



MINISTRY OF HEALTH

Building Resilient and Responsive Health Systems (BREHS)

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Labor Management Procedures (LMP)

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ABBREVIATIONS AND ACRONYMS

ANC	Ante Natal Care
CAJ	Commission for the Administration of Justice
C-ESMP	Contractors Environment and Social Management Plan
CHP	Community health promoters
CoC	Code of conduct
CoK	Constitution of Kenya
DOSHS	Directorate of Occupational Safety and Health Services
DRS	Department of Refugee Services
EACC	Ethics and Anti-Corruption Commission
ESF	Environmental Social Framework
ESMF	environment and social management framework
ESS	Environmental and Social Standard
GBV	Gender Based Violence
GBV/SEA SH	Gender Based violence/ Sexual Exploitation and Abuse and Sexual Harassment
GRC	Grievance Redress Committee
GRM	Grievance Redress Mechanism
ILO	International Labour Organization
KEMSA	Kenya Medical Supplies Authority
KHIS	Kenya Health Information System
KHP	Kenya Health Policy
KQMH	Kenya Quality Model for Health
MDAs	Ministries, Departments, and Agencies
MoH	Ministry of Health
NEMA	National Environment Management Authority
NHIF	National Health Insurance Fund
OHS	Occupational Health and Safety
OSHA	Occupation Safety and Health Act
PM	Project Manager
PMT	Project Management Team
PWDs	Persons with Disabilities
SEA-SH	Sexual Exploitation and Abuse and Sexual Harassment
T&Cs	Terms and Conditions
UNHCR	United Nations High Commissioner for Refugees
VMG	Vulnerable and Marginalized Group
WB	World Bank
WHO	World Health Organization
WIBA	Workers Insurance and Benefits Act

2 INTRODUCTION

2.1 Background

1. Over the years, Kenya has strived to overcome development obstacles and improve the socioeconomic status of her citizens, including health. One of the initiatives include the development of the Kenya Health Policy (KHP), 2014–2030 which gives directions to ensure significant improvement in overall status of health in Kenya in line with the Constitution of Kenya 2010, the country’s long-term development agenda, Vision 2030, and global commitments.
2. The ongoing government reforms together coupled with the anticipated economic growth was anticipated to facilitate the achievement of health goals. However, the global and local economic downturn, Covid-19, erratic weather patterns and inadequate institutional capacity among other challenges have conspired to slow down the gains made in the sector by increasing the disease burden and the ability of the government to adequately fund the health sector reform programs. The health sector has therefore defined priority reforms to be implemented both at the national and county governments to address the challenges of healthcare infrastructure, human resource, and institutional capacity as well as healthcare financing.
3. It is against this backdrop that Government of Kenya (GoK) with financing from the World Bank is embarking on Building Resilient and Responsive Health Systems Project (BREHS) [herein the Project]. The overarching Project development objective (PDO) is improving the utilization of quality primary health care services and the effectiveness of planning, financing, and procurement of health products and technologies (HPTs).
4. The PDO will be monitored through the following PDO level outcome indicators: (a) Percentage of women receiving postnatal care within 48 hours; (b) Percentage of pregnant women attending 4 or more Ante Natal Care (ANC) visits in selected counties; (c) Proportion of maternal deaths at the health facility audited and reported in Kenya Health Information System (KHIS) in selected counties; (d) Percentage stock availability for priority HPTs.

2.2 Project Beneficiaries

5. The Project will benefit all Kenyans and refugees in Garissa and Turkana counties; however, the main beneficiaries are women and children from the poorest population who tend to utilize primary care services more. The project will provide support to all 47 counties to address key priority areas that impact on PHC and focus on addressing inequities in counties that have poor RMNCAH service coverage and outcomes.

2.3 Project Implementation Arrangements

6. The Project will be implemented by multiple entities at both national and county levels. The Ministry of Health (MoH) will have the overall responsibility of overseeing implementation of the project. County governments will be responsible for implementation of county-level activities under Component 2, with support from KEMSA for procurement and delivery of HPTs to primary care facilities. Both KEMSA and county governments will put in place a management team to oversee project implementation. In refugee camps, implementation will be undertaken by relevant county

governments in close coordination with Department of Refugee Services (DRS) and the United Nations High Commissioner for Refugees (UNHCR).

7. The project management team (PMT) under the MoH, will have oversight responsibility for the overall coordination and implementation of the Project. The PMT will be headed by the Project Manager who will be responsible for the effective functioning of the project. The MoH will be required to fully designate and maintain PMT members with appropriate skills, including component coordinators, safeguards and fiduciary staff, and M&E officer. The PMT will (i) coordinate the project activities; (ii) ensure the financial management of all project activities in all components; and (iii) prepare consolidated AWP, budgets, monitoring and evaluation, and quarterly and annual financial and technical implementation reports. The PMT will compile reports from each of the 47 counties and all national implementing entities and share them with the World Bank.
8. The PMT shall have a one full-time environmental safeguards officer with health and safety expertise and one social safeguards officer with social sciences and health expertise, each with more than five (5) years of experience in carrying out environmental and social assessments of Project activities. The PMT staff should have qualifications and experience acceptable to the World Bank. Additional staff shall be mobilized as needed on short-term and long-term engagements in accordance with capacity building and environment and social management framework (ESMF) institutional assessment/needs.
9. Kenya Medical Supplies Authority (KEMSA) and National Health Insurance Fund (NHIF) shall each assign Environmental & Social focal persons to maintain coordination and support E&S implementation of the Project.

2.4 Project Components, Sub-Components and Activities

10. The Project has the following components and sub-components:
 1. Component 1: Strengthening Institutional Capacity for Health Service Delivery Towards Achieving UHC (US\$50 Million):
 - a) Sub-component 1.1: Institutional and operational reforms to enhance efficiency and transparency of KEMSA (US\$30 million)
 - b) Sub-component 1.2: Health financing and quality of care reforms (US\$12 million):
 - c) Sub-component 1.3: Improve availability and use of quality data for decision making (US\$8 million)
 2. Component 2: Improving Utilization of Quality Health Services at Primary Care Level (US\$115 Million)
 - a) Sub-component 2.1: Improving availability of essential HPTs and delivery of key quality services at the primary care level (US\$90 million)
 - b) Sub-component 2.2: Improve delivery of quality health services in selected counties (US\$25 million).
 - c) Sub-component 2.3: Improving access to and utilization of quality health services in refugee and host communities (US\$40 million).
 3. Component 3: Project management and evaluation (M&E) (US\$10 million)
11. Table 1 below presents a summary of expected project activities in each sub-component. The project presents moderate OHS risks for workers who will be involved in the implementation of different activities. Construction-related risks are also expected from the rehabilitation works in sub-

components 2.3 for the refugee and host communities in Garissa and Turkana Counties. The main activities will involve the rehabilitation of health facilities and support towards management of the transition process of health facilities and health workers to county governments.

Table 1: Outline of BREHS Project Components and Activities

Component	Activity
Component 1: Strengthening institutional capacity to enhance efficiency in service delivery for UHC	
Sub-component 1.1: Institutional and operational reforms to enhance efficiency and transparency of KEMSA.	<ul style="list-style-type: none"> • Procurement and distribution of HPTs for primary care services (levels 1-3) in all 47 counties during the life of the project. • Automate the procurement processes, through rolling out a new ERP system with extended supply chain modules to ensure end-to-end visibility. • Development and implementation of an accountability dashboard to strengthen governance and accountability.
Sub-component 1.2: Health financing and quality of care reforms	<ul style="list-style-type: none"> • Development of regulations, design of business processes and claims processing among others, to transition from the NHIF to the SHA. • Establishment/strengthening of regulatory bodies and support counties towards operationalization of the Kenya Quality Model for Health (KQMH).
Sub-component 1.3: Improve availability of quality data for decision making	Conducting relevant cross-sectional surveys including, but not limited to, the World Health Organization (WHO) STEPwise approach to Noncommunicable diseases (NCD) risk factor surveillance (STEPS) survey, and the Household Health Expenditure and Utilization Survey.
Component 2: Improving utilization of quality health services at primary care level	
Sub-component 2.1: Improving availability of essential HPTs and delivery of key quality services at the primary care level	<ul style="list-style-type: none"> • Procurement and distributing selected HPTs to primary care facilities. • Implementation key quality of care related interventions delivered at the primary care level.
Sub-component 2.2: Improve delivery of quality health services in selected counties	<ul style="list-style-type: none"> • Revision, where needed, and roll out of standardized patient-level data collection tools²² at facility level. • Reporting of QoC by county monitoring and evaluation (M&E) units. • Development and implementation of facility level QoC improvement plans. • Development and implementation of sub-county and county-level QoC improvement plans. • Peer-to-peer learning across the selected counties and with other high-performing counties.
Sub-component 2.3: Improving access to and utilization of	<ul style="list-style-type: none"> • Strengthening community health services.

Component	Activity
quality health services in refugee and host communities	<ul style="list-style-type: none"> • Improving availability of essential HPTs for services at levels 1- 4 (level 4 is the sub-county hospital). • Improving the availability of diagnostic and medical equipment. • Training of community enrolled health nurses. • Recruitment of health workers. • Strengthening referral systems. • Rehabilitation of health facilities; and support towards management of the transition process of health facilities and health workers to County Governments.
Component 3: Project Management and Monitoring and Evaluation	Day-to-day management of the Project at the national and county levels.

2.5 World Bank Environment and Social Standards

12. The Project applies the World Bank’s Environment and Social Framework (ESF) with five relevant Environmental and Social Standards (ESS’s):

- i. Assessment and Management of Environmental and Social Risks and Impacts (ESS1);
- ii. Labor and Working Conditions (ESS2);
- iii. Community Health and Safety (ESS4);
- iv. Indigenous Peoples/Sub Saharan African Historically Underserved Traditional Local Communities (ESS7); and
- v. Stakeholder Engagement and Information Disclosure (ESS10).

13. To ensure compliance with the Environmental and Social Standard 2: Labor and Working Conditions (ESS2)¹ and Standard 4: Community Health and Safety (ESS4)² of the World Bank’s Environmental and Social Framework (ESF) and the national laws and regulations of the Republic of Kenya, these Labor Management Procedures (LMPs) have been prepared for the proposed BREHS Project.

14. The goal of the LMP is for planning and efficient executing of the Project by identifying the key labor requirements, related risks, processes, and resources required for their management.

15. The purpose of the LMP is to identify the main labor requirements and risks associated with Building Resilient and Responsive Health Systems Project (BREHS). Specific objectives of this LMP are to; (i) define different types of project workers, including direct workers, contracted workers, and primary supply workers, (ii) evaluate and propose labor management measures for the different types of workers, (iii) determine the resources required to address Project labor issues, and (iv) provide guidance for the establishment of a functional workers grievance redress mechanism (GRM). The LMP

¹ ESS2 Labor and Working Conditions recognizes the importance of employment creation and income generation in the pursuit of poverty reduction and inclusive economic growth. Borrowers can promote sound worker-management relationships and enhance the development benefits of a project by treating workers in the project fairly and providing safe and healthy working conditions.

² ESS4: Community Health and Safety addresses the health, safety, and security risks and impacts on project-affected communities and the corresponding responsibility of Borrowers to avoid or minimize such risks and impacts, with particular attention to people who, because of their particular circumstances, may be vulnerable.

is a living document, which will be reviewed and updated throughout Project development and implementation.

16. This LMP will be complemented by the following project documents:

- i. Environmental and Social Management Framework (ESMF);
- ii. Vulnerable Groups Planning Framework (VGPF);
- iii. Stakeholder Engagement Plan (SEP); and
- iv. Environmental and Social Commitment Plan (ESCP).

3 OVERVIEW OF LABOR USE ON THE PROJECT

17. ESS2 categories of project workers include direct workers, contracted workers, community workers, migrant workers, and primary supply workers. Public Officers of the Government (those working for the MoH at the national and county levels) and staff from other government ministries, departments, and agencies (MDAs) deployed to provide the necessary technical assistance will also fall under direct workers. Government employees will be governed by the Employment Act of 2007, as well as a number of regulations pertaining to the public service and Human Resources Manuals, but consultants will be governed by a series of mutually agreed-upon contracts. The Project Management Team (PMT) will be constituted by these professionals.

18. **Direct workers.** The project will engage the following types of workers as “direct workers”:

- a. **Project Management Team (PMT):** A PMT will be set up by the MoH to manage the project. The PMT will have a dedicated Project Manager (PM) who is responsible for the Project's overall performance. The PMT will be made up of employees with interdisciplinary training (such as procurement officers, project accountants, safeguarding officers (Environmental and Social), and M&E), with the addition of qualified personnel as needed.
- b. **Public Officers:** The project will involve numerous MoH employees, including directors of various divisions, all levels of healthcare professionals, frontline workers, vulnerable and marginalized groups (VMG) and environmental and social safeguards focal points and support staff. Workers will comprise MoH E&S Officers, officers from DOSHS, National Environment Management Authority (NEMA), the facility in-charges, KEMSA, and SHA (NHIF) and health workers- doctors, nurses, community health workers among others (Table 2.1)

19. **Primary supply workers:** workers who are employed or contracted by primary suppliers and over whom primary suppliers exercise control for the job, working conditions, and treatment of the workers while providing goods and materials to the Project. These will include employees of companies that provide the equipment and services, as well as individuals that stockpile medical supplies at locations.

20. **Contracted workers:** Contractors, subcontractors, service providers/consultants, as well as any subcontractors or sub consultants assigned to perform the services, in whole or in part, will employ or engage contracted workers as needed for project implementation, including construction and rehabilitation works and supplies. This includes professionals and support staff provided by the contractor or consultants. The Project might also hire migrant laborers.

21. **Workforce requirement:** The requirement of the workforce at different levels will be determined by the scope of the project activities operated by each implementing institution (MoH and KEMSA, NHIF) which is variable over time. Table 2 below presents the estimated number of labor force for each type

of worker category. Most of these workers are government officers who will remain subject to the terms and conditions of their existing sector employment.³ Direct workers who may be directly engaged as additional staff will need to be contracted in line with the requirements of ESS2 in relation to Labor and working conditions, non-discrimination and equal opportunities and occupational health and safety. All contractors and sub-contractors that will be involved in this project will adhere to the legal frameworks of both the GoK and the WB’s provisions of ESS2.

