



BTY

NON-TECHNICAL SUMMARY

Kokshetau 630 Bed Multidisciplinary Hospital PPP

NOVEMBER 30, 2023

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*People to count on.
Knowledge to build with.*

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Abbreviations

Abbreviation	Definition
E&S	Environmental and Social
EBRD	European Bank for Reconstruction and Development
EIA	Environmental Impact Assessment
ESDD	Environmental and Social Due Diligence
ESP	Environmental and Social Policy
ESAP	Environmental and Social Action Plan
EU	European Union
FM	Facility Management
GHG	Greenhouse Gas
IUCN	The International Union for Conservation of Nature
MoH	Ministry of Health of Kazakhstan
NTS	Non-Technical Summary
PPP	Public-Private Partnership
PR	Performance Requirements
RoK	Republic of Kazakhstan
TuRAR	Industry Operator (General Directorate of Health Investments by Ministry of Health of Republic of Kazakhstan)



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TIRKEU

1.0 Introduction

1.1 About the Kokshetau Multidisciplinary Hospital Project

In cooperation with EBRD, the Ministry of Health of the Republic of Kazakhstan has developed a hospital modernization Program that envisages the development of 19 new hospitals to replace 40 outdated existing facilities and further increase bed capacity. The first phase of the Program involves the development of six new hospitals, including Kokshetau Hospital. Under the Program, the hospitals will be delivered as Public Private Partnerships, PPP, with Kokshetau being the pilot Hospital PPP project.

The concession of the pilot project has been awarded to Renell Kokshetau LLP, which has a strong track record in delivering healthcare PPP investments.

The Project is the construction and operation of a multidisciplinary hospital with 630 beds located in the Sar-yarka microdistrict of the city of Kokshetau, Akmola region, Kazakhstan. There is a City Zoning Master Plan, including various different facilities around the Kokshetau Project to be constructed and be in use in the future city planning. The image showing the other facilities and plants within the scope of area's development plan is shown below. As can be seen in below image, the Hospital will consist of the structures from 1 to 9A.



Сарыарқа

Ақмола облысы. Көкшетау қаласы.

Сарыарқа шағын ауданында 45,0 гектарға нақты жайғастыру жобасы
Проект детальнай планировки в микрорайоне Сары-Арка,
г.Кокшетау, Ақмолинской области на участке площадью 45,0 га

Құрылыс нобайы Эскиз застройки

Экспликация:

1. ПДП на 38,6 га - разработан 2012 г. архитектурное фирма "Форма S"
2. ПДП на 28 га и 94 га - разработан 2017 г. ТОО "Урбостиль"

1. Гостиничный комплекс с развлекательным центром

*МНОГОПРОФИЛЬНАЯ БОЛЬНИЦА на 630 коек, в т.ч.:
2. Главный корпус (администрация, конференц зал, приемное отделение: экстренное, плановые и роддома)

3. БЛОК-1 (кардиология, нейрохирургия, инсультный центр, урология, офтальмология, дерматовенерология, хирургия, и т.д.)

4. БЛОК-2 (акушерский пункт, родильные залы, гинекология, химиотерапия, палатология, онкология, и т.д.)

5. КДЦ (дневной стационар, хирургия, терапия, и т.д.)

6. Пансионат для персонала

7. Морг

8. Техническое помещение, котельная

8А. Мед. газ

9. Гарма спецтехники

9А. Закрытый паркинг на 202 автомашин

10. Молодежно-развлекательный центр

11. Многопрофильный торговый центр

12. Объекты обслуживания

13. Деловой центр, выставочный зал

14. Центр досуга, культурно-зрелищный центр

15. Общеобразовательное учреждение (школа на 1200 учащихся)

16. Детское дошкольное учреждение (детский сад на 280 мест)

17. 9эт. многоквартирный жилой комплекс

18. 7эт. многоквартирный жилой комплекс

19. 2-3-х эт. блокированный жилой дом типа "таунхаус"

20. Многоуровневый автостояног

21. Пожарное депо



Условные обозначения:

	Граница проектируемой территории
	Проектируемые красные линии
	Административно-деловые учреждения, культурно-бытовые и торговые объекты
	7-9 эт. многоквартирные жилые дома
	2-3 эт. блокированные жилые дома
	Учреждения образования
	Учреждения здравоохранения, соцобеспечения и оздоровительного назначения
	Объекты транспортного обслуживания
	Улицы и дороги

The layout of the Project is shown below in Figure 1.



Figure 1: Layout of the Project

The Project will cater to the healthcare needs of the Akmola Region, encompassing 10 cities, 17 districts, and 203 rural districts, with a total population of 733.8 thousand people. These figures are drawn from reports by the Bureau of National Statistics of the Agency for Strategic Planning and Reforms of the Republic of Kazakhstan.

The Akimat of the city of Kokshetau granted temporary use of the land plot to the Project Company for 10 years, with specific instructions to ensure compliance with sanitary and epidemiological requirements for establishing a sanitary protection zone. The duration of the construction period will be 24 months followed by Object Transfer to TuRAR (General Directorate of Health Investments by Ministry of Health of Republic of Kazakhstan ("RoK") or ("Industry Operator") for medical services management. The Project Company will be responsible for two main services (building maintenance and repair and hospital information management system) for the first 5 years of the operation period and will transfer those services to the Industry Operator at the end of the five year operation period.

The General Structure of the Project Team is shown below.

