Environmental and Social Monitoring Report

Project Number: 54293-001

Semi-annual Report for the period from January to June 2026

July, 2026

ARM: HEALTHCARE QUALITY IMPROVEMENT PROGRAM (Financed by the ADB)

Prepared by Armenian Territorial Development Fund and Health Project Implementation Unit for the Asian Development Bank

Contents

CURRENCY EQUIVALENTS

(as of 15 July - 2026)

Currency unit	–	Armenian dram (AMD)
AMD 1.00	=	$ 0.0027
$1.00	=	367.25 AMD

ABBREVIATIONS

ADB	–	Asian Development Bank
AP(s)	–	Affected Person(s)
ATDF	–	Armenian Territorial Development Fund
CC	–	Construction Contractor
DC	–	Design Company
DLI	–	Disbursement-Linked Indicator
EA	–	Executing Agency
EMP(s)	–	Environmental Management Plan(s)
E&S	–	Environmental and Social
EARF	–	Environmental Assessment and Review Framework
GRM	–	Grievance Redress Mechanism
HCF	–	Health Care Facility(ies)
HPIU	–	Health Project Implementation Unit
HQIP	-	HealthCare Quality Improvement Program
IR	–	Involuntary Resettlement
LARF	–	Land Acquisition and Resettlement Framework
MOH	–	Ministry of Health
OHS	–	Occupational Health and Safety

PAP	–	Project action plan
RA	–	Republic of Armenia
SAEMR	–	Semi-Annual Environmental Monitoring Report
SDDR	–	Social Due Diligence Report
SEIA	–	State Environmental Impact Assessment
SPS	–	Safeguard Policy Statement (ADB, 2009)

NOTE(i) In this report, "$" refers to United States dollars .

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1. Introduction

This Second Semi-Annual Environmental Monitoring Report (SAEMR) has been prepared within the framework of the "HealthCare Quality Improvement Program" (HQIP) in accordance with the requirements of the ADB Safeguard Policy Statement (SPS 2009) for the Health Quality Improvement Program. The report covers the January–June 2026 reporting period and presents the progress of program implementation, the status of E&S safeguard measures, environmental monitoring activities, identified issues, and corrective actions.

The objective of the Program is to support the RA Government in improving the quality of healthcare services. The Program supports ongoing reforms in the healthcare sector through infrastructure development, strengthened management capacities, and the institutionalization of quality measurement and accountability mechanisms. The intended outcome is a measurable improvement in service quality, supported by the availability of climate-resilient, gender-responsive, and inclusive healthcare facilities, enhanced organizational and service delivery capacities, and established systems for quality monitoring and accountability. The objective of the Program is to support the RA Government in improving the quality of healthcare services. The Program supports ongoing reforms in the healthcare sector through infrastructure development, strengthened management capacities, and the institutionalization of quality measurement and accountability mechanisms. The intended outcome is a measurable improvement in service quality, supported by the availability of climate-resilient, gender-responsive, and inclusive healthcare facilities, enhanced organizational and service delivery capacities, and established systems for quality monitoring and accountability.

During the current reporting period, the primary focus has shifted to active construction oversight, regular health and safety monitoring at the 19 subproject sites, and ensuring swift compliance with safeguard standards following midterm project reviews.

2. Institutional Arrangements

The Ministry of Health (MoH) of the Republic of Armenia (RA) is the Executing Agency (EA) and Implementing Agency (IA) for all outputs under the Program. The MoH exercises its functions through the HPIU and ATDF. The MoH, as the EA, has overall Program oversight and steering responsibility, which includes preparing, implementing, and financing all Land Acquisition and Resettlement (LAR) tasks, as well as cross-agency coordination.

The HPIU holds an overall coordinating role. It collates inputs from across all divisions, consolidates reports, and submits periodic progress reports on Disbursement-Linked Indicator (DLI) achievements and Project Action Plan (PAP) activities. Specifically, the HPIU is responsible for:

The design of healthcare facilities;
Public consultation meetings were organized with the support of Consultants and Local Self-Government Bodies (LSGBs) during the Program preparation stage. The public consultations were conducted in Ararat and Armavir Regions, with 23 participants in Ararat Region and 24 participants in Armavir Region. The consultations focused on informing local stakeholders and communities about the planned Program activities and providing an opportunity to raise questions and provide comments and feedback (Appendix 1). Assisting in the settlement of individual complaints during the design and construction stages as an active member of the Grievance Review Committee;
Ensuring proper internal monitoring and disclosure of results (including consolidated monitoring and progress reports regarding design and equipment components).
The ATDF acts as the Co-Implementing Agency under the Program, responsible for the construction (rehabilitation) of health facilities, including the tendering of civil works under Output 1.1 (DLI3). All LAR-related tasks are implemented through ATDF.
For E&S safeguards, ATDF is responsible for adapting the standard designs to specific locations, as well as the implementation, monitoring, and administration of safeguards, including immediate oversight of physical civil works. ATDF ensures that all Program activities undergo environmental due diligence up to the level prescribed for ADB Environment Category B.
Furthermore, environmental and health & safety considerations are incorporated into detailed designs, drawings, and technical specifications. Appropriate environmental costs are integrated into the BoQs, with implementation designed to adhere directly to ADB guidelines and local regulatory requirements. The monitoring of mitigation measures and related reporting are conducted by the allocated ATDF safeguard staff in full compliance with ADB requirements. One Environmental Specialist and one Social Specialist under the E&S Department of ATDF are actively assigned to the Program.

3. Program Description

Within the framework of the Program, the environmental and involuntary resettlement (IR) safeguard requirements of the ADB (SPS, 2009) have been applied. The Program has been classified as Environmental Category “B”, as its potential impacts are site-specific, temporary, and manageable through the implementation of appropriate mitigation measures.