Table 2: Number and Types of Workers to be Engaged on the Project

No.	Type of Worker by Job Classification	Estimated No.
I	Direct Workers	
	Project Management Team	8
	Environmental Safeguards Officers – MoH	1
	Social Safeguards Officers – MoH	1
	Environmental Safeguards Focal Person (County governments)	47
	VMG/Social Safeguards Focal persons (County level)	31
	Workers at KEMSA	635
	Workers at SHA (NHIF)	1800
	Primary care health workers	116580
II	Contract Workers (By types of work)	
	Rehabilitation contractors	60
	Consulting services	20
III	Primary supply workers	
	Drivers (Truck, Vans)	200
	Primary supplier’s supervisors	5
IV	Community health workers/Promoters (CHP)/Assistants	100,000
Grand Total		219,388

4 ASSESSMENT OF KEY POTENTIAL LABOR RISKS

22. Risks that could arise from job and working situations include SEA--SH, OSH, and discrimination at work. The PMT will assess and address these risks by adopting and applying best labour practices, and suitable OHS measures as well as by putting relevant provisions of the Employment Act of 2007 and relevant HR manual rules into effect. The WB Environmental Health and Safety Guidelines (EHSG) General

³ All government civil servants seconded to work on the project will remain subject to the terms and conditions of their existing public sector employment agreements/arrangements, as understood under ESS2, Scope of Application, paragraph 8.

- Sections 2 and 4, WB EHSg for Health Care Facilities (including those relating to HCF operations), and WB EHSg will all be followed in terms of risk reduction in this Project.

23. The PMT will also train each project participant in the policies and practices for preventing the spread of infectious diseases to themselves, their communities, and other people. The primary labor risks predicted during Project implementation include:

- a. Risks to occupational health and safety (OHS) risks for civil work subprojects include handling heavy objects by hand, height falls, burns from hot work (like welding), electricity, injuries from moving machinery, and dust from construction trucks. All project workers run the danger of contracting diseases, and stress and burnout associated with the Project can also lead to mental health issues and illnesses. Table 3.1 provides more specific OHS risks and mitigating measures. These will serve as the guidelines for the creation of Site-Specific ESMPs, which will comprise Environmental Health and Safety Management Plans that will describe how these risks will be addressed for each of the sub-projects and each worksite for assessment and approval by the implementing agencies. Contractors must create and implement a construction environmental and social management plan (C-ESMP) that takes site-specific risks and hazards into account as well as OHS procedures. For the building phase, the operation and maintenance phase, and the decommissioning phase of the subprojects, pertinent OHS plans and procedures will be established and implemented. The PMT is responsible for ensuring that procedures for routine disinfection of public spaces, equipment, tools, and trash are in place and adhered to to protect workers at the facility. An operation manual that includes a complete OHS management plan should be prepared and used by workers to protect themselves and the neighboring community. The operational procedures should be of a standard to meet guidance from WHO and/or CDC on infection control and ESS2 and WB EHSg. The design, construction, operation and decommissioning of the project activities shall follow the national legal requirements, the WB EHSgs, and other good international industry practices related to OHS hazard assessments as stated in text below and in the draft ESMF.
- b. In order to ensure equal opportunity and non-discrimination for workers employed/engaged under all employment categories, the PMT will ensure that all sub-project activities are carried out in accordance with the guiding acts and regulations prohibiting any form of discrimination and/or harassment (directly/indirectly) against an employee. Sexual harassment, exploitation, and abuse are also prohibited. In addition, contractors and subcontractors are required to support equal opportunities for women and men, with a focus on equal criteria for selection, compensation, and promotion and equal application of these criteria; put in place measures to prevent project workers from being harassed, including sexual harassment in the workplace; and, if migrant workers are employed, implement suitable measures to prevent any discriminatory treatment towards them in accordance with the Gender Based Violence (GBV) action plan. The PMT will make sure there is equal opportunities provided and that there is no any form of discrimination.
- c. Despite the low danger (due to the strict recruiting requirements for all government employment), child labor may nevertheless occur as a result of hired labor at construction sites. Contractors, including third parties, will be required to adhere to contractual obligations not employ nor engage in child/forced labor. The supervision of contractors will monitor and report on whether the contractors are adhering by the World Bank ESS2 and the International Labour Organization (ILO) Conventions 105, 138, and 182 on the prohibition of child and forced labor. Prior to the employment or engagement of a project worker, paperwork and age verification shall

be done, and this information will be kept on file, to prevent the employment or engagement of children under the age of 18.

- d. **Labor disputes over terms and conditions of employment;** Labor disputes are likely to be sparked by demands for insufficient employment possibilities, labor wages/rates and payment delays, disagreements over working conditions (particularly overtime pay and rest breaks), and health and safety concerns at work. Furthermore, there is a possibility that employers will retaliate against workers who voice concerns about dangerous or unhealthy working conditions, demand fair working conditions, or bring up any other issues; in such instances, there may be labor unrest and work stoppages. The LMP's policies will be implemented by the PMT. With reference to ESS2, ESS4, and other relevant WB ESF standards, these procedures describe how project workers will be managed. The protocols outline how various project worker types will be subject to labor regulations, how the PMT expects third parties to manage their workforces, and how employees will be provided with a formal route through which to voice complaints about their working conditions and contract terms.
 - e. **Discrimination and exclusion of vulnerable groups:** Vulnerable populations are probably not given job opportunities in projects. These include women, persons with disabilities (PWDs), and underprivileged groups. Sexual harassment and other abusive behavior on the part of employees or management could potentially jeopardize the safety and wellbeing of the most vulnerable personnel as well as the local populations, which would also negatively affect the project's effectiveness.
24. Site-specific risk and hazard assessments will be carried out to examine all the potential hazards that have been identified. The ESMP for the project will be created with mitigation plans for the risks that have been identified. Table 3 below lists potential protective measures for the Project's potential dangers.

Table 3: Potential Labor Risks and Mitigation Measures

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
1	Non-compliance of employers to terms and conditions of employment	<p>The project implementers will ensure the following in relation to direct workers, as well as workers engaged through contractors/subcontractors and primary suppliers, in order to ensure compliance with terms and conditions of employment as per requirements of the national Employment and Labor Relations statutes, WB ESS2, and ILO Labor Relations Convention 151 (1978) which are:</p> <ul style="list-style-type: none"> • Provide project workers with information and documentation that is clear and understandable on terms and conditions of employment; for illiterate workers simplified language will be used and the officer in-charge will read the terms and conditions to them and request them to specify if they require further clarification. • The information and documentation shall include any applicable collective agreements, including their rights related to hours of work, wages; overtime, compensation, and benefits, as well as those arising from the requirements of ESS2. • This information and documentation shall be provided at the beginning of the working relationship and when 	<p>All activities involving workers (components 1, 2 and 3) including Subcomponent 1.1 procurement and distribution of HPTs in 47 counties, Automation of procurement processes, develop accountability dashboard</p> <p>Subcomponent 1.2- develop regulations, processes to transition from NHIF to SHA, establish and strengthen regulatory bodies and county government operationalization of Kenya Quality Model for Health (KQMH)</p> <p>Subcomponent 1.3- conduct cross sectional surveys</p> <p>Revise and roll out data collection tools at facility level, and develop and</p>	County government, National Government Social Safeguards Officer

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<p>any material changes to the terms or conditions of employment occur.</p> <ul style="list-style-type: none"> • The project shall also have GRMs for project workers (direct workers and contracted workers) to promptly address their workplace grievances and concerns • All workers will be provided with written contracts. 	<p>implement facility quality of care plans</p> <p>Subcomponent 2.3- strengthen community health service, rehabilitate health facilities</p> <p>Component 3 coordination and management, monitoring, evaluation and reporting</p>	
2	Risks associated with a labor influx, like transmission of diseases to workers and the neighborhood, including HIV/AIDS through project activities	<ul style="list-style-type: none"> • Training and sensitization HIV/AIDS– targeting workers, learners, and communities under supervision of the PMT. • Contractors to employ unskilled and semi-skilled workers at the local level and through the local administrators to reduce influx. • Contractors to ensure workers sign and comply with Code of Conduct (CoC). 	<ul style="list-style-type: none"> • Rehabilitation of health facilities; and support towards management of the transition process of health facilities and health workers to County Governments Recruitment of health workers 	<ul style="list-style-type: none"> • PMT, MOH, DRS, UNHCR
	Conflicts between host and refugee communities over opportunities	<ul style="list-style-type: none"> • Ensure equal opportunity between the hosts and the refugees in the camps. 	<ul style="list-style-type: none"> • Improving availability of essential HPTs for services at levels 1- 4 (level 4 is the sub-county hospital) and diagnostic and medical equipment 	<ul style="list-style-type: none"> • DRS/UNHCR, County governments, MOH

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
			<ul style="list-style-type: none"> • Training of community enrolled health nurses • Recruitment of health workers, • Rehabilitation of health facilities; and support towards management of the transition process of health facilities and health workers to County Governments 	
3	Occupational Health and Safety	<ul style="list-style-type: none"> • Ensure workers access and use appropriate PPEs; • The equipment used in the works should be routinely serviced to ensure proper and safe equipment functionality; • PMT will Carry out job risk assessment for all project workers analysis of likely hazard and precautions before executing an assignment; and prepare and implement a C-ESMP • Effective site management and access control for visitors and intruders (including children playing, etc.) by fencing/ barricading, signage, manned posts, etc. • Hazardous areas must be clearly marked with signs easily understood by workers, visitors and the public, as appropriate; • Electrical works must be performed by trained and qualified experts; 	<p>Components: 1, 2 and 3 activities including</p> <p>Procurement and distribution of HPTs for primary care services (levels 1-3) in all 47 counties during the life of the project.</p> <p>Development and implementation of an accountability dashboard to strengthen governance and accountability.</p> <p>Conducting relevant cross-sectional surveys including, but not limited to, the WHO</p>	<ul style="list-style-type: none"> • PMT, DOSHS, environmental Safeguards

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<ul style="list-style-type: none"> • In case on any spillage for example oil and hazardous substances) at working areas, the contractor and operator must clean the spillage immediately, post anti-slip hazard warning should be used when mopping floors to reduce chances of slip and falls; • First aid kits, trainings on first aid and qualified first aiders on site • Developing and implementing emergency response plans (ERP); • Developing, adopting and sensitizing of standard operation procedures and guiding working at heights, lifting operations excavations, etc; 	<p>STEPwise approach to NCD risk factor surveillance (STEPS) survey, and the Household Health Expenditure and Utilization Survey.</p> <p>Procurement and distribution of selected HPTs to primary care facilities.</p> <p>Improving availability of essential HPTs for services at levels 1- 4 (level 4 is the sub-county hospital) and diagnostic and medical equipment</p> <p>Rehabilitation of health facilities; and support towards management of the transition process of health facilities and health workers to County Governments.</p> <p>leading to increased exposure of workers to</p> <ul style="list-style-type: none"> • infections and diseases • hazardous materials / waste • Exposure to radiation • Fire safety 	

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
			<ul style="list-style-type: none"> • Construction risks and injuries 	
4	Discrimination of employment based on gender, disability or ethnicity	<ul style="list-style-type: none"> • Hiring of project workers shall be based on the principle of equal opportunity and fair treatment. • Contractors shall provide appropriate facilities at the workplace and PPEs for women and persons with disability 	<ul style="list-style-type: none"> • recruitment of health workers, • recruitment of workers at the facility rehabilitation sites 	<ul style="list-style-type: none"> • Contractors /subcontractors, Social safeguards
5	Risks of GBV incidences including sexual Exploitation and Abuse and Sexual Harassment (SEA-SH)	<ul style="list-style-type: none"> • The project and the project staff implement GBV/SEA-SH management plan provided in Annex D of the ESMF • The project's Social Specialist to work with service providers to mitigate SEA-SH related risks and provision of aftercare services; • Communities and workers are sensitized on GBV/SEA-SH and the referral pathways. • Psychosocial support and counseling services and rescue centers for survivors. • The CoC containing provisions on GBV/ SEA-SH to be signed by all workers aimed at preventing and addressing harassment, intimidation and/or exploitation (see template in Annex 2 &3). 	<p>Procurement and distribution of HPTs for primary care services (levels 1-3) in all 47 counties during the life of the project.</p> <p>Automate the procurement processes, through rolling out a new ERP system with extended supply chain modules to ensure end-to-end visibility.</p> <p>Development and implementation of an accountability dashboard to strengthen governance and accountability.</p> <p>Conducting relevant cross-sectional surveys including, but not limited to, the WHO</p>	Social safeguards, service providers, contractors/subcontractors

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
			<p>STEPwise approach to NCD risk factor surveillance (STEPS) survey, and the Household Health Expenditure and Utilization Survey.</p> <p>Procurement and distribution of selected HPTs to primary care facilities.</p> <p>Improving availability of essential HPTs for services at levels 1- 4 (level 4 is the sub-county hospital) and diagnostic and medical equipment</p> <p>Training of community enrolled health nurses.</p> <p>Recruitment of health workers.</p>	
6	Likely incidences of Child or forced labor	<ul style="list-style-type: none"> • Ensure compliance with minimum age requirements in the labour laws, enhanced monitoring of compliance including by Ministry of Labour • Certification of laborers' age (using National Identification Card, Voters Registration Card, Birth Certificate, or affidavit of birth in employment of workers); 	<ul style="list-style-type: none"> • Activities involving rehabilitation works at the facilities in Turkana and Garissa, supplies especially at the refugee camps 	Safeguards focal persons, National and County Governments- Child and social protection officers

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<ul style="list-style-type: none"> due diligence and monitoring of primary suppliers to enhance compliance with Child Labor Policy. 		
7	<p>Risks related to occupational health and safety e.g., general facility and operation.</p> <p><i>Note:</i></p> <ul style="list-style-type: none"> <i>Specific OHS risks for some Project operations laboratory tests, transportation, stores management</i> <i>Subproject specific OHS Plans shall be prepared and implemented for the operation and maintenance phase.</i> 	<p><i>Integrity of Workplace Structures</i></p> <ul style="list-style-type: none"> Surfaces, structures, and installations shall be easy to clean and maintain, and not allow for accumulation of hazardous compounds. Buildings shall be structurally safe, provide appropriate protection against the climate, and have acceptable light and noise conditions. Fire resistant, noise-absorbing materials shall be used for cladding on ceilings and walls. Floors should be level, even, and non-skid. Heavy oscillating, rotating or alternating equipment should be in dedicated buildings or structurally isolated sections. <p><i>Severe Weather and Facility Shutdown</i></p> <ul style="list-style-type: none"> Workplace structures shall be designed and constructed to withstand the expected elements for the region and have an area designated for safe refuge, if appropriate. Standard Operating Procedures (SOPs) will be developed for project and will include an emergency response plan, evacuation plan to be developed and implemented by PMT and contractors. Drills to practice the procedure and plan should also be undertaken annually. 	<p>Procurement and distribution of HPTs for primary care services (levels 1-3) in all 47 counties during the life of the project.</p> <p>Development and implementation of an accountability dashboard to strengthen governance and accountability.</p> <p>Conducting relevant cross-sectional surveys including, but not limited to, the WHO STEPwise approach to NCD risk factor surveillance (STEPS) survey, and the Household Health Expenditure and Utilization Survey.</p> <p>Procurement and distribution of selected HPTs to primary care facilities.</p> <p>Improving availability of essential HPTs for services at levels 1- 4 (level 4 is the sub-</p>	<p><i>Environmental safeguards, facility management committees</i></p>