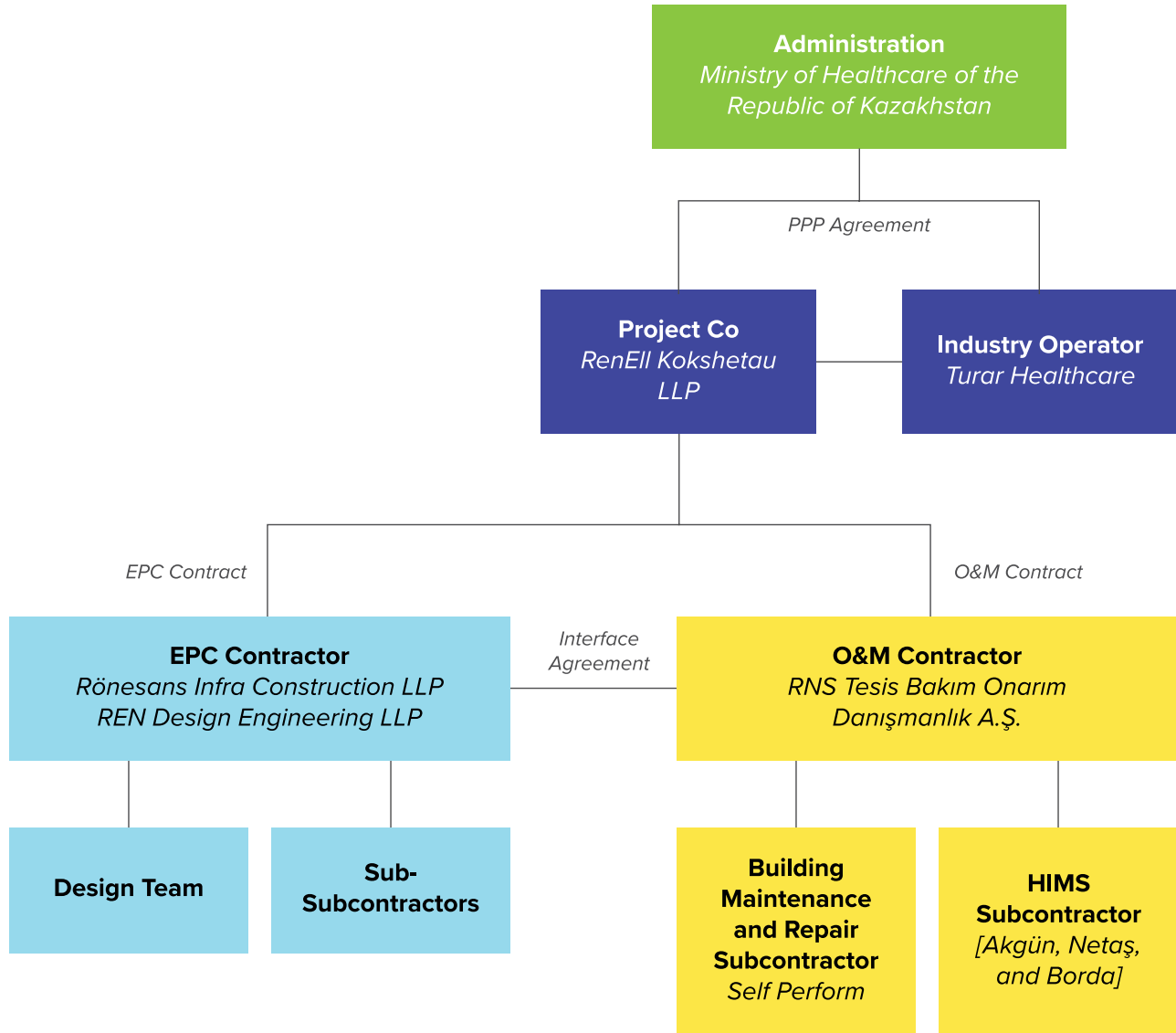


Figure 2: Organization of the Project Team

Outlined within the comprehensive structure of the Project, the management of the hospital's facilities during its operational phase will be overseen by the Industry Operator, as illustrated in the preceding diagram. This signifies that the execution of responsibilities pertaining to the Environmental and Social Management System, scheduled for formulation six months prior to the operational phase, will be undertaken by TuRAR. TuRAR's involvement is ensured through formal written correspondence by the Administration and the Project Company, substantiated by the agreed-upon commitment register of the Project, detailing the Industry Operator's obligations before and throughout the operational phase.

The Project is a Category B project as per EBRD's Environmental and Social Policy (ESP) meaning that "the project activities have limited environmental and social risks and impacts, and these are capable of being readily prevented or mitigated through technically and financially feasible measures" according to EBRD's categorization.

1.2 The Goal of This Document

This document is a Non-Technical Summary (NTS) of the Environmental and Social Due Diligence (“ESDD”) Report prepared for the Project by BTY as the Lenders’ Independent Environmental and Social Consultant. The NTS outlines the findings of the ESDD in a non-technical language for the management of the Project’s environmental and social issues. The NTS is a concise document that provides a description of the Project process and its findings in a manner that is both appealing to read and easily understood by the general public.

1.3 The Location of the Project

The site where Kokshetau Hospital will be built is located in the northern part of the city of Kokshetau and comprises a land plot of 17 hectares. It is located at the northern end of Malik Gabdullina street, one of the main roads in the city, and next to Saryarka Microdistrict to the south. The hospital will be located to the north-east of Kopa Lake, which is 900 meters away from the Project area.

The Project area is marked below In Figure 3 with a red polygon.

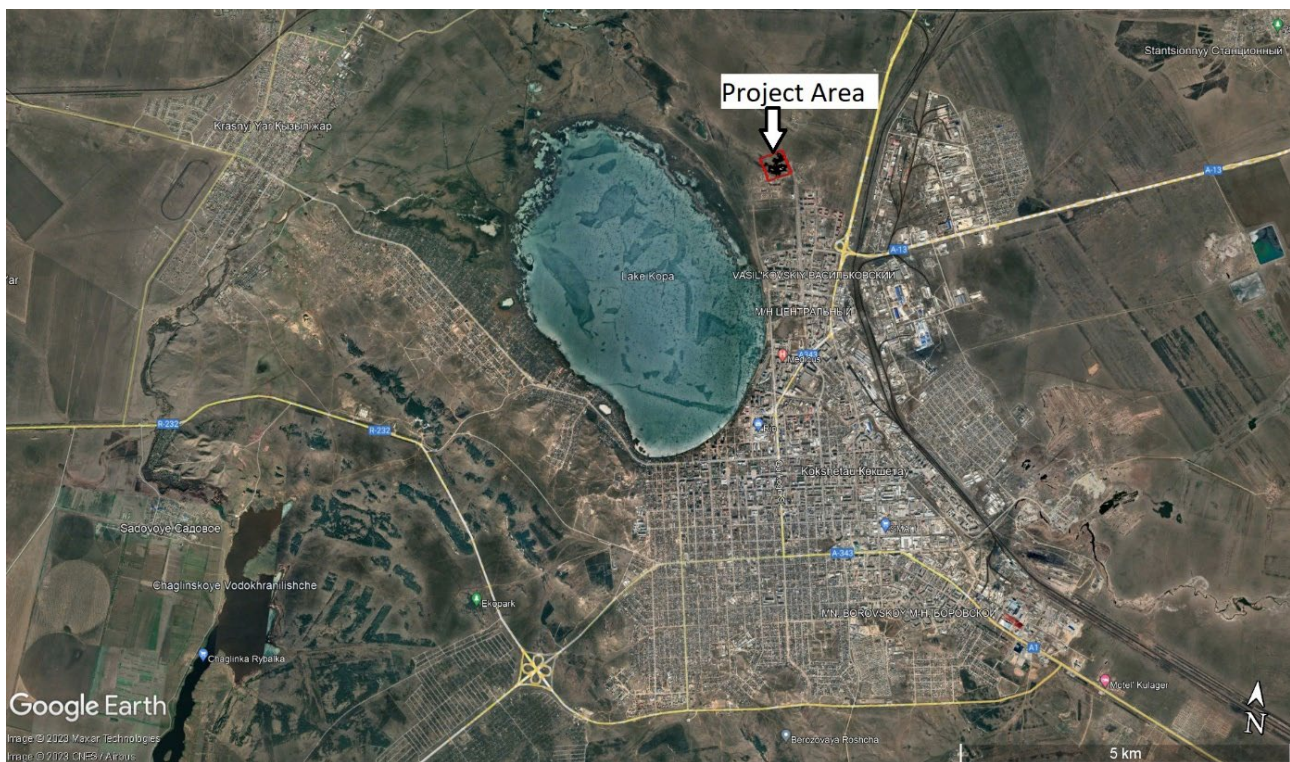


Figure 3: Location of Project area with respect to City of Kokshetau

The Project site is located, in a predominantly greenfield area without any facilities or previous use/development. The location has been selected to meet the national regulatory standards and fulfil the objectives outlined in the State Program of Healthcare Development; it represents a forward step in the development of the health-care facility in Kokshetau.