The Program is co-financed by the Government of the RA and the ADB and is implemented under a results-based lending modality. The Program aims to improve the quality of health care in Armenia. It supports important developments and reforms in Armenia’s health sector. The outcome of the Program is the quality of care improvements demonstrated, and the key outputs are

(i) climate- and gender-responsive and inclusive health facilities for quality health services delivered,
(ii) capacity and organization for quality of care strengthened, and
(iii) quality of care measurement and accountability institutionalized.

The Program is aligned with the GoA Program 2021-2026, the Health Sector Strategy 2023-2026, the Concept Note for Universal Health Insurance, the Quality-of-Care Strategy 2022-2026, and the Primary Health Care Action Plan (July 2022).

Having nationwide coverage, the Program will be implemented over a period of four years.

Three types of health facilities will be supported under the program, which include
(i) ambulatories,
(ii) policlinics, and
(iii) regional medical centres.

At least 24 health facilities will be constructed/reconstructed under the Program.

4. Environmental and Social Instruments and Requirements

The Program is implemented in accordance with the requirements of the ADB (SPS, 2009). Based on the safeguard screening conducted during project preparation, the Program has been classified as Category B for Environmental and Social Safeguards, indicating that potential environmental impacts are site-specific, temporary, and can be effectively mitigated through the implementation of appropriate environmental management measures.

Environmental impacts are anticipated for the Program activity under output 1.1, related DLI 3: "(i) By 2028, at least 24 health care facilities are rehabilitated, or constructed and equipped, meeting criteria for climate change mitigation and adaptation, inclusive design and gender responsiveness". These comprise physical civil works that will cause moderate adverse environmental impacts typical for upgrading and constructing small- to medium-sized buildings. Physical works will involve construction and rehabilitation of medium-sized health facilities, the medical center, polyclinics, and ambulatories— with an average size of 11,000; 1,568 and 305 square meters (m^2) respectively, and serving about 200,000 people in total. Having nationwide coverage, the Program will be implemented over a period of four years.

The negative environmental impacts of the civil works are largely localized within construction sites, site-specific, short-term in nature, and limited to the construction period. They include: (i) generation of waste during demolition of existing buildings and construction, potentially including material containing asbestos; (ii) dust, emissions, and localized atmospheric air pollution; (iii) wastewater discharge, which could cause minor contamination of soil and waterbodies; (iv) increased noise and vibration that creates a nuisance for neighbouring houses and residents; (v) impact on roads and traffic; and (vi) occupational and community health and safety risks. The impacts are effectively mitigated through the application of standard construction and operation management practices.

The total construction footprint of the ambulatory facilities does not exceed 1,500 sq. m, and the area of paved/impervious improvements does not exceed 1,000 sq. m. Consequently, the working design documentation for these ambulatory facilities is not subject to State Environmental Impact Assessment (SEIA).

The Program has been categorized as category B for Environment and IR. The Program is not expected to cause physical or economic displacement. No permanent/temporary IR impacts are envisaged, as the Program intends to either reconstruct (or rehabilitate) the existing health facilities at the exact sites (locations) where they were built or, if new facilities are to be built, to screen the sites (using the IR Screening Checklist) and prepare Social Due Diligence Report (SDDR) confirming the absence of IR impacts, excluding any sites with confirmed/expected potential for IR impacts. It is strictly restricted to use private and community-owned land for the program needs. This approach will minimize IR and impacts on private and community-owned property, if any. However, with no specific program site areas being identified at the Program preparation stage, no due diligence process initiated based on the Detailed Design, and no SDDR prepared to confirm the absence of the IR impacts, the Program was classified to IR category B, and the corresponding Land Acquisition and Resettlement Framework (LARF) was prepared by an individual consultant during the Project preparation period in coordination with HPIU and ATDF.

5. Project Contracts and Management

The MOH acts as the EA for all outputs under the Program. The HPIU and the ATDF act as Co-Implementing Agencies for Output 1.1 (DLI 3). ATDF is in charge of managing tenders for the construction and civil works of healthcare facilities.

5.1 Design Adaptation and Approval Status

The preparation and approval of the modular design for ambulatory healthcare facilities, including its positive state expertise conclusion (obtained on 25 February 2025) and the integration of E&S safeguard requirements, were completed and detailed in the previous semi-annual report. During the current reporting period, works continued on the site-specific adaptation of the modular design by the Construction Contractors (CCs) to ensure compliance with local site conditions and safeguard standards. The current status of these activities for each site, along with the list of construction and supervision contractors, is reflected in Appendix 1.

5.2 Update on Construction Contracts Management and E&S Monitoring

The institutional arrangements, contract management procedures, and E&S safeguard responsibilities for the construction contractors (CCs), design companies (DCs), and technical supervision companies remain as detailed in the previous reporting period. During this reporting period, ATDF E&S specialists conducted periodic site visits to monitor environmental and OHS compliance, ensuring that all mitigation measures are implemented in accordance with ADB safeguard requirements and national legislation.
All construction contracts remain active, and works continue under the oversight of independent technical supervision companies. The current construction progress, along with the updated list of active contractors and supervision companies for each medical ambulatory, is reflected in Appendix 1.

6. Activities Undertaken During the Reporting Period

During the reporting period of January-June 2026, the following key activities were carried out:

- Active progression of site adaptation and civil construction works of the 19 ambulatories;;
- Conducting routine environmental monitoring and oversight visits to construction sites by ATDF E&S specialists and technical supervision teams;
- Facilitating the ADB Project Review Mission in May 2026 and formulating corresponding corrective actions based on the mission's findings.
- On-site consultations were conducted per month by the ATDF E&S specialists. Consultations were held at the sub-project sites in the communities where the ambulatory facilities were under construction.

