

DR. CONSULTA - BRASIL
Environmental and Social Action Plan (ESAP)

No.	Aspect	Action	Deliverable	Delivery date
PS 1: Assessment and Management of Environmental and Social Risks and Impacts				
1.1	Environmental and Social Management System	1. Developing an Environmental and Social Management System ("ESMS").	1. ESMS Manual.	1. Twelve months after first disbursement.
		2. Implementing the ESMS.	2. Evidence of ESMS implementation.	2. Annually, as part of the Environmental and Social Compliance Report ("ESCR").
		3. Conducting an ESMS audit, considering management and process indicators, including recommendations for corrective and improvement actions.	3. ESMS audit report.	3. Eighteen months after first disbursement and annually thereafter, as part of the ESCR.
1.2	Sustainability Policy	1. Adopting a Sustainability Policy for Dr. Consulta.	1. Sustainability Policy for Dr. Consulta.	1. Nine months after first disbursement.
		2. Disseminating the Sustainability Policy to employees, contractors, vendors, and the external public.	2. Evidence of dissemination	2. Twelve months after first disbursement.
1.3	Environmental and Social Risk and Impact Identification Matrix.	1. Developing an Environmental and Social Risk and Impact Identification Matrix, including the identification and evaluation of risks related to climate change.	1. Environmental and Social Risk and Impact Identification Matrix.	1. Ten months after first disbursement.
		2. Updating the Environmental and Social Risk and Impact Identification Matrix, including the identification and evaluation of risks related to climate change.	2. Updated Environmental and Social Risk and Impact Identification Matrix	2. Annually, as part of the ESCR.
1.4	Organizational Capacity and Competency	1. Appointing an employee to be responsible for leading and monitoring the ESMS implementation.	1. Evidence of appointment.	1. Six months after first disbursement.
1.5	Monitoring and Review	1. Developing the ESMS Monitoring Program to establish performance indicators, KPIs, procedures, persons in charge and monitoring frequency.	1. ESMS Monitoring Program	1. Eighteen months after first disbursement.
		2. Implementing the ESMS Enhancement Program	2. Evidence of implementation, including monitoring results based on the established performance indicators and KPIs.	2. Annually, as part of the ESCR.
1.6	Environmental Licensing and Permitting	1. Obtaining the National Healthcare Establishment Registration ("CNES," in Portuguese) for the Osasco outpatient unit.	1. CNES for the Osasco medical center unit.	1. When issued by the proper authorities.
		2. Requesting the Executive Project Technical Approval Report ("LTA," in Portuguese) for the Ibirapuera and Metrô Luz outpatient units.	2. Evidence of LTA request for the Ibirapuera and Metrô Luz outpatient units.	2. Six months after first disbursement.
		3. Requesting Health Licenses for all pending units.	3. Health License requests	3. Six months after first disbursement for units that already have the LTA, and, for the Ibirapuera, Metrô Luz, and Tatuapé 2 outpatient units, four months after LTA approval.
		4. Obtaining all required Health Licenses for all units.	4. Health Licenses.	4. When issued by the proper authorities.
		5. Requesting a National Public Signage Registration ("CADAN", in Portuguese) for all units to which the requirement applies and for which approval is pending.	5. Evidence of CADAN requests.	5. Four months after first disbursement.