There is a residential area in adjacent plots and a Horse Farm 500 meters away from the Hospital Area. Figure 4 below shows their locations.



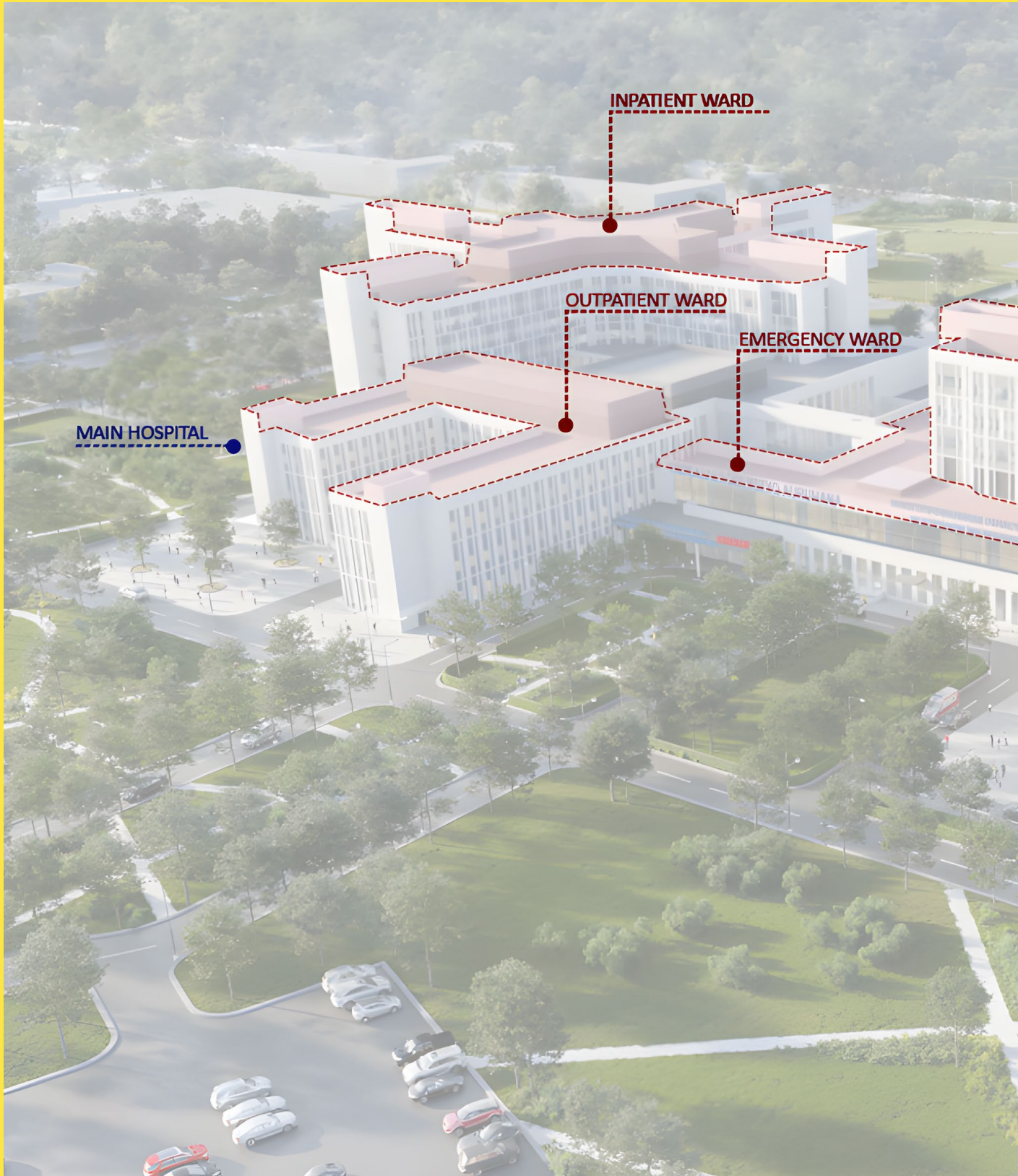
Figure 4: Project area and nearby Structures

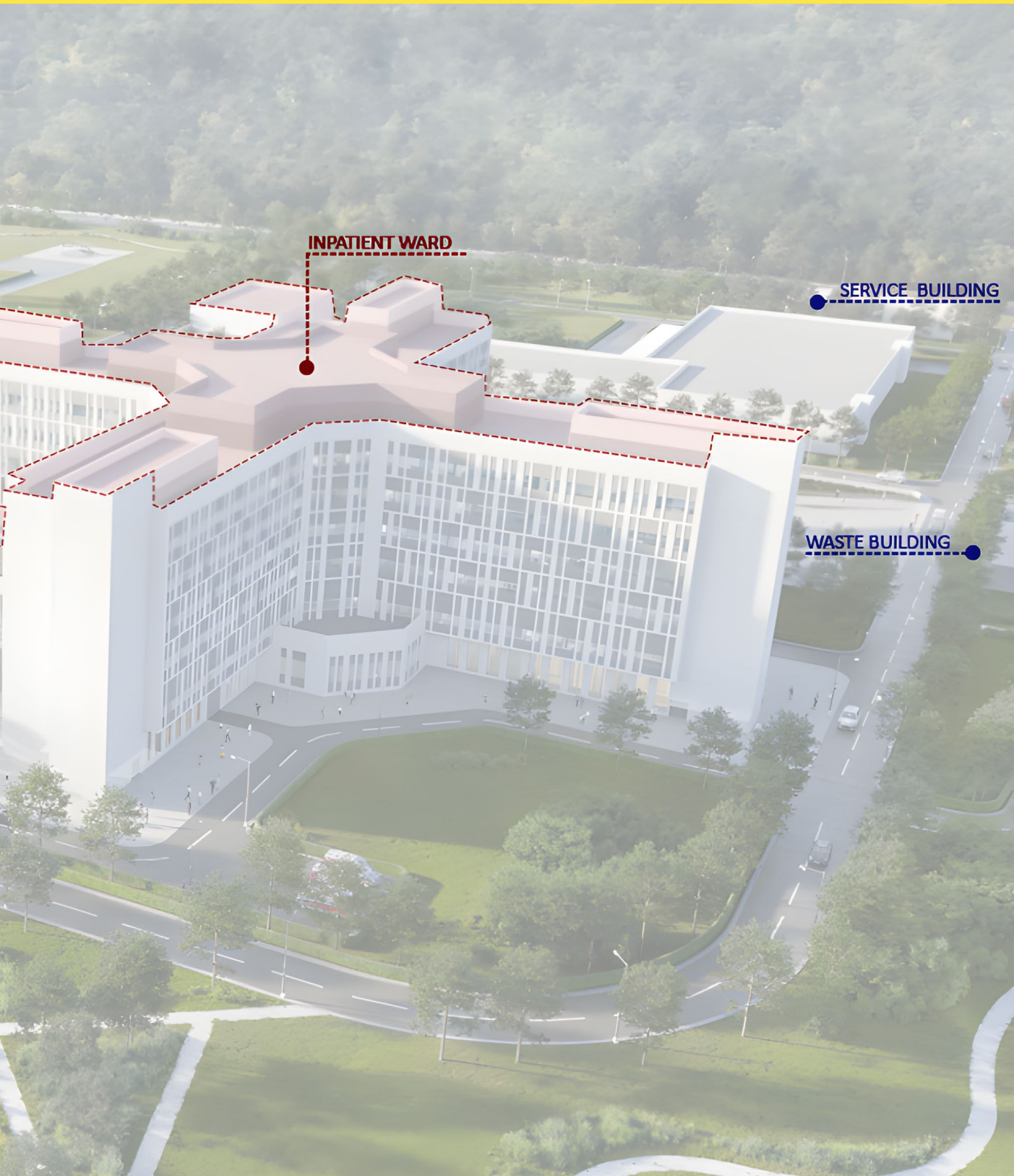
1.4 Standards to be Applied in the Project

The Project commits to adhere to the provisions of Republic of Kazakhstan Legislation applicable to the Project for environmental, labor, and socio-economic issues. The Project will also comply with the EBRD's ESP (2019) and its incorporated Performance Requirements (PRs).