7. Design Integration with Environmental and Social Safeguard Standards

During the preparation of the modular design for ambulatory healthcare facilities, E&S safeguard considerations were fully incorporated into the design process in accordance with ADB SPS (2009) and applicable national regulations. Particular attention was given to environmental protection, energy efficiency, climate resilience, gender-responsive and inclusive accessibility, as well as occupational health and safety (OHS) requirements.

These pre-approved E&S requirements and technical specifications remain integrated into the design packages. During the ongoing site-specific adaptation stage, the Construction Contractors (CCs) and their contracted Design Companies (DCs) are legally bound by contract to ensure that all localized designs strictly adhere to these established E&S standards, with performance monitored against ADB guidelines and national laws.

8. Changes in Project Scope and Safeguard Implications

During the reporting period, no major changes were made to the core design concepts or institutional arrangements that would negatively affect E&S safeguard requirements. All activities continued to be implemented in accordance with the approved Program design, the Environmental Assessment and Review Framework (EARF), and ADB SPS (2009).

Notably, to enhance inclusive accessibility and ensure barrier-free access to the ambulatories for persons with limited mobility, stair-climbing wheelchair lifts (wheelchair platform lifts) were integrated into the design.

9. Environmental Safeguard Compliance

To ensure compliance with ADB and national environmental requirements, the focus during the reporting period shifted from pre-construction screening (which was fully completed for all 19 sites in the previous period) to active construction-phase monitoring.

The following safeguard activities were implemented during the current reporting period:

- Regular Site Monitoring Visits: Monthly monitoring visits were conducted by ATDF Environmental and Social specialists to all 19 medical facility sites located across Syunik, Armavir, Ararat, Tavush, Gegharkunik, Shirak, Kotayk, Lori, and Aragatsotn regions. These visits focused on verifying on-site compliance with environmental requirements, including waste management, dust suppression, and soil/water protection. Occupational Health and Safety (OHS) Specialists monitored contractors' compliance with safety protocols. During the inspections, minor non-compliances were identified, primarily regarding:

  - Inadequate dust control measures;
  - Non-use or partial use of Personal Protective Equipment (PPE) by workers;
  - Accumulation of construction waste on site;
  - Unsafe electrical wiring (exposed wires without proper sockets/switches).

  The instructions were issued to the respective Construction Contractors (CCs), defining a strict timeframe of **3 to 5 days** to rectify all identified deficiencies. All corrective actions were successfully implemented within the designated period, confirmed by follow-up verifications and photo documentation submitted by the contractors.

- Grievance Redress Mechanism (GRM) Supervision: Ensuring that Grievance Logbooks are established and maintained at all active construction sites, and verifying that no community complaints or unresolved grievances were recorded during this period.

- On-site Guidance and Coordination: Providing ongoing instructions and clarifications to Construction Contractors (CCs) and Technical Supervision Companies to ensure proper understanding and implementation of ADB safeguard standards.

9.1 Construction Waste Management

Construction waste generated during civil works activities is managed in accordance with national environmental regulations and contractual environmental requirements. Contractors are responsible for ensuring proper collection, temporary storage, transportation, and disposal of construction waste generated at the sites.

Waste management measures implemented during construction include:

- ✓ segregation of construction waste at the site where feasible;
- ✓ provision of designated waste containers for temporary storage of construction debris;
- ✓ regular removal of waste from construction sites to licensed municipal disposal locations;
- ✓ prohibition of uncontrolled dumping or burning of construction waste;
- ✓ maintenance of good housekeeping practices to prevent accumulation of waste on site.

The main waste stream generated during the construction of the ambulatories was excavated soil. On average, approximately 2,200 m^3 of excavated soil is generated during the construction of one ambulatory. Depending on the type and suitability of the excavated soil, approximately 200 m^3 per site may be reused for backfilling. The remaining excavated soil, where unsuitable for reuse, is transported to designated/authorized disposal locations in accordance with applicable requirements. Thus, where the excavated soil is suitable for backfilling, approximately 2,000 m^3 per ambulatory is expected to require removal/disposal. The actual quantities depend on the soil characteristics and site-specific construction conditions.

Other construction waste generated during the works includes concrete and masonry residues, packaging materials, wood, metal, plastic and other construction debris. Such waste is collected separately where feasible, temporarily stored in designated areas/containers, and regularly removed from the construction sites for appropriate disposal or recycling/reuse, where applicable.

Domestic waste generated by construction workers was estimated using the waste generation rate specified in the relevant Armenian construction norms. The applicable rate is 360 kg/person/year (or 1.3 m^3/person/year)[1]. Based on an average workforce of approximately 10 workers per ambulatory and a six-month reporting period, the estimated domestic waste generation is calculated as follows:

Waste stream / parameter	Per one ambulatory	19 ambulatories
Average number of workers	10 persons	190 persons
Reporting period	6 months (0.5 year)	6 months (0.5 year)
Domestic waste generation rate	360 kg/person/year	360 kg/person/year
Estimated domestic waste generated	1,800 kg (1.8 t)	34,200 kg (34.2 t)
Equivalent volume	6.5 m^3	123.5 m^3

The domestic waste estimate is based on the following calculation:
10 workers × 360 kg/person/year × 0.5 year = 1,800 kg (1.8 tonnes) per ambulatory for six months.
Other construction waste: Site-specific; quantities depend on construction activities.

10. Environmental Monitoring

10.1 Environmental Monitoring Results

This SAEMR covers the January–June 2026 period and summarizes the environmental monitoring activities conducted during construction works under the project. The monitoring focuses on assessing compliance with environmental protection measures, occupational and community health and safety requirements, and good construction practices.