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<p><i>Workspace and Exit</i></p> <ul style="list-style-type: none"> • The space provided for each worker, and in total, should be adequate for safe execution of all activities, including transport and interim storage of materials and products. • Passages to emergency exits to always remain unobstructed. Exits will be clearly marked to be visible in total darkness. Provide sufficient number and capacity of emergency exits for safe and orderly evacuation of the greatest number of people present at any time, and ensure a minimum two exits from any work area. • Ensure inclusion in infrastructure, facilities to the needs of disabled persons. <p><i>Fire Precautions</i></p> <ul style="list-style-type: none"> • Ensure workplace design prevents fires through implementation of applicable fire codes to industrial settings. Other essential measures include: <ul style="list-style-type: none"> • Equipping facilities with fire detectors, alarm systems, and fire-fighting equipment. The equipment will be serviced regularly, maintained in good working order and readily accessible. It should be adequate for the dimensions and use of the premises, equipment installed, physical and chemical properties of substances present, and the maximum number of people present. 	<p>county hospital) and diagnostic and medical equipment</p> <p>Rehabilitation of health facilities; and support towards management of the transition process of health facilities and health workers to County Governments.</p>	

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<ul style="list-style-type: none"> • Provision of manual firefighting equipment that is easily accessible and simple to use. • Install fire and emergency alarm systems that are both audible and visible. <p><i>Lavatories and Showers</i></p> <ul style="list-style-type: none"> • Adequate lavatory facilities (toilets and washing areas) provided for the number of people expected to work in the facility and allowances made for segregated facilities, or for indicating whether the toilet facility is “In Use” or “Vacant”. Toilet facilities should also be provided with adequate supplies of running water, soap, and hand drying devices. • Where workers may be exposed to poisonous substances by ingestion and skin contact facilities for showering and changing into and out of street and work clothes will be provided. Standard operation procedures for laboratory testing and waste management plan will be developed and implemented. <p><i>Potable Water Supply</i></p> <ul style="list-style-type: none"> • Adequate supplies of potable drinking water will be provided from a fountain with an upward jet or with a sanitary means of collecting the water for the purposes of drinking. • Water supplied to areas of food preparation or for the purpose of personal hygiene (washing or bathing) shall meet drinking water quality standards. 		

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<p><i>Clean Eating Area</i></p> <p>Where there is potential for exposure to substances poisonous by ingestion, suitable arrangements are to be made for provision of clean eating areas where workers are not exposed to the hazardous or noxious substances.</p> <p><i>Lighting</i></p> <ul style="list-style-type: none"> • Workplaces shall be well light with natural light and be supplemented with sufficient artificial illumination to promote workers' safety and health and enable safe equipment operation. Supplemental 'task lighting' may be required where specific visual acuity requirements will be met. • Emergency lighting of adequate intensity shall be installed and automatically activated upon failure of the principal artificial light source to ensure safe shut-down, evacuation, etc. <p><i>Safe Access</i></p> <ul style="list-style-type: none"> • Passageways for pedestrians and vehicles within and outside buildings shall be segregated and provide for easy, safe, and appropriate access. • Equipment and installations requiring servicing, inspection, and/or cleaning shall have unobstructed, unrestricted, and ready access • Hand, knee and foot railings will be installed on stairs, fixed ladders, platforms, permanent and interim floor openings, loading bays, ramps, etc. 		

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<ul style="list-style-type: none"> • Openings will be sealed by gates or removable chains • Covers will be installed to protect against falling items • Ensure adequate measures to prevent unauthorized access to dangerous areas are in place and implemented <p><i>First Aid</i></p> <ul style="list-style-type: none"> • Ensure qualified first-aid can be provided at all times. Appropriately equipped first-aid stations will be established and made accessible throughout the place of work • Eye-wash stations and/or emergency showers will be provided close to all workstations where immediate flushing with water is the recommended first-aid response • Where the scale of work or the type of activity being carried out so requires, dedicated and appropriately equipped first- aid room(s) will be provided. First aid stations and rooms will be equipped with gloves, gowns, and masks for protection against direct contact with blood and other body fluids • Remote sites will have documented emergency procedures for dealing with cases of trauma or serious illness up to the point at which patient care can be transferred to an appropriate medical facility. <p><i>Air Supply</i></p> <ul style="list-style-type: none"> • Sufficient fresh air will be supplied for indoor and confined work spaces. Factors to be considered in 		

Item	Description of the risk/impact as identified in ESS2	Proposed risk mitigation measures	Project Activities	Responsible entities
		<p>ventilation design include physical activity, substances in use, and process- related emissions. Air distribution systems will be designed so as not to expose workers to draughts</p> <ul style="list-style-type: none"> • Maintain mechanical ventilation systems in good working order. Point-source exhaust systems required for maintaining a safe ambient environment to have local indicators of correct functioning. • Re-circulation of contaminated air is not acceptable. Air inlet filters will be kept clean and free of dust and microorganisms. Heating, ventilation and air conditioning (HVAC) and industrial evaporative cooling systems will be equipped, maintained and operated so as to prevent growth and spread of disease agents (e.g., Legionella pneumophila) or breeding of vectors (e.g. mosquitoes and flies) of public health concern. <p><i>Work Environment Temperature</i></p> <p>The temperature in work, rest room and other welfare facilities will, during service hours, be maintained at a level appropriate for the purpose of the facility.</p>		

5 OVERVIEW OF LABOR LEGISLATION

5.1 Terms and Conditions

25. Kenya has enacted legislative provisions and policies that regulates employment laws and working conditions, non-discrimination, fair treatment, prevention of forced and child labor and protection of vulnerable workers. National labor legislation include:

i. Constitution of Kenya (2010)

26. The CoK 2010 has a number of significant articles, most notably Article 2, which recognizes ratified treaties as being a part of Kenyan law. The rights and safeguards that workers, employers, and unions have access to and are permitted to exercise within Kenya's employment system are described in Article 41 (on Labor Relations). These benefits are based on basic liberties and rights for individuals, such as Article 28's guarantee of human dignity, Article 30's ban of all forms of slavery, and Article 31's assurance that everyone's right to privacy will be upheld.

In accordance with Article 27 on non-discrimination, which guarantees equality, it is forbidden to discriminate on the basis of race, sex, pregnancy, marital status, health condition, ethnic or social origin, color, age, disability, religion, conscience, belief, culture, attire, language, or place of birth.

ii. The Kenya Employment Act, CAP. 226 (Rev. 2012)

27. The Act establishes employment regulations in Kenya. It focuses on regulating the complex interaction between employers, workers, and the government as well as the State's responsibility as a mediator to uphold the rights of all parties. The Act, which has undergone multiple changes, sets down the requirements for employment, including guidelines for the hiring of minors, and also detailed the fundamental rights of workers. Specifically the Act in section 56 provides for prohibition of employment of children between thirteen years and sixteen years of age, Section 57—prohibits written contracts for child between thirteen and sixteen years of age and Section 58 restricts in employment of children between thirteen and sixteen years of age to attend machinery. This Act complies with the essential standards set forth in the ESS2 of the World Bank. The Employment Act deals with the power dynamics between employers and employees, with a focus on the engagement of employers and employees from the narrow perspective of a direct contractual arrangement between the two parties. The assumption is that all persons who fulfill the descriptions of 'employer' and 'employee' are regulated by this law, including those undertaking development initiatives.

28. The law considers a variety of methods to categorize employees, including by nature, and length of employee engagements. The categories include part-time, full-time, piece work (where the focus is on the amount of work performed regardless of the time occupied in its performance), casual employees (who are not engaged for a longer period than 24 hours at a time), and employees with probationary contracts (which address the formalities and length of the probationary period)⁴. The Act also specifies the conditions that must be met by migrant workers before they can be employed, which is the case with individuals who migrate to Kenya specifically for employment-related reasons. It also handles the nationality and origin of the employees. The Act also specifies the minimal terms and conditions of an employee's employment as well as the grounds for contract cancellation. This is done to deter arrangements that seek to undermine the statutory standards.⁵

⁴ The probation period is not more than 12 months' duration or part thereof

⁵ Sec 3 (6) of The Employment Act, No. 11 of 2007

iii. The Employment (General) Rules, 2014

The Employment (General) Rules are the subsidiary legislation of the Employment Act. The rules primarily elaborate on the terms and conditions of work, aside from other procedural considerations, and includes a full schedule describing the minimal rights granted to employees, and another dedicated to the requisite elements of the Policy Statement on Sexual Harassment.

iv. The Labour Relations Act, 2007

consolidates the law relating to trade unions and trade disputes, to provide for the registration, regulation, management and democratization of trade unions and employers organizations or federations, to promote sound labour relations through the protection and promotion of freedom of association, the encouragement of effective collective bargaining and promotion of orderly and expeditious dispute settlement, conducive to social justice and economic development and for connected purposes.

v. The Regulation of Wages and Conditions of Employment Act (Chapter 229)

The Act regulates conditions of employment of workers and prevents employment of any person over 18 at less than the basic minimum wage with minimum housing allowance. This is done to ensure fairness and dignity among workers.

vi. Pensions Act, CAP. 189 (Rev. 2012)

Makes provisions for the granting and regulating the payment of pensions, gratuities, and other allowances in respect of the public service for officers under the Government of Kenya.

vii. National Social Security Fund Act No. 45 of 2013

The Act establishes that the National Social Security Fund provides Social Security for Workers and Self-Employed Persons and their dependents.

29. Applicable international labour statutes that apply in Kenya include: International Convention on the Elimination of All Forms of Racial Discrimination, 1965 (ICERD); Convention on the Rights of the Child, 1990, (CRC); Convention on the Protection of the Rights of all Migrant Workers and Members of their Families, 1990 (ICRMW); Convention on the Rights of Persons with Disabilities; (CRPD) and Convention on the Elimination of All Forms of Discrimination against Women, 1979 (CEDAW).

30. The instruments of the International Labor Organization (ILO) applicable in Kenya include:

1. Freedom of Association and Protection of the Right to Organize (ILO Convention 87);
2. The Right to Organize and Collective Bargaining (ILO Convention 98); Forced Labor (ILO Convention 29);
3. The Abolition of Forced Labor (ILO Convention 105);
4. Minimum Age (of Employment) (ILO Convention 138);
5. The Worst Forms of Child Labor (ILO Convention 182);
6. Equal Remuneration (ILO Convention 100); and
7. Discrimination (Employment and Occupation) (ILO Convention 111).

5.2 Occupational Health and Safety

31. National labor legislation related to Occupational Health and Safety, include:

- i. The Constitution of Kenya (2010)

32. The Constitution of Kenya (2010) lays the foundation for all other laws and provides, in the Bill of Rights, the right for every citizen to fair labour practices, reasonable working conditions, and a clean and healthy environment.

ii. The Occupational Safety and Health Act, 2007

33. The Occupational Safety and Health Act, 2007 is the law in Kenya that regulates workplace safety and health. The National Council for Occupational Safety and Health is created under the law, which addresses "the safety, health, and welfare of workers and all persons lawfully present at workplaces." This law generally handles any health dangers to employees while they are at work. The requirements established by the Act are primarily focused on the environmental and social dangers to people at work because these issues would likely stay the same if only one person was likely to be affected. Part VI (on Health-General Provisions), Part VII (on Machinery Safety), Part VIII (on Safety-General Provisions), Part IX (on Chemical Safety), Part XI (on Health, Safety and Welfare - Special Provisions), and Part XII (on Special Applications) provide for various occupational safety and health scenarios (in detail) in order to allow for the management of the intended and unintended safety and health consequences that may be wrought by potential hazards. By virtue of their presence on the premises, these safety and health repercussions are more localized to specific workers than to larger society.

34. The Safety and Health Committees (which ought to be established at every workplace) give workers the capacity to regulate the intended and unintended health and social repercussions of their employment, facilitating cooperation between employers and employees on occupational safety and health. Additionally, educating the public about potential occupational safety and health risks will be important to further empower everyone working to protect their own health. This can be done through training and workplace advertising campaigns (mainly through signs).

35. Protection against possible risks as provided in Section 6 (2) of the OSH Act, 2007 will be managed through:

- a. Establishing and maintaining work practices that are risk-free and safe for health;
- b. Planning to guarantee health and safety in the use, handling, storage, and transportation of objects, substances, and materials;
- c. Giving everyone working at the site the essential information, guidelines, training, and oversight to protect their health and safety at work;
- d. Maintenance of any in conditions that are safe and without risks to health and the provision and maintenance of means of access to and egress from it that are safe and without such risks to health;
- e. Making sure that everyone who works there is aware of (i) any risks posed by new technology, (ii) any dangers that may arise, and (iii) appropriate recourse measures; and
- f. Making sure that every employee takes part in the implementation and evaluation of safety and health measures.

iii. The Work Injury Benefits Act (WIBA), 2007

36. Safety and health at work are also covered under the Work Injury Benefits Act (WIBA), which has since undergone multiple modifications. It provides benefits to people who become ill or are injured at work while they are working. For "injured" employees and their dependents who suffer harm as a result of workplace accidents, the Act provides compensation. Part III (on the Right to Compensation) covers the entitlement and guarantee offered regarding compensation. The scope of this provision may be expanded to include COVID-19 infections contracted at work.

37. The PMT could refer to applicable international conventions, and directives for addressing health and safety issues, such as:

- ILO Occupational Safety and Health Convention, 1981 (No. 155)
- ILO Occupational Health Services Convention, 1985 (No. 161)
- ILO Safety and Health in Construction Convention, 1988 (No. 167)
- WHO International Health Regulations, 2005
- WHO Emergency Response Framework, 2017
- EU OSH Framework Directive (Directive 89/391)

5.3 The World Bank's Environmental and Social Standards (ESS's)

38. The World Bank's stipulations related to labor are outlined in its ESS2: Labour and Working Conditions. The implementing agency is tasked to promote sound worker-management relationships and provide safe and healthy working conditions. The key objectives of the World Bank's ESS2 are to:

- a. Promote safety and health at work;
- b. Promote fair treatment, non-discrimination, and equal opportunity for project workers;
- c. Secure protection of project workers, including vulnerable workers such as women, persons with disabilities, children (of working age, in accordance with this ESS) and migrant workers, contracted workers, community workers and primary supply workers, as appropriate;
- d. Prevent the use of all forms of forced and child labor;
- e. Support the principles of freedom of association and collective bargaining of project workers in a manner consistent with national law; and,
- f. Provide project workers with accessible means to raise workplace concerns.