- **PR 1:** Assessment and Management of Environmental and Social Risks and Impacts
- **PR 2:** Labour and Working Conditions
- **PR 3:** Resource Efficiency and Pollution Prevention and Control
- **PR 4:** Health, Safety and Security
- **PR 5:** Land Acquisition, Restrictions on Land Use and Involuntary Resettlement
- **PR 6:** Biodiversity Conservation and Sustainable Management of Living Natural Resources
- **PR 7:** Indigenous Peoples (*not applicable for the Project due to its location in an urban setting*)
- **PR 8:** Cultural Heritage
- **PR 9:** Financial Intermediaries (*not applicable for the Project as EBRD is planning direct involvement in financing*)
- **PR 10:** Information Disclosure and Stakeholder Engagement

In addition, the Project will comply with international agreements, conventions and protocols on environmental protection and sustainability; health, safety, labor and social issues that Kazakhstan has ratified.





2.0 The Project

2.1 Management of Environmental and Social Issues

2.1.1 Will the Project Affect Land Use, Geology and Soil Quality?

The project area is located in a partly urbanized region with no industrial activity. The entire Project area is owned by Akimat with a status of “State Land Reserved for Urban Development” and rented to the Project Co. for 10 years (Cadastral No. 01-174-014-1892). There is currently no settlement activity in the project area, no agricultural activity, or any other economic activity within the Project area. The east, north and northern-west of the Project area is publicly owned meadow area covered by field grass.

Land preparation and construction activities of the Project are major impact triggers in the scope of land use, geology and soil characteristics. Project design is not yet finalized. The activities noted below, however, are regarded as common undertakings for land preparation and pre-construction for a hospital project. They include:

- Topsoil stripping,
- Excavation works,
- Landscaping activities,
- Establishment of safety and security systems, such as lighting, wire fences, communication facilities, etc.,

After above land preparation activities are completed, main construction works will start as below:

- Foundation Work
- Concrete Work
- Roofing
- Mechanical, Electrical, and Plumbing (MEP) Systems Installation
- Interior Finishing
- Installation of Medical Equipment
- Exterior Finishing and Landscaping
- Testing and Commissioning

Since Kokshetau city does not have any risk in terms of seismicity, earthquake loads are not taken into consideration in structural design. However, Considering the prevalent threat of flooding due to climate change in the vicinity, the structural design has been integrated with robust flood mitigation measures.

Although the project area already exhibits a modified habitat and the area is partly urbanized, specific measures will be implemented to minimize the project’s impact on land use, geology, and soil, separately for construction and operation phases. These measures include the following:

These measures include the following:

Construction Phase:

- Construction activities are limited only to designated sites that are to be clearly marked. In case of disruption of other areas, rehabilitation will be implemented immediately.
- A Construction Phase Emergency Preparedness and Response Plan is to be developed and implemented. The Plan should include detailed preparedness and response activities for potential emergencies such as fire (including wildfire), flood, sabotage, theft, disaster preparedness. A Climate Change Risk Assessment specific to the Project was prepared and as a result of this assessment, it was observed that there is a risk of forest fire and flood within the Region, therefore wild fire and flood emergency and preparedness will be included in the Construction Phase Emergency Preparedness and Response Plan.
- Structural design measures are to be implemented as required by national legislation and international standards.

Operation Phase:

- Only the designated area is to be used during Operation Phase.
- An Operation Phase Emergency Preparedness and Response Plan is to be developed and implemented. The Plan will include detailed preparedness and response activities for wild-fire, flood, sabotage, theft, disaster preparedness and spills/leakages. A Climate Change Risk Assessment specific to the Project was prepared and as a result of this assessment, it was observed that there is a risk of forest fire and flood within the Region therefore wild fire and flood emergency and preparedness will be included in the Operation Phase Emergency Preparedness and Response Plan.

2.1.2 Will the Project Affect the Air Quality and Climate Change?

Construction phase activities will lead to emissions that impact local air quality, and thus may have adverse health impacts on Project workforce, local communities (especially Saryarka Microdistrict and the nearby Horse Farm), and the end users of Kokshetau Hospital, all of which are considered as highly sensitive receptors. The main emissions are:

- Dust from earthworks and construction activities; and
- Gaseous exhaust emissions from construction vehicles and machinery (i.e., PM10, NOx, CO, SO2 and TOC).

Greenhouse Gas (GHG) emissions relate to wider impacts on the global climate system through the exacerbation of climate change. Project *construction phase* activities which emit GHGs include:

- Change in land use (e.g. alteration to the GHGs sequestered in soils),
- Mobile and stationary combustion emissions from construction vehicles and machinery,
- Stationary combustion emissions associated with campsite heating; and
- Emissions from the wider power system related to purchased electricity required on site

Operation phase GHG emissions will comprise:

- Combustion emissions from boiler systems,
- Emissions from the wider power system related to purchased electricity required to operate the hospital and other facilities
- Emissions from generators during power-cuts; and
- Potential fugitive emissions from medical waste storage areas.

Mitigation measures have been embedded into the construction and operation phases. These measures minimize and/or eliminate potential impacts on air quality and climate change

Construction Phase:

- Baseline measurements will be performed in line with and comparable to national legislative requirements, EBRD ESP (2019), and be conducted to identify current conditions and points representative of local communities.
- A Construction Phase Air Quality Management and Monitoring Plan, including a Dust Suppression Program, will be developed and implemented. The Plan and the Program will continuously be updated based on monitoring results.
- As part of the Air Quality Management and Monitoring Plan, monthly air quality monitoring will be conducted; in case targets are at risk of being exceeded, further measures will be developed or implemented, such as increasing the frequency and extent of dust suppression measures.
- A Construction Vehicles and Machinery Maintenance Program will be developed and implemented.

Operation Phase:

- A Boilers Maintenance Program will be developed and implemented.
- Relevant permitting and compliance with limits to be set by Local Environmental Authorities ensured.
- Annual operation phase GHG emissions will be calculated once relevant information is available, prior to initiation of operation phase.
- A Medical Waste Management Plan and Operation Phase Waste Management Plan will be developed and implemented.
- Adequate/suitable storage area and related ventilation systems will be included in design and implemented.
- The Project Company has committed to a LEED Silver certification for the hospital (further details below).

