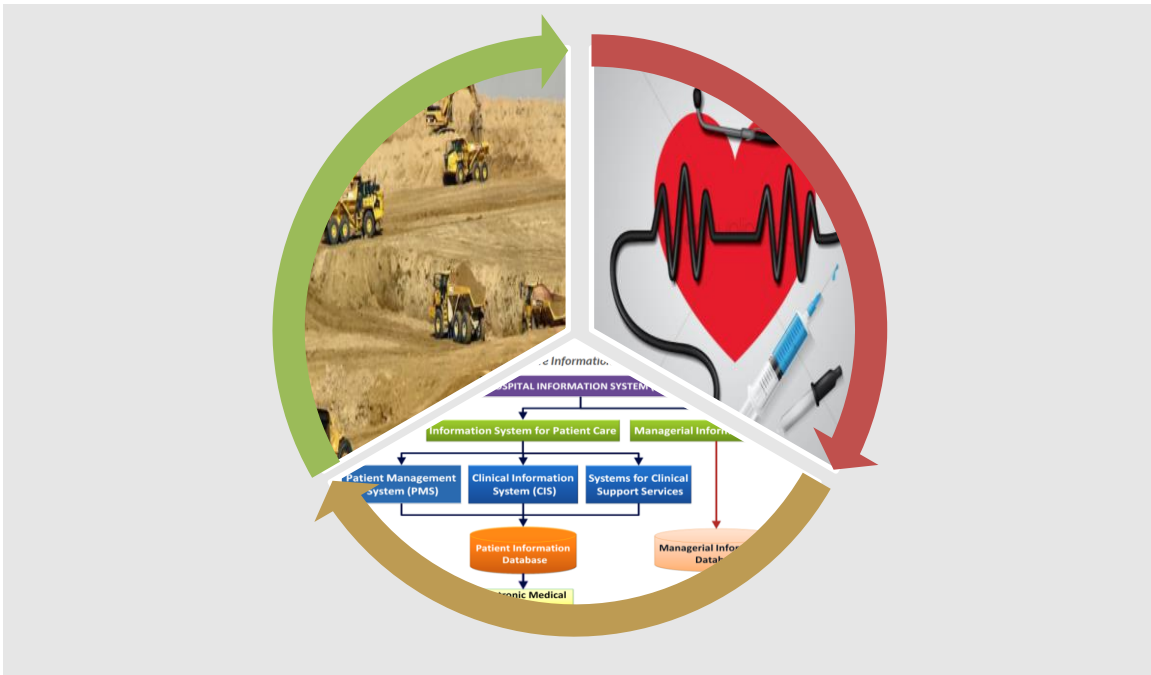


Government of Saint Vincent and the Grenadines

Draft Stakeholder Engagement Plan



Strengthening Health System Resilience Project

JUNE 2022

Acronyms

API	Agency for Public Information
CARPHA	Caribbean Public Health Agency
CBO	Community Based Organization
CWSA	Central Water and Sewage Authority
ESF	Environmental and Social Framework
ESMF	Environment and Social Management Framework
ESS	Environment and Social Standards
GBV	Gender Based Violence
GRM	Grievance Redress Mechanism
GRS	Grievance Redress Service
IPF	Investment Project Financing
ITSD	Information and Telecommunication Service Division
KAP	Knowledge Attitude and Practice
LMP	Labour Management Procedures
NGO	Non-Government Organization
OIP	Other Interested Parties
PAHO	Pan American Health Organization
PAP	Project Affected Parties
PAI	Project Area of Influence
PSIPMU	Public Sector Investment Programme Management Unit
RAP	Resettlement Action Plan
SEP	Stakeholder Engagement Plan
SHSRP	Strengthening Health System Resilience Project
SVG	Saint Vincent and the Grenadines
USD	United States Dollar
VINLEC	Saint Vincent Electricity Services Limited
WB	World Bank
WHO	World Health Organization
XCD	Eastern Caribbean Dollar

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1 Introduction

The Saint Vincent and the Grenadines Strengthening Health System Resilience Project (SHSRP) Stakeholder Engagement Plan (SEP) describes how stakeholders are being engaged and the activities that are planned throughout the construction phase of the project. Stakeholder engagement refers to a process of sharing information and knowledge, seeking to understand the concerns and building relationships based on trust and collaboration.

The purpose of this Stakeholder Engagement Plan (SEP) is to establish the timing and methods of engagement throughout the implementation of the SHSRP. The SEP supports the development of strong, constructive, and responsible relationships with project stakeholders that are important to and integral for the successful management of the project's environmental and social risks.

The SEP identifies project beneficiaries as well as project affected persons (PAPs) and the potential impacts (negative or positive). It also indicates the prospects of useful alliances and helps to identify the probable risks. The Government of Saint Vincent and the Grenadines (GOSVG) and the World Bank (WB) both value stakeholder engagement and stakeholder input at all stages of projects. Stakeholder engagement and input is viewed as integral element to national development as well as an important tool for social inclusion and reducing inequalities in society.

The scope of this SEP seeks to be proportionate to the nature and scale of the project and its potential risks and impacts. The SEP will be updated as necessary throughout the project's life cycle. The stakeholders can be divided into two main categories: Primary stakeholders [beneficiaries or PAPs affected by any project activity] and secondary stakeholders [members of the public, and other institutions with an interest in the resources or project site being considered].

The overall objective of this Stakeholder Engagement Plan (SEP) is to define a program for

stakeholder engagement, including public information disclosure and consultation, throughout the entire project cycle. The SEP outlines the ways in which the Strengthening Health System Resilience Project team (project team) will communicate with stakeholders and includes a mechanism by which people can raise concerns, provide feedback, or make complaints about project and any activities related to the project. The involvement of the all-project beneficiaries and workers is essential to the success of the project(s) in order to ensure smooth collaboration between project staff and local communities and to minimize and mitigate environmental and social risks related to the proposed project activities.

2 Objectives of the Stakeholder Engagement Plan

The Key Objectives of the SEP can be summarized as follows:

- To identify stakeholders and build and maintain a constructive relationship with them, in particular Project Affected Parties (PAPs).
- To assess the level of stakeholder interest and support for the project and to enable stakeholders' views to be taken into account in project design and environmental and social (E&S) performance
- To promote and provide means for effective and inclusive engagement with project-affected parties throughout the project life cycle on issues that could potentially affect them.
- To ensure that appropriate project information on environmental and social risks and impacts is disclosed to stakeholders in a timely, understandable, accessible, and appropriate manner and format.
- To provide project-affected parties with accessible and inclusive means to raise issues and grievances redress mechanism to respond and manage grievances and for the project to respond and manage those.

3 **World Bank Requirements for Stakeholder Engagement- ESS10** *Stakeholder Engagement and Information Disclosure*

The World Bank's Environmental and Social Framework (ESF) came into effect on October 1, 2018. They include 10 standards which guides the Environmental and Social Framework according to Bank Standard. The "Stakeholder Engagement and Information Disclosure" is the tenth standard which recognizes "the importance of open and transparent engagement between the Borrower and project stakeholders as an essential element of good international practice"¹. The Stakeholder Engagement and Information Disclosure Environment and Social Standard (ESS 10) emphasizes that effective stakeholder engagement can significantly improve the environmental and social sustainability of projects, enhance project acceptance, and make a significant contribution to successful project design and implementation.

According to the Bank, the ESS10, stakeholder engagement is an inclusive, two-way engagement process that:

- (a) Begins early in the project planning process to gather initial views on the project proposal and inform project design;
- (b) Encourages stakeholder feedback, particularly as a way of informing project design and engagement by stakeholders in the identification and mitigation of environmental and social risks and impacts;
- (c) Continues on an ongoing basis, as risks and impacts arise;
- (d) Is based on the prior disclosure and dissemination of relevant, transparent, objective, meaningful, and easily accessible information in a time frame that enables meaningful consultations with stakeholders in a culturally appropriate format, in relevant local language(s), and is understandable to stakeholders;
- (e) Considers and responds to feedback;
- (f) Supports active and inclusive engagement with project-affected parties;

¹ The World Bank Environmental and Social Framework

- (g) Is free of external manipulation, interference, coercion, discrimination, and intimidation; and
- (h) Is documented and disclosed by the Borrower.

The Stakeholder Engagement Plan when properly designed and implemented, it supports the development of strong, constructive, and responsive relationships that are important for successful management of a project's environmental and social risks. The SEP advocates that stakeholder views are not only collected and recorded but also there is a proper response from the project implementers and decision-makers and that feedback is taken into account to make improvements in the project design and implementation.

4 Project Description

The project is funded by the World Bank loan of US\$60 Million. It will focus on improving the resilience and capacity of secondary-level hospital facilities to provide high-quality services that can respond effectively to new, emerging, and re-emerging health conditions and public health emergencies, while being buoyant to extreme weather events.

Project Components

The project is comprised of the following four components:

Component 1: Strengthening Hospital Services

This component will finance the development of the modern, safe, and smart Arnos Vale Acute Care Hospital (AVACH) with a service profile that responds to the burden of diseases and manages higher complexity cases. It will look at Hospital Infrastructure Development & Equipment and Hospital Management & Performance.

Component 2: Strengthening Health System resilience

This component will contribute to strengthening the health system's capacity to plan and respond to emergencies and maintain core functions when crises hit; and support the implementation of the NHSSP's vision of redevelopment and modernization of the sector" to improve the quality and sustainability of the health system through technical assistance and capacity building.

This component aims to

- Strengthen health sector policy-making and planning
- Predict disturbance, respond and adjust system
- Sector governance, health financing, service delivery
- Evidence-based decision-making

Component 3: Project Management, Coordination and Evaluation

This component will finance project management, coordination and evaluation activities and capacity building in the areas of contract management, procurement, environment and social safeguards, financial management (FM), and monitoring and evaluation, including project audits.

Component 4: Contingency Emergency Response Component

This is a Zero-cost component aims to provide funding in the event of public health or other national emergencies

5 Stakeholder Identification and Analysis

5.1 Previous Stakeholder Engagement Activities

The table that follows present the technical stakeholder engagement during project preparation.