39. Project workers will be provided with information and documentation that is clear and understandable stipulating their terms and conditions (T&Cs) of employment considering measures to address potential language, ethnicity, and vulnerability barriers. The information and documentation will consider national labor law provisions and ESS requirements (as applicable), including their rights related to hours of work, wages, overtime, compensation, and benefits. The information and documentation will be provided at the beginning of the working relationship, when any material changes can be made.

40. For more details on the WB Environmental and Social Standards, please follow the link below:
<https://thedocs.worldbank.org/en/doc/837721522762050108-0290022018/original/ESFFramework.pdf>

5.4 Labour Inspectorate

41. General labor inspection (Labour Department) and occupational safety and health (Directorate of Occupational Safety and Health Services (DOSHS)) are both within the purview of Kenya's Ministry of Labour. Two pieces of legislation, the Workers' Injury Benefit Act of 2007 and the Occupational Safety and Health Act of 2007, are enforced by the DOSHS. The Labour Department is in charge of overseeing and enforcing the Employment Act and the Industrial Relations Act of 2007. The National Youth Service, the military forces, the police, and family undertakings are exempt from the application of the Employment Act, which is applicable to all employees engaged by any employer under a contract of service. All workplaces where someone is employed, whether on a temporary basis or on a permanent basis, are covered by the Occupational Safety and Health Act. All MOL labor officers are capable of acting as labor inspectors and mediating labor disputes.

5.5 OHS Considerations During Project Implementation

42. The MoH shall ensure necessary safeguards are put in place to meet Kenya OHS requirements, World Bank requirements (ESS2, EHSs), and EHS General - related to construction activities; (ii) WB EHS for Health Care Facilities - including those related to HCF operations and labs; and (iii) WB EHS Pharmaceuticals & Biotechnology Manufacturing - including those related to operation phase. These will include:

- a. The OHS measures will be designed and implemented to address: (a) identification of potential hazards to project workers, particularly those that may be life threatening; (b) provision of preventive and protective measures, including modification, substitution, or elimination of hazardous conditions or substances; (c) training of project workers and maintenance of training records; (d) documentation and reporting of occupational accidents, diseases and incidents; (e) emergency prevention and preparedness and response arrangements to emergency situations; and (f) remedies for adverse impacts such as occupational injuries, deaths, disability and disease.
- b. All parties who employ or engage workers will develop and implement procedures to establish and maintain a safe working environment, including that workplaces, machinery, equipment, and processes under their control are safe and without risk to health, including by use of appropriate measures relating to chemical, physical and biological substances and agents. Such parties will actively collaborate and consult with project workers in promoting understanding, and methods for, implementation of OHS requirements, as well as in providing information to project workers, training on occupational safety and health, and provision of personal protective equipment without expense to the project workers. There will be regular Occupation health and safety (OHS) audit of each facility to ensure compliance with requirements stated in the Act, (OSHA).
- c. Workplace processes will be put in place for project workers to report work situations that they believe are not safe or healthy, and to remove themselves from a work situation which they have reasonable justification to believe presents an imminent and danger to their life or health. Project workers who remove themselves from such situations will not be required to return to work until necessary remedial action to correct the situation has been taken. Project workers will not be retaliated against or otherwise subject to reprisal or negative action for such reporting or removal.
- d. Project workers will be provided with facilities appropriate to the circumstances of their work, including access to canteens, hygiene facilities, and appropriate areas for rest. Where accommodation services are provided to project workers, policies will be put in place and implemented on the management and quality of accommodation to protect and promote the health, safety, and well-being of the project workers, and to provide access to or provision of services that accommodate their physical, social, and cultural needs. The employer should ensure that these are maintained in good working order and are regularly cleaned. Separate toilets and accommodation for men and women should be provided.
- e. Where project workers are employed or engaged by more than one party and are working together in one location, the parties who employ or engage the workers will collaborate in applying the OSH requirements, without prejudice to the responsibility of each party for the health and safety of its own workers.
- f. Participation of organizations with the authority to enforce OHS programs, such as Occupation Safety (OSHA). This will include required worksite inspections as specified by the law and Health Act (OSHA); trainings offered to the project staff;
- g. Regular health and safety training for employees during the implementation phase.
- h. Usage of suitable and sufficient safety warning signage; emphasis on recording near-misses and accidents and conducting investigations and documentation of them. The findings of the investigation will be applied to all projects to establish preventative and protective measures. To reduce exposure risks, all project personnel (direct, contract, and migrant) will get clear and intelligible information about their jobs.

- i. For project construction works, a subproject ESMP will be developed according to the ESMF, and this will include subproject OHS measures. The bid and contract for such works will include OHS terms and conditions including for the Contractor to prepare and implement a C-ESMP which shall include an OHS Plan.
- j. For all subprojects involving HCFs, laboratories or vaccine/pharmaceutical production, an operation phase OHS plan shall be prepared and implemented.
- k. For all project activities that involve travel or use of trucks and vehicles, a set of traffic safety measures shall be developed and implemented (including training)
- l. In the case of any significant OHS incident or accident related to the Project, provide sufficient detail regarding the scope, severity, and possible causes of the incident or accident, indicating immediate measures taken or that are planned to be taken to address it, and any information provided by any contractor and/or supervising firm, as appropriate. Subsequently, at the WB's request, prepare a report on the incident or accident within 48hours and propose any measures to address it and prevent its recurrence.
- m. For Primary Suppliers, the project shall comply with ESS2 requirements. These include: prohibition of use child labor, forced labor and mitigation of serious safety issues which may arise in relation to primary suppliers undertaking their assignment.

6 RESPONSIBLE STAFF

43. **The PMT:** will oversee the coordination and management of the entire Project including monitoring adherence to ESHS risk management guidelines. The PMT, through the guidance of the environmental and social safeguards officers, in collaboration with labor officials and OHS officers from the Ministry of Labour, accessible in most counties across the country, will coordinate implementation and compliance with labour laws. The PMT will be responsible for the following tasks;
- a) Engage and manage consultants and contractors in accordance with this LMP and the applicable Procurement Documents;
 - b) Monitor project contractors and workers to ensure their activities are included in the LMP and the applicable Procurement Documents;
 - c) Monitor the potential risks of child labor, forced labor and serious safety issues in relation to primary suppliers;
 - d) Provide training to mitigate social risks including SEA-SH of project workers;
 - e) Ensure that the project workers GRM functional and that project workers are informed about it;
 - f) Monitoring the implementation of the Worker Code of Conduct;
 - g) Report to the World Bank on labor and OHS performance and key risks and complaints;
 - h) Develop and implement OHS measures, based on World Bank EHS Guidelines and Good International and Industry Practices (GIIP), such as Emergency Preparedness and Response Plans; and,
 - i) Produce and submit periodic reports to management and the WB.
44. **Social and environmental specialists:** Promoting the adoption of the LMP and OHS requirements within the project will be the responsibility of social and environmental specialists in the PMT. The implementation of these crucial project elements falls under the purview of the project manager and the entire PMT. The Social and Environmental Specialists will oversee the following:
- a) Supervise workers' adherence to the LMP;
 - b) Prepare, review, approve the various OHS measures and plans.
 - c) Maintain records of recruitment and employment of contracted workers (including sub-contractors);
 - d) Provide induction training to heads of contracted workers' organizations or EHS officers on environmental, social and OHS issues. This will include SEA-SH;
 - e) Require primary supplier(s) to identify and address risks of child labor, forced labor and serious safety issues and undertake due diligence to ensure this is done;
 - f) Develop and implement the GRM for contracted workers, including ensuring that grievances received from the contracted workers are resolved promptly, and report the status of grievances including grievances related to SEA-SH and resolutions regularly to the PMT and World Bank. Also, the PMT should ensure that a GRM is outlined in contractor C-ESMP
 - g) Ensure all contractor and subcontractor workers understand and sign the CoC prior to the commencement of works and supervise compliance with the CoC;
 - h) Ensure the abbreviated CoC (one-pager) is displayed in all project supported facilities (Annex 1); and
 - i) Report to the PMT on labor and OHS performance.
45. Table 4 presents a summary of the project staff/entity responsible for various key responsibility areas.

Table 4: Summary of the Project Staff/Entity Responsible for Various Key Responsibility Areas

Responsibility area	Direct and contracted workers	Primary supply workers
Hiring and managing individual project workers	PMT PMT will oversee the work of consultants hired for project activities	n/a (outside the scope of ESS2)
OSH	PMT, Contractor All workers (long-term and casuals) will follow OHS measures	The PMT will assess the risk levels/safety issues of primary suppliers and as needed require them to develop procedures to address these risks
Child labor and forced labor	Contractor PMT to ensure the contract does not allow child and forced labor and age verification procedures are maintained	<ul style="list-style-type: none"> • Primary supplier to adhere to child labor requirements. • PMT to review
Training	PMT/contractors/Operators	n/a (outside the scope of ESS2)
Code of conduct	PMT, Contractor The contract to commit workers to comply with a code of conduct through signing	
Grievance mechanism	PMT/Contractors/facility-in-charge	
Monitoring and reporting	PMT/Contractors/operators to monitor and report World Bank	PMT to monitor compliance PMT to report to World Bank.

46. The Management will assign oversight responsibilities to each member to effectively implement the LMP. The social specialist shall supervise the implementation of social safeguards including the GRM and stakeholder consultation, while the environmental specialist should oversee monitoring, supervising, and reporting on health and safety. Additional roles would be:
- Training of workers on OHS;
 - Monitoring, supervising, and reporting on health and safety issues including details of key responsibilities and reporting arrangements made with contractors and operators;
 - Coordinating and reporting arrangements between contractors and operators;
 - Following up on the feedback mechanisms between the contractors and their workers and flagging out any issues for redress; and
 - Reporting on a regular basis on the overall project progress.
47. **Labour officers and OHS officers:** are from the ministry of labour, [Department of Labour and Directorate of occupation safety and health services (DOSHS)]. These services are carried out to ensure that every workplace is free of any hazards and complies to laid down standards to assure safety of employees. Responsibilities include;
- Registration and renewal of workplaces and plants,

- b. Workplace inspection & audits- involving checking the condition of workplaces
Critical examination and inspections of workplace help to identify and record hazards for corrective action and prevent injuries, illnesses, incidents, and accidents.
 - c. Examination & testing of plants to guarantee that they are in a good working condition.
 - d. Accident investigation & WIBA processing. Employers must report accidents and employee injuries to DOSHS County offices within 24 hours if the accident is fatal, and within 7 days for non-fatal accidents. Using DOSHS1 form. This triggers an accident investigation. A county DOSHS officer visits the workplace where the accident happened to undertake an investigation and write a report on the nature, cause, and impact of the accident. The report forms a basis for seeking compensation through WIBA (Work Injury Benefit Act). The employer is held responsible if they have not taken up WIBA. Insurance cover.
48. **Contractors:** Responsibilities in the implementation of the LMP and OSH compliance will include
- a) Prepare the C-ESMP and undertake the overall implementation of OSH in compliance with the C-ESMP;
 - b) Engage and manage employees in accordance with labour laws and ESS2 standards;
 - c) Monitor the potential risks of child labor, forced labor and serious safety issues in relation to primary suppliers;
 - d) Sensitize own staff on OSH and SEA-SH-SH risk mitigation measures and sanctions for violating the CoC;
 - e) Ensure that workers are aware and understand the Project workers GRM and how they can report their grievances;
 - f) Ensure own workers sign the Code of Conduct and monitor compliance; and
 - g) Report to the PMT on labor and OHS performance and key risks and complaints.

7 POLICIES AND PROCEDURES FOR LABOUR MANAGEMENT

7.1 Implementation of LMP

49. A summary of indicative procedures to develop and implement the LMP policies is provided below.

- a) **Occupational health and safety (OHS):** The MoH will manage the Project in accordance with the pertinent provisions of the national OSH Act, Employment Act, ESS2 (including WBG Environmental, Health and Safety Guidelines (EHSGs) – General, Health Care Facilities, and Pharmaceuticals and Biotechnology Manufacturing), and WB standard procurement documents, so that project workers are adequately protected against potential OHS risks. Additionally, the contractors and operators will be expected to develop policies and practices that adhere to these rules. Identification of potential workplace hazards, provision of protective measures, training of employees, maintenance of training records, documentation and reporting of occupational accidents and incidents, emergency preparedness, and remedies for workplace injuries and fatalities are all important components of OSH measures.
- b) **Child labor:** The Project has a stated minimum age requirement of 18 years of age or older for project workers. All contracts must include clauses requiring compliance with the minimum age requirements, including penalties for non-compliance in accordance with the applicable legislation, to prevent the hiring of workers who are underage. The PMT is obligated to keep an age-verified labor registration of all employed individuals. [Section 7](#) gives more information.
- c) **Labor influx:** The contract for the project will include that the contractors must prioritize hiring unskilled workers from the neighborhood and adjacent towns to reduce labor influx. Prior to the start of employment, all contractual workers will be asked to sign the CoC, which contains a clause to address the risk of Gender Based Violence (GBV) (see [Annex 1](#) on the Guideline on CoC).
- d) **Labor disputes over terms and conditions of employment:** Fair terms and conditions shall be imposed for project workers (directed by pertinent regulations) to prevent labor disputes. Additionally, the project will have GRMs for workers (both direct employees and contracted employees) to swiftly resolve any workplace complaints (further information is provided in Section 10). Additionally, the project will adhere to the Employment Act 2007's provisions regarding workers' freedom of association and the right to form labor unions.
- e) **Discrimination and exclusion of vulnerable groups:** There will be no discrimination in any aspect of the employment relationship, including recruitment and hiring, terms of employment (including pay and benefits), termination, and access to training. The employment of project workers will be based on the principles of inclusion, equal opportunity, and fair treatment. The project must adhere to the Employment Act of 2007, which mandates gender equality at work and includes maternity, paternity and sick leave, non-discrimination, equal pay, right to organize and industrial action. Additionally, there will be adequate and suitable restroom and laundry facilities, with separate areas for male and female workers. There will be adequate provisions for other vulnerable groups including persons with disabilities (PWDs). These conditions, which are also a part of the monitoring system, will be included in the contracts with third parties.
- f) **GBV and SEA-SH:** Given the implementation setting, there is a risk of sexual harassment, coworker exploitation, and abuse. Therefore, all employees and contractors are required to sign the code of conduct (CoC), which outlines the expected standards of conduct in this regard, and to participate in a session on the topic, which also covers the repercussions of such actions. To provide training in GBV and SEA-SH, the MoH will find a certified trainer or consultant (the development partners may be contacted for assistance). For handling GBV and SEA-SH complaints, a separate GRM will be established, as detailed below.