LEED Certification process:

In support of this endeavor, the Project Company have engaged the services of ERKE Sustainable Building and Design Consultancy, a specialized firm in green building certification. According to ERKE's progress report, the facility is projected to achieve 55 points, meeting the criteria for LEED Silver certification.

ERKE conducted detailed assessments involving energy modeling and water calculations to support the LEED certification process. Through a comprehensive 8760-hour whole building energy analysis, it was determined that the Kokshetau Hospital Project is expected to achieve a 22.7% reduction in energy costs compared to baseline building conditions. Preliminary estimations also indicate a 47% reduction in water consumption, both indoors and outdoors, compared to baseline values.

In terms of greenhouse gas emissions generated during construction, an estimated total of 4,580.53 tons of CO₂-equivalent will be produced. However, upon evaluating this against the Project's emission criteria, which set limits for projects exceeding 100,000 tons annually or resulting in a net change of over 25,000 tons annually, the emissions from this Project are significantly below the specified thresholds.

Climate change resilience:

As well as the impact of the project on climate change through the emissions of GHGs, there is the potential for natural hazards that impact that operation of the hospital to be exacerbated by climate change. For the Climate Change Risk Assessment of the Project, three

steps are followed to outline climate risk and vulnerability context: i) identification of location-based climate hazards, ii) assessment of climate hazards and risks for roads in general, iii) risk and materiality assessment for the project.

Potential climate risks were found to be (1) Wildfire as the methodological risk score indicated a material risk and (2) Infrastructure damage due to flooding as the Project area is located at foothills of the southern mountains. Therefore; flooding is already an issue for the Project area. Creation of impermeable surfaces may increase flooding risk even more. Applicable mitigation measures for these risks are included within the ESAP.



2.1.3 Will Project Based Noise and Vibration Occur?

Construction machinery and equipment to be used for land preparation and construction activities will generate noise and vibration. Noise generation depends on number and types of machinery and equipment, which are not yet determined.

During the *operation phase* of the Project; main possible sources of noise will be boiler and generators, increased traffic activity including ambulance sirens.

Potential noise and vibration impacts of the Project for *construction and operation phases* are negative health impacts on Project workforce, users and the local communities. Some mitigation measures have been proposed for construction and operation phases separately in order to eliminate these potential impacts.

Construction Phase:

- Baseline measurements will be applied in line with and comparable to national legislative requirements, EBRD ESP (2019) and WHO standards conducted to identify current conditions at the Project site.
- A Construction Phase Noise Control and Monitoring Plan will be developed, implemented continuously updated based on monitoring results.
- A Construction Phase OHS Plan will be developed and implemented.
- A Construction Vehicles and Equipment Maintenance Program will be developed and implemented.
- Appropriate machinery and equipment to mitigate vibration generation will be used in accordance with national and international standards.

Operation Phase:

- Low-noise” generators for operation phase will be selected to the extent possible.
- All vehicles and ambulances are subject to fully follow the national noise limits namely “maximum permissible sound pressure levels for the work activities and workplaces” as per the Order dated February 16, 2022 numbered 26831 named “on approval of hygienic standards for physical factors affecting humans” nearby the workplaces.
- Technical Service Building noise insulation will be ensured.
- A Boilers Maintenance Program will be developed and implemented.

2.1.4 Will the Project Affect Water Resources?

Impacts on water resources related with *construction phase* of the Project include:

- Effects on water quantity related to water use for earthworks, dust suppression and consumption by personnel,
- Effects on groundwater due to accidental spills and leakages; and
- Effects on wastewater generation amount.

The wastewater connection permit has been obtained by the relevant Akimat and “Kokshetau Sy Arnasy” for

the construction period. The connection is to be completed before construction.

The permit for connection to potable water network of city of Kokshetau has also been obtained by Kokshetau Sy Arnasy. The connection will be completed before construction starts.

The depreciation rate of the Wastewater Treatment Plant (“WWTP”) of the city of Kokshetau is nearly at 90%. Therefore, it is important to understand if the connection to wastewater sewage system and the existing WWTP will be successfully operated without

further strain or without causing additional problems to the sewage system. The capacity of the existing WWTP which is located c. 2.5 km away from the Project Area is 32.000 m³/day. The construction works are expected to generate an extra load of 390 m³/day at the peak conditions, which is about 1,2% more load on the WWTP. The daily contribution is deemed sufficiently low compared to the overall capacity of the WWTP.

Similarly, below calculation can be made for the operation period according to LEED rating summary for water consumption of the hospital:

The baseline annual water consumption is estimated as 15.543,41 cubic meters/year = 42,5 cubic meters/day

The designed (LEED targeted) annual water consumption is estimated as 8.176,45 cubic meters/year = 22,4

cubic meters/day (47% water consumption reduction is foreseen by the way compared to baseline)

Assuming all water consumed will be converted to the wastewater, the daily wastewater contribution of the Kokshetau Hospital to the WWTP capacity will be 0,13% for the base case and 0,07% for the designed case.

Impacts on water resources during the *operation phase* are mainly related with water requirement and wastewater generation of operation personnel, inpatients, outpatients, visitors and laundry services. Wastewater discharge will be managed by connection to municipal system during operation phase.

Some mitigation measures have been proposed for construction and operation phases separately in order to mitigate these impacts.

Construction Phase:

- A Construction Phase Spill and Leakage Response Plan will be developed and implemented.
- Wastewater discharge to be managed according to national and international standards and relevant permits are taken and followed up completely.
- An Emergency Preparedness and Response Plan for the construction phase including detailed aspects related with flooding will be developed and implemented.

Operation Phase:

- Calculation of Water consumption data for the operation period is conducted.
- Relevant permits are secured for wastewater discharge to the municipal sewage system.
- Water resources available for the Project are confirmed.
- An Emergency Preparedness and Response Plan for the operation phase, including detailed aspects related with flooding, will be developed and implemented.

2.1.5 How Will Resources and Produced Waste Be Managed?

Waste generated during construction and operation phases of the Project can have a negative impact due to inadequate waste management. Three core principles guide the implementation of waste management measures for the Project: reducing waste at source, correct separation of waste, and proper temporary storage of waste.

Possible types of waste that may occur during the *construction phase* of the Project include:

- *Domestic wastes* generated by the construction workforce. Since the majority of the construction

workforce employed will most likely come from Kokshetau City, the actual load on landfill capacity caused by the Project will be low.

- *Excavation waste* from excavated material; a portion of which will most probably be reused on-site as fill material. Remaining excavation waste will be transported to a designated area according to instructions of local authority.

- *Hazardous and special waste* will be managed through co-incineration or incineration in the producer's own facilities or private operators' facilities or landfilled.



Possible types of waste that may occur during the operation phase of the Project include:

- *Domestic wastes* that will be collected and disposed as per regulations. The temporary storage of household waste must be located in the basement of the building where the access is quick and easy, but functionally separated to minimize any negative effects on hospital operations.

Hazardous wastes, including medical waste, will be held in temporary storage within a closed and functionally separated area from the rest of the building. Hazardous waste will be sent to licensed disposal facilities at least every six months as required by national legislation. Main mitigation measures for potential impacts have been proposed for *construction and operation phases* separately.

Construction Phase:

- A Waste Management Plan for construction phase will be developed and implemented.
- Compliance with national legislation regarding waste management.