During the reporting period under the Review Mission for the Health Care Quality Improvement Program a joint environmental monitoring site visit was conducted on 7 May 2026. The mission team of ADB was led by Mrs. Kirthi Ramesh (Senior Social Sector Specialist, ARRM) and included Mrs. Lilit Dilanyan (Safeguards Officer (Social), and Mr. Tigran Oganezov (Environmental Safeguard Specialist). The ATDF implementing agency was represented by Mr. H. Chobanyan (Project Coordinator), Mrs. Armine Gabrielyan (Environmental Specialist), and Mrs. Meri Abrahamyan (Social Safeguards Specialist).

During the mission, representatives visited several project sites, including the Vardanashen and Lenughi community ambulatory construction sites. The representatives paid close attention to compliance with environmental and social (E&S) standards, particularly the presence of information boards, warning signs, the availability of

[1] In the absence of site-specific weighing records, domestic waste generated by construction workers was estimated using the municipal solid waste generation rate of 360 kg/person/year (or 1.3 m^3/person/year) specified in Table 44 of RA Construction Norms ՀՀՇՆ 30-01-2023.

recycling/waste bins, and sanitary and hygienic conditions at the construction sites. In addition, several design-related issues were discussed with the implementing agency.

The specific EHS observations raised by the ADB Environmental Specialist during this mission, along with the corresponding corrective action plan and response status, have been integrated into this report and are detailed in Section 10.3 and Appendix 4.

10.2 Qualitative and Quantitative Monitoring Data

Environmental monitoring is conducted through site inspections, visual observations, and review of construction practices was carried out at all 19 project sites.

Environmental monitoring during the reporting period was conducted through regular site inspections and visual observations of construction activities and site conditions. Monitoring activities were carried out jointly by E&S specialists of ATDF, technical supervision companies, and contractors' site representatives.

Daily supervision of construction activities, quality control, as well as monitoring compliance with E&S measures, is carried out by the technical supervision companies. During the reporting period, regularly monitoring site visits (typically once per month) were conducted by E&S specialists of ATDF to ensure compliance with E&S standards.

Monitoring activities were carried out in accordance with the environmental monitoring approach defined in the EARF and applicable national regulations. Monitoring methods included site inspections, visual observations and photographic documentation by ATDF E&S specialists, technical supervision companies, and contractors' site representatives.

The E&S parameters were monitored according EARF Monitoring checklist (Appendix 3).

The monitoring results presented in the table indicate that environmental and OHS measures were generally implemented across all 19 construction sites. Minor issues were identified during site inspections, mainly related to dust suppression, temporary waste accumulation, use of personal protective equipment (PPE), and fencing of construction areas. These issues were typical for construction activities and did not result in significant environmental or safety risks.

Table 1. Summary of Environmental and OHS Monitoring Results

Monitoring Parameter	Number of Sites Inspected	Issues Identified	Status
Dust suppression	19	9	Corrected
Waste management	19	8	Corrected
PPE compliance	19	7	Corrected
Site fencing	19	8	Corrected

The monitoring results indicate that construction activities generally comply with the environmental protection requirements set by national legislation of the RA and the environmental management provisions included in the construction contracts. Environmental conditions observed during site inspections were within acceptable limits for construction activities and consistent with the environmental good practice standards reflected in ADB's environmental, health, and safety guidelines.

10.3 Corrective actions

The monitoring activities during the reporting period identified several minor non-compliances related to dust suppression, waste management, and PPE use, as summarized in Table 2. Corrective actions were promptly communicated to the responsible contractors and technical supervision teams. Water spraying for dust suppression was increased immediately where needed, additional waste containers were provided at selected sites (and safety briefings were reinforced to improve PPE compliance. Implementation of these actions has been closely monitored by ATDF E&S specialists and technical supervision staff. While most corrective actions have been fully implemented, ongoing supervision is continuing for PPE compliance to ensure consistent adherence to safety protocols. Overall, the timely identification and corrective measures have effectively mitigated potential environmental and occupational health risks, contributing to safer and more environmentally responsible construction practices.

Table 2. Summary of corrective actions

Issue	Location	Action Required	Responsible	Status of implementation
Insufficient dust suppression	Several sites	Increase water spraying during dry weather	Contractor	Immediate
Temporary waste accumulation	Several sites	Provide additional waste containers	Contractor	Completed
PPE use inconsistent	Several sites	Reinforce safety briefing and supervision	Contractor & Supervision	Completed

10.3.1 ADB Joint Mission (7 May 2026) – Specific Observations and Responses

To address the specific EHS findings raised by the ADB Environmental Specialist during the joint mission on 7 May 2026, the PIU (ATDF) immediately issued instructions

and Corrective Action Plans (CAP) to the respective contractors at the Lenughi and Vardanashen sites.
Appendix 4 and 5 details the exact observations made by the ADB mission and the formal response/rectification status implemented by the ATDF and the contractors:
During the January–June 2026 reporting period, no unanticipated environmental impacts or high-risk situations were observed at any of the 19 construction sites. Monitoring inspections confirmed that construction activities remained within the expected E&S risk profile identified in the EARF.

10.4 Summary of Monitoring Outcomes

Monitoring results during the reporting period indicate that construction activities across all 19 project sites were generally in compliance with E&S standards of the RA and the environmental good practice standards reflected in the ADB EHS Guidelines. Minor non-compliances were observed, including improper removal of construction waste from the site, insufficient use of water spraying for dust suppression, etc. for which corrective actions were applied. The monitoring findings confirm that environmental impacts associated with the construction activities remain localized, temporary, and manageable through the application of standard mitigation measures. No significant environmental impacts or high-risks situations were identified No accidents or incidents were reported during the reporting period.