A SEA-SH Prevention and Response Plan has been developed to guide risk management during the implementation of the Project. The Plan is based on existing protection, prevention and mitigation strategies and measures developed by the WB and coordinated through the PMT. The

grievance procedure shall have a particular and sensitive approach to GBV-related situations and should be handled according to the complainant's informed permission to avoid the risk of stigmatization, amplification of the mental/psychological injury, and potential reprisals. When a case like this is reported, the complainant should be informed of the services that are available, such as confidential, suitable medical and psychological support, emergency housing, and any other services that may be required, including legal assistance. Support for using these services should be given to the survivor. Within 72 hours of the occurrence, staff should advise the victim/complainant to see a medical facility that offers free post-SEA-SH health support. The only information that should be determined if a case of GBV is reported to staff or GRM focal points is whether the incident involves a project worker, the nature of the incident, the complainant's age, and sex, and whether the survivor/complainant was referred to service provision. If a project employee is involved, the issue should immediately be reported right away to the head of PMT.

- g) **Monitoring and reporting:** The PMT is required to provide a monthly report on the progress of the policies and processes. The PMT will keep a close eye on the project's labor and OHS performance and provide a quarterly report to the World Bank (see Section 10 for more information). However, in the case of accidents or incidents, PMT is required to notify the World Bank within 48 hours. In response to mishaps or accidents connected to the project, corrective measures must be taken. For creating and implementing additional remedial actions, the PMT or, as appropriate, a consultant, may perform a root cause analysis.

7.2 Contractor's Responsibilities

50. Contractors will be expected to develop policies and practices that adhere to these rules in accordance with the contracts and C-ESMP. Summarily, they will identify potential workplace hazards, provide protective measures, train employees, maintain training records, document, and report occupational accidents and incidents, develop emergency preparedness procedures, and provide remedies for workplace injuries and fatalities. Contractors and supervising firms will submit monthly reports to the World Bank upon request as annexes to the reports to be submitted under the PMT. However, any fatalities must be reported within 24 hours.

7.3 Whistleblowing and Protection Against Retaliation

51. The Project will provide protection against retaliation for all workers who become whistleblowers. Whistleblowers are Project workers who report, in good faith, suspected wrongdoing to the PMT and may be subject to retaliatory action as a result. A whistleblowing policy rooted in the following underlying approach will be developed by the PMT at the Project onset:
- Project workers have an obligation to report wrongdoing;
 - The Project has a duty to protect whistleblowers against retaliation;
 - The Project has a duty to address wrongdoing by instituting remedies and taking disciplinary action as appropriate and retaliation constitutes misconduct.
52. Primary supply and community workers are also encouraged to report any suspicious wrongdoing to PMT.
53. The identity of a whistleblower that comes forward for advice regarding the reporting of suspected wrongdoing is protected. Confidentiality will only be waived with their express consent.

8 AGE OF EMPLOYMENT

54. The minimum employment/work age set by the implementing agencies as required by the Kenyan law is 18 years and older, and it will be stipulated in employment contracts. Employees' ages must be verified and documented prior to being hired. The National ID Card (ID) or the passport will be used as a general method of age verification. In the event these documents are not available, an Affidavit confirming a birth date will suffice. To engage VMGs who might not have ID cards or passports, a verification from a reputable local leader is sufficient. Violation or breach of implementing agencies' standard on child labor may result in termination of contract.

9 TERMS AND CONDITIONS OF EMPLOYMENT

55. Part III on Employment Relationship (as read with Part V on Rights and Duties in Employment; and Part VI on Termination and Dismissal) of the Employment Act 2007 comprehensively addresses various concerns, including the minimal, legislative requirement of any employment agreement. According to Section 14 on Reasonably Accessible Document or Collective Agreement, the employee has a legal right to important employment information and paperwork. The Protection of Wages section of Part IV of the Act sets forth the minimum requirements for all salary schemes.
56. The employer's capacity to influence how the employees use their pay has been expressly limited by law. The Rights and Duties in Employment are the subject of Part V, which specifies the obligations of both employers and employees. The choice of working hours is legally up to the employer, but there must be a weekly rest day or days. The Act also addresses issues related to employee leave (specific terms are provided in Annex 3).
57. Part VI of the Act covers Termination and Dismissal. It describes the legal procedures for ending a contract between an employer and an employee. To prevent ambushing the other party, termination notice(s) are legally required of the party wishing to terminate the contractual agreement. A payment in lieu of notice may be made by the party wanting to terminate the employment agreement, or the employer may merely waive the employee's requirement to do so.
58. There should be due process for the employee to present a defense and refute the claims in cases where the contractual arrangement is terminated owing to suspected employee wrongdoing. The employer must provide a valid reason for the dismissal and supporting documentation. The employer may choose to dismiss the employee summarily (with due process) if the reason (and the evidence supporting it) is grave enough to meet the requirements. The termination must not amount to an unfair, unlawful and/or unreasonable dismissal for what is otherwise lawful, reasonable and the exercise of the employee's entitlements (such as employee's pregnancy). Additionally, the Act requires employers to pay separation and severance benefits on time. All accrued salary/wages, allowances and benefits, pension and pension contributions, and any other employee entitlements will be paid at the time of working relationship termination or earlier.
59. The Project, will consider the following provisions in the management of workers:
 - a. **Direct workers:** National labor laws will govern the terms and conditions of direct workers in PMT, consultants, and workers at project-supported facilities. Short-term employees are not entitled to maternity leave, yearly leave, or other types of leave. Their terms and conditions will be based on an assignment that must be finished within a certain time frame and be paid for per day. These terms and conditions ought to be covered during the hiring process; and

- b. **Contracted workers:** The employment terms and conditions for contracted workers are governed by the Employment Act and related public service rules. Therefore, the MoH must abide by the rules regarding management and labor agreements.
60. **Minimum Wages:** The Salaries and Remuneration Commission's (SRC) rules will govern the official minimum wage. All efforts will be made to ensure that contractors do not underpay and overwork their workers, particularly temporary (casual) workers.
 61. **Hours of Work:** The normal working hours of a project worker shall not exceed 8 hours a day. Overtime hours worked are eligible for the appropriate compensation.
 62. **Rest per week:** Every employee is entitled to time off on Saturday and Sunday. On public holidays that are recognized as such by the Republic of Kenya, employees are also entitled to time off.
 63. **Annual leave:** For each year of continuous service, employees (aside from consultants and temporary workers) are entitled to 30 days of paid leave. A complete year of continuous service is typically required to obtain the right to paid leave.
 64. **Maternity and Paternity leaves:** Female employees are entitled to 90 days of maternity leave upon presentation of a medical certificate stating the anticipated date of their delivery, while male employees are entitled to 14 days of paid paternity leave, provided they have worked for the employer for at least six months with no breaks other than properly documented illness.
 65. **Deductions from remuneration:** Except for the repayment of advances obtained from the employer and supported by written documentation, no deductions from a worker's compensation other than those allowed by labor laws or any other law or collective labor agreement, shall be made. Employers are not permitted to request or receive from employees any monetary payments or gifts of any sort in exchange for hiring them or for any other purpose related to the terms and circumstances of employment.
 66. **Death benefits:** If a worker dies while on the job, the employer shall pay his or her remuneration as death benefits in accordance with the provisions of the applicable laws.
 67. **Medical treatment of injured and sick workers:** Contractors must ensure that contract workers under their employment are enrolled in WIBA. All other employees will continue to be covered by medical insurance plans set up by their employers, such as the civil service insurance plan for employees in the public sector.

10 GRIEVANCE REDRESS MECHANISM

10.1 General Principles

68. Workplace grievances commonly involve interest in employment opportunities, labor wage rates, payment delays, disagreements about working conditions, and health and safety problems in the workplace. Even though SEA-SH/GBV is an occurrence at workplaces, it is not always reported for fear of victimization. As required by ESS2, a Grievance Redress Mechanism (GRM) will be established for project workers (direct, contractual and casual workers). Grievances should be handled objectively, quickly, and with consideration for the needs and concerns of aggrieved persons. The system will also cater for anonymous complaints. When submitting complaints or concerns, individuals may ask that their identity remain anonymous; this request should be honored. Workers will be adequately sensitized on the GRM to enhance awareness and enable effective use.

69. The Kenya Employment Act, CAP. 226 (Rev. 2012) provides that employees may seek redress of any grievances relating to an employment. In addition, the Labour Relations Act, 2007 gives guidelines for trade unions to engage in collective bargaining for agreements and represent members' grievances in workplaces.

The project worker's GRM to be established will consider the following guidelines:

- i. The GRM will be accessible to all project workers;
- ii. The grievance management process will be transparent, objective, prompt, and responsive to project workers complaints/compliments;
- iii. All grievances will be treated with confidentiality and Aggrieved Persons (APs) may request anonymity;
- iv. It must be written in a language easily understood by all including VMGs/IPs;
- v. Multiple uptake channels will be available including suggestion boxes, email, a telephone hotline;
- vi. Grievance log sheets to record and track grievances will be available at all project sites; comment/complaint form;
- vii. Project workers Grievance Redress Committees (GRCs) will be established;

70. The project workers Grievance Redress Committees (GRCs) will be established to implement the project worker's GRM at the national, county and project levels. The GRCs will be responsible to:

- a. Evaluate logged complaints;
- b. Acknowledge logged grievances and communicate with the APs;
- c. Recommend to the PMT, county or contractor, as applicable, solutions to logged grievances from APs;
- d. Communicate the decisions to the APs;
- e. Acknowledge appeals and communicate to APs

10.2 Direct workers

71. For direct workers, the Project will adopt and apply the existing GRM at the county and national level. These will be strengthened by among others adopting more efficient technologies in reporting and documentation of grievances, sensitization of workers on channels to use, setting up of committees and more regular and periodic team meetings involving direct workers (PMT, field personnel, enumerators, and consultants) to address any workplace issues. There will be regular reports on grievance instances received. Direct employees who are unhappy with their immediate supervisor or hiring unit may bring up

their concerns either with the PMT if they want to escalate the matter, anonymously, or through a person other than them. The Direct workers will use the worker's grievance redress mechanism described below.

10.3 Workers GRM

72. This grievance mechanism will be maintained by all project implementing institutions to manage workers' grievances in the Project. The Project will feature multiple avenues for complaints and grievances, including email, phone calls, messages, blogs, a toll-free number, and letter writing, all of which will be accessible to all personnel. To ensure that all employees have adequate information on how to file a complaint and who to direct it to, information on the project GRM will be made available to workers at all facilities, government offices (both national and county), and community level (chief's office, for example). When handling employee complaints, confidentiality will be guaranteed. Even though there are "suggestion boxes" at many workplaces that appear to be a favored method for reporting issues, it has been observed that these boxes are rarely opened. If these must be utilized in the GRM, a structure will be put in place for opening, reviewing, responding, and providing feedback on the issues raised.

The WGRM will have the following design and procedural features:

- i. Information about the existence of the grievance mechanism will be readily available to all project workers (direct and contracted) through notice boards, the presence of "suggestion/complaint boxes", and all pertinent information, such as: designated call centers, hotline numbers, email addresses, office work hours, comment/complaint forms, stipulated timeframes to respond to grievances; information on a register to record and track the timely resolution of grievances; the responsible department to receive, record and track resolution of grievances, and other means as needed.
 - ii. Grievance handling will be transparent and aggrieved workers will be informed within 10 days of their grievance application, either with a respective solution or with a request of extension if more time is needed to investigate and decide upon the case.
 - iii. Grievance logbook will be maintained in the project office.
 - iv. The WGRM, however, does not replace or override the requirement that the PMT provides for workplace processes for project workers to report work situations that they believe are not safe or healthy, such as reporting requirements regarding workplace injuries and accidents.
 - v. The WGRM will not prevent workers from using judicial procedure or administrative remedies that might be available under the law or existing arbitration procedures or substitute for collective agreements grievance mechanisms, if preferred.
 - vi. The quarterly environment and social implementation monitoring will include reports on grievances related to project labor and working conditions issues.
 - vii. If not satisfied with the outcome of the resolution, the aggrieved party will be able to access a National level at the MoH.
73. The following actions will be used for managing complaints for this project:
- a. Complaints will be directed to the GRM focal point (to be identified by the implementing agencies) at the workplace via email, text, phone, letter, or in person. The complaints must be compiled onto a complaints form, entered into the register, and submitted using the format outlined in Annexes 4 and 5. The workers will receive the email address and phone number when they sign the contract or are hired.
 - b. The Project grievance committee shall critically review complaints on weekly basis after receipt. The team will examine the complaints/conduct preliminary investigations, and offer advice on the

best course of action,. Which may include; (i) recommending a solution to the complainant (ii) forwarding/escalation of the complaint to the relevant department/level for action, which may include the HR department for direct staff(iii) instituting /recommending investigations for further information, in which case the investigations must be completed within 5 business days, or (vi) escalating the case to other legal bodies including Ethics and Anti-Corruption Commission (EACC), Commission on Administration of Justice (CAJ). The complainant should receive a response within 10 working days of submission.

- c. Grievances touching on direct staff, that require resolution following the existing mechanisms/applying the HR manual will be referred to/escalated to relevant departments for action. The GRC will however make follow up to ensure such are resolved and concluded.
- d. The PMT shall be informed if the issue is escalated to the primary project GRM and the national legal complaint bodies (EACC, CAJ, etc.).
- e. Complaints about SEA-SH should be kept anonymous; only the complainant’s age and gender, as well as if a project worker was involved, should be noted, and should be sent directly to the PM, who should immediately notify the World Bank.
- f. Anyone who makes a complaint in good faith will not face disciplinary or legal action, and GRC will ensure that all complaints are followed and closed
- g. A monthly report of complaints resolution should be provided to the PMT and the World Bank (as per the reporting format in Annex 5).