Operation Phase:

- A Waste Management Plan for the operation phase will be developed and implemented, including a Medical Waste Management Plan
- National legislation regarding waste management to be complied.
- LEED Silver Certification will be secured to maximize proper waste segregation and management practices.

2.1.6. Will the Biodiversity Be Affected by the Project?

During the biodiversity baseline survey carried out by the Project Company's Biodiversity Consultant, two species were identified around the project area: the Dalmatian Pelican, classified as "Near Threatened" on the IUCN Red List, and the *Whooper swan*, not listed on the IUCN Red List.

The Consultant then developed a Biodiversity Management Plan ("BMP") specific for the Project. As no species in the "endangered" status is encountered and the protected areas are far from the Project area; the Project is not expected to exert risks on those pro-

tected areas. Therefore, mitigation measures for biodiversity are developed are of a general nature. The BMP contains specific measures for protecting bird species that might be encountered during construction period.

Possible impacts for the *construction phase*, which can be regarded as minor to moderate according to available information gathered to date, are listed below.

- Potential disturbance to fauna species due to noise emission, waste generation and dust emissions associated with construction activities.
- Direct mortality due to increased traffic load.

- Noisy activities at the site, such as test drilling, will prevent four common passerine bird species that have been observed locally, from nesting at the site.
- Hazardous material and waste storages at the site can cause surface and groundwater contamination and vegetation and soil damage with hydrocarbons if proper management strategies are not taken.
- Overspill of the septic tank for vehicle-washing wastewater may occur.
- Possible open fires on site can ignite local grass fires that in turn can degrade natural habitat, human poaching and egg collection, and falling prey to other animals.

- Potential unattended deep excavation activities can cause trap animals.

- Possibility of the presence of seeds from fast-growing invasive species during amenity planting activities.

Impacts of the *operation phase* on biodiversity features are much the same as those during the construction phase. In addition to measures identified for the construction phase, additional measures will be to deal with for packs of stray dogs. Main mitigation measures have been proposed for *construction and operation phases* separately in order to eliminate these potential impacts.

Construction Phase:

- A site-specific biodiversity study to identify classification and characteristics of flora and related habitat in the Project Area has been conducted. Following the study, a Biodiversity Management Plan (BMP) was developed. The BMP will be fully implemented to protect bird species that might establish nests within the Project Area. Along with other mitigation measures in the BMP, a buffer zone of 25 meters will protect the potential nesting areas.
- A Construction Phase Noise Management and Monitoring Plan will be developed and implemented.
- A Construction Phase Air Quality Management and Monitoring Plan, including dust suppression program, will be developed and implemented.
- A Construction phase Waste Management Plan will be developed and implemented.
- A Construction Phase Traffic Management Plan will be developed and implemented.
- Relevant driver training about animals that may be present at the construction site and on access roads will be provided.

Operation Phase:

- An Operation Phase Traffic Management Plan will be developed and implemented.
- Food waste will be kept in closed containers to keep dogs from frequenting the site.
- A trained gardener will be part of the staff to maintain vegetation and control weeds at the site.
- Performance indicators for the garden will be established and checked twice yearly.

2.1.7 Will the Project Have Any Landscape and Visual Impact?

The whole area will be fenced yet visible from the outside. Therefore, during construction, there will be temporary visual impacts expected such as:

- Earthworks leading to dust generation; and
- Views of construction machinery and vehicles.

In the operation phase, there is potential for the new hospital to dominate the landscape and transform existing views across the flat landscape. The area is flat, the hospital operations will be inside the buildings such as morgue operations or waste storage areas, and the landscaping will be performed as a part of construction activities, in order to prevent any potential unpleasant view from those adjacent points. Therefore, no unpleasant visual impacts other than the building view is expected.

Mitigation measures to eliminate these potential impacts have been proposed for *construction and operation phases* separately.

Construction Phase:

- Preparation of a Landscape Plan for the Project.
- A Dust Suppression Program (as part of Construction Phase Air Quality Management and Monitoring Plan) will be developed and implemented

Operation Phase:

- Implementation and maintenance of Landscape





Plan.2.1.8 What Measures Will Be Taken for Labor and Working Conditions?

In this section, occupational health and safety issues have been included in labor and working conditions assessments.

Multiple subcontractors will be engaged to complete each scope of work. The Project Company is planning to reach 2,300 manpower levels at the peak conditions and complete the construction works with c. 7.7 million total man-hours.

Also, during operation, the envisaged number of workers in the Hospital is c. 2,300 as well.

There will be a construction camp to be built within the Project borders at the southern east corner of Project area, having a maximum capacity of c. 1500 people. There will be some impacts anticipated regarding the labour and working conditions unless mitigated in the scope of Project implementation.

Potential impacts on these issues for the *construction phase* are listed below:

- Failure to comply with the Labour Code of Kazakhstan and PR2 of EBRD, which equally protects the rights of all employees on the Project.
- Improper and inadequate management of stakeholder engagement and the management of grievances.
- Lack or insufficiency of comprehensive knowledge on the labour rights of the employees, on provision of non-discrimination and equal opportunities, on accommodation conditions and on gender-based issues.
- Potential forced labor, child labor, employment of unregistered migrants.
- Improper management on the retrenchment of workers at the end of construction.
- Occupational Health and Safety impacts.

Potential impacts for the *operation phase* are listed below.

- The impacts expected for the construction period and listed above will also apply for the labor and working conditions in the operation phase. There will be additional impacts expect specifically for the operation as follows:
- Increased risk of infection for healthcare personnel and lack of protection and hygiene equipment.
- Health risks associated with handling and use of various chemicals such as cleaning and disinfectant agents, solvents, pest control agents and various drugs; Leakage risk due to extreme precipitation in case of open storage.
- Increased risk of fire/explosion due to continuous and high-volume use of flammable solvents, chemical disinfectants, flammable gases, cleaning agents, and extreme increases in temperature, etc.
- Additional traffic load in the vicinity.
- Emergencies during the operation phase may include natural hazards (including climate change related emergencies such as flood and wildfire) fires / explosions, power outage, mass casualty events, events requiring evacuation, accidents, sabotage, hazardous material spills/ leakages and violence from patients/ patient relatives.

In order to eliminate these potential impacts, the Project will fully comply with all national and international requirements on these issues and also EBRD's PR2. Project specific measures that will be complied with during *construction and operation* are separately below.