Table 5.1: Previous Stakeholder Engagement

Date	Facilitators	STAKEHOLDERS	TYPE OF CONSULTATION	MAIN POINTS DISCUSSED	Main Beneficiary comments
16 February, 2022	<ul style="list-style-type: none"> Environmental Safeguard Specialist Nyasha Hamilton Social Safeguard Specialist De-Anna Ralph 	<ul style="list-style-type: none"> Civil Engineer - PS/ Health Director Health Information Health Planner Medical Director Hospital Administrator Environmental health Senior Nursing officer Epidemiologist Deputy Director of Planning 	Technical consultation	<ul style="list-style-type: none"> The hospital design Staffing Waste management plan WB E&S requirements Safeguard awareness Grievance mechanism ESS1-10 	<p>Requested follow-up sessions</p> <p>Timelines for completion of E&S documents</p> <p>Setting up of health working groups</p> <p>Identifying responsible personnel</p>
15 th May, 2022	<ul style="list-style-type: none"> Senior Engineer Cecil Harris Ps/ Health Cuthbert Knights CMO Dr. Keizer Beache Minister of Health St. Clair Prince 	General Public	National Radio Programme	<ul style="list-style-type: none"> The design and construction of the AVACH Hospital Services Overview of Health and the upgrades necessary 	<p>Accessibility to all</p> <p>Useful information</p> <p>Caution about flood zone and drainage</p> <p>Health tourism</p> <p>Movement of the Public Works Building</p>

Date	Facilitators	STAKEHOLDERS	TYPE OF CONSULTATION	MAIN POINTS DISCUSSED	Main Beneficiary comments
19 th May, 2022	<ul style="list-style-type: none"> • Senior Engineer Cecil Harris • Ps/ Health Cuthbert Knights • Hospital Administrator Grace Walters 	<ul style="list-style-type: none"> • Community consultation in Arnos Vale 	In persons consultation with community in the project area of influence	<ul style="list-style-type: none"> • The design and construction of the AVACH • Hospital Services • Overview of Health and the upgrades necessary 	<ul style="list-style-type: none"> • Noise during construction - minimal • Noise from vehicular traffic during operations current noise level high • Patient centred where the measure or focus is not on the building, but the quality of service rendered • Propose hospital zoning to provide the respect necessary to the patients • Maintenance and upkeep capacity of new building reviewing same for current hospital or health care facilities • Environmental health maintenance. • Improving the Care and operation of the current services • Cost and governance what changes would be taken into consideration for an improved care as well as loan repayment and cost of services. • Moving of persons in pole yard, to be considered under the wider Modern city project. • Regional capacity-ability to accommodate patients from the region for care • Preparation and training of personnel to operationalize the AVACH

5.2 Methodology for Identification of Stakeholders

The identification of stakeholders was realized through:

- I. A collaborative approach amongst the relevant sectors, government agencies and users in the project area to identify inputs from key stakeholders, including:
 - Relevant Government Ministries/agencies or departments
 - Relevant NGOs; CBOs – the National Cancer Society as well as the Surgical Association, the Red Cross, the nurses association, SVG Pharmacy association.
 - Research of secondary data

- II. Analyse the Project’s impact on each stakeholder group, their level of interest, influence and importance, in order to identify the level of engagement as well as engagement strategies for each stakeholder group and assign responsibility to team members accordingly.

5.3 Categories of Stakeholders

The stakeholders² fall under in three categories: (i) Project Affected Parties, (ii) Other Interested Parties, and (iii) Vulnerable Groups.

5.4 Project Affected Parties (PAPS):

According to the ESS the term PAP includes those likely to be affected by the project because of actual impacts or potential risk to their physical environment, health, security, cultural practices, well-being, or livelihoods. Affected parties may include individuals, groups, communities, community members and others that may be subject to direct impacts from the Project’s activities.

The PAPs for the AVACH includes the residents of the local communities of Arnos Vale, and Pole Yard: Businesses - Sunrise C. K Greaves Supermarket; Rubis Gas Station, E.T. Joshua Shopping Plaza,; Government Public Works Department; West St. George community: Schools , Temporary Classroom of Saint Vincent Girls High School and the Saint Vincent Grammar School: Security and Traffic: Royal Saint Vincent and the Grenadines Police Force – Traffic Department Church., Arnos Vale Methodist Church: Community group AVESCO.

² Stakeholder refers to individuals or groups who (a) are affected or likely to be affected by the project (project-affected parties) and (b) may have an interest in the project

5.5 Other Interested Parties (OIP):

According to the ESS the term OIP refers to individuals, groups, or organizations with an interest in the project which may be because of the project location, its characteristics, its impacts, or matters related to public interest. For example, these parties may include regulators, government officials, the private sector, the scientific community, academics, unions, women's organization, other civil society organizations, and cultural groups. These Individuals /groups/entities/that may not experience direct impacts from the project but who could potentially influence the project and its outcomes.

The OIPs include - residents of other communities in Saint Vincent and the Grenadines can benefit from possible employment opportunities, business owners of construction material and trucks, ambulant service providers of food and private practitioners of health care services.

5.6 Vulnerable Persons /Groups:

Persons who are disadvantaged may be adversely impacted or further disadvantaged by the project's activity as compared with any other groups due to their socio-economic status, location, physical attributes etc. These could possibly include members of the Pole Yard community, unemployed female, female vendors, youth, persons with disability, and the LGBT community, etc. The vulnerable groups within the Project Area of Influence (PAI) will be further confirmed and consulted throughout the project life cycle.

-

A general list of stakeholders are identified in the table below:

5.7 Stakeholder Identification

Table5-1: Stakeholder Identification 5-2

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
Project AFFECTED PARTIES	Residents of the local communities of Arnos Vale, inclusive of Pole Yard	Persons living in and around the project area of influence	Accessibility to new hospital	Jobs, waste management issues, traffic and other impacts related to construction,	High	High
	Businesses in Arnos Vale Inclusive of Pole yard	Supermarkets: such as Randys, CK Greaves, Massy Gas Station: Rubis; Richardson Shopping Centre: ET Joshua Plaza	More traffic in the area	Increase sales opportunity due to project activities	Medium	Low
	Service sector in Arnos Vale inclusive of Pole Yard	Churches: Hope of Life, Arnos Vale Methodist	Noise and dust from construction	Provide service time to contractor to minimize disruption of church services	Low	Low
		Schools: Temporary classrooms south of the construction	Noise and dust from construction Disruption of school due to construction or traffic	Provide operation time to contractor to minimize disruption of services	Low	Low
	Ministry of Health, Wellness and the	Health Administration	Construction of New Hospital Sector governance,	Strengthen health sector policymaking and planning Development of a Business	High	High

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
	Environment		health financing, service delivery	Plan for the operation of the Hospital		
		Management of MCMH	Transfer of services and resources (physical and Human)	Decrease service, training for targeted interventions.	High	High
		Environmental Health	Pollution, solid waste	Sanitation and Waste management and advisory service for pollution	High	High
		Health Information System (HIS)	Improving Health data and information	Evidence-based decision-making Development of the Health Information System	High	High
		Communication and Wellness	Increase outpatients and new service options	Inform the public Design health and wellness programmes	High	High
OTHER Interested parties	Ministry of Finance Economic Planning and Information Technology	PSIPMU	Project implementation Mobilize resources for socio-economic development, interface with development partners	Fiduciary M&E Environmental safeguard Social Safeguard	High	High
		ITSD	Health Information System	Support to the operationalization of the HIS	High	High

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
	Office of the Prime Minister, Foreign Affairs, National Security, Legal Affairs and Information	Legal Affairs		Legislative framework Training	Medium	Medium
		Agency for Public Information (API)		Communication strategies prepare bulletins to be disseminated via radio, television, print and social media	High	High
		Coast Guard		Transportation of patients from the Grenadines Islands	Low	Low
		Police		Public security and safety	Medium	Medium
		NEMO	Coordinate activities related to pre and post disaster management		Disaster action plan for the AVACH	Low

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
	CWSA	Supplies SVG with pipe borne water and is responsible for sewage and solid waste management	Increase consumption	Monitoring, planning and management of Water resource	Low	High
		Solid Waste Unit	Increase medical waste	Guidance on the Waste Management Plan	Low	High
	Ministry of National Mobilisation, Social Development, Family, Gender Affairs and Local Government	Work with the vulnerable sector of the society	Provide guidance on service delivery for marginalized and vulnerable groups Provide guidance and orientation to Marginalized and Vulnerable groups		Low	High
		Community Division		Mobilize communities for Consultation Livelihood options	High	High
		Gender Affairs	GBV matters	Gender impact Collaborate with resolving GBV	Medium	High

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
	Urban Development, Energy, Airports, seaports, Grenadines Affairs and Local Government	Local Government	Modernization of Arnos Vale		Low	Low
	Ministry of Education	Adult Education Unit		Training	Low	Low
		St. Vincent and the Grenadines Community College (SVGCC)	Desk reviews	Research and knowledge	Low	Low
	Residents on Other Communities in SVG		Access to more option	Increase quality of care	High	High
	Business owners of construction material and trucks;	Suppliers of raw material	Economic gains	Economic and business opportunities by hospital construction	Medium	Low
	Food providers	Ambulant food providers	Providing food to construction workers	Economic and business opportunities by hospital - construction phase and operations phase	Medium	Low
	International Organizations	PAHO		Guidelines and protocols	High	High

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
		WHO			High	High
		CARPHA			High	High
	Local health Organization	National Health and Wellness Commission	Increase services	Improved health intervention	High	Medium
		SVG Cancer Society			High	High
		Surgical Associates			High	High
		Red Cross			Medium	Low
		Private practitioners of health services ³			High	High
		SVG Pharmacy Association			High	High
	Others	NBC Radio 705 Medical assistance programme	Increase medical service	Refocus support to persons needing to travel for medical attention	Medium	Medium
		Mustique Company Ltd Medical Assistance Programme	Increase medical service	Refocus support to persons needing to travel for medical attention	Medium	Medium

³ Please see annex 7

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
	Ministry of Agriculture , Forestry, Fisheries, rural transformation, Industry and labour	Forestry	Green space at the new hospital	Ecosystem restoration; revegetation	Medium	Low
		Labour		Collaboration with the implementation of the Labour Management Procedures (LMP)	High	High
	Ministry of Transport, Works, Lands and Physical Planning	Lands and Surveys		Provide guidelines on geographical boundaries	High	High
		Physical Planning		GIS mapping	Low	Low
Vulnerable Groups	LGBTI community	Equal Rights Access and Opportunities SVG INC. (ERAO)	ERAO might be interested in providing feedback on how the project can ensure inclusive access to health to vulnerable groups, including the LGBTI+ community, women, children, and persons with disabilities.	To provide feedback on creating inclusive infrastructure in hospitals for the LGBTI+ community.	Medium	High

Key SH	Stakeholder (SH)	Description	Interest	Expectations from the SH	Importance of the SH HIGH, medium, low	Influence on the Project Outcome
	Persons with disabilities	National Society of Persons with Disabilities (NSPD).	Interested in participating in the design of inclusive infrastructure (such as accessible entrances, ramps, accessible toilets for persons with physical impairments, inclusive audio-visual mechanisms, etc.).	Incorporate needs into design and operations	High	High
	Women's groups	SVG Women's Association	Important to ensure access to the hospital as well as jobs during construction and implementation	Provide viewpoint on women's health and accessibility consideration for women	Medium	Medium

6 Engagement Programme

6.1 Description of Engagement Methods

Various methods of engagement will be employed as part of the project's interaction with the stakeholders, to ensure that different stakeholder groups are successfully reached and involved in the process of consultation, decision-making and development of Stakeholder Engagement Plan. Stakeholder consultations will be undertaken throughout the life cycle of the Project, they will be accessible to all and will be accompanied by the timely provision of relevant and understandable information.

