, and property and to comply with city authorities and KGI regulations and the requirements of accrediting agencies and IFC Performance Standard. The Security Management Plan will include training and procedures for personal safety/security, hiring of security persons/guards, handling security incidents, crime prevention, identification of patients, visitors, employee and security preparedness and response. SMP would be developed after carrying out risk/vulnerability analysis and developing action plan to control, deploying static posts, organizing foot patrols to keep the hospital premises under surveillance, providing Emergency Response to security situations and taking instant action on security incidents, logging all security incidents, etc. The security management personnel would also monitor city situation during, riots and other civil disturbances as a proactive approach to response to emergencies and disaster management.

PS 5: Land Acquisition and Involuntary Resettlement

PS 6: Biodiversity Conservation and Sustainable Management of Living Natural Resources

PS 7: Indigenous Peoples

PS 8: Cultural Heritage
IFC supports its clients in addressing environmental and social issues arising from their business activities by requiring its real sector clients to set up and administer appropriate grievance mechanisms and/or procedures to address complaints from Affected Communities in relation to environmental and social issues arising from IFC’s business activities. Since 2012, IFC’s Financial Intermediary clients applying the Performance Standards are required to develop External Communications Mechanisms to receive and review inquiries or complaints from any interested party regarding the E&S risks and impacts of their operations.

In addition, Affected Communities have unrestricted access to the Compliance Advisor Ombudsman (CAO), the independent accountability mechanism for IFC. The CAO is mandated to address complaints from people affected by IFC-supported business activities in a manner that is fair, objective, and constructive, with the goal of improving environmental and social project outcomes and fostering greater public accountability of IFC.

Independent of IFC management and reporting directly to the World Bank Group President, the CAO works to resolve complaints using a flexible, problem-solving approach through its dispute resolution arm and oversees project-level audits of IFC’s environmental and social performance through its compliance arm.

Complaints may relate to any aspect of IFC-supported business activities that is within the mandate of the CAO. They can be made by any individual, group, community, entity, or other party affected or likely to be affected by the environmental or social impacts of an IFC-financed business activity. Complaints can be submitted to the CAO in writing to the address below:

Compliance Advisor Ombudsman
International Finance Corporation
2121 Pennsylvania Avenue NW
Room F10K-242
Washington, DC 20433 USA
Tel: 1 202 458 1973
Fax: 1 202 522 7400
E-mail: cao@worldbankgroup.org

The CAO receives and addresses complaints in accordance with the criteria set out in its Operational Guidelines which are available at: www.cao-ombudsman.org