Construction Phase:

- Plan for Construction phase Community Health, Safety and Security Management will be developed and implemented.
- Plans for Local Employment and Procurement, Construction Camp and Labor Management (in line with IFC and EBRD workers accommodation guideline), and Subcontractor and Supplier Management that includes Human Rights Policy for the Project will be developed and implemented.
- A Gender Plan which includes Gender Based Violence and Harassment (GBVH) policy and procedure for addressing GBVH will be developed and implemented.
- Establish national standards for child labor where national standards are not adequate and conduct quarterly audits.
- Develop and implement Project Level Human Rights policy as per the corporate level existing Human Rights policy, to include fundamental principles of worker rights to form and join workers organizations collective bargaining.
- Include specific provisions on freedom of association and collective bargaining in worker contracts, which must clearly show provisions on wages, benefits and conditions of work, and retrenchment at the end of work in line with the National Labour Code and international good practice.
- Include provisions on wages, benefits and conditions of work in induction training. Use timecard applications (manual or digital) for all construction workforce to ensure effective tracking of working hours and overtimes
- Perform independent Labour Audits in accordance with Project's Labour standards and Labour Code of Kazakhstan
- A Grievance Mechanism with Senior Social Specialist assigned for internal grievance management will be developed and implemented. The mechanism should refer to GBVH policy and procedure with special addressing mechanisms.
- A retrenchment plan for proper collective dismissal of the construction workers upon completion of the construction works.
- An Emergency Preparedness and Response Plan will be developed and implemented.
- An Occupational Health and Safety Plan will be developed and implemented.
- A Construction Phase Community Health, Safety and Security Plan will be developed and implemented.
- A Training Management plan for security personnel, including subcontractors, against gender insensitivity, will be developed and implemented.

Operation Phase:

- Plans for operation phase Community Health, Safety and Security Management will be developed and implemented.
- An Operation Phase Traffic Management Plan for the operation phase will be developed and implemented.
- An Operation Phase Wastewater Management for the operation phase will be developed and implemented.
- An Operation Phase Medical Waste Management Plan in line with national legislation and IFC HSE will be developed and implemented.
- An Operation Phase Pest Control Management Plan for the operation phase will be developed and implemented.
- An Operation Phase Emergency Preparedness and Response Plan in line with the WHO Hospital Emergency Checklist (2011).
- An Operation Phase procedure on control of diseases of significant importance (influenza, COVID-19 pandemic etc.) including pandemic control procedures and adequate protection equipment supplement.
- An Operation Phase Sterilization/Disinfection Procedures.
- An Operation Phase Hazardous Materials Management Plan.
- Operation Phase Landscape Management Plan.
- Operation Phase Radiation Safety Manual and relevant procedures etc.
- Conduct training to raise awareness on hygiene rules, Biosafety Manual, and other OHS procedures.



2.1.9 Will the Project Have Any Effects on Community Health, Safety and Security?

As a large complex project, there will be significant potential impacts on community, health and safety, with commensurate proposed mitigation measures. The whole Project area will be fenced to prevent any trespassing, especially for the benefit of the two main sensitive areas nearby: the Saryarka Microdistrict and the Horse farm nearby, with horses feeding outside adjacent to Project area.



Currently, Gabdullina Street's end neighbors the Project area, serving as the final stop for various public transportation routes across Kokshetau. Public buses arrive approximately every 4 minutes at the Hospital building. As the city's master plan unfolds around the Hospital, more bus stops are anticipated, enhancing accessibility in response to increased facility demand. Since the area is partially urbanized and lacks traffic density data, a traffic modeling study, to be conducted before operations, will evaluate accessibility, congestion risks, and traffic issues along Malik Gabdullina Street. This study will be undertaken by the Industry Operator.

Potential impacts on Community Health, Safety and Security from the following issues during the *construction phase* include:

- The influx of a substantial workforce during the construction phase can pose an elevated threat to local communities from communicable and vector-borne diseases and may strain the capacity of existing healthcare facilities.
- Heightened accident risk associated with increase in traffic load due to large number of construction vehicles, material and personnel transport vehicles and

heavy machinery leading to high risk of accidents/incidents involving project personnel and local communities in lack of proper management.

- Additional traffic load to be generated by Project construction activities may disrupt access to the existing facilities.
- Potential risks associated with relations of the security personnel and local communities in terms of social conduct and conflict. These risks may be sourced due to gender insensitivity, insensitivity to local culture, inappropriate use of force and perceptions of the Project.
- A Traffic Management Plan for construction phase will be developed and implemented.
- Conduct study of construction materials supply alternative routes and apply results.
- Complete Life and Fire Safety Audit.
- Access of unauthorized people to construction sites, leading to potential health and safety risks.
- Improper management of stakeholder engagement and grievances.

- Potential Construction Phase environmental impacts on environment, and therefore the communities.
- Potential improper management of emergencies including natural hazards, fires, accidents, hazardous material spills/leakages, sabotage.

Potential impacts from the following issues during the *operation phase* include:

- Increased traffic in the area, including within the hospital premises, poses a substantial danger to Project staff, hospital visitors, and the nearby communities, especially for the disabled in Saryarka Microdistrict.
- Increased traffic poses heightened accident risk due to large number of personnel vehicles, support services and operational vehicles (e.g., ambulances, waste disposal vehicles, etc.), patient and patient relative vehicles, public transport, etc.
- Delayed access of ambulances is a possible risk during the operation.

- Positive impact on community health due to service enhancement.

- Exposure to disease for the communities.
- Potential risks associated with relations of the security personnel and local communities in terms of social conduct and conflict. These risks may be sourced due to gender insensitivity, insensitivity to local culture, inappropriate use of force and perceptions of the Project.
- Improper management of stakeholder engagement and grievances.
- Potential Operation Phase environmental impacts on environment, and therefore communities.
- Improper management of emergencies including natural hazards, fires, accidents, hazardous material spills/leakages, sabotage, etc.

Proposed mitigation measures follow below:

Construction Phase:

- Develop and implement Construction Phase Community Health, Safety and Security Management Plan.
- As noted above, develop and implement plans for Construction Phase Traffic Management, Stakeholder Engagement, Waste Management, Campsite Management, Emergency Preparedness and Response Plan.
- Develop and implement Hazardous Materials Waste Plan; construct hazardous materials temporary storage area.
- Carry out a 3rd party Life and Fire Safety Audit at the planning and design stage, followed by periodical monitoring during construction and operation phases.
- As noted above develop and implement plans for Emergency Preparedness and Response Plan Occupational Health and Safety, Spill and Leakage Response.
- As noted above, Develop and implement Traffic Management Plan for construction and operation phase; conduct study of construction materials supply alternative routes and apply results.
- Develop and implement a training management plan & program including training to machinery operators and drivers regarding speed limitations, noise limitations and safe driving.
- As noted above, Develop and implement External Grievance Mechanism (for local communities and other external stakeholders).
- An external Grievance Mechanism with Community Liaison Officer (CLO) assigned for external grievance management will be developed and implemented.
- Develop and integrate into design measures for mitigating fire risk (sprinkler systems, alarms); construct isolated storage areas will be constructed for flammable solvents, chemicals etc.

Operation Phase

- Adapt and implement the results of the traffic modelling study for continuous accessibility and to avoid congestions.
- An Operation Phase Traffic Management Plan with relevant driver training (including sub-contractor personnel).
- Conduct study and apply results to identify alternative roads for ambulances to access Project area without delay.
- An Operation Grievance Mechanism will be developed and implemented; also monitoring of hospital operations with indicators such as urgent applicants/death ratio, infected patients during treatment in hospital will be conducted.
- An Operation Phase Sterilization/Disinfection Procedures, procedures on control of diseases of significant importance (influenza pandemic, smallpox, etc.).
- An Operation Phase Community Health Safety and Security, Operation Phase Pest Control Management, Operation Phase Waste Management.
- An Operation Plan against Gender Based Violence and Harassment in accordance with EBRD guidelines.
- Plans for Operation Stakeholder Engagement.
- Operation Phase Emergency Preparedness and Response.
- Develop and implement External Grievance Mechanism (for local communities and other external stakeholders) and provide relevant training to personnel (including sub-contractor personnel).
- Monitor service quality in line with the medical ethical standards by key performance indicators.