Information that is communicated in advance of public consultations primarily includes

- an announcement thereof in the national public media – as well as the
- distribution of invitations and full details of the forthcoming meeting,
- a newspaper publication with the project description as well as, email and telephone contact,
- a short video presentation on the project designs and main benefits to be telecast on social media. The information will be widely available, readily accessible, clearly outlined, to ensure that it reaches all areas and segments of the target community.

It must be noted that any consultation activities will follow proper COVID-19 protocols as detailed in the Bank's technical guidance "Public Consultations and Stakeholder Engagement in WB-supported operations when there are constraints on conducting public meetings, (March 20, 2020)" along with national guidelines.

During stakeholder engagement activities, the following principles will be followed:

- a) Advance public notification of an upcoming consultation will be provided:
 - Via publicly accessible locations and channels. The primary means of notification may include mass and social media and the dissemination of flyers/posters in public places.
 - The project team will keep proof of the publication (e.g., a copy of the newspaper announcement) for the accountability and reporting purposes.
 - Targeted invitations to identified stakeholders will be used once stakeholder contact information (telephone or email) is available. Specific attention to NGOs and the businesses in the Project Area of Influence
 - Record meeting (minutes and/or audio recording) and photographing (with authorization of stakeholders).
- b) Methodology of communication will take into consideration (see Table 6.5 for special consideration to vulnerable population):
 - How to best reach people from various literacy levels, as well as persons with disabilities and any other aspects of vulnerability

- Oral communication is most effective via radio or television and through direct calls (in case fixed-line or mobile phone communication is available).
- A consistent day and time is determined for project updates (e.g., every second Tuesday in the month).
- A communication liaison officer is appointed to provide all relevant details, including date, time, location/venue and contact persons.

c) Grievance / project concerns / suggestions / comments

- Provide a suggestion box at project sign board to receive grievances. This can be used by any member of the affected community and general public to provide their written feedback. Provide an email and or telephone number on the notification where the designated personnel can be contacted.
- Provide a register to note grievances and suggestions, which will then be transferred to an excel file.
- Where necessary, a project representative or an appointed consultant should be made available to receive and record any verbal feedback in case some stakeholders experience a difficulty with providing comments in the written form.
- Grievances can also be received via telephone and email (see section on Grievance redress).

d) Beneficiary feedback

At the end of the public meeting, provide evaluation forms to be completed by participants to capture feedback from those who may have refrained from expressing their views or concerns in public. Questions provided in the evaluation form may cover the following aspects:

- Participant's name and affiliation (this information is not mandatory if the participant prefers to keep them confidential)
- How did they learn about the Project and the consultation meeting?
- What is your opinion in the project component?
- Are they generally in favour or disagreement of the Project? Why?
- What are their main concerns or expectations/hopes associated with the Project or the activity discussed at the meeting?
- What do they think the project will bring to their community?
- Is there anything in the Project that they would like to change or improve?
- Do they think that the consultation meeting has been useful in understanding the specific activities of the Project, as well as associated impacts and mitigation measures?
- What aspects of the meeting did they particularly appreciate?
- What aspects of the meeting would they recommend being improved and why?
- Other general comments/questions.

e) Covid-19 consideration

- Make a short video (that can be shared via WhatsApp) to present the objectives of the project and the main risks and benefits

- Share the link of the website where the documents are available with all the stakeholders
- Collect feedback directly over the phone – especially for people without internet access
- Prepare the summary of the comments received and actions taken to address the comments

6.2 Methods and Tools for Engagement

Instrument	Description and Use	Contents	Dissemination Method	Target groups
Means of Disseminating Information				
Flyers Social Media Email Radio Programmes Text blast Posters	Used to convey information on the Project and regular updates on its progress to stakeholders.	Printed materials present illustrative and written information on Project activities, facilities, technologies and design solutions, as well as impact mitigation measures. Presented contents are concise and adapted to a layperson reader. Graphics and pictorials.	Distribution as part of consultation meetings, public hearings, discussions and meetings with stakeholders, as well as household visits in remote areas. Placement at the offices of local administrations and NGOs, libraries and other public venues.	All stakeholders
Training workshops	Capacity building workshops on ESSs	PowerPoint presentations, participatory exercises	Internet and newspaper advertisements Public Service Announcements Email invitations Word-of-mouth invitations through community partners	PAPS, Community stakeholders
Means of Receiving Feedback				
Phone # Email Suggestion box Website Surveys interviews /questionnaires	Avail stakeholders of various channels to request information, make enquiries, or provide feedback on the Project	Project-related issues including ESMF documentation, and environmental and social action plans.	Telephone numbers are specified on the printed materials distributed to Project stakeholders and are mentioned during public meetings. Project's designated staff should be assigned to answer and respond to the calls, and to direct callers to specialist experts or to offer a call-back if a question requires detailed	All stakeholders

Instrument	Description and Use	Contents	Dissemination Method	Target groups
			consideration.	
Types for Community consultation				
Public consultation (in person /virtual) Round table discussion	Project technical staff, the affected public authorities, regulatory bodies and other stakeholders for detailed discussion on a specific activity of the Project.	Topics include: Overview of project activities (Project scope, objectives, rationale, etc.); Grievance redress mechanism; and E&S principles, etc. Presentations and interactive Questions & Answers session with the audience.	Disclosure of Project Documents prior to the meeting. Written and email invitations Word-of-mouth invitations through community partners	PAPs
Extra due Diligence Communication with vulnerable population				
Community consultation Worker groups	Provide information to persons	Detailed information on the activity in a way that it is understandable by stakeholders	Verbal communication Information in braille Brochures to household	Vulnerable population(LGBTQI, elderly, women's groups, persons with disabilities) Workers

6.3 Proposed Strategy for Information Disclosure

The disclosure of the draft and final E&S instruments of the project (Environmental and Social Management Framework (ESMF), Labor Management Procedures (LMP), Stakeholder Engagement Plan (SEP), Environmental and Social Commitment Plan (ESCP) as well as other specific E&S instruments to be developed during implementation) will follow the standard practice of all World Bank Project materials released for disclosure. The Project will take note of comments and suggestions from the public, and will incorporate them, as possible, in the relevant revised project documentation. The stakeholder feedback will also be documented by the project implementation unit in a formal manner and reflected in project documentation.

Electronic copies of the draft and final versions of the ESMF, LMP, SEP, ESCP as well as any subsequent ES risk management instruments, will be placed on the Government SVG website: www.gov.vc. Printed copies of the documents will be available at the Administrative Building of the Ministry of Health. This will allow stakeholders to view information about the planned development and to initiate their involvement in the public consultation process. The website will be equipped with an on-line feedback feature that will enable readers to leave their comments in relation to the disclosed materials. The project team responds to feedback and reflects the summary of the feedback received through this online feature as part of reporting on environment and social risk management. The project team will use this feedback to help improve the project design and activities.

For consultations, general information to be provided to stakeholders include: (a) purpose, nature, and scale of the project; (b) duration of proposed project activities; (c) potential risks and impacts of the project on local communities, and the proposals for mitigating these risks, (d) highlight potential risks and impacts that might disproportionately affect vulnerable and disadvantaged groups, and describing the differentiated measures taken to avoid and minimize these risks; (e) proposed stakeholder engagement process; (e) time and venue of any proposed public consultation meetings, and the process by which meetings will be notified, summarized, and reported; and (f) the function of the grievance redress mechanism. As detailed above, the project will take note of comments and suggestions from the public, and will incorporate them, as possible, in the relevant revised project documentation.

Table :Communication of project document

Project stage	Engagement Activity	Information to be shared	Targeted Stakeholders	Method and Timing of Disclosure	Responsibilities
Identification	Technical working group	Project concept	Cabinet	Presentation	Ministry of Health, Environment and Wellness
Preparation	World Bank Instrument for project appraisal	<ul style="list-style-type: none"> • Project description • Components • Potential risks and impacts • Grievance mechanism • Stakeholder engagement plan • ESCP • LMP 	Ministry of Health	Presentation Flyers Document outlines	Safeguard Team- Economic Planning
Appraisal		<ul style="list-style-type: none"> • Grievance mechanism • Stakeholder engagement plan • ESCP 			PSIPMU
Implementation		Stakeholder Engagement Labour Management Procedures <ul style="list-style-type: none"> • GRM 			PSIPMU and Ministry of Health
Completion and evaluation	National consultation	Update on project development			Ministry of Health

6.4 Stakeholder Engagement Plan

The mechanisms which will be used for facilitating input from stakeholders will be various as previously mentioned in this document and will include press releases and announcements in the media, notifications of the aforementioned disclosed materials to local, regional and national NGOs as well as other interested parties. Mechanism to facilitate input from stakeholders include online feedback channels, feedback surveys provided after public consultation meetings to capture the views of those that were reluctant to speak out publicly, grievance redress mechanisms, etc.

The SEP is a living document and will be updated as required during the project life cycle, with for example, further details around stakeholder engagement activities and will seek to ensure that engagement methods and tools are effective, especially in encouraging informed participation from the vulnerable and disadvantage groups. The table that follows displays the information disclosure strategy:

6.5 Planned Stakeholder Engagement Activities

The implementation schedule is intended to capture all the major activities of this project ranging from the preparation stage through to the implementation of the project. Table below is the implementation schedule relating to this project:

Table 6-1: *Implementation Schedule*

	Task	Target audience	2022												2023												2024			Responsible Agency (bo
			apri	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar				
1.	Project presentation	General public	x		X		x		x				x						x										Ministry of Health	
2.	Review Stakeholder Engagement Plan	Internal	x										x															PSIPMU		
3.	Monitor Grievance Redress Mechanism	Stakeholders Workers	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	Social Safeguard		
4.	Disclosure of SEP	General Public	x																								Safeguard Team			
5.	Consultations with information sharing	Project Affected persons		x							X					X						X		X		x	Safeguard Team			
6.	Technical Working Groups	Health Administration	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	Ministry of Health PSIPMU			
7.	Beneficiary feedback Mechanism	Project Affected Persons		X			x				x								x					x		PSIPMU				
8.	Public relations (Ongoing)	General Public	x	x	x		x				x								x					x		Health Information and Communication				
9.	Monitoring (Ongoing)	Stakeholders																								PSIPMU				
10.	Construction	Consulting firm																								PSIPMU				

6.6 Proposed Strategy to Incorporate the Views of Vulnerable Groups

While some vulnerable groups have been included in the SEP, any additional groups will be identified throughout the consultation process. The project will apply some measures to remove obstacles to their participation, identified in Table 4 below.