74. The practical steps to be used in addressing grievances at the workplace are presented in Figure 1.

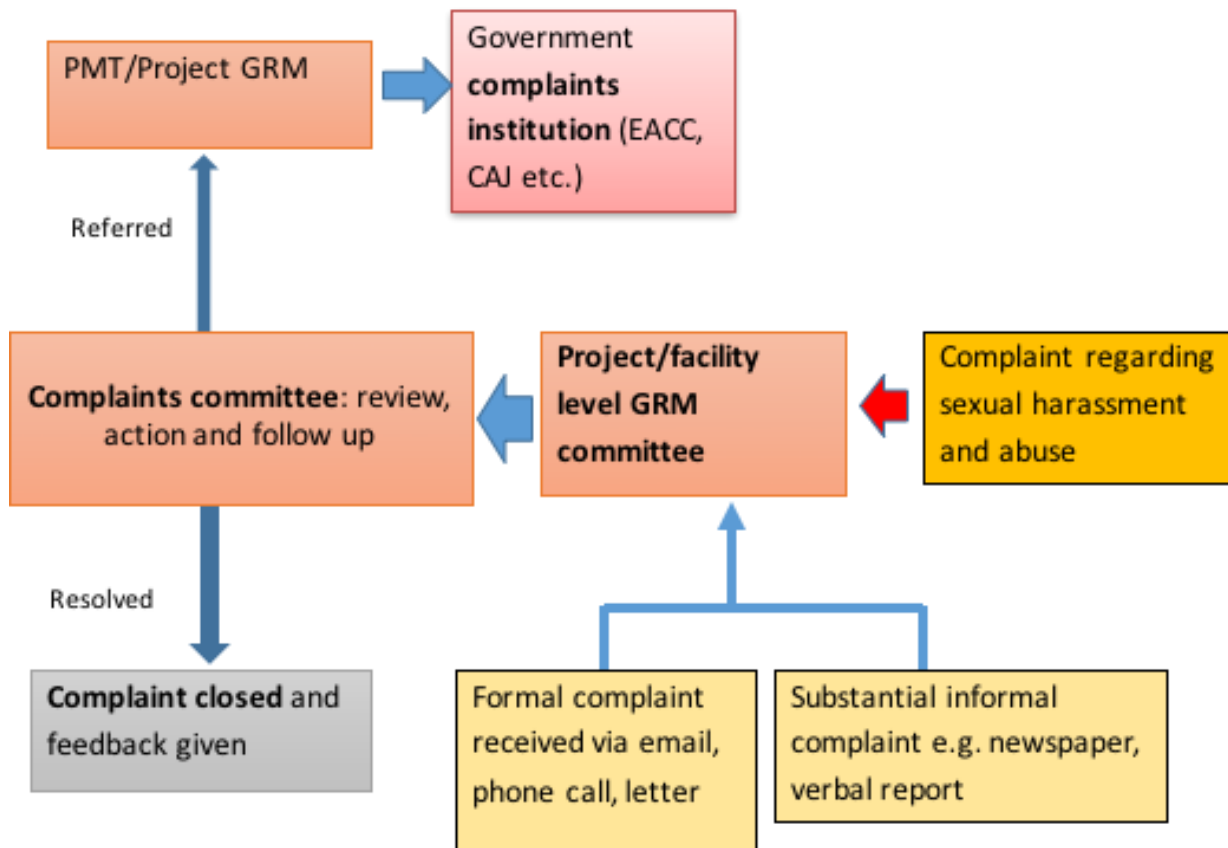


Figure 1: Internal grievance redress system

10.3.1 Levels of GRM resolution

75. The following levels of grievance resolution shall apply:
- a. **Project /Facility level:** the facility management will be the first level to resolve grievances. The project manager who leads the project implementation will be the focal point for grievance redress and will act as the chairman of GRC at the sub-project level. Its members will include the respective social and environment responsible officers (secretary to the committee), one nominated officer from the County government, and a representative of the community.
 - b. **PMT level:** GRC will comprise the Project Manager (chair), the environmental specialist and/or social safeguards specialist or any other relevant official of the PMT and representative of the facility management and community. This handle grievance that are not resolved at facility/subproject level. In addition, grievances can also be reported directly by a community member or any other individual to PMT.
76. On receiving a grievance (via E&S responsible officers/specialists) GRC will:
- i. Receipt and review of grievances to establish relevance to project and ensure effective documentation of grievances and status;
 - ii. Discuss the complaints and come up with appropriate solutions for communication to the parties;
 - iii. Communicate the resolutions through the focal persons for action/implementation;
 - iv. Monitoring the implementations of the resolutions;
 - v. Recommending escalation as applicable; and,
 - vi. Close/signoff the grievances together with the complainant signifying that the concern has been satisfactorily resolved.
77. **National appeal process:** If any dissatisfied employees feel that the project's established process is ineffective or unfair, they should use the national appeals process that is provided by the labor laws.

10.4 Capacity Building for Worker GRM's Responsible Staff

78. The Project will develop a capacity development plan for WGRM responsible persons such as the social specialist and the Human Resources Officers and ensure that the GRM focal point person receive adequate training on their roles and responsibilities as well as the overall procedures of the GRM. The WGRM will be described in staff induction and on-the-job trainings, which will be provided to all project workers. Further, the project will ensure that adequate resources are available for running and managing the WGRM, including building capacities of GRM officers. Training topics would include workers' rights and pertinent national legislations and international conventions/standards; receiving, filing, and closing work-related complaints; dealing with complaints raised by vulnerable workers (including female and young workers of working age, as well as workers with disabilities); and IT and communication skills.
79. On SEA-SH, there will be a need to ensure that GRM procedures and mechanisms for reporting allegations of SEA-SH are known to all GRM Focal Persons. Necessary capacities will be built to respond to and address SEA-SH cases in line with procedures drawn in the SEA-SH plan developed for the project.

10.5 Promotion of the worker GRM

80. The worker GRM messaging will be incorporated into the wider project Communication Strategy. Information on the various channels to submit grievances, complaints, and concerns will be publicized through meetings, monthly information brochures and posters explaining the GRM process in

languages understood by project workers, and through one-on-one meetings during recruitment. Those posters will be displayed in accessible places, and suggestion boxes will also be available in each locality, state level responsible health ministries and all implementing agencies. Meetings will be held at least quarterly; announcements will also be placed on Notice Boards. Other sensitization methods such as print media as well as electronic media such as adverts on local radio will be used.

10.6 Linkage to World Bank Grievance Redress System

81. Communities and individuals who believe that they are adversely affected by a WB supported project may submit complaints to existing project-level grievance redress mechanisms or the WB's Grievance Redress Service (GRS). The GRS ensures that complaints received are promptly reviewed to address project-related concerns. Project affected communities and individuals may submit their complaint to the WB's independent Inspection Panel which determines whether harm occurred, or could occur, because of WB non-compliance with its policies and procedures. Complaints may be submitted at any time after concerns have been brought directly to the World Bank's attention, and Bank Management has been given an opportunity to respond. For information on how to submit complaints to the World Bank's corporate Grievance Redress Service (GRS), please visit, <http://www.worldbank.org/en/projects-operations/products-and-services/grievance-redress-service>. For information on how to submit complaints to the World Bank Inspection Panel, please visit, www.inspectionpanel.org.

11 CONTRACTOR MANAGEMENT

82. It is likely that Health facilities operations will continue during rehabilitation works. This means that project workers employed or engaged by more than one party shall be working together in one location. As such, there is need for both parties to collaborate in applying the OSH requirements, without prejudice to the responsibility of each party for the health and safety of its own workers. Arrangements aimed at achieving such collaboration should be documented.

11.1 Construction Related OHS Risk Management

11.1.1 Contractor Responsibility

- i. Designate, appoint and/or assign tasks to personnel who shall be responsible for managing all or parts of the C-ESMP. The Contractor must appoint or designate a Environmental Safeguards Officer to monitor daily implementation of the C-ESMP.
- ii. The officer shall;
 - o monitor environmental, social, health and safety performance and conformance with the specifications contained in this C-ESMP during site inspections;
 - o prepare and submit ESHS monitoring reports on a monthly, quarterly and annual basis, including a grievance log as an annex, to the PMT;
 - o Report on non-conformances with this C-ESMP at site meetings;
 - o immediately report to the PMT of any incidents, accidents or emergencies on site, including an action report.
 - o Ensure the workers GRM is functional to receive, respond and timely resolve complaints with log sheets maintained on site. A workers GRC will be established, and continuous awareness of uptake channels undertaken;

- Ensure all workers sign formal contracts stating the terms and conditions of employment, and the CoC;
- Ensure throughout project implementation, compliance with statutory requirements: registration of construction works with the National Construction Authority (NCA); registration of sites as workplaces with the Directorate of Occupational Safety and Health Services (DOSHS); and obtainment of WIBA and Contractors All Risk (CAR) Insurance policy covers.

11.1.2 Subcontractor Responsibility

- i. Responsibility for implementation of the C-ESMP will be cascaded to the Sub-contractor by way of a contract signed between the contractor and sub-contractor;
- ii. In implementing the C-ESMP the sub-contractor will among others;
- iii. Be responsible for onsite implementation of the environmental and social requirements outlined in this plan, the ESMP and other associated plans as well as applicable rules and regulations;
- iv. Nominate and engage Safety, Health, Environment and Quality Officer (SHEQO) to monitor daily implementation of subproject activities, the ESMP on behalf of the subcontractor;
- v. Ensure all workers involved in the subproject implementation are trained and covered with insurance for any work-related injuries or incidents; and,
- vi. Manage the waste and rubble and ensure that these are managed in adherence to local regulations.

11.1.3 Facility management (construction and operation)

- i. Follow-up closely on the activities onsite and to ensure adequate protection for the environment, assets, communities and workers from any adverse impact that might be resulted from subproject implementation;
- ii. The necessary PPE are provided to- and used by workers as well as regularly conducting the appropriate training and supervision; and,
- iii. Provide necessary awareness and training to workers on occupational health and safety (OHS), waste management and other environmental and social safeguards requirements.

11.1.4 PMT Responsibility

PMT's environmental and social safeguards specialists shall:

- i. Monitor the implementation of the Project ESMF;
- ii. Submit quarterly and annual ESHS implementation monitoring reports, including a grievance log as an annex, to the World Bank;
- iii. Monitor functionality of the Project GRM;
- iv. Prepare and share a BREHS GRM brief, including a grievance log sheet template, for utilization by appointed ESHS focal persons, contractors, and other relevant stakeholders;
- v. Monitor contractor's validity and compliance with statutory requirements: registration of construction works with the National Construction Authority (NCA); registration of sites as workplaces with the Directorate of Occupational Safety and Health Services (DOSHS); and obtainment of WIBA and Contractors All Risk (CAR) Insurance policy covers.

- vi. Ensure all contractors in the monthly ESMP implementation reports, report on incidents, accidents, emergencies, fatalities, Lost Time Injuries (LTI), Medical Treatment Injuries (MTI), or Near Misses (NM);
- vii. Conduct targeted and continuous ESHS capacity building;

In addition, the PMT will conduct audits to ensure that the system for implementation of the C-ESMP is operating effectively. The audit shall check that a procedure is in place to ensure that:

- i. The C-ESMP and the Method Statements being used are the up-to-date versions;
- ii. Variations to the C-ESMP, Method Statements and non-compliances and corrective actions are documented; and
- iii. Emergency procedures are in place and effectively communicated to personnel.
- iv. Develop and promote implementation including internal Reporting and Response protocol for incidences on SEA/GBV as provided in the SGBV plan.

The audit program shall consist of the following at a minimum:

- i. First audit no later than 1 month after construction commences;
- ii. Thereafter audits at monthly intervals, at a minimum;
- iii. An audit one week prior to practical completion of the Project is granted; and
- iv. A post construction audit within 1 week after the Contractor has moved off site.

The contractor and the PMT will also be required to meet at least weekly to discuss and check progress of implementing the C-ESMP.

11.1.5 Compliance with the C-ESMP

83. The Contractor and/or his agents are deemed not to have complied with the C-ESMP and remedial action if:

- i. There is evidence of contravention of the C-ESMP clauses within the boundaries of the site or extensions;
- ii. Environmental damage ensues due to negligence; and
- iii. The Contractor fails to comply with corrective or other instructions issued by the PMT, within the agreed period.

11.2 Contracted Truck Driver OHS Management

11.2.1 Overview

84. Road transport workers generally face higher occupational risks than other workers, including risks of accidents, physical injury, violence and exposure to harmful substances. In addition, long-haul road transport drivers might find it challenging to combine work and family life because of the irregular and split shifts that their work involves, which can have a negative impact on their work–life balance. Informal transport service provision is mostly present in low- and middle-income countries, for both freight and passenger transport services. Low levels of income, productivity, skills, technology and capital are generally associated with informal working opportunities, which might also give rise to OSH and public safety concerns. These include low maintenance and inspection levels of vehicles, inadequate training opportunities and knowledge levels, and acute competition for passengers or

loads. Informal workers might be poorly organized, a situation that often translates into performing riskier tasks or the absence of decent working conditions.⁶

11.2.2 OHS Risk Assessment, Management and Monitoring

85. The process forms part of the overall legal duties (OSH Act) for employers and persons in control of places of work to conduct a risk assessment on all activities that introduce risk. Contractors shall also adopt the project LMP that will allow them to operate in accordance with the requirements of ESS2. When conducting the risk assessment follow the three-step process:

1. Identify Hazards: Look at what could cause injury or harm;
2. Assess the risks of injury or harm: consider who could be harmed, how and to what extent; and
3. Control the risks: put in place control measures to eliminate or reduce the risk to as low a level as reasonably practicable.

86. To manage and monitor OHS performance by third parties/contractors, the PMT /County government/MOH/KEMSA shall:

- Incorporate the OHS requirements into contractual agreements with such third parties/contractors, together with appropriate non-compliance remedies; and
- Manage and monitor the performance of contractors in relation to contracted workers, focusing on compliance by such third parties with their contractual agreements (obligations, representations, and warranties). This may include periodic audits, inspections, and/or spot checks of trucks and their drivers and/or of labor management records and reports compiled by contractors. Contractors labor management records and reports audited may include: (a) a representative sample of employment contracts or arrangements between contractors and truck drivers; (b) records relating to grievances received and their resolution; (c) reports relating to safety inspections, including fatalities and incidents and implementation of corrective actions; (d) records relating to incidents of noncompliance with national law; and (e) records of training provided for truck drivers to explain labor and working conditions and OHS for the project.

11.3 Selecting Contractors

87. The MoH and project implementing agencies will be responsible for the management of the contractors under the project. In a situation where contractors are hired, MoH will undertake due diligence assessment of the contractors' Labor practice and adherence to ESS2, WB EHSs, the project LMP and ESMF, the international conventions Kenya has ratified and the national law. The contract will include clauses that refer to the Environmental and Social Commitment Plan (ESCP), Stakeholders Engagement Plan (SEP), the LMP and ESMF with the specified OHS requirements.