2.1.10 Will the Project Have An Impact on Socio-Economic Resources?

The Project will support improved health of the population of the region through by centralizing the provision of medical care. The Project will further replace existing regional hospital while improving standards and complying with the international standards for the quality and safety of medical activities. These advances will contribute to an increase in budget revenues, all of which are considered as positive impact of the Project.

Considering the sanitary and epidemiological situation, the necessary measures are provided to ensure normal sanitary and hygienic conditions for the work and rest of personnel, and their medical care. In conjunction with the employment opportunities to be generated in both the construction and operation phases, the likelihood of a deterioration in the sanitary and epidemiological situation is very low.

Both construction and operation periods are expected to have a positive impact on the communities and local businesses in terms of the possibility of local employment and procurement.

- Employment and procurement opportunities provided to project affected people (PAPs), women, local communities, regional and national level people and businesses.
- Design of the Project is not yet available, however, current water supply network, sewage supply network, underground/aboveground electricity transmission lines and structures, gas supply infrastructure, and or telecommunication infrastructure may be damaged

due to earthworks, relocation, and capacity increases.

- The traffic and accessibility issues may rise in both for construction and operation due to heavy machinery and equipment movements and increased hospital traffic, respectively.
- Lack of access to information and grievance management, i.e. improper management of stakeholder engagement and grievance mechanism may lead to negative impact on Socio-economic resources.

Proposed mitigation measures to eliminate or reduce those negative impacts and enhance the positive impacts are listed below.

Construction Phase:

- A Construction Phase Plan for Local Employment and Procurement (including supply alternatives analysis) will be developed and implemented.
- A Plan against Gender Based Violence and Harassment in accordance with EBRD guidelines will be developed and implemented.
- Develop and implement measures to achieve employment targets set within national strategies.
- Develop and implement measures to ensure equal conditions for disadvantaged employees within the community with respect to disabilities, gender, religion, and race.
- Ensure close collaboration with stakeholders to identify all potential infrastructure interactions (underground/aboveground) for water supply, sewage collection, electricity transmission, gas supply and telecommunication networks and measures proposed as required, following finalization of design.
- Develop and implement the Construction Environmental and Social Management Plan ("CESMP") to be implemented throughout the construction period by the EPC contractor and all subcontractors.
- Develop and implement a Subcontractor Management Plan.
- Ensure all public utility connection permits are in place.
- Develop and implement Traffic Management Plan for construction and operation phase; conduct study of construction materials supply alternative routes and apply results.
- Develop and implement a training management plan & program including training to machinery operators and drivers regarding speed limitations, noise limitations and safe driving.
- Develop and implement External Grievance Mechanism (for local communities and other external stakeholders).

Operation Phase:

- An Operation Phase Plan for Local Employment and Procurement Plan for Operation Phase (including supply alternatives analysis) will be developed and implemented.
- An Operation Phase Plan for Gender Based Violence and Harassment in accordance with EBRD guidelines will be developed and implemented.
- Develop and implement measures to achieve employment targets set within national strategies.
- Develop measures to ensure equal conditions for disadvantaged employees within the community with respect to disabilities, gender, religion, and race.
- Ensure effective and compliant relocation of workers to be transferred from the Regional Hospital to Kokshetau Hospital by adequate and sensitive development and implementation of Employee Relocation Procedure, in order to protect their rights, to ensure the conditions they have now is maintained or improved in terms of their wages, benefits and ways of commuting to work etc.
- If the existing regional hospital is to be closed permanently, not to be used for another public service purpose, i.e. demolished; the potential negative livelihood impact of the businesses/shops nearby will be subject to further socioeconomic assessment and a livelihood restoration plan will be developed and implemented.



2.1.11 Will the Project Have An Impact on Cultural and Natural Heritage?

The Project Area as well as the district has no registered or listed heritage or cultural heritage. Nor has any significant intangible cultural heritage potential been identified. The only potential impact the Project might have in this regard would occur in the event of a chance find is damaged during earthworks. Proposed mitigation measures are listed below.

Construction Phase

A Chance Find Procedure to mitigate potential risks and protect historical or archaeological discoveries that may occur will be developed and implemented.

- Compliance with relevant provisions of “the Law of the Republic of Kazakhstan dated 2 July 1992, No. 1488 – XII on Protection and Use of the Objects of Historical – Cultural Heritage” and other relevant national legislative requirements.

Operation Phase

There is no impact expected for the operation phase of the Project.





3.0 Stakeholder Engagement

Good stakeholder engagement is critical to the success of the Project. A Stakeholder Engagement Plan (SEP) to be developed and implemented has identified stakeholders in advance of developing a structured stakeholder consultation and engagement process during all further stages of the Project implementation. Stakeholders identified to date include:

1. Community residing nearby (Saryarka Microdistrict & the Horse Farm being the main ones)
2. Disabled community residing in Saryarka Microdistrict supported and represented by relevant NGOs
3. Local authorities including Akimats
4. NGOs
5. Patients
6. Doctors, Medicine Students, Workers
7. Media
8. Medical Institutions

Main SEP activities will include:

Conduct a Public Consultation Meeting prior to initiation of the Construction Phase.

Conduct a Public Consultation Meeting prior to initiation of Operation Phase.

Conduct regular public consultation meetings set out in the SEP.

Disclose meaningful information when any change or alteration in the Project in terms of design or any other major changes that will directly or indirectly affect stakeholders in a timely manner.

Implement SEP fully conducting regular stakeholder meetings through the tools and methods set out in the SEP.

Implement and monitor the Grievance Mechanism for the operation period including GBVH incidents as well.

Disclose updated information on the Project web site and through the means described in SEP.

In addition, as stated in the “Commitment Register” document, where the actions for which TuRAR is responsible are specified, the actions specified within the scope of the stakeholder engagement activities include following:

- Support Project Company for Public Consultations and Information Disclosure, as well as periodical Stakeholder Engagement Meetings
- Perform a Public Consultation Meeting prior to initiation of Operation Period
- Implement, monitor and as required update the Project Stakeholder Engagement Plan.
- Implement and monitor the Grievance Mechanism for the operation period including GBVH incidents as well.
- Ensure the training management program includes specific training program on the GBVH matters to relevant staff to be given by a third-party competent Gender Expert experienced on GBVH addressing procedures.
- Disclose updated information on the Project web site and through the means described in SEP.

To effectively disclose relevant information with different stakeholder groups, the following documents will be published at the Project Company's and Industry Operator's website and in the Project Company's office and the Industry Operator's office as a paper copy:

- Non-technical summary (in Kazakh Russian and English)
- This Stakeholder Engagement Plan (in Kazakh Russian and English)

- Posters, Booklets, Leaflet and similar materials (in Kazakh Russian and English)

The international community will also be able to have access to the English versions of these documents from the Project Company website.

Table 1 Project Contact Details

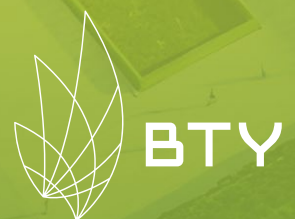
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