Table 4: Consideration for full participation

TARGET GROUP	Factors	Consideration	Mitigation measures	Organization
Persons With Different Abilities	Language	If the person is hearing/vision impaired	Translate information using sign language, or braille or pictorial depending on the disability	National Society of and for the Blind National Disability Association Ministry of National Mobilization
Working Population	Time	Socio-economic status might determine availability of time	Advance notice for community meeting 2 weeks minimum	Check for most convenient time
Single Parents	Caregiving service	Persons not available because they need a caregiver for children or elderly parents and the persons contribution is essential to the meeting	(a) Provide caregiving service for the hours required or, (b) Arrange to have a televised recording of the persons contribution	Child centres in proximity to the meeting centre or the villages where participants are attending
Persons From Various Constituency	Transportation To Onsite Presentation	Person may need transportation before and after the meeting	(a) Monetary allocation to reimburse participants or (b) Provide transportation from different districts	Ministry of Transport Taxi association Minibus association Online options
All	Meal	Participants may need food and beverage if consultation takes more than 3 hours.	(a) Light refreshment included water or, (b) Monetary allocation to provide light refreshment or meals for participants	Use meal providers from the project community
All	Location	Participants may be unable to reach the location of the consultations.	Offer the possibility of participating virtually	Virtual meetings
Vulnerable Groups	Individual interviews and/ group consultation	Participants may be intimidated to participate in group setting or with other more dominant persons of the community A group may have an interest in understanding the project components	Ensure personal security in the selection of venue	Virtual meetings Individual meeting in public spaces

6.6 Documenting Stakeholder Feedback

Feedback from stakeholders will be solicited at every stage of the project life cycle. Public meetings, workshops, focus groups, comments will be recorded through meeting minutes. Additionally, the Social Specialist at the PIU will be responsible for receiving and recording any queries, concerns or complaints about the project. Comments and decisions regarding the feedback will be collated and reported back to stakeholders once the final decision on the course of action has been made. Records will also be maintained on the methods used to inform stakeholders on dates and/or locations where they can gather project information and provide feedback.

In addition, stakeholders will be allowed to file complaints about the project through the Grievance Redress Mechanism detailed in a later section of this plan. All records relating to this mechanism including, grievance forms, grievance log, notes, interviews, meeting minutes, release forms etc. will also be stored.

a) Documentation of Stakeholder Engagement

Documentation of stakeholder engagement should be published in a timely fashion in relevant local languages through channels that are accessible to stakeholders. This documentation includes the following, as appropriate:

- I. Date and location of each meeting, with copy of the notification to stakeholders;
- II. The purpose of the engagement (for example, to inform stakeholders of an intended project or to gather their views on potential environmental and social impacts of an intended project);
- III. The form of engagement and consultation (for example, face-to-face meetings such as town halls or workshops, focus groups, written consultations, online consultations);
- IV. Number of participants and categories of participants;
- V. A list of relevant documentation disclosed to participants;
- VI. Summary of main points and concerns raised by stakeholders;
- VII. Summary of how stakeholder concerns were responded to and taken into account; and
- VIII. Issues and activities that require follow-up actions, including clarifying how stakeholders are informed of decisions.

7 Resources and Responsibilities for Implementing Stakeholder Engagement Activities

The table below provides the details on the roles and responsibilities for the implementation of the SEP:

Responsible Person/Agency	Responsibilities
Project Coordinator	<ul style="list-style-type: none"> Has the overall responsibility for oversight of managing, updating and executing the SEP Responsible for approving the SEP, including the annual budget required for implementation Supervise the grievance log Prepare the biannual report on SEP implementation and submit to the Bank
Communication Officer	<ul style="list-style-type: none"> Manage interactions with key national-level stakeholders such as media, critical NGOs
Social Specialist	<ul style="list-style-type: none"> Interface with stakeholders and respond to comments or questions about the project or consultation process publicize the SEP, including the GRM. Document interactions with stakeholders Maintain records and document stakeholder engagement activities as set forth in the SEP. Coordinate public meetings, workshops, group discussions Provide resolutions of all grievances related to the project according to the established Grievance Mechanism Conduct outreach (?), manage and monitor the GRM Prepare inputs for the annual report on SEP implementation, including GRM On site visits and consultations.

7.1 Contact Details Until Project Implementation

Prior to project implementation, the following persons may be reached by stakeholders with any questions, concerns and recommendations, regarding the project.

Name	Title	TELEPHONE	EMAIL ADDRESS	PHYSICAL LOCATION
Ps. Knights	Permanent Secretary Ministry of Health, Wellness and the Environment	4572586	mohesvg@gov.vc/ mohesvg@gmail.com	Back Street Kingstown
Dr. Simone Keizer	Chief Medical Officer	4572586	mohesvg@gmail.com mohesvg@gov.vc	Back Street Kingstown
R. Frederick	Director of Economic Planning	4571746	cenplan@svgcpd.com	1 st Floor, Administrative Building,

Name	Title	TELEPHONE	EMAIL ADDRESS	PHYSICAL LOCATION
				Kingstown
M. Edwards-John	Deputy - Director of Economic Planning	4571746	cenplan@svgcpd.com	1 st Floor, Administrative Building, Kingstown
N. Hamilton	Environmental Specialist	4571746	cenplan@svgcpd.com	2 nd Floor, Administrative Building, Kingstown
D. Ralph	Social Specialist	4571746	cenplan@svgcpd.com	2 nd Floor, Administrative Building, Kingstown

7.2 Estimated Budget for SEP

The implementation of the SEP will be funded as part of the overall project management cost. The table below presents an indicative budget for the implementation of the SEP (XCD \$100,000). This estimate covers the Planning and Pre-Construction as well as construction phase. The PSIPMU will review this plan every year to determine if any changes to stakeholder classification or engagement are required.

7.3 Proposed Budget

Activity	Quantity	Unit	Total
Public consultations (inclusive of venue and PA system)	10	1000.00	10,000
Information production and dissemination	1500	20.00	30,000
Advertisement (newspaper, social media, internet, radio)	50	600.00	30,000
Refreshment (50 persons at each consultation at XCD 30) 6 (per year)	6	1,500.00	9,000
Miscellaneous (transportation, child care)			20,000
			100,000

It must be noted that this budget is annually and will be updated throughout the project life cycle as needed.

7.4 Monitoring and Reporting

The PSIPMU will monitor and evaluate the implementation of the Strengthening Health System Resilience Project. The SEP will be revised and updated as necessary during project implementation. The E&S Specialist will prepare the Quarterly Reports on stakeholder engagement activities, including the GRM, which he/she will submit to the Project Manager who will in turn submit it officially to the World Bank as part of the semi-annual reporting requirement.

Reporting back to stakeholder groups

The information of the results of the participation activities will be available and will be shared with the interested parties in different ways:

- i. Project Information Sheet
- ii. Bi-annual bulletins of the activities and results of the Project.
- iii. Information products through the project's social media networks
- iv. Quarterly reports of project activities which will include the GRM report
- v. Monitoring dashboard

These informative products will be distributed by different means: email to established lists of interested parties, quarterly information of the Project, press releases with the milestones of the Project (which will be sent to all local media), periodic radio caps and interviews with stakeholders on the local radio and television stations.

On the government web page, a tab will be enabled to publish the project information.

8 Grievance Mechanism

8.1 Definition:

A Grievance Redress Mechanism (GRM) refers to methods and processes by which a redressal to a grievance is sought and provided. The GRM can be designed specifically and separately for a project or built on existing institutions and processes, whether they are formal or informal. GRMs are designed to benefit both the project and the project-affected persons (PAPs).

A grievance refers to an issue, concern, problem, or claim, whether actual or perceived, that affects individuals and communities' physical, social, and economic conditions in the project area of influence. They can occur at different stages of the project cycle. The project activity often determines the nature of the grievance.

Grievances can occur at various stages in the project cycle:

- Inception – these are complaints about the perceived macro impact (social, economic, environmental) of the Project
- Implementation – these are complaints about the micro context of the Project emerging from its specific activities, for example, complaints related to construction noise or dust, displacement or land acquisition, compensation etc.
- Close – these are complaints about the non-fulfilment of project activities.

The World Bank's Environmental and Social Standards (ESS) requires persons affected by the Project (PAP) to be meaningfully consulted and to have opportunities to participate in planning and implementing the program. ESS 2 [Labour and Working Conditions], ESS5 [Land Acquisition, Restrictions on Land Use and Involuntary Resettlement]; and ESS 10 [Stakeholder Engagement and Information disclosure] recommends a Grievance Redress Mechanism (GRM) to be created in order to address all concerns of the PAPs. There is a separate GRM for project workers (ESS2), explained under the Labor Management Procedures (LMP). The GRM is an effective tool for early identification, assessment and resolution of complaints. The Government of St. Vincent and the Grenadines recognizes a GRM as an integral tool in the development process. In the country's National Economic and Social Development Plan (2013-2025), goal three (3) promotes good governance and increases the effectiveness of public administration: outcome, 3.3 solicits avenues to educate the public about their legal rights and avenues for redress.

GRM provides the residents of Saint Vincent the Grenadines an opportunity to voice their complaints or concerns and clarify and resolve misconceptions about the project activities. It provides a simple, transparent, and timely tool to express their opinion or grievance related to project activities execution.

8.2 Objectives of the GRM

In order to ensure the implementation of the Project in a timely manner and effectively address any anticipated and unanticipated concerns and grievances that would be encountered during project preparation and implementation, a Grievance Redressal Mechanism (GRM) was developed. The GRM aims to effectively and timely address all relevant grievances to minimize or eliminate negative impacts of the Project on affected persons. In satisfying its aim, the GRM will ensure that grievances are identified early and that the redress mechanisms are appropriate and expeditious, ultimately preventing escalation or un-manageable circumstances. The GRM can also help to minimize or eliminate conflicts, which have the potential to compromise reaching the project development objectives.

The GRM will enable the Project Authorities to address any grievances against the Project. It must be noted that this GRM covers grievances that relate to any negative impacts that the Project might have on its stakeholders, as listed in the Stakeholder Engagement Plan.

In summary, the objectives of the Grievance Redress Mechanism are as follows:

1. Ensuring that the Government of Saint Vincent and Grenadines' regulations and the World Bank's Environmental and Social Standards are adhered to in all project activities;
2. Addressing any negative environmental and social impacts of all sub-projects and activities;
3. Resolving all grievances emanating from the project activities in a timely manner;
4. Establishing relationships of trust between project staff and Grievance Officer;
5. Creating transparency between grievance parties

8.3 Types of Grievances

Aggrieved persons can file different types of complaints depending on the specific issue

or concern, including labour⁴, (there is a separate grievance registration for labour related grievances), service provision, environmental impact, social impact, health and safety, or project execution. The figure below provides an outline of some of the grievances for this Project.

These may include but are not limited to the following categories:



All grievances will be classified to ascertain the level of impact to determine the type of intervention. The complaints will be ranked on a 4 level grading; level one (low), level 2 (moderate), level 3 (substantial) and level 4 (high) see [Processing of Grievance](#).