11. Social Safeguards Monitoring

11.1. Social Safeguards Requirements

Social safeguards monitoring is conducted in accordance with the ADB SPS (2009) and applicable national legislation. The Project aims to avoid or minimize adverse social impacts, including involuntary resettlement(IR) and to ensure that vulnerable groups are not disproportionately affected by project activities.

Key requirements include impact screening, preparation and implementation of safeguard documents (if applicable), stakeholder consultations, functioning of the GRM, timely compensation to affected persons (Aps), and regular monitoring and reporting. Particular attention is given to identifying any unforeseen land acquisition or resettlement impacts during implementation. If such impacts are identified, the procedures established in the Project Land acquisition and Resettlement Framework (LARF) and the ADB SPS (2009) will be applied before the commencement of the relevant works.

The ATDF is responsible for overseeing the implementation of social safeguard requirements, ensuring compliance with the Project LARF and ADB SPS (2009), coordinating monitoring activities, and ensuring that any identified non-compliance or unforessen impacts are addressed through appropriate corrective actions.

11.2. Objectives and Scope of Social Monitoring

(i) Objectives

The main objective of social monitoring is to ensure that project implementation complies with the social safeguards requirements of the ADB SPS, Project LARF and relevant national legislation. Social monitoring aims to assess the effectiveness of mitigation measures, identify any unforeseen social impacts, and ensure that affected people are adequately informed, consulted, and compensated where applicable.

(ii) Reports Tracking

Reports tracking is conducted to systematically monitor the preparation, submission, and review of social safeguard documents and reports. This includes internal monitoring reports, semi-annual social monitoring reports, grievance redress records, and other relevant documentation. The tracking process ensures that all reports are submitted in a timely manner, meet ADB requirements, and accurately reflect the current status of project implementation. It also helps identify delays, gaps, and areas requiring corrective actions.

12. Methodology behind IR Monitoring and summary of monitoring outcomes

The methodology for monitoring social impacts is based on a combination of multiple approaches. Data is collected through field visits, site observations, consultations with affected persons (if any) and stakeholders, and review of project documentation. The monitoring process includes verification of safeguard implementation, assessment of compliance with approved plans, and evaluation of the effectiveness of mitigation measures. Grievance records are regularly reviewed to identify recurring issues and ensure timely resolution. The findings are documented and used to recommend corrective actions where necessary.

The IR safeguards monitoring was carried out in accordance with the approved project documents and the requirements of the ADB SPS 2009. Project activities were confined to existing boundaries and did not involve land acquisition, physical or economic displacement, or any impacts on livelihoods.

Based on monitoring results and due diligence conducted during implementation, no involuntary resettlement impacts, as per SPS 2009, were identified. Accordingly, no compensation, resettlement, or livelihood restoration measures were required.

Ongoing monitoring confirms that the project continues to be fully compliant with applicable ADB social safeguard requirements.

13. Implementation procedures

Grievance Redress Mechanism

A GRM, established in line with ADB policies and guidelines, is maintained throughout the entire Program cycle—from pre-construction and design to construction and operation—to receive feedback, concerns, and complaints from affected persons (Aps), including those related to environmental issues. The GRM ensures a transparent, accessible, and timely process for registering and resolving grievances, involving the complainants, Contractor, ATDF, DC, HPIU, and MOH, without limiting the APs' right to seek judicial or administrative remedies.

The person affected by the Project (AP) can raise suggestions/ concerns/ complaints first to the Contractor's dedicated grievance staff, so an attempt will be made to resolve complaints at the local level. To maintain transparency and accountability to affected communities and to make information, assistance and grievance resolution services accessible to the APs, the construction contractors have established on-site GRM activities:

- Project boards/ posters containing information on field office location, contact information, including phone numbers, regular mail and email addresses, etc.).
- Field office.
- Grievance register logbook kept in the field office.
- Dedicated grievance redress staff.
- Designated telephone line and e-mail address.

APs can approach Contractor's representative (construction foreman, engineer, social or environmental specialist) on-site and/ or register the suggestion /complain into the grievance register logbook kept by Contractor at the field office established nearby the construction site. Should the issue be out of Contractor's responsibility and competence, Contractor shall forward the issue to ATDF, if not satisfied, the AP can apply to the MOH via lodging the complaint within two weeks after receiving/not receiving the response from the Contractor. The ATDF or MOH/HPIU shall inform the complaint within 2 days of acknowledging receipt and shall respond to the application within 30 days. If the AP is not satisfied with the ATDF's or HPIU's resolution of his/her complaint, then the complaint can be lodged with the GRC.

Information on the GRM is communicated to local communities and other stakeholders through announcements, and is also disclosed on official websites and on project information boards at the construction sites.

During the reporting period no grievances or complaints related to environmental or social issues were registered through the GRM mechanism.

14. Example of good practice and opportunities for improvement.

During the reporting period, E&S management measures at the construction sites were implemented in accordance with contractual obligations and national regulations. Site inspections confirmed that contractors generally followed the E&S mitigation measures defined in the safeguard documentation.

Notably, a good practice observed during this period was the Contractors' prompt and corrective responsiveness to the findings of the ADB Mission. Immediate actions were taken to rectify identified non-compliances, particularly regarding electrical safety, site cleaning, and worker training, demonstrating a commitment to continuous compliance.

To sustain these improvements, enhanced daily on-site supervision by both the Contractors and the Technical Supervision organizations remains a continuous recommendation. Capacity-building activities and regular toolbox briefings focusing on hazard recognition and safe work practices were expanded during this period and should be maintained routinely throughout the construction cycle

Summary and recommendations. Overall, the monitoring results indicate that E&S management practices at the construction sites are generally satisfactory and consistent with the project safeguard framework. The successful resolution of the corrective actions requested during the reporting period reflects improved E&S performance.