88. Moreover, the PMT will make reasonable efforts to ascertain third parties who engage contracted workers are legitimate and reliable entities and have in place Labor Management Procedures applicable to the project that will enable them to operate in accordance with the requirements of ESS2. Specifically, the Project will ensure the project national contractors (including third party suppliers) provide the following information as part of the contracting process:

- Business licenses, necessary registrations, permits, and approvals;

⁶ See https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/publication/wcms_400598.pdf

- Proof of having a Labor management system in place, including OHS-related management systems and associated procedures, templates and forms;
 - Qualifications and certifications of Labor management, safety and health personnel;
 - Certifications, necessary permits and training qualifications of workers, who will perform the required work;
 - Records of safety and health violations and responses (corrective and preventive measures);
 - Payroll records and proofs of enrolment of workers in health and benefit-related programs;
 - Identification of safety committee members and records of meetings, as seen appropriate by the project management, to the nature of goods and services to be rendered; and
 - Copies of similar engagement with other employers, showing adequate experience and compliance with sensitive work issues, such as, child Labor, forced Labor, GBV/SEA/SH, OHS, and others, as required by the provisions of ESS2 .
89. The PMT will ensure that the requirements of the Environmental and Social Standard (ESS2) on Labor and working conditions and non-compliance remedies are incorporated into the Contractors' contractual agreements. Contractors under the project will be required to develop and sign a contractors' ESMP that will also include issues of GBV/SEA/SH, child and forced Labor, child protection, OHS and accessibility of GRM at contractor's worksite, as well as a specific worker code of conduct (CoC).

11.3.1 Contractor Performance Monitoring

90. The PMT, KEMSA, SHA/NHIF, and health institutions in the project will manage and monitor the performance of contractors in relation to contracted workers, focusing on compliance by contractors with their contractual agreements (obligations, representations, and warranties) and Labor management procedures. The MoH, through its PMT and beneficiary public health institutions will undertake due diligence assessment of the engaging contractors on their Labor practices. This will include periodic audits and spot-checks on project locations as appropriate. Specifically, the PMT staff and beneficiary public health institutions will look how the following obligations are fulfilled by the Contractors:
- *Labor conditions*: records of workers engaged under the Project, including sample contracts, registry of induction of workers, and working hours' logs;
 - *Workers*: number of workers, indication of origin (expatriate, local, nonlocal nationals), gender, age with evidence that no child Labor is involved, and skill level (unskilled, semiskilled, skilled, supervisory, professional, managerial);
 - *Training/induction*: dates, number of trainees and topics, records on training provided for contracted workers that were tailored to educate workers on occupational health and safety risks and applying corrective and preventive measures;
 - *Incidents and safety*: records of incidents, such as, lost time incidents, medical treatment cases, first aid cases, remedial and preventive activities taken, as well as reports relating to safety inspections, including fatalities and incidents and implementation of corrective actions, records relating to incidents of non-compliance with national law;
 - *Details of any security risks*: details of the risks the Contractors may be exposed to, while performing their work—the threats may come from third parties, external to the project; and
 - *Worker grievances*: details including occurrence date, grievance description, and date submitted; actions taken and dates; resolutions/referrals (if any) and progress dates; and follow-up yet to be

taken. Grievances listed should include those received since the preceding report and those that were unresolved at the time of preparing the new report.

- *Tracking of OHS performance:* assessment and performance on implementation of C-ESMP which includes the OHS Plan

91. In ensuring that there is compliance with the requirements of ESS2, WBG EHSGs, and GOK legal frameworks, by service providers, the project will regularly monitor and evaluate activities of contractors in line with the project's M&E framework. The project will also ensure that there is a comprehensive and continuous awareness raising among workers, about their entitlements. The MoH subsequently will provide regular reports (on monthly, quarterly, and annual basis) regarding the performance of the contractors.

12 PRIMARY SUPPLY WORKERS

92. To mitigate/manage the risk of forced and child labour, human rights abuse, health and safety concerns among primary supply workers, the PMT through procurement documents will require: (i) forced and/or forced labour declarations; (ii) qualification requirements, and (iii) mandatory prior review/No-objection by the Bank. Effective screening and due diligence at selection of primary suppliers will be undertaken to identify and detect potential risks related to labour and human rights abuse including child labor, forced labor and major safety concerns. The PMT will not approve the purchase of supplies from primary suppliers associated with such abuses or non-compliance with labour laws. All purchase orders and contracts by the project will have specific provisions for child protection, non-involvement in forced labor and work safety. Metrics for evaluation of compliance with the requirements of the ESS2 will be developed by the environmental and social specialists and used during selection of suppliers and contracting under the project. Monitoring of compliance will be done through regular review/assessment of project documentation as well as project site visits. In the event of non-compliance, the MoH, the employer, will invoke contractual provisions in the supplier contract to manage and provide corrective measures as required.

13 MIGRANT WORKERS

93. These are workers who have migrated from one country to another or from one part of the country to another for purposes of employment. These workers may form part of the contracted workers pool on the Project and will be categorized among the vulnerable. The PMT shall implement measures to protect and assist migrant workers in their employment.

14 CAPACITY BUILDING

94. The requirements detailed in this LMP are, for the most part, identical with the standards of the national Labour laws, with only a few additional measures (such as the Worker Grievance Redress Mechanism) to meet the criteria of ESS2. The project will develop and deliver trainings and simple awareness raising materials to address gaps and challenges on meeting some of the obligations/requirements. The proposed budget for the project includes funding for capacity building and awareness efforts.

95. The PMT will also prepare a simple booklet, with easily understood illustrations, explaining the requirements of the LMP as applicable to contracted and casual workers in the project. The booklet

will include, among others, details of the Worker Grievance Redress Mechanism. This booklet and/or information will be disseminated to all project workers.

15 ANNEXES

Annex 1: Guideline on Code of Conduct

1. A satisfactory code of conduct will contain obligations on all project workers (including sub-contractors) that are suitable to address the following issues, as a minimum. Additional obligations may be added to respond to concerns of the ministries, the location, and the project sector or to specific project requirements.

2. The Code of Conduct should be written in plain language and signed by each worker to indicate that they have:

- received a copy of the code;
- had the code explained to them;
- acknowledged that adherence to this Code of Conduct is a condition of employment; and
- Understood that violations of the Code can result in serious consequences, up to and including dismissal, or referral to legal authorities.

Annex 2: Sample Individual Code of Conduct

I, _____, acknowledge that adhering to environmental, social, health and safety (ESHS) standards, following the project's occupational health and safety (OHS) requirements, and preventing Gender Based Violence (GBV) is important.

The Company Code (annex 1b) on OHS responsibilities for Employers considers that failure to follow ESHS and OHS standards, or to partake in activities constituting GBV—be it on the work site, the work site surroundings, at workers' camps, or the surrounding communities—constitute acts of gross misconduct and are therefore grounds for sanctions, penalties, or potential termination of employment. Prosecution by the Police of those who commit GBV may be pursued if appropriate.

I agree that while working on the project I will:

1. Consent to Police background check.
2. Attend and actively partake in training courses related to ESHS, OHS, and GBV as requested by my employer.
3. Will always wear my personal protective equipment (PPE) when at the work site or engaged in project related activities.
4. Take all practical steps to implement the contractor's environmental and social management plan (C-ESMP).
5. Implement respective parts of the OHS plan relevant to my work.
6. Adhere to a zero-alcohol and drugs policy during work activities, and refrain from the use of narcotics or other substances which can always impair faculties.
7. Treat women, children (persons under the age of 18), and men with respect regardless of race, color, language, religion, political or other opinion, national, ethnic, or social origin, property, disability, birth or other status.
8. Not use language or behavior towards women, children or men that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate.
9. Not sexually exploit or abuse project beneficiaries and members of the surrounding communities.
10. Not engage in sexual harassment of work personnel and staff—for instance, making unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature is prohibited. E.g., looking somebody up and down; kissing, howling or smacking sounds; hanging around somebody; whistling and catcalls; in some instances, giving personal gifts.
11. Not engage in sexual favors—for instance, making promises of favorable treatment (e.g., promotion), threats of unfavorable treatment (e.g., loss of job) or payments in kind or in cash, dependent on sexual acts—or other forms of humiliating, degrading or exploitative behavior.
12. Not use prostitution in any form at any time.
13. Not participate in sexual contact or activity with children under the age of 18—including grooming or contact through digital media. Mistaken belief regarding the age of a child is not a defense. Consent from the child is also not a defense or excuse.
14. Unless there is the full consent⁷ by all parties involved, I will not have sexual interactions with members of the surrounding communities. This includes relationships involving the withholding or

⁷ **Consent** is defined as the informed choice underlying an individual's free and voluntary intention, acceptance or agreement to do something. No consent can be found when such acceptance or agreement is obtained using threats, force or other forms of coercion, abduction, fraud, deception, or misrepresentation. In accordance with the United Nations Convention on the Rights of the Child, the World Bank considers that consent cannot be given by children under the age of 18, even if national legislation of

promise of actual provision of benefit (monetary or non-monetary) to community members in exchange for sex (including prostitution). Such sexual activity is considered “non-consensual” within the scope of this Code.

15. Consider reporting through the GRM or to my manager any suspected or actual GBV by a fellow worker, whether employed by my company or not, or any breaches of this Code of Conduct.

Regarding children under the age of 18:

16. Bring to the attention of my manager the presence of any children on the construction site or engaged in hazardous activities.
17. Wherever possible, ensure that another adult is present when working in the proximity of children.
18. Not invite unaccompanied children unrelated to my family into my home unless they are at immediate risk of injury or in physical danger.
19. Not use any computers, mobile phones, video, and digital cameras or any other medium to exploit or harass children or to access child pornography (see also “Use of children's images for work related purposes” below).
20. Refrain from physical punishment or discipline of children.
21. Refrain from hiring children for domestic or other labor below the minimum age of 14 unless national law specifies a higher age, or which places them at significant risk of injury.
22. Comply with all relevant local legislation, including labor laws in relation to child labor and World Bank’s safeguard policies on child labor and minimum age.
23. Take appropriate caution when photographing or filming children (See Annex 2 for details).

Use of children's images for work related purposes

When photographing or filming a child for work related purposes, I must:

24. Before photographing or filming a child, assess and endeavor to comply with local traditions or restrictions for reproducing personal images.
25. Before photographing or filming a child, obtain informed consent from the child and a parent or guardian of the child. As part of this I must explain how the photograph or film will be used.
26. Ensure photographs, films, videos, and DVDs present children in a dignified and respectful manner and not in a vulnerable or submissive manner. Children should be adequately clothed and not in poses that could be seen as sexually suggestive.
27. Ensure images are honest representations of the context and the facts.
28. Ensure file labels do not reveal identifying information about a child when sending images electronically.

Sanctions

I understand that if I breach this Individual Code of Conduct, my employer will take disciplinary action which could include:

1. Informal warning.
2. Formal warning.
3. Additional Training.

the country into which the Code of Conduct is introduced has a lower age. Mistaken belief regarding the age of the child and consent from the child is not a defense.

4. Loss of up to one week's salary.
5. Suspension of employment (without payment of salary), for a minimum period of 1 month up to a maximum of 6 months.
6. Termination of employment.
7. Report to the Police if warranted.

I understand that it is my responsibility to ensure that the environmental, social, health and safety standards are met. That I will adhere to the occupational health and safety management plan. That I will avoid actions or behaviors that could be construed as GBV. Any such actions will be a breach to this Individual Code of Conduct. I do hereby acknowledge that I have read the foregoing Individual Code of Conduct, do agree to comply with the standards contained therein and understand my roles and responsibilities to prevent and respond to ESHS, OHS, GBV issues. I understand that any action inconsistent with this Individual Code of Conduct or failure to act mandated by this Individual Code of Conduct may result in disciplinary action and may affect my ongoing employment.

Signature: _____

Printed Name: _____

Title: _____

Date: _____

Annex 3: Sample Company Code of Conduct

Company Code of Conduct

Implementing ESHS and OHS Standards
Preventing Gender Based Violence

The company is committed to ensuring that the project is implemented in such a way which minimizes any negative impacts on the local environment, communities, and its workers. This will be done by respecting the environmental, social, health and safety (ESHS) standards, and ensuring appropriate occupational health and safety (OHS) standards are met as established in respective contracts and Project LMP. The company is also committed to creating and maintaining an environment where children under the age of 18 will be protected, and where Sexual Exploitation and Abuse and sexual harassment (SEA-SH) have no place. Improper actions towards children, SEA-SH are acts of Gender Based Violence (GBV) and as such will not be tolerated by any employee, sub-contractors, supplier, associate, or representative of the company.

Therefore, to ensure that all those engaged in the project are aware of this commitment, the company commits to the following core principles and minimum standards of behavior that will apply to all company employees, associates, and representatives, including sub-contractors and suppliers, without exception:

General

1. The company—and therefore all employees, associates, representatives, sub-contractors, and suppliers—commits to complying with all relevant national laws, rules and regulations.
2. The company commits to full implementing its 'Contractors Environmental and Social Management Plan' (C-ESMP) as approved by the client.
3. The company commits to treating women, children (persons under the age of 18), and men with respect regardless of race, color, language, religion, political or other opinion, national, ethnic, or social origin, property, disability, birth or other status. Acts of GBV are in violation of this commitment.
4. The company shall ensure that interactions with local community members are done with respect and non-discrimination.
5. Demeaning, threatening, harassing, abusive, culturally inappropriate, or sexually provocative language and behavior are prohibited among all company employees, associates, and its representatives, including sub-contractors and suppliers.
6. The company will follow all reasonable work instructions (including regarding environmental and social norms).
7. The company will protect and ensure proper use of property (for example, to prohibit theft, carelessness, or waste).

Health and Safety

8. The company will ensure that the project's OHS Management Plan is effectively implemented by company's staff, as well as sub-contractors and suppliers.

9. The company provides also that all person's on-site wear prescribed and appropriate personal protective equipment, preventing avoidable accidents, and reporting conditions or practices that pose a safety hazard or threaten the environment without fear of reprisal.
10. The company will:
 - i. prohibit the use of alcohol during work activities.
 - ii. prohibit the use of narcotics or other substances which can always impair faculties.
11. The company will ensure that adequate sanitation facilities are available on site and at any worker accommodations provided to those working on the project.
12. The company will not hire children under the age of 18 for construction work, or allow them on the work site, due to the hazardous nature of construction sites.
13. Provide adequate means and organization and establish a suitable program on the safety and health of workers, consistent with national laws and regulations and in compliance with the prescribed safety and health measures in the workplace.
14. Assign a competent person or body at the site with the authority and means necessary to ensure coordination and compliance with the measures. A competent person means a person possessing adequate qualifications, such as suitable training and sufficient knowledge, experience, and skill to ensure the safe performance of the specific work. The competent authority(ies) may define appropriate criteria for the designation of such persons and may determine the duties to be assigned to them.
15. Provide and maintain workplaces, plant, equipment, tools, and machinery, and so organize construction work that, as far as is reasonably practicable, there is no risk of accident or injury to health of workers. In particular, construction work should be planned, prepared, and undertaken such that: (a) dangers likely to arise at the workplace are prevented as soon as possible; (b) excessively or unnecessarily strenuous work positions and movements are avoided; (c) organization of work takes into account the safety and health of workers; (d) materials and products used are suitable from a safety and health point of view; and (e) working methods are employed that protect workers against the harmful effects of chemical, physical, and biological agents.
16. Establish committees with representatives of workers and management or make other suitable arrangements consistent with national laws and regulations, to enlist the participation of workers in ensuring safe working conditions.
17. Take all appropriate precautions to protect persons present at, or in the vicinity of, a construction site from all risks that may arise from such a site.
18. Arrange for regular safety inspections by competent persons, at suitable intervals, of all buildings, plant, equipment, tools, machinery, workplaces, and systems of work under the control of the employer at construction sites, in accordance with national laws, regulations, standards, or codes of practice. As appropriate, the competent person should examine and test, by type or individually, to ascertain the safety of construction machinery and equipment.
19. When acquiring plant equipment or machinery, employers should ensure that it takes account of ergonomic principles in its design and conforms to relevant national laws, regulations, standards, or codes of practice, and if there are none, that it is designed or protected such that it can be operated safely and without risk to health.
20. Provide such supervision as will ensure that workers perform their work with due regard to their safety and health.
21. Assign workers only to employment for which they are suited by their age, physique, state of health, and skill.
22. Satisfy themselves that all workers are suitably instructed in the hazards connected with their work and environment and are trained in the precautions necessary to avoid accidents and injury to health.