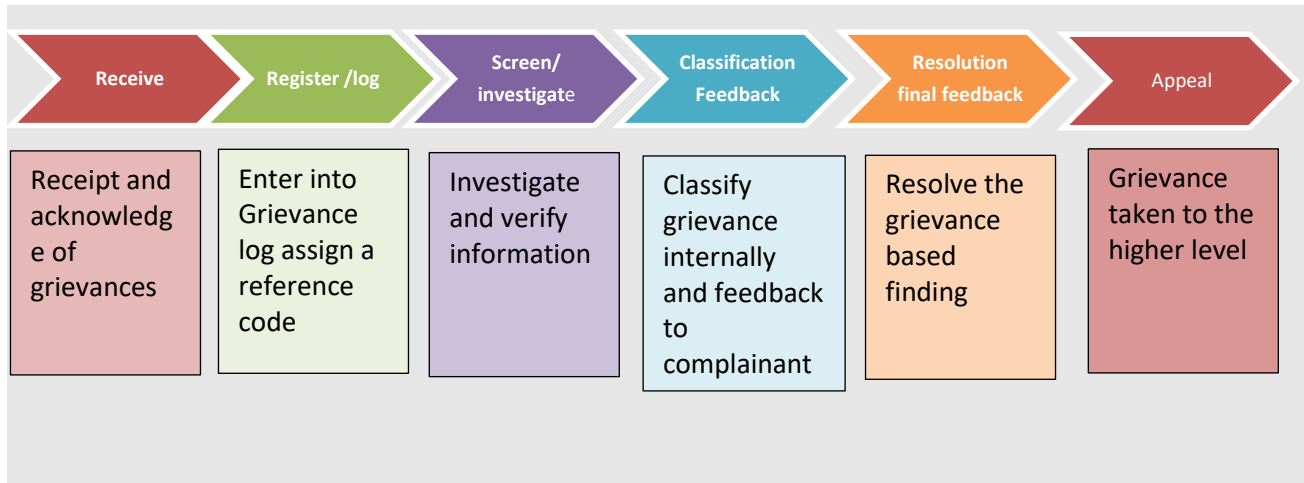
Grievances can be lodged anonymously, orally or in written form by the Project Affected Persons (PAPs). In establishing the GRM, the public, especially persons living in the project area, must be informed about the project activities, where they can lodge their concerns, who will be responsible for the appropriate redress and the timeframe of the responses.

⁴ Workers’ Grievance Mechanism is part of the Labour Management Procedure (LMP). Some of the worker-related grievances could be considered as complaints to be addressed under the procurement’s grievance mechanism, and if it is related to contractual issues: e.g., Vacation leave/sick/maternity/family leave/special leave/termination.

8.4 Processing of Grievance

The structure of the GRM is as follows:

Figure 1: Diagram of Processing Grievance



I. Receive Grievance

The Project Coordinator (PC) should receive all grievances. At the national consultation, stakeholders will be informed of various avenues through which the grievance redress mechanism can be accessed.

Mode of receiving grievances

Complaints can be made in person, anonymously, in writing, verbally over the phone, by fax, emails or any other media.

Sample Notification to the public on mediums through which grievances can be submitted

Email: cenplan@svgcpd.com

Telephone: 784-457-1746

By letter: The Project Coordinator
Strengthening Health System Resilience Project
Ministry of Finance, Economic Planning and Information Technology
Bay Street
Kingstown

The information contained in the sample notification will be placed at strategic points at the project site. A separate receptacle will be used to collect employees' grievance.

II. Acknowledge Grievance

All grievances will be acknowledged by telephone or in writing by the PC using the Grievance Acknowledgment Form (Annex 1) within 48 hours of receipt. The complainant will be informed of the approximate timeline for addressing the complaint if it cannot be immediately addressed. The PC will work with the safeguards team to ensure the speedy resolution of the grievance. If the complaint cannot be resolved at this level, it is taken to the next level.

III. Register/Log

After receiving and recording the grievance on the Grievance Intake Form (GIF) GIF, it will be registered in the Grievance Redressal Registration log as attached in Annex 3 of this document. [Separate registration for labour and other general project grievances].

Table 8-1: Contact Information

Name	Title	Phone	Email	Physical Address
Nyasha Hamilton	Interim Project Coordinator	4571746	cenplan@svgcpd.com	
	Environmental Safeguard Focal Point	4571746	nhamilton@svgcpd.com cenplan@svgcpd.com	Financial Complex Bay Street Kingstown
De-Anna Ralph	Social Safeguard Focal Point	4571746	dralph@svgcpd.com cenplan@svgcpd.com	Financial Complex Bay Street Kingstown

IV. Screen

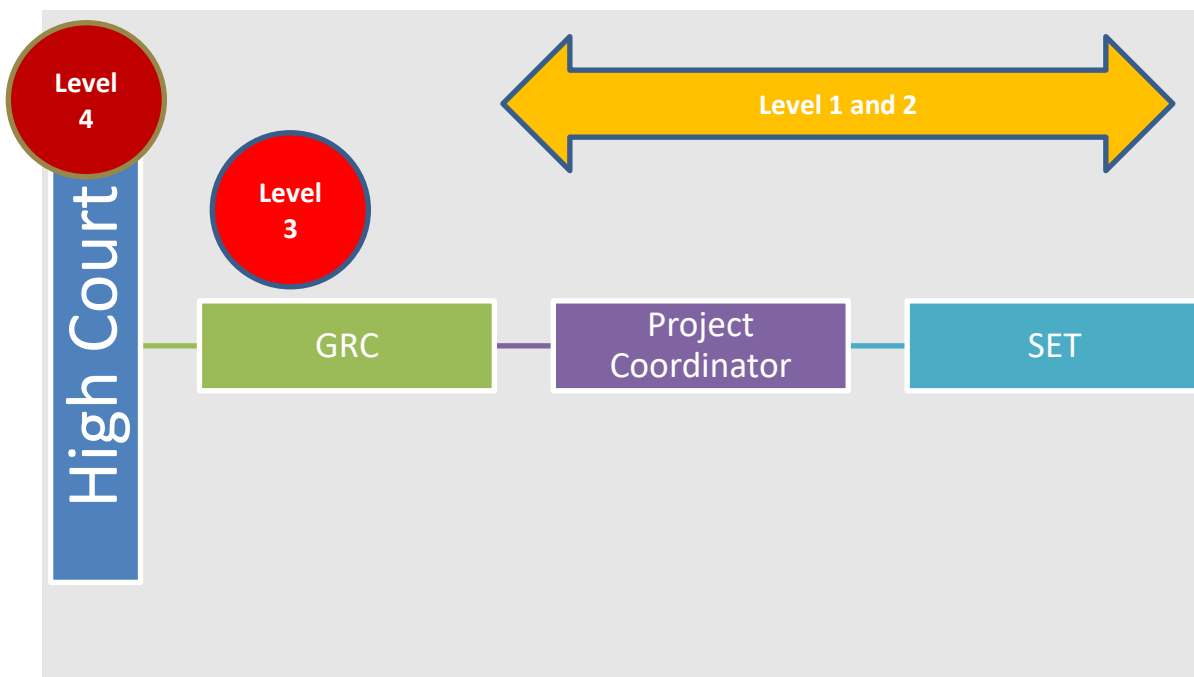
The Project Coordinator reviews the complaint, classifies it, and assigns a grievance officer. The complaint will be forwarded to the Safeguard Team responsible for investigating the claim and liaising with both the aggrieved party and project technical team to reach a mutually acceptable resolution. The complainant will be given a specific timeline for resolving the claim. Meetings with the grievant/complainant will be held, if necessary, in an attempt to resolve the matter. All meetings must be recorded.

V. Investigate

The grievance officer will investigate the complaint. This investigation will include but is not limited to meetings with the complainant, site visits, meetings and/or interviews with project staff and collection of relevant documentation and other forms of evidence. For meetings, the deliberations and decisions will be recorded on the Meeting Record Form included as Annex 4. Community representatives or representatives of the complainant will be allowed to sit in on these meetings.

- VI. Classification of Grievance (see levels of Grievance)**
- Level 1 When an answer can be provided immediately and/or the safeguards team is already working on a resolution.
 - Level 2 One-off event, a member of the SET Team & Project Coordinator, can provide a resolution
 - Level 3 If the complaint is repeated or if it's a high-profile grievance that, if not resolved promptly, may represent significant risks to the environment or community, the Grievance Redress Committee (see GRM committee 8.5) will address it. Additionally, the Grievance Redress Committee would address any complaint that indicates a breach of law or applicable policy/regulation.
 - Level 4 The Court of Law - Violations of rights, Gender-Based Violence (GBV), all grievances that the Grievance Redress Committee cannot resolve.

Figure 2: Diagram of Levels of Grievance



VII. Resolution

The resolution at the first tier should generally be completed within fifteen (15) working

days of receiving the grievance and notified to the concerned party through the Disclosure Form.

If the grievance is not being resolved within this period, it can be referred to the Grievance Redressal System's next level. However, once it is determined that progress is being made towards a resolution, the grievance will be retained at this first level. The complainant will be informed of this decision, and an estimated time for the resolution of the matter will be given either verbally or in writing. If the issue cannot be resolved within twenty-five (25) working days, it will be transferred to the next level. Once a resolution has been agreed and accepted, the complainant's acceptance will be obtained on the Disclosure Form. If the proposed resolution is not accepted, the grievance will be escalated to level 2.

The complainant will be informed in writing of the measures taken to address the grievance by the Project Manager or the Social Specialist if the complaint is against the Project Manager.

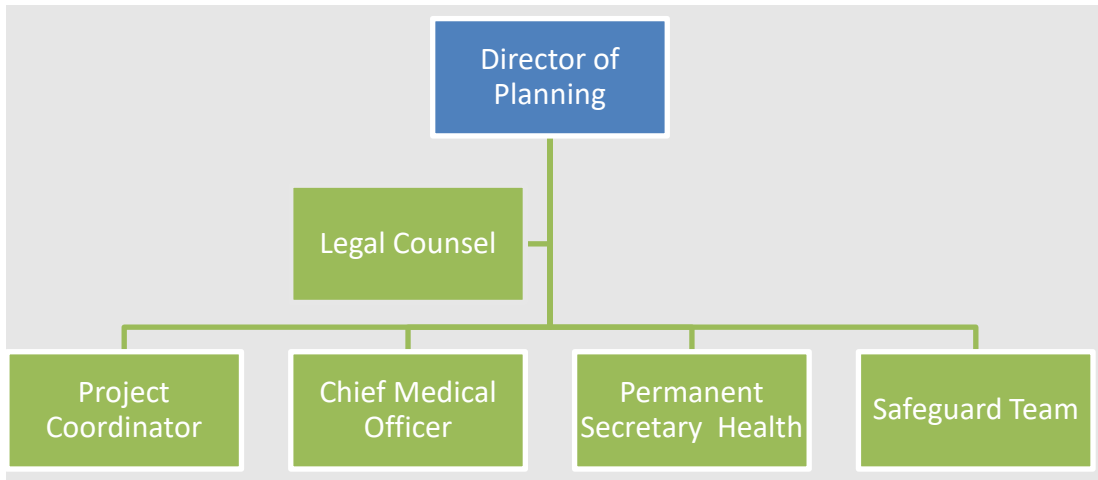
GRM Timeframe

Step	Process	Timeframe
1	Receive grievance & log	Within 1 day
2	Acknowledge grievance	Within 1 day
3	Screen	Within 1 day
4	Investigate/resolve Tier1 complaints	Within 10-15 days
5	Resolution	Within 25 days
6	GRC	Within 30 days
7	Close grievance	

8.5 The Grievances Redress Committee

The Grievance Redress committee would be headed by the Director of Planning. The other members of the Redress Committee includes: the Project Coordinator, Permanent Secretary Ministry of Health, Chief Medical Officer, Government Legal counsel for OECS Health Project, officers from the environmental and social development team. Other officers may be required if there is land acquisition issues, destruction of property or crops etc.