For the next monitoring period, it is recommended to maintain strict adherence to E&S measures, ensure continuous daily monitoring of housekeeping and electrical safety, and conduct regular refreshers of safety briefings for new worker personnel to sustain a proactive safety culture."

15. Training and Capacity Building

During the reporting period, training and awareness-raising sessions were conducted for Contractors and TSC staff on environmental protection and OHS issues.

Rather than being one-time events, these capacity-building sessions are carried out on an on-going basis directly on-site by the ATDF E&S safeguard specialists. During these continuous site briefings and meetings, the main focus is placed on addressing specific site observations, reinforcing compliance with E&S standards, and mitigating risks in real-time. The importance of maintaining these regular, practical on-site discussions and periodic training sessions was strongly emphasized to ensure that E&S standards are implemented effectively, dynamically, and in full compliance with the requirements set by national legislation and donor organizations.

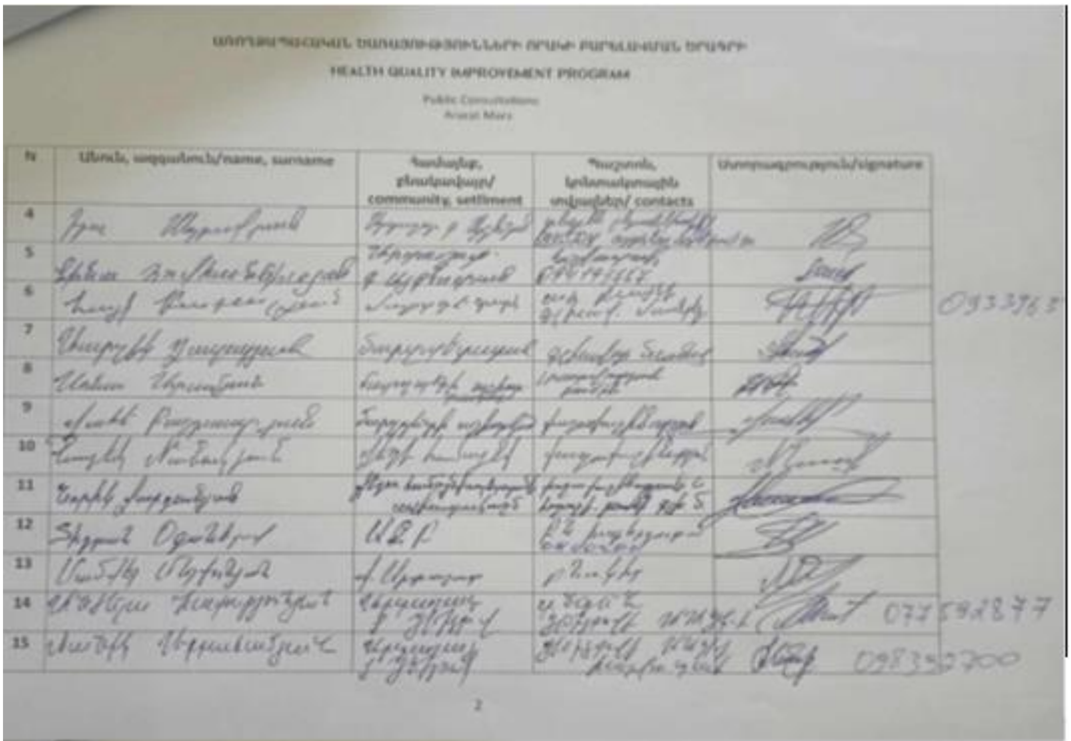
16. Focus of the Next Monitoring Period

The next E&S monitoring report will cover the period July–December 2026. Monitoring activities will focus on continued supervision of construction activities, strengthening OHS practices, and ongoing environmental training for contractors and supervision staff.

Based on the monitoring experience during the reporting period, continued emphasis will be placed on strengthening site safety management, dust suppression practices, and waste management. Additional awareness-raising activities for contractors and supervision staff will also be implemented to further improve environmental and OHS performance.

Appendix 1. Photographs and Attendance Lists of Public Consultation Meetings

Ararat Region



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HEALTH QUALITY IMPROVEMENT PROGRAM

Public Consultations
Ararat Marz

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HEALTH QUALITY IMPROVEMENT PROGRAM

Public Consultations
Ararat Marz

N	Անուն, ազգանուն/name, surname	Համայնք, բնակավայր/ community, setliment	Պաշտոն, կոնտակտային տվյալներ/ contacts	Ստորագրություն/signature
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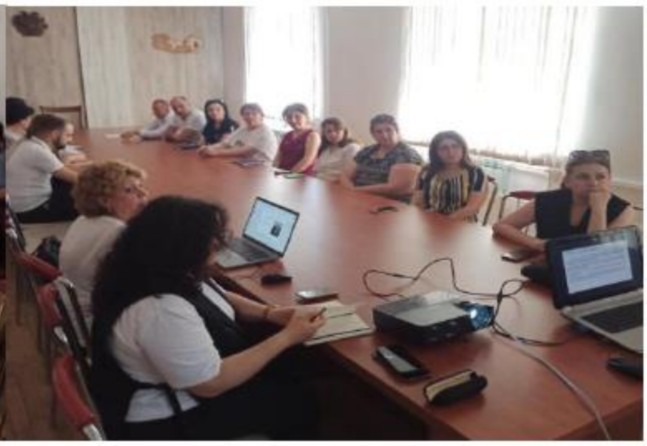
Armavir region

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HEALTH QUALITY IMPROVEMENT PROGRAM

Public Consultations
Armavir Marz

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HEALTH QUALITY IMPROVEMENT PROGRAM