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		6. Obtaining a National Public Signage Registration (CADAN) for all units.	6. CADAN for all units.	6. When issued by the proper authorities.
		7. For each new unit, requesting licenses, permits, and registrations from the proper authorities and agencies as required under local legislation	7. Evidence of requests of licenses, permits, and registrations, as applicable.	7. Six months after start of operations at the new unit.
		8. Obtaining all licenses, permits, and registrations for new units as required under local legislation.	8. Licenses, permits, and registrations for the new unit as required under local legislation.	8. When issued by the proper authorities.
		9. Preparing an annual Action Plan, including a schedule of execution, to adapt or update all licenses, permits, and registrations required under local legislation.	9. Action Plan.	9. Six months after first disbursement and annually thereafter, as part of the ESCR.
		10. Implementing the Action Plan.	10. Evidence of implementation.	10. Annually, as part of the ESCR.
PS 2: Labor and Working Conditions				
2.1	Internal Grievance and Complaint Mechanism	1. As part of the Ethics Channel, developing a procedure that establishes: i) the types of complaints and requests that it may receive; ii) a channel to capture complaints from direct employees, contractors, and service providers; iii) a confidentiality and non-retaliation guarantee; iv) the possibility of capturing anonymous complaints; v) registration procedures; vi) response times for each type of complaint; vii) teams responsible for managing complaints; and viii) a specific procedure to receive and manage complaints regarding moral and sexual harassment and discrimination.	1. Ethics Channel procedure.	1. Six months after first disbursement.
		2. Disseminating the procedure to direct employees, contractors, and service providers.	2. Evidence of dissemination of the procedure to direct employees, contractors, and service providers.	2. Nine months after first disbursement.
		3. Implementing the procedure.	3. Evidence of implementation.	3. Annually, as part of the ESCR.
2.2	Nondiscrimination and Equal Opportunities	1. Developing the Diversity and Inclusion Committee Policy to establish the scope of action, composition, governance, and schedule of annual activities.	1. Diversity and Inclusion Committee Policy.	1. Six months after first disbursement.
		2. Implementing the Diversity and Inclusion Committee Policy.	2. Evidence of implementation (minutes, activity reports, etc.).	2. Annually, as part of the ESCR.
2.3	Occupational Health, Safety and Security	1. For new units or whenever there are changes in work conditions at existing units, preparing a Technical Report on Work Environment, Health Hazard or Risk Conditions (" <i>Lauda Técnico das Condições Ambientais de Trabalho, de Insalubridade ou Periculosidade,</i> " in Portuguese)	1. Preliminary Technical Report on Work Environment, Health Hazard or Risk Conditions.	1. Six months after start of operations at the new unit, or one month after work conditions change at existing units.
		2. Developing a Risk Management Program for each new Dr. Consulta unit.	2. Risk Management Program at the new unit.	2. Three months after start of operations at the new unit.
		3. Updating the Risk Management Program of all Dr. Consulta units annually.	3. Risk Management Program of all units.	3. Annually, as part of the ESCR.
		4. Developing the Occupational Health Surveillance Program for each new Dr. Consulta unit.	4. Occupational Health Surveillance Program at the new unit.	4. Six months after start of operations at the new unit.
		5. Updating the Occupational Health Surveillance Program of all Dr. Consulta units based on the expiration date of each unit's OHSP.	5. Renewal of units' Occupational Health Surveillance Program as they expire.	5. Annually, as part of the ESCR.
		6. Developing a Standard Operating Procedure for Health and Safety Management of MRI Services.	6. SOP for Health and Safety Management of MRI Services.	6. One month after first disbursement.
2.4	Provisions for persons with disabilities.	1. Developing a Procedure of Hiring and Human Resources Managing for Persons with Disabilities that establishes: i) recruitment and hiring procedures; ii) hiring percentage goals based on local legislation; and iii) work environment adaptations to ensure inclusion of persons.	1. Standard Operating Procedure Hiring and Human Resources Managing for Persons with Disabilities.	1. Six months after first disbursement.

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		2. Implementing the Procedure to Hire and Manage Persons with Disabilities.	2. Evidence of implementation and report on percentage of PWD employees.	2. Twelve months after first disbursement and annually thereafter, as part of the ESCR.
2.5	Gender Risks	1. Implementing at least one lactation room in an outpatient unit strategically located to provide wide access for employees.	1. Evidence of implementation.	1. If implemented in a new outpatient unit, at opening of the new unit. If implemented in an existing unit, twelve months after first disbursement.
PS 3: Resource Efficiency and Pollution Prevention				
3.1	Resource Efficiency	1. Developing an Efficient Water and Energy Use Program	1. Efficient Water and Energy Use Program.	1. Six months after first disbursement.
		2. Implementing the Efficient Water and Energy Use Program.	2. Reports with data on annual consumption and program implementation.	2. Annually, as part of the ESCR.
PS 8: Cultural Heritage				
8.1	Cultural Heritage	1. Implementing adaptations to façade and external area at units that are close to historical heritage areas, as applicable, and according to requirements established by CONDEPHAAT.	1. Evidence of implementation of adaptations.	1. Three months after request from the proper authorities during the CADAN obtention process,