Figure 3: Composition of Grievance Redress Committee



8.6 Roles of Members of the GRC

The role of the members of the GRC is outlined below:

Director of Planning	<ul style="list-style-type: none"> •Responsible for the overall decision of the committee
Legal Counsel	<ul style="list-style-type: none"> •Provide guidance as it relates to the Law of the Country and the Rights of the Citizens
Project Coordinator	<ul style="list-style-type: none"> •Provide information regarding the project activity affecting the PAP
Permanent Secretary Health	<ul style="list-style-type: none"> •provide overall direction and guidance on the project
Chief Medical Officer	<ul style="list-style-type: none"> •provides status information and clarification regarding the nature of the project activity .
Safeguard Team	<ul style="list-style-type: none"> •Liaison for the PAP , represent the Best interest of the PAP , ensure World Bank Guidelines are followed. provides explanation for compensation to the PAP, monitor , provides guidance regarding best options to minimize adverse effects from the project

8.7 World Bank Grievance Redressal Service (GRS)

The Grievance Redress Service (GRS) is an avenue for individuals and communities to submit complaints directly to the World Bank if they believe that a World Bank-supported project has or is likely to have adverse effects on them, their community, or their environment. The World Bank GRS can be found at the following URL link:

<https://www.worldbank.org/en/projects-operations/products-and-services/grievance-redress-service>

Complaints must be completed in writing and addressed to the GRS. They can be submitted using the following methods:

1. Online, by completing the online form:
<https://pubdocs.worldbank.org/en/743201426857500569/Grievance-Redress-Service-GRS-complaint-form.docx>
2. By email to grievances@worldbank.org
3. By letter or by hand delivery to the World Bank Headquarters in Washington D.C., United States or any World Bank Country Office- printing and using this form:
<https://pubdocs.worldbank.org/en/743201426857500569/Grievance-Redress-Service-GRS-complaint-form.docx>

It must be noted that although the complainant has the right to access this service as any time, this GRS should ideally only be accessed once the project's grievance mechanism has first been utilized without an acceptable resolution.

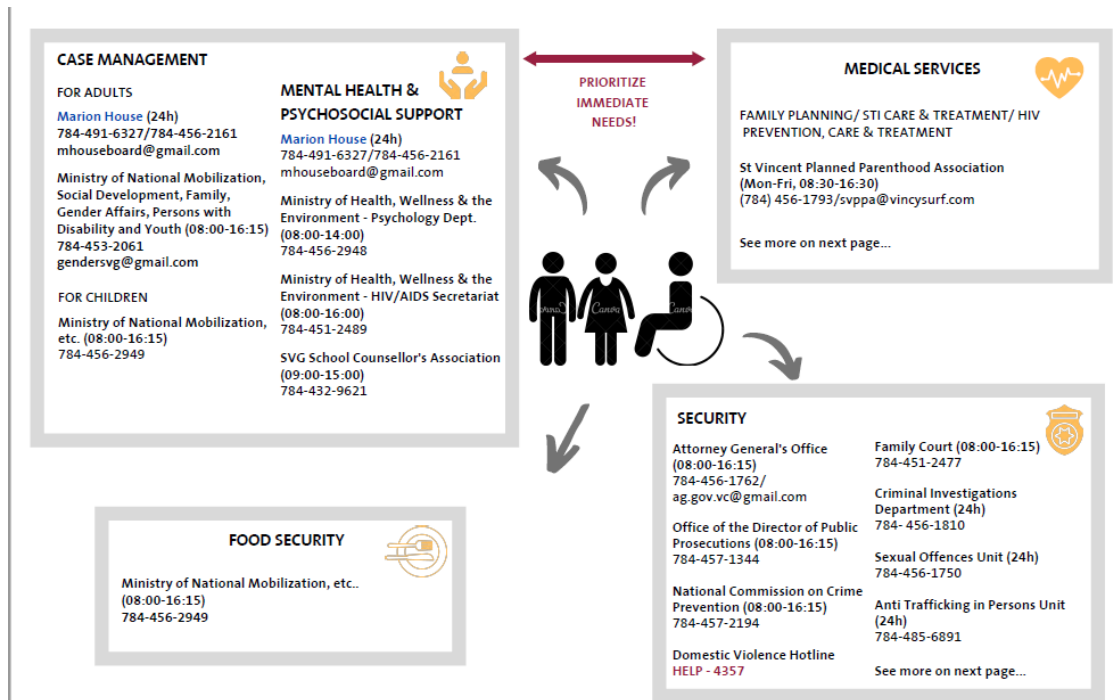
8.8 Addressing Harassment and Gender-Based Violence (GBV)

The SET team will specify the individual responsible for dealing with any GBV issues should they arise. The manifestation of GBV include, but is not limited to:

- Physical violence (such as slapping, kicking, hitting, or the use of weapons);
- Emotional abuse (such as systematic humiliation, controlling behaviour, degrading treatment, insults, and threats);
- Sexual violence, which includes any form of non-consensual sexual contact, including rape;
 - sending inappropriate videos or pictures with co-workers
 - making sexual or lewd comments
 - inappropriate and unwanted sexual advances or gestures
 - making comments about body parts, clothing, or appearance in a sexual manner
 - inappropriately making physical contact with another person
 - asking a co-worker about their sexual orientation/history, etc.
 - making comments about someone's gender identity or sexual orientation
 - being offered an employment benefit in exchange for a sexual favour
- Economic abuse and the denial of resources, services, and opportunities (such as restricting access to financial, health, educational, or other resources to control or subjugate a person);

The following are a list of GBV service providers;

- (i) Marion House
- (ii) Gender Affairs Department
- (iii) Please see [GBV referral pathway for SVG](#)



Source: GBV Referral Pathway- St. Vincent and the Grenadines

If any GBV related incident occurs, it will be reported through the GRM, as appropriate and keeping the survivor information confidential. The Project Manager and the Social Specialist should assist GBV survivors by referring them to GBV Services Provider(s) for support immediately after receiving a complaint directly from a survivor.

Specifically, the GRM will only record the following information related to the GBV complaint:

- The nature of the complaint (what the complainant says in her/his own words without direct questioning);
- If, to the best of their knowledge, the perpetrator was associated with the project; and,
- If possible, the age and sex of the survivor.

Any cases of GBV brought through the GRM will be documented but remain closed/sealed to maintain the confidentiality of the survivor. Here, the GRM will

primarily serve to:

- Refer complainants to the GBV Services Provider; and
- Record the resolution of the complaint

The GRM will also immediately notify both the Implementing Agency and the World Bank of any GBV complaints **WITH THE CONSENT OF THE SURVIVOR**.

8.9 Building Grievance Redress Mechanism Awareness

The Project Manager or Social Specialist will initially brief all project staff, including consultants, on the Grievance Redressal Mechanism of the Project and explain to them the procedures and formats to be used including the reporting procedures. The communication specialist would provide the relevant information to the public about the project as well as the GRM

The Project Manager or Social Specialist will also brief all project stakeholders on the GRM of the project and explain the procedures and formats to be used, including reporting procedures. Awareness campaigns would be conducted targeting project stakeholders to inform them on the availability of the mechanism; various mediums will be used- as detailed in previous sections of the SEP. The GRM will also be published on the Government websites and/or Facebook page. Contact information for the GRM will be posted/disseminated within beneficiary communities.

8.10 Notification About GRM

The following stakeholders will be notified of the GRM as specified herein.

(a) Contractors /consultants /Project coordinator /project personnel

At an inception meeting with the consultant, the Social Safeguards Officer will explain the operation of the GRM, the other Environmental and Social Safeguard Standards of the World Bank, and an awareness of the handling and monitoring of GBV.

(b) General public

During the project launch, notification about the project development should be given in collaboration with the Communication Specialist:-

- I. On radio via the public service information
- II. Flyer distribution in the project area of influence, and,

(c) Workers

On the signpost at the project site, or on Project posters or communication documentation or wherever project activities are being realized, a notification will be displayed with information on where to direct all grievances. The notification would state:

-

Notification to the Public as to how to submit a grievance

All grievances relating to the development of this project are to be directed to:

Project Coordinator

Health System Resilience Project

Ministry of Finance, Economic
Planning, and Information
Technology

First Floor Administrative
Building, Kingstown

Telephone: 784-457-1746

WhatsApp 784 494 3000

Email - cenplan@svgcpd.com
svgavach@gmail.com

8.11 Monitoring and Reporting

The E&S Specialists will prepare the 6-month (bi-annual) reports on the GRM, including any grievances addressed by the Grievance Redress Committee. The GRC may review the nature of grievances that have been represented and if grievances are repeated, recommend suitable changes. The 6-month (bi-annual) report will be submitted to the Bank as part of the Project reporting.

All accidents, injuries, harassment or non-compliance to Safeguards should be reported to the WB safeguard team within 48 hours .

9 Annex

9.1 REGISTRATION OF A GRIEVANCE

Level of grievance: _____

Grievance No.: _____

Please use capitals: (Note that using your full name is optional)

Name: _____

Contact No: _____

Address: _____

E-mail Address: _____

National ID No: _____

NIS Number: _____

Gender: _____

Name of Project Site:

As per the ESMF of the Project, Grievance Redressal, I register my grievance as detailed:

"Details of Grievance"

(a) Outline reasons why and how you are affected by the Project. (overleaf if necessary)

(b) If land or other properties are being affected e.g. (agriculture), include copies of relevant documentations you have to support your claim.

List documents: attach copies

(a) _____ (b) _____
(c) _____ (d) _____

Undertaking: I hereby certify that statements made in my Grievance and documentation enclosed are true and complete to the best of my knowledge. If at any time any part of the Grievance or the documentation is found to be false, I will be liable for any legal action that the Government of St. Vincent and the Grenadines may deem necessary.