Շրջակա միջավայրի վրա հնարավոր ազդեցությունների կառավարման վերաբերյալ

Environmental/ Social Impact Management

հանրային քննարկումների

public consultations

ՄԱՍՆԱԿԻՑՆԵՐԻ ՑՈՒՑԱԿ

LIST OF PARTICIPANTS

Արմավիրի մարզ

Armavir Marz

3 հունիսի 2024 թ. ժ.14:30

3rd of June 2024, at 14:30

N	Անուն, ազգանուն/name, surname	Համայնք, բնակավայր/ community, setllment	Պաշտոն, կոնտակտային տվյալներ/ contacts	Ստորագրություն/signature
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HEALTH QUALITY IMPROVEMENT PROGRAM

Public Consultations
Armavir Marz

N	Անուն, ազգանուն/name, surname	Համայնք, բնակավայր/ community, setllment	Պաշտոն, կոնտակտային տվյալներ/ contacts	Ստորագրություն/signature
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6	[illegible]	[illegible]	[illegible] 094105156	[illegible]
7	[illegible]	[illegible]	[illegible]	[illegible] 094961008, 095994040
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HEALTH QUALITY IMPROVEMENT PROGRAM

Public Consultations
Armavir Marz

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Appendix 2. List of the medical ambulatories

N	Medical Ambulatory	Region	Technical Supervision	Construction Contractor	Contract Date	Status of construction
1	Koghb MA	Tavush	Miqnar LLC	Amiraghyan Universal Group LLC and Khachmichshin LLC	12.06.2025	Masonry work for internal partitions and installation of utility lines are currently being executed.
2	Dimitrov MA	Ararat	Cottage LLC & Arame LLC	Shahart LLC and Blesk LLC Consortium	19.06.2025	Improvement works of the areas adjacent to the building are ongoing
3	Aygestan MA	Ararat	Cottage LLC & Arame LLC	Shahart LLC and Blesk LLC Consortium	19.06.2025	All works have been completed, except for the installation of the elevator/hoist descending to the basement floor.
4	Dvin MA	Ararat	Cottage LLC & Arame LLC	Shahart LLC and Blesk LLC Consortium	19.06.2025	All works have been completed, except for the installation of the elevator/hoist descending to the basement floor.
5	Gay MA	Armavir	Arame LLC	Ela Shin LLC and Lilanarm LLC	19.06.2025	Masonry work for internal partitions and installation of utility lines are currently being

						executed.
6	Jrarat MA	Armavir	Arame LLC	Ela Shin LLC and Lilanarm LLC	30.06.2025	Building cladding, site improvement, and interior finishing works are currently being executed.
7	Voskevaz MA	Aragatsotn	Arame LLC	Ela Shin LLC and Lilanarm LLC	30.06.2025	Internal partition wall construction and utility lines installation works.
8	Vardanashen MA	Armavir	Arame LLC	Kankarshin LLC and Art Plast LLC	16.06.2025	Site improvement works are currently being executed.
9	Tandzut MA	Armavir	Arame LLC	Kankarshin LLC and Art Plast LLC	16.06.2025	Building cladding and site improvement works are currently being executed.
10	Khanjyan MA	Armavir	Arame LLC	Kankarshin LLC and Art Plast LLC	16.06.2025	Building cladding, site improvement, and interior finishing works are currently being executed.
11	Pemzashen MA	Shirak	Agea LLC	Goharik LLC	10.06.2025	All works have been completed, except for the installation of the elevator/hoist descending to the basement floor.
12	Akhurik MA	Shirak	Agea LLC	Lenchanshin LLC, M. Lambaryan LLC, Akhuryan Coopshin LLC, Elite Arman Shin LLC (JV)	10.06.2025	Interior finishing, exterior landscaping, and building

						cladding works are currently being executed.
13	Tsakqar MA	Gegharkunik	Techno shin LLC	Hayk En Norik LLC and Europa LLC, Gaysat LLC and Hydrogeoshin LLC Consortium	16.06.2025	Site improvement works are being executed, and interior finishing works are nearly completed.
14	Dzoraghbyur MA	Kotayk	Arame LLC	Avag Shin 1 LLC, Yeghvardshin OJSC and Transuniversal CJSC Consortium	16.06.2025	All works have been completed, except for the installation of the elevator/hoist descending to the basement floor.
15	Getahovit	Tavush	Arame LLC	Dustr Margarita LLC and Zet Profil LLC	16.07.2025	All works have been completed, except for the installation of the elevator/hoist descending to the basement floor.
16	Metsavan MA	Lori	Irtig LLC	Asphalt Construction LLC, Artezia LLC and Blesk LLC	16.07.2025	Roofing works are completed; masonry work for internal partitions and installation of utility lines are currently being executed.
17	Angeghakot MA	Syunik	Armstroy LLC	Asphalt Construction LLC, Artezia LLC and Blesk LLC	16.07.2025	Building cladding, installation of power cables, and

						installation of utility lines are currently being executed.
18	Vahagni MA	Lori	Irtig LLC	Olimp Shin LLC and Lilanarm LLC Consortium	11.08.2025	Masonry work for internal partitions and installation of utility lines are currently being executed.
19	Lenughi	Armavir	Irtig LLC	Lilanarm LLC	04.08.2025	The building framework is erected, and concreting of the upper slab has been completed; masonry work for internal partitions will commence shortly.