Environmental & Social Action Plan
### Environmental & Social Action Plan

#### SEEMA hospital(39533) Appraisal Disclosure Snapshot – Version 1

<table>
<thead>
<tr>
<th>Description</th>
<th>Anticipated Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Sponsor shall develop a project specific EHS&amp;S Policy.</td>
<td>30-Jun-2019</td>
</tr>
<tr>
<td>The Sponsor shall identify EHS&amp;S risks in project operations.</td>
<td>31-Dec-2019</td>
</tr>
<tr>
<td>The Sponsor shall address the identified risks by developing a project-specific EHS&amp;S Management Plans for operational phase of the hospital that would provide for an EHS&amp;S organogram, assessment and review of risks, management of solid and hazardous waste, management of resources, monitoring plan (for effluents, emissions, wastes, workplace hazards, etc.), radiation safety program, etc. to meet the requirements of IFC PSs.</td>
<td>30-Sep-2020</td>
</tr>
<tr>
<td>The Sponsor shall develop Occupational Health &amp; Safety Management Program (OHSMP) to manage workers and work place specific hazards; and develop a hazardous materials and waste management program covering infectious and radiological waste. The Sponsor will engage a qualified professional to do the EHS&amp;S risk assessment of the Seema hospital, formulate EHS &amp; Social Management System specific to the project.</td>
<td>30-Sep-2020</td>
</tr>
<tr>
<td>The Sponsor Shall review the EHS related responsibilities and obligations under the projects and develop a capacity building plan to establish and strengthen the EHS Section defining roles and responsibilities, organogram, functions, etc. The Sponsor, through Board of Directors, will be responsible to develop and implement project specific EHS&amp;S management plans for the operational phase in compliance with the IFC PSs, WBG EHS Guidelines and local legislation.</td>
<td>31-Dec-2019</td>
</tr>
<tr>
<td>The Sponsor shall appoint a well-qualified EHS&amp;S manager in charge of the implementation of the EHS&amp;S related policy and procedures and action items mentioned under this ESAP.</td>
<td>30-Jun-2019</td>
</tr>
<tr>
<td>The Sponsor shall develop a HR policy statement specifying scope and applicability of HR policies and procedures to all components of the Project including the upcoming incineration facility.</td>
<td>30-Jun-2019</td>
</tr>
<tr>
<td>The Sponsor shall: i) develop the HR manual to: a) reflect the following: terms and conditions of employment, working hours and rest time, over time, weekly rest and gazetted holidays, minimum wages, equality of treatment, freedom of association, prohibition of forced and child labor, termination of contract, grievance mechanism, mechanism for resolution of collective and individual disputes, etc.; b) provision of basic services at staff accommodations; c) make employment contracts consistent with the local Labor Codes and IFC PS2 requirements; d) reflect HR requirements applicability and binding on the contractors and third-party service providers.</td>
<td>30-Jun-2020</td>
</tr>
<tr>
<td>The Sponsor shall appoint a well-qualified HR manager in charge of the implementation of the HR related policy and procedures and action items mentioned under this ESAP.</td>
<td>30-Jun-2019</td>
</tr>
<tr>
<td>Sponsor shall develop and include EHS and labour provisions and compliance conditions in the contracts/agreements with contractors and third part service providers (including security agencies, technical operators, etc.) with clear guidelines on labor performance and requirements for compliance with sponsor’s HR policy and procedures including, but not limited to, minimum wages, working hours, overtime, procedure for termination, grievance mechanism in engagement, etc..</td>
<td>31-Dec-2019</td>
</tr>
</tbody>
</table>
## SEEMA hospital(39533) Appraisal Disclosure Snapshot – Version 1

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<td>The Sponsor shall: i) submit the technical design for the incineration system (either built within the Seema Hospital project or developed as a separate venture), confirming that it will comply with the stack emission levels specified in Table 3 of the IFC EHS Guidelines for Healthcare Facilities and that all operations such as transportation of hazardous waste and disposal of ash generated from the incineration process are properly managed in accordance to best international practices and in compliance with local requirements; OR ii) in the event that the Sponsor chooses to use the government facility or any other third-party facility for incineration of its hospital waste, an E&amp;S Due Diligence of such facility would be conducted including transportation of the hazardous waste.</td>
<td>31-Dec-2019</td>
</tr>
<tr>
<td>The Sponsor shall obtain approval (relating to action i or ii above) form relevant local authority for establishment, operations and/or use of hazardous waste/hospital waste incineration facility.</td>
<td>30-Sep-2020</td>
</tr>
<tr>
<td>Sponsor will engage a suitably qualified Life and Fire Safety professional acceptable to IFC to conduct a review, as part of project completion test, at the time of the L&amp;FS systems testing and commissioning and will certify that the construction of these systems are in compliance with an international L&amp;FS standard (e.g. NFPA) as described in the initial design or, alternatively, that the L&amp;FS risks are properly addressed by the installed systems. As needed a corrective Action Plan with a time frame for implementation will be submitted after the professional's first review. Completion will not be certified until the professional has received confirmation of satisfactory completion of the Action Plan.</td>
<td>30-Sep-2020</td>
</tr>
<tr>
<td>The company shall perform a Security Risk Assessment (SRA) with a qualified international security risks firm and will present a Security Management Plan (SMP) as per the IFC guideline to assure that staff, patients/visitors, as well as physical assets are safe, under surveillance, and in a controlled environment. The SMP will be (a) site specific and comprehensive (b) commensurate to the security risks, (c) describe security risks and detailed response procedures, (d) aligned with the Voluntary Principles on Security and Human Rights (<a href="http://www.voluntaryprinciples.org">http://www.voluntaryprinciples.org</a>), and (e) assure that all security personnel have necessary back ground checks completed at hiring, are trained, especially those who will bear arms, and operate consistently with such principles. As a general rule, the company’s security response will be guided by principles of proportionality, avoidance of confrontation, use of a preventive and defensive approach commensurate to the nature and extent of the threat, and respect for human life and basic human rights.</td>
<td>29-Feb-2020</td>
</tr>
</tbody>
</table>

### Related SII

Summary of Investment Information (SII)

### Client Documentation

No related documents.