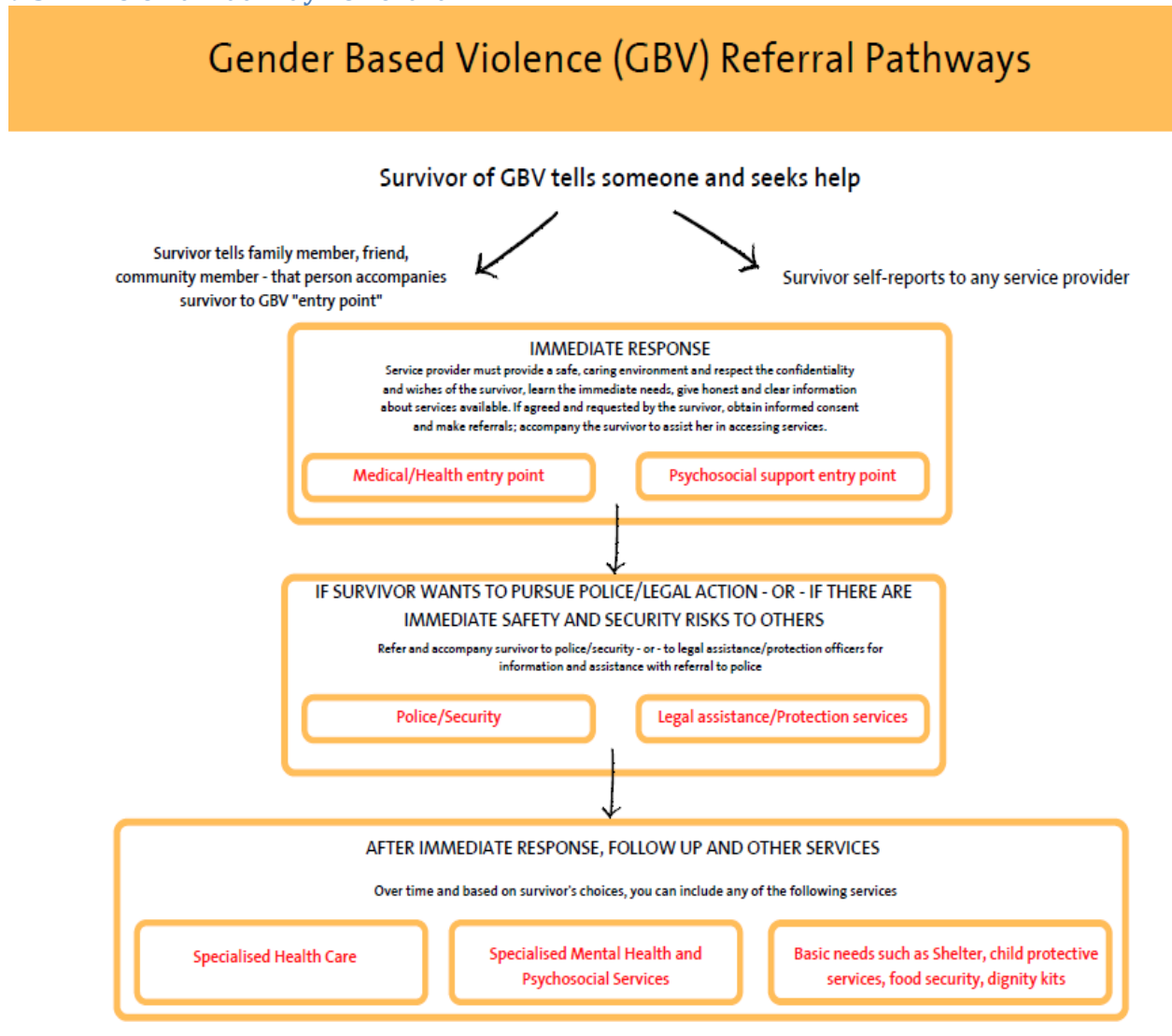
Date: _____ (Signature of aggrieved person) _____

Name of recording Officer: _____ (Signature) _____
_____ (Please print)

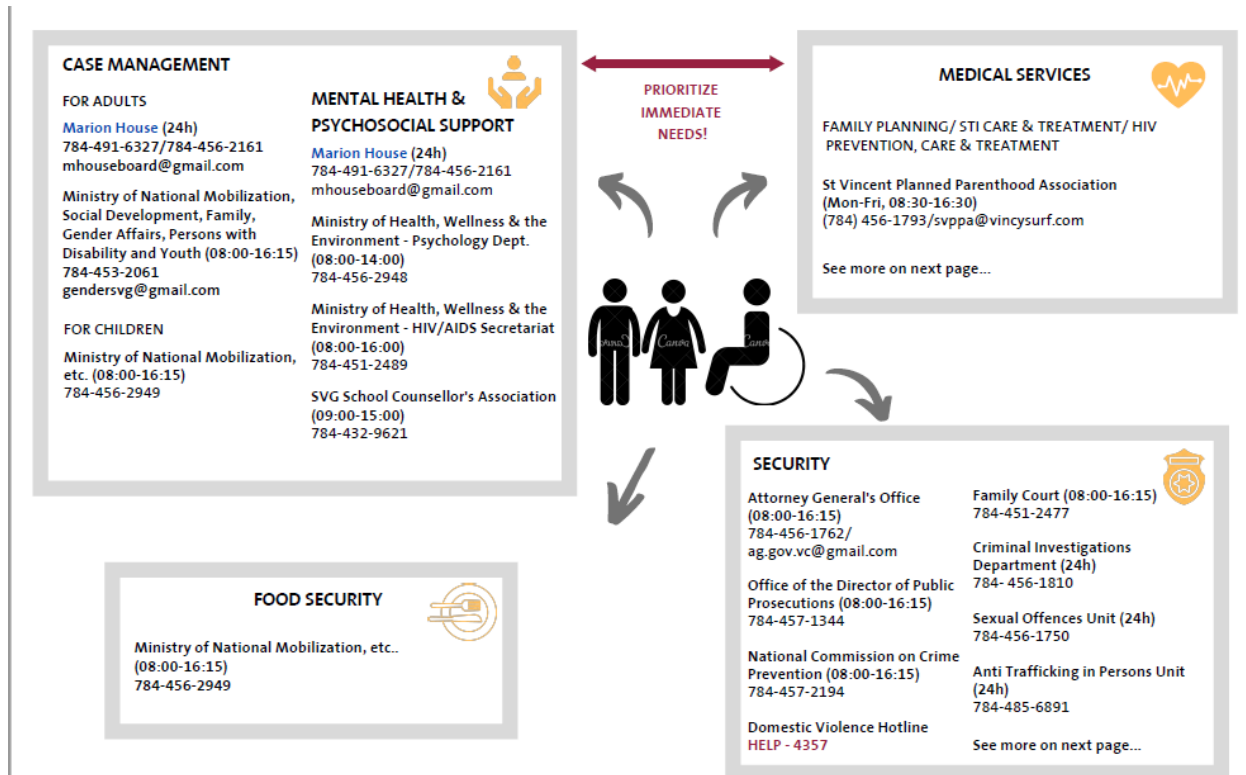
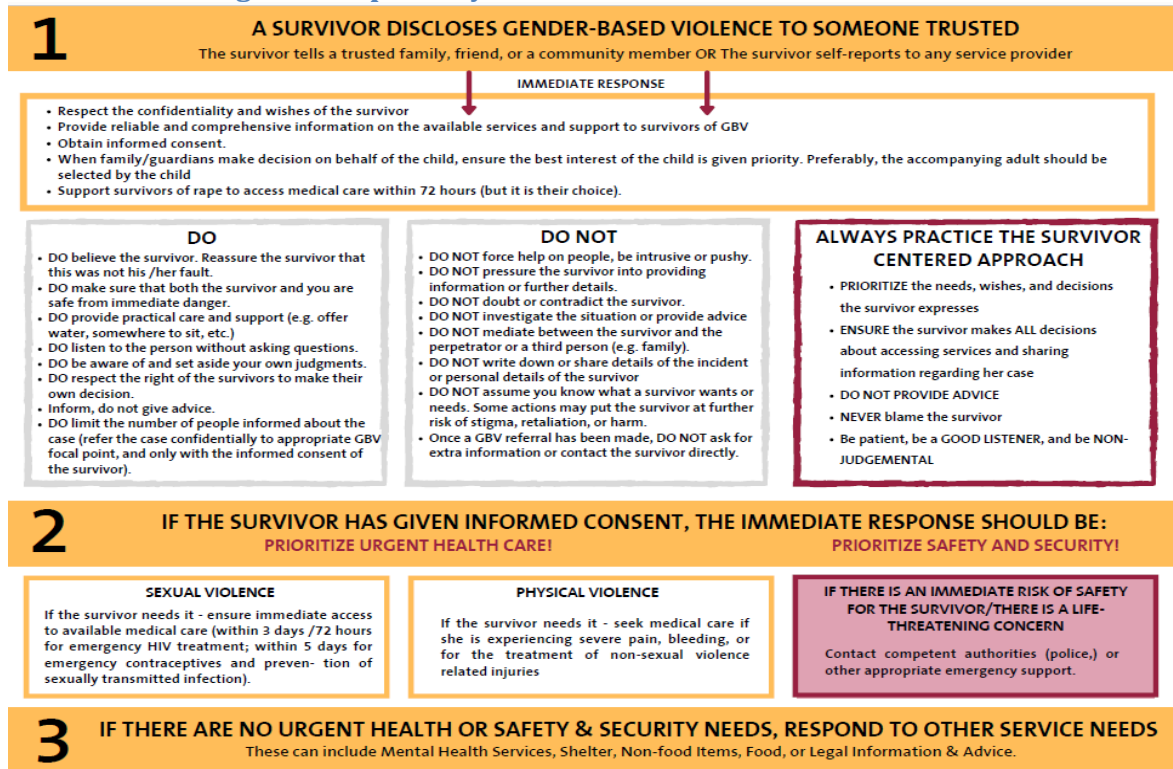
Witness: _____ (Signature) _____
_____ (Please Print)

9.3 Gender Based Violence (GBV) Referral Pathways

9.3.1 Referral Pathway flowchart



9.3.2 Processing referral pathway



9.3.3 Referral pathway Directory

GBV REFERRAL PATHWAY - ST VINCENT & THE GRENADINES

SECURITY



POLICE STATIONS ST VINCENT

Barrouallie - 458-7329
Biabou - 458-0239
Calliaqua - 458-4200
Chateaubelair - 458-2229
Colonarie - 458-6250
Georgetown - 458-6229
Kingstown - 457-1211 Ext 247
Layou - 458-7229
Mesopotamia - 458-5229
Old Montrose - 457-1211 Ext 265
Owia - 457-6605
Penniston - 458-7429
Questelles - 456-1750
Rose Hall - 458-2249
Sandy Bay - 458-6239
Spring - 458-2322
Stubbs - 458-4210

POLICE STATIONS GRENADINES

Paget Farm, Bequia - 458-3250
Port Elizabeth, Bequia - 458-3350
Canouan - 458-8100
Ashton, Union Island - 458-8229

MEDICAL SERVICES



MEDICAL SERVICES ST VINCENT

FAMILY PLANNING

Milton Cato Memorial Hospital, Kingstown
Accepts referrals from all polyclinics re rape cases.
456-1185

FAMILY PLANNING/ INITIAL ASSESSMENT OF RAPE CASES

Levi Latham Health Complex, Mesopotamia
458-5245

Buccament Poly Clinic, Buccament Bay
458-7191

Stubbs Poly Clinic, Stubbs
458-0743

Chateaubelair Smart Hospital, Chateaubelair
458-2228

Georgetown Health Center, Georgetown
458-6652

MEDICAL SERVICES GRENADINES

FAMILY PLANNING/ INITIAL ASSESSMENT OF RAPE CASES

Port Elizabeth Hospital, Port Elizabeth
458-3294

Union Island Health Center, Union Island
458-8339

Canouan Clinic, Canouan
458-8305

9.4 Example Stakeholder Engagement Plan Reporting

The SEP is a living document and will be updated as required during the project life cycle, with for example, further details around stakeholder engagement activities and ensure engagement methods and tools are effective, especially in encouraging informed participation from the vulnerable and disadvantage groups.