23. Take all practicable steps to ensure that workers are made aware of the relevant national or local laws, regulations, standards, codes of practice, instructions, and advice relating to prevention of accidents and injuries to health.
24. Buildings, plant, equipment, tools, machinery, or workplaces in which a dangerous defect has been found should not be used until the defect has been remedied.
25. Where there is an imminent danger to the safety of workers, the employer should take immediate steps to stop the operation and evacuate workers as appropriate.
26. On dispersed sites and where small groups of workers operate in isolation, employers should establish a checking system by which it can be ascertained that all the members of a shift, including operators of mobile equipment, have returned to the camp or base at the close of work.
27. Provide appropriate first aid, training, and welfare facilities to workers, and when collective measures are not feasible or are insufficient, provide and maintain personal protective equipment and clothing. Employers should also ensure access for workers to occupational health services.
28. Design and planning of a construction project shall consider the safety and health of the construction workers in accordance with national laws, regulations, and practice.
29. Provisions for worker welfare include an adequate supply of drinking water, sanitary and washing facilities (separate for men and women), facilities for changing and for the storage and drying of clothing, and accommodations for eating meals and for taking shelter during interruption of work due to adverse weather conditions.
30. A worker shall have the right to remove himself from danger when he has good reason to believe that there is an imminent and serious danger to his safety or health, and the duty to inform his supervisor of such immediately.

Gender Based Violence

31. Acts of GBV constitute gross misconduct and are therefore grounds for sanctions, which may include penalties and/or termination of employment and, if appropriate, referral to the Police for further action.
32. All forms of GBV, are unacceptable, regardless of whether they take place on the work site, the work site surroundings, at worker's camps or within the local community.
33. Sexual harassment of work personnel and staff (e.g., making unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature) are acts of GBV and are prohibited.
34. Sexual favors (e.g., making promises of favorable treatment such as promotions, threats of unfavorable treatment such as losing a job, payments in kind or in cash dependent on sexual acts) and any form of humiliating, degrading or exploitative behavior are prohibited.
35. The use of prostitution in any form at any time is strictly prohibited.
36. Sexual contact or activity with children under 18—including through digital media—is prohibited. Mistaken belief regarding the age of a child is not a defense. Consent from the child is also not a defense or excuse.
37. Unless there is full consent⁸ by all parties involved in the sexual act, sexual interactions between the company's employees (at any level) and members of the communities surrounding the workplace

⁸ **Consent:** refers to when an adult makes an informed choice to agree freely and voluntarily to do something. There is **no** consent when agreement is obtained through the use of threats, force or other forms of coercion, abduction, fraud, manipulation, deception, or misrepresentation; the use of a threat to withhold a benefit to which the person is already entitled, or; a promise made to the person to provide a benefit. In accordance with the

are prohibited. This includes relationships involving the withholding/promise of actual provision of benefit (monetary or non-monetary) to community members in exchange for sex (including prostitution). Such sexual activity is considered “non-consensual” within the scope of this Code.

38. In addition to company sanctions, legal prosecution of those who commit acts of GBV will be pursued if appropriate.
39. All employees, including volunteers and sub-contractors are highly encouraged to report suspected or actual acts of GBV by a fellow worker, whether in the same company or not. Reports must be made in accordance with project’s GBV Allegation Procedures.
40. Managers are required to report and act to address suspected or actual acts of GBV as they have a responsibility to uphold company commitments and hold their direct reports responsible.

Implementation

To ensure that the above principles are implemented effectively the company commits to:

41. Ensuring that all managers sign the project’s ‘Manager’s Code of Conduct’ detailing their responsibilities for implementing the company’s commitments and enforcing the responsibilities in the ‘Individual Code of Conduct’.
42. Ensuring that all employees sign the project’s ‘Individual Code of Conduct’ confirming their agreement to comply with ESHS and OHS standards, and not to engage in activities resulting in GBV, child endangerment or abuse, or sexual harassment.
43. Displaying the Company and Individual Codes of Conduct prominently and in clear view at workers’ camps, offices, and in public areas of the workspace. Examples of areas include waiting, rest and lobby areas of sites, canteen areas and health clinics.
44. Ensuring that posted and distributed copies of the Company and Individual Codes of Conduct are translated into the appropriate language of use in the work site areas as well as for any international staff in their native language.
45. Ensuring that an appropriate person is nominated as the company’s ‘Focal Point’ for addressing GBV issues, including representing the company on the GBV Compliance Team (GCT) which is comprised of representatives from the client, contractor(s), the supervision consultant, and local SEA Service Provider.
46. Ensuring that an effective GBV Action Plan is developed in consultation with the GCT which includes as a minimum:
 - i. **GBV Allegation Procedure** to report GBV issues through the project Grievance Redress Mechanism (Section 4.3 Action Plan);
 - ii. **Accountability Measures** to protect confidentiality of all involved (Section 4.4 Action Plan); and,
 - iii. **Response Protocol** applicable to GBV survivors and perpetrators (Section 4.7 Action Plan).
47. Ensuring that the company effectively implements the agreed final GBV Action Plan, providing feedback to the GCT for improvements and updates as appropriate.
48. Ensuring that all employees attend an induction training course prior to commencing work on site to ensure they are familiar with the company’s commitments to ESHS and OHS standards, and the project’s GBV Codes of Conduct.

United Nations Convention on the Rights of the Child, the World Bank considers that consent cannot be given by children under the age of 18, even if national legislation of the country into which the Code of Conduct is introduced has a lower age. Mistaken belief regarding the age of the child and consent from the child is not a defense.

49. Ensuring that all employees attend a mandatory training course once a month for the duration of the contract starting from the first induction training prior to commencement of work to reinforce the understanding of the project's ESHS and OHS standards and the GBV Code of Conduct.

Sanctions for Breach of Code of Conduct

50. Violating this Code of Conduct can have serious consequences for employees, for example, disciplinary action under Kenya's employment law, including termination of employment, or claims for compensation by the Project or third parties. If violating this Code of Conduct also constitutes a criminal offence, such violation may also result in criminal proceedings, which could lead to the employee being fined or imprisoned.
51. Violating this Code of Conduct is never in the Project's interest (zero-tolerance principle). In such cases, employees may not use the defense that they believed they were acting in the Project's interest.

I do hereby acknowledge that I have read the foregoing Company Code of Conduct, and on behalf of the company agree to comply with the standards contained therein. I understand my role and responsibilities to support the project's OHS and ESHS standards, and to prevent and respond to GBV. I understand that any action inconsistent with this Company Code of Conduct or failure to act mandated by this Company Code of Conduct may result in disciplinary action.

Company name: _____

Signature: _____

Printed Name: _____

Title: _____

Date: _____

Annex 4: Terms and Conditions of Employment

Terms and Conditions. Below is the list of relevant provisions of the Employment Act, 2007 mainstreamed to MoH Human Resources Manual regarding terms and conditions of work.

- 1) Content of individual contract in-line with Employment Act 2007 (Section 10)
 - Subject to the provision of this Act or regulations made hereunder, a written individual contract of employment shall specify the following: (a) name and father's name of workers; (b) address, occupation, age and sex of workers; (c) employer's name and address; (d) nature and duration of contract; (e) hours and place of work; (f) remuneration payable to the worker; (g) procedure for suspension or termination of contract.
- 2) Notice for termination of contract in-line with Employment Act, 2007 (Part VI; Sections 35 - 51)
 - Either of the contracting parties may terminate a contract of employment by giving written notice in-line with the provisions of employment Act, 2007:
 - (a) Not less than ten days in the case of manual workers;
 - (b) Not less than 30 days in the case of non-manual workers:

Provided that no notice need be given in case the duration of contract does not exceed one month.
- 3) Protection of wages in-line with Employment Act, 2007 (Part IV; Sections 17 - 25)
 - Taking into consideration the economic and social conditions of the country (and in consistence with the provisions of Employment Act, 2007 and NEMA Human Resources Manual), the minimum wages for any category of workers may be determined by the salaries remuneration commission.
- 4) Hours of work – Employment Act, 2007 (Article 85, 86)
 - The normal hours of work of a worker shall not exceed eight a day or 48 a week.
 - Hours worked more than the normal hours of work shall not exceed 12 a week and shall entitle a worker to a proportionate overtime payment in-line with the provisions of NEMA Human Resources Manual on allowances.
- 5) Weekly rest
 - Every worker shall be entitled to one day's rest each week, which should normally fall on Friday. It shall consist of at least 24 consecutive hours each week.
 - Workers shall also be entitled to a rest day on public holidays recognized as such by the State.
- 6) Annual leave (Employment Act, 2007)
 - Workers shall be entitled to 30days' leave with pay for every year of continuous service.
 - An entitlement to leave with pay shall normally be acquired after a full year of continuous service.
- 7) Fringe benefits (Employment Act 2007)
 - Any employer shall provide (a) accommodation when a worker is required to be away from his normal residence; (b) free food to workers, or subsistence allowance in place thereof; (c) free transport to and from the place of work, when a worker is required to work in a town or locality away from his normal residence.
- 8) Deductions from remuneration (Employment Act 2007)
 - No deductions other than those prescribed by the Code or regulations made hereunder or any other law or collective labor agreement shall be made from a worker's remuneration, except for repayment of advances received from the employer and evidenced in writing.
- 9) Death benefit (Employment Act 2007)
 - In case of death of a worker during his contract of employment, the employer shall pay to his heirs an amount not less than 15 days' remuneration as death benefit for funeral services.
- 10) Maternity and Paternity Leaves (Employment Act, 2007)
 - A woman worker shall be entitled for maternity leave with pay for 90 days and male workers 14 days in-line with the provision's employment Act, 2007 and NEMA Human Resources manual.

Annex 5: Complaints form

1. Complainant's Details

Name (Dr / Mr / Mrs / Ms)

ID Number _____

Postal address _____

Mobile _____

Email _____

County _____

Age (in years): _____

2. Would you like the information to remain anonymous: Yes No

3. Which institution or officer/person are you complaining about?
Ministry/department/agency/company/group/person

4. Have you reported this matter to any other public institution/ public official?

Yes No

5. If yes, which one?

6. Has this matter been the subject of court proceedings?

YES NO

7. Please give a summary of your complaint and attach all supporting documents [Note to indicate all the particulars of what happened, where it happened, when it happened and by whom]

7. What action would you want to be taken?

Signature _____

Date _____

Annex 6: Public Service Grievance Form

PUBLIC SERVICE COMMISSION GRIEVANCE PROCEDURE GRIEVANCE FORM

Officer's Full Name	P/No.	Designation & Grade
Department		Section
Office Tel. No	Official E-mail Address:	Mobile Telephone No
Stage I		
<p>Grievance Statement/Issues (Use attachments if necessary):</p> <p>Submitted to:</p> <p>Name.....Head/Officer in ChargeDept/Section</p> <p>Date</p>		
Date Received:		

<p>Response/Action taken:</p> <p>Respondent's Name</p> <p>Designation.....</p> <p>Signature:Date.....</p> <p>Employee's response</p> <ul style="list-style-type: none"> ● I conclude my grievance and am returning the form to the Human Resource Office ● I request that my grievance be taken to the next stage. <p>SignatureDate.....</p>

Stage II

Submitted to:.....

Name:Senior Deputy Secretary (Administration)

Date:

Date Received:

Response/Action taken:.....

Respondent's Name Designation

Signature: Date

Employee's Response

- I have documented my grievance and am returning the form to the Human Resource Office
- I request that my grievance be taken to the next stage

Stage III

Submitted to the Secretary PSCK

Annex 8: Complaints reporting template

No. of complaints received	Type of complaint	Location /site/ contractor	Main mode complaint lodged	No. of complaints resolved	No. of complaints pending	Duration taken to resolve, e.g., spot resolution, 1 day, 7 days, 14 days, 1 month, quarterly, annual	Recommendations for system improvement

Note that this form could be replaced by the remote Geo-enabling Initiative for Monitoring and Surveillance (GEMS) monitoring tool.

Annex 9: OHS plans for Construction and Operation phases

a) OHS plan for construction phase

Below is a standard template for the OHS management plan for the construction phase

- Individual responsibility.
- Health and safety committee or representative, establishment and role
- Relevant health and safety legislation and policies
- Safe work procedures.
- Worker orientation.
- Capacity building.
- Workplace inspections.
- Hazard identification, assessment, and control
- Reporting and investigating incidents.
- Emergency planning.
- Medical and first aid.
- Health and safety promotion, including psychological health and prevention of harassment and violence.
- Workplace specific items.
- Review of the health and safety program.

b) OHS plan for O&M Phase

1. Definitions
2. Hazard identification
 - Identification process
 - Chemicals used and generated in the process
 - Chemicals preparation and use
 - Potential hazards
3. Hazard control
 - Selection and Purchasing
 - . Engineering Controls:
 - . Administrative and Work Practice Controls:
 - Personal Protective Equipment (PPE):
 - Storage and Transportation:
4. Emergencies, Spill Procedures, and Exposures/Unintended Contact
 - Key equipment
 - Emergency procedure
 - Exposure response

(Note: For lab injuries/illnesses and potential exposures, please complete a Report Safety Incident form in Workday).
5. Waste
 - Identification
 - Collection and management
 - Capacity building on waste management
6. Training:

All laboratory personnel are required to complete the online EHS Laboratory Safety Training modules initially and annually thereafter and must review the Chemical Hygiene Plan (CHP) and lab-specific training on an annual basis.

7. References