

**INTEGRATED SAFEGUARDS DATA SHEET
CONCEPT STAGE**

Report No.: AC1397

Date ISDS Prepared/Updated: 09/28/2005

I. BASIC INFORMATION

A. Basic Project Data

Country: West Bank and Gaza	Project ID: P064988
Project Name: Second Health System Development Project	
Task Team Leader: Anne Johansen	
Estimated Appraisal Date: June 30, 2006	Estimated Board Date: October 13, 2006
Managing Unit: MNSHD	Lending Instrument: Specific Investment Loan
Sector: Health (75%);Information technology (15%);Central government administration (10%)	
Theme: Health system performance (P);Other public sector governance (S)	
IBRD Amount (US\$m.):	0.00
IDA Amount (US\$m.):	0.00
GEF Amount (US\$m.):	0.00
PCF Amount (US\$m.):	0.00
Other financing amounts by source:	
BORROWER	0.00
EC: EUROPEAN COMMISSION	3.90
<u>SPECIAL FINANCING</u>	<u>10.00</u>
	13.90

B. Project Objectives [from section 2 of PCN]

5. The proposed development objectives for the project are: (a) To increase financial sustainability of publicly funded health services through improvements in the government health insurance program and better utilization of existing resources; (b) to provide users of publicly funded health care services with improved quality of care.

C. Project Description [from section 3 of PCN]

The proposed project envisions two components that are designed to address essential aspects of the key development issues outlined above. In the primary care sector, the project will scale up successful or promising activities from HSDP I, in particular, the quality improvement activities and the Clinical Information System. In addition, where possible, the project will extend these efforts to selected areas of secondary and tertiary care to promote a continuum of care. The project will also build on or benefit from on-going projects supported by other donors, particularly the European Union (EU), the World Health Organization (WHO), and the French, Swiss, and Austrian Technical Cooperations. Finally, the proposed project design takes into

consideration the currently available finance sources (from the World Bank and others) as well as the precarious fiscal situation facing the PA. The two components are:

Component 1: Reforming Government Health Insurance System and Improving the Capacity of the MOH to Manage the Health Sector and Its Expenditures.

This component will have two sub-components. The first sub-component focuses on updating the government health insurance system. This will include reviewing the existing benefit package (i.e., what is covered), premiums and cost-sharing rules, and eligibility and enrollment requirements (including the current provision that allows people to enroll at any time without a waiting period); and assessing the actuarial soundness of the current system. Based on these initial analyses, critical reform measures will be identified and initial steps introduced that improve financial viability and promote access, equity, and clinical effectiveness of the government health insurance system.

The second sub-component aims to strengthen the capacity of the MOH to plan and manage the Palestinian health sector by (a) providing support to the newly established Planning and Research Department of the MOH; (b) preparing a Palestinian master plan for all (public, UNRWA, private, and NGO) health infrastructure and human resource development in the West Bank and Gaza, based on the needs assessment being carried out by the EU Health Services Support Project; (c) developing investment and recurrent budget projections and human resource development strategy based on the master plan and needs assessments; and (d) further developing the HMIS to improve its utility as a management and planning tool.

Component 2: Improving the Quality of and Efficiency of Publicly funded Priority Health Services. This component will have two sub-components: The first will focus on improving structural aspects of the public health care system, through selected investments to upgrade and modernize substandard infrastructure. Investments will be selected on the basis of explicit cost-effectiveness (e.g., a new central drug store in Ramallah and partial replacement of Shifa hospital in Gaza city) and consistent with the Master Plan to be developed under Component 1.

The second subcomponent will develop a national quality improvement (QI) strategy, institutionalize previous QI activities, and continue the development and implementation of clinical guidelines, as well as provide improved and expanded training. A specific part of this sub-component will focus on improving health status and quality of care through further development and diffusion of the Clinic Information System, which in HSDP I proved effective in bringing about both clinical/health and efficiency gains.

D. Project location (if known)

West Bank and Gaza

E. Borrower's Institutional Capacity for Safeguard Policies [from PCN]

Under HDSP I, the MOH/PIU gained some capacity in environmental management and medical waste management.

F. Environmental and Social Safeguards Specialists

Mr John Bryant Collier (MNSRE)
 Mr Colin S. Scott (MNSRE)

II. SAFEGUARD POLICIES THAT MIGHT APPLY

Safeguard Policies Triggered	Yes	No	TBD
Environmental Assessment (OP/BP 4.01)	X		
New construction of medical stores and physical rehabilitation of health facilities may require the preparation and implementation of an environmental management plan and medical waste management plan at the affected sites.			
Natural Habitats (OP/BP 4.04)		X	
Forests (OP/BP 4.36)		X	
Pest Management (OP 4.09)		X	
Cultural Property (OPN 11.03)		X	
Indigenous Peoples (OD 4.20)		X	
Involuntary Resettlement (OP/BP 4.12)		X	
Safety of Dams (OP/BP 4.37)		X	
Projects on International Waterways (OP/BP 7.50)		X	
Projects in Disputed Areas (OP/BP 7.60)		X	

Environmental Category: B - Partial Assessment

III. SAFEGUARD PREPARATION PLAN

- A. Target date for the Quality Enhancement Review (QER), at which time the PAD-stage ISDS would be prepared: 06/15/2006
- B. For simple projects that will not require a QER, the target date for preparing the PAD-stage ISDS: N/A
- C. Time frame for launching and completing the safeguard-related studies that may be needed. The specific studies and their timing¹ should be specified in the PAD-stage ISDS. Launch of safeguard-related studies is expected to take place in January 2006 with completion by May 15, 2006.

¹ Reminder: The Bank's Disclosure Policy requires that safeguard-related documents be disclosed before appraisal (i) at the InfoShop and (ii) in-country, at publicly accessible locations and in a form and language that are accessible to potentially affected persons.

IV. APPROVALS

<i>Signed and submitted by:</i>		
Task Team Leader:	Ms Anne Johansen	09/27/2005
<i>Approved by:</i>		
Regional Safeguards Coordinator:	Mr Sherif Kamel F. Arif	
Comments:		
Sector Manager:	Ms Akiko Maeda	
Comments:		