9.4.1 Engagement plan mapping exercise

Engagement objective	Primary Engagement activities and Topics	Frequency and location	Target Stakeholders	Methods of engagement	Stakeholder feedback	Main comments to respond to stakeholder	Responsibilities

Please attach attendance sheet to each stakeholder engagement

9.4.2 Format for attendance sheet;

Government of St. Vincent and the Grenadines Consultation Attendance Sheet

Please PRINT INFORMATION

#	Name	Gender	Job Title/ Department Address(community Mtg)	Contact Information	
				Email	Telephone
0					
10					
20					
30					
40					
50					

9.5 Template to Capture Consultations/Stakeholder Feedback Minutes

I. Background

- Background about the stakeholder engagement/consultation activity (e.g., Is it a follow up from a previous consultation? Did it take place as part of a supervision mission?)
- Objective of the consultation.

II. Description of the Stakeholder Engagement Activity:

- **Who** was consulted?
- **What?** (What is the engagement about? Which sub-project? Which issue?)
- **Where?**
- **When?**
- **How?** Methods used for the stakeholder engagement activity (public meeting, small group discussion, face to face, online via - zoom, WhatsApp, individual consultations by phone, feedback via online survey etc.)

III. Feedback Received from Stakeholders and Project Team’s Response

Question/Feedback/ Comment Received from Participants	Project Team’s Response	Next Steps/ Actions to be taken based on this feedback (if any)	Responsible Entity/Person for the follow-up Action (if any)	Date for Follow-up Action (if any)

IV. Supporting Documents

- List of stakeholders consulted. Contact information.
- Any photos, if available.
- Other relevant documents

Note: Photos and personal contact information of the individuals can be kept in internal records, however, will not be included in publicly disclosed documents for reasons of confidentiality.

9.6 Evidence from consultation

9.6.1 Evidence from Facebook page of radio programme

The topic: Strengthening health system in Saint Vincent and the Grenadines – taking a look at the Construction of the Arnos Vale Acute Care Hospital

The government of St. Vincent and the Grenadines is negotiating funding from the World Bank for the construction of the Arnos Vale Acute Care Hospital (AVACH). The site identified is the northern sections of E.T.Joshua tarmac adjacent to the Casson gardens. The AVACH with a capacity of 130+ beds will augment the services offered at the Milton Cato Memorial Hospital in Kingstown.

Objective of the session: To improve public awareness of the construction of the AVACH and get feedback from the public on the project and the possible impacts

On the panel

Minister of Health:	Mr. St. Clair Jimmy Prince - an overview on health and the upgrades necessary
Senior Engineer:	Mr. Cecil Harris – Construction of the AVACH
Chief Medical Officer the Grenadines:	Dr. Simone Keizer Beache- Hospital Services in Saint Vincent and the Grenadines:
Ps/ Health	Mr. Cuthbert Knights - Health outlook
Moderator :	Ms. Dionne John, General Manager of National Broadcasting Station

Description of Stakeholder Engagement Activity :

Who was consulted?The general public

What? The construction of the AVACH

Where? National Radio Station – radio 705 and broadcasted on Facebook

When? Date: 15th May, 2022

How? Radio Broadcast and Facebook live broadcast

Supporting Documents

The programme was broadcasted on the national radio station as well as on their Facebook page. There were 23 comments and 2300+ views, from Saint Vincent and Grenadines.



<https://www.facebook.com/nbcsvg/videos/414506344012759>

Feedback Received from Stakeholders and Project Team's Response

Question/Feedback/ Comment Received from Participants	Project Team's Response	Next Steps/ Actions to be taken based on this feedback (if any)	Reponsible Entity/Person for the follow-up Action (if any)	Date for Follow- up Action (if any)
Did you consider flooding	Yes a number of studies were conducted consideration was taken flood zone and drainage	N/A	N/A	N/A
What type of services would be offered	Telemedicine Interventional cardiology Neurosurgery	N/A	N/A	N/A
Accessibility to all persons	Yes its Accessible to anyone who needs care, there will be some specialized services but once you arrive you will be attended	N/A	N/A	N/A
What is the cost repayment for the construction of the hospital going to be like? The cost	It's not so much about the cost but the improved and enhanced quality of life that the hospital will offer.	N/A	N/A	N/A

9.6.2 Evidence from public consultation

The topic: Strengthening health system in Saint Vincent and the Grenadines – taking a look at the Construction of the Arnos Vale Acute Care Hospital

The government of St. Vincent and the Grenadines is negotiating funding from the World Bank for the construction of the Arnos Vale Acute Care Hospital (AVACH). The site identified is the northern sections of E.T.Joshua tarmac adjacent to the Casson gardens. The AVACH with a capacity of 130+ beds will augment the services offered at the Milton Cato Memorial Hospital in Kingstown.

Objective of the session: To improve public awareness of the construction of the AVACH and get

feedback from communities on the project and possible impacts

key speakers

Senior Engineer: Mr. Cecil Harris – Construction of the AVACH
Hospital Administrator Grace Walters Hospital Services in Saint Vincent and the
Grenadines:
Ps/ Health Mr. Cuthbert Knights - Health outlook
Moderator : Ms. De- Anna Ralph, Social Safeguard

Description of stakeholder Engagement Activity :

Who was consulted: Arnos Vale and surrounding communities inclusive of Pole Yard

What? The construction of the AVACH

Where? Northern End of the Tarmac

When? Date: 19th May, 2022

How? Open forum consultation

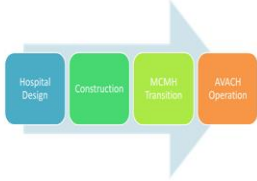
Feedback Received from Stakeholders and Project Team's Response

Question/Feedback/ Comment Received from Participants	Project Team's Response	Next Steps/ Actions to be taken based on this feedback (if any)	Responsible Entity/Person for the follow-up Action (if any)	Date for Follow-up Action (if any)
<p>Q. Will the new hospital be sound proof? MCMH suffers from noise originating at Victoria Park? There is the Arnos Vale playing field and a busy highway adjacent to the new hospital. Will it be the same here?</p>	<p>No, the hospital will not be sound proof but it is not the same as MCMH, if is further away from the playing field, it will not be hemmed in and the walls and windows type will buffer some noise.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>Will the hospital be air conditioned?</p>	<p>The entire hospital will not be air conditioned, some rooms e.g. operating theatres will be air conditioned, but the general areas will benefit from a natural cooling system build into the design.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>If this is a modern hospital then the area should be declared a hospital zone restricting some activities.</p>	<p>Point noted</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>One can't be impress that the hospital will be all you are making it out to be, look at MCMH. There is urgent need to address waste disposal at some government facilities to show commitment to AVACH.</p>	<p>We will try to do better, but this hospital is about improving some of the services offered.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>What will become of Pole Yard?</p>	<p>This project is not about Pole Yard. Pole Yard will be addressed Under the Modern City Project.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

Question/Feedback/ Comment Received from Participants	Project Team's Response	Next Steps/ Actions to be taken based on this feedback (if any)	Responsible Entity/Person for the follow-up Action (if any)	Date for Follow-up Action (if any)
<p>What does the new governance structure look like? How was it</p> <p>Informed? Was there a study? Are the services going to be free?</p> <p>Where will the maintenance cost come from?</p>	<p>We are still working on some details. The services will not be free but persons will not be denied service. Health care is not about profit but care, it's about providing access to affordable care.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>What are the Human Resource plans to obtain specialized staff?</p>	<p>A number of persons are already in training and specialized</p> <p>training is a priority area for SVG, we are encouraging and</p> <p>inviting other persons to enter specialized field of training and</p> <p>work. Colleges are encourage to offer specialized studies in</p> <p>Health Care services.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>Are there plans to make this a regional service?</p>	<p>We are already offering regional service at MCMH in</p> <p>partnership with the World Pediatric Care. A number of OECS</p> <p>states use the services at MCMH. Persons from the region with</p> <p>need for the services offered would be welcomed</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

Supporting Documents

The programme was broadcasted on the national radio station as well as on their Facebook page. There were approximately 70 persons some persons refused to provide their names. Information sheet – flyer for meeting



Meeting the public

Sunday 15th May, 2022 – National Radio Programme – Views on Issues 11:00 am to 1:00 pm

Wednesday 18th May, 2022 – Information sheet distribution, Amos Vale


Thursday 19th May, 2022 – Public consultation – Northern end of the E1 Joshua Tarmac, 5:00 – 7:00 pm

Let's Connect

Come in or give us a call whether you want to hear more about the project or just need to provide us with some feedback.

Telephone: 784-424-3000
Email: avgach@gmail.com

STRENGTHENING HEALTH SYSTEM RESILIENCE PROJECT




ARNOS VALE ACUTE CARE HOSPITAL (AVACH)

Public consultation Thursday 19th May, 2022
Northern end of the E1 Joshua Tarmac, 5:00 – 7:00 pm

Implementing Ministry
Ministry of Finance,
Economic Planning and
Information Technology
Tel: 457-4740
Email: conrole@vbg.gd


Grantance
Ministry of Health, Wellbeing
and the Environment
Tel: 457-2886
Email: info@mh.gov.gd

Where will the AVACH be located?
Northern end of the discommissioned E1 Joshua Tarmac



AVACH Site plan

Our 130+ beds facility, spread across 26,500 square feet, includes green spaces, and spacious parking will provide enhanced quality care for all.



What will we offer?

State of the Art Facility:

- Focus on critical Care
- New and enhanced medical services
- New technology
- Integrated care delivery
- Private capacity

Enhanced Quality Health Care

Proposed outcomes:

- Improved quality of life for all
- Increased life expectancy
- Increased health care access and opportunities
- Reduce overseas medical referral
- Increased employment at both the construction and operationalization phases

Include of:

- Telemedicine
- Interventional Cardiology
- Neurology transplant
- Neurosurgery
- Cardiothoracic surgery
- Rheumatology
- Endocrinology

EMERGENCY ROOMS

DIAGNOSTIC AND THERAPEUTIC SUPPORT

- ICU
- ICU
- SURGERY