Appendix 3. MONITORING CHECK LIST

MITIGATION COMPLIANCE & INSPECTION MONITORING

Project: Lenughi Medical Ambulatory

Implementing Agency: Armenian Territorial Development Fund

Scope of Inspection: Environmental, Social and OHS Monitoring

Contractor: "Lilanarm" LLC

Weather Condition: Rainy

Attendees: Armine Gabrielyan, Environmental specialist

Meri Abrahamyan, Social Specialist

Date: 07 May 2026

Monitoring visit was carried out with the presence of Contractor's and Technical Supervisor representative:

_ _

<**Permits/ approvals obtained**						
Construction Activity		**Mitigation Measure**	**Mitigation Imple- mented Yes/No/NA**	**Respon si- ble entity**	**Corrective Action Request (CAR) including deadline for ef- fective CA.**	**Resolution Status of pre- vious CAR (resolved/outstanding ac- tions required)**
Environmental As- sessment Report (EIA)		Conclusion on Environmental Exper- tise available	NA			
Dump sites		Permission for disposal of waste available	Yes	Lilanarm LLC		
Tree cutting		Permission on tree cutting available	NA			
CONSTRUCTION STAGE						
WORK SITE: General						
Environmental management: environmental team, health& safety, emergency, trainings, grievance redress mechanism						

Construction Activity		**Mitigation Measure**	**Mitigation Imple- mented**	**Mitigation Effective* 1 to 5**	**Corrective Action Request (CAR) including deadline for ef- fective CA.**	**Resolution Status of pre- vious CAR (resolved /**

			Yes/No/NA			outstanding actions)
Environmental team						
All activities	1.	Person in charge on environmental/ health & safety management is appointed and is pre- sent on-site	Yes	5		

Construction Activity		**Mitigation Measure**	**Mitigation Imple- mented Yes/No/NA**	**Mitigation Effective 1 to 5**	**Corrective Action Request (CAR) including deadline for ef- fective CA.**	**Resolution Status of pre- vious CAR (resolved / outstanding actions)**
Management measures						
All activities	2.	Any use of land outside the healthcare facility footprint including camps and parking sites is excluded	Yes	5		
All activities	3.	Tree cutting is implemented in accordance with permission. Other trees and vegetation are	NA			

		properly protected.				
Health& safety						
All activities	4.	Warning signs, fencing and exclusion barriers erected around all open pits and work site areas	Yes, the worksites are fenced, warning signs are installed	5		
Excavation works	5.	Open pits are backfilled within reasonable time. Unnecessary open pits are not detected	Yes	5		
All activities	6.	Access of strangers and outsiders (especially children) is excluded	Yes	5		.
All activities	7.	Workers are provided with and are using the uniform and applicable personal protection equipment (PPE) for site conditions	Yes	5		
Dismantling of asbestos-containing material	8.	Workers dealing with hazardous materials are using the special protective equipment and follow the Guidelines on ACM	NA, No ACM identified at the site			

All activities	9.	Board with information on project and imple- menting agencies is installed	Yes, The information board is installed inside the construction site, but it is not fully visible to the public and lacks detailed information.	3		
All activities	10.	Sanitary-hygienic conditions for workers are provided: drinking and washing water supply, mealtime utilities, toilets, rest time, etc.	Yes	5		
All activities	11.	First aid kit is available on-site and is accessible to all workers.	Yes	5		
All activities	12.	Fire extinguisher available	Yes	5		

Construction Activity		Mitigation Measure	Mitigation Imple- mented Yes/No/NA	Mitigation Effective 1 to 5	Corrective Action Request (CAR) including deadline for ef- fective CA.	Resolution Status of pre- vious CAR (resolved / outstanding actions)
All activities	13.	Dark time illumination is available	Yes	5		
		Emergency Response Plan				
All activities	14.	Person in charge on emergency management is appointed and is present on-site	Yes	5		
All activities	15.	Copy of ERP and emergency contact list are available, updated and posted in a visible place at all work sites	Yes	5		
All activities	16.	Accident report maintained	Yes	5		
		Trainings and orientation courses				
All activities	17.	Workers briefed on EIA/ EMP at time of starting employment	Yes	5		
All activities	18.	Workers briefed on ERP at time of starting employment	Yes	5		

All activities	19.	Workers receive introductory job- focused safety trainings before starting work; training event is properly registered in the instructions' book	Yes	5		
Work site cleanliness						
All activities	20.	The work site kept clean from debris, garbage, etc.	Yes	5		
All activities	21.	Bins for garbage collection are installed	Yes	5		
Public communication and grievance redress mechanism: environmental issues						
All activities	22.	Meeting with APs on construction activities, environmental impacts and mitigation measures held	Yes	5		
All activities	23.	Register of complaints maintained, Complains observed during the last visit ad- dressed	NA, No complaints were registered during the reporting period.			

Construction Activity		Mitigation Measure	Mitigation Implemented Yes/No/NA	Mitigation Effective* 1 to 5	Corrective Action Request (CAR) including deadline for ef- fective CA.	Resolution Status of pre- vious CAR (resolved / outstanding actions)
All activities	24.	Healthcare facility management and people are notified on inconveniences: water, elec- tricity breaks, etc.	Yes	5		
Environmental parameters: ***Dust control***						
Earth works, material de- livery, removal of gener- ated waste	25.	Trucks are operating using covers	NA			
	26.	Construction sites watered	NA, The site visit was conducted in rainy weather			
	27.	Equipment and haul vehicles are fitted with ef- fective emission control equipment	Yes	5		
Noise control						
Operation of machinery	28.	Construction noise levels are acceptable at closest sensitive	Yes	5		

		receptor				
	29.	Equipment fitted with effective silencers	Yes	5		
	30.	managed by restricting operating hours	Yes	5		
Vibration control						
Operation of machinery	31.	managed by reducing time exposed to vibra- tion,	Yes	5		
Runoff control:						
All activities using liquid materials	32.	Spillages are managed properly	Yes	5		
Earth works	33.	Sediment laden runoff is prevented	Yes	5		
Earth works, material de- livery, removal of exist- ing pavement, asphalt pavement	34.	Drains are kept open and water bodies are not blocked by sediment	Yes	5		
All activities using ma- chinery	35.	Tires of trucks are cleaned before leaving the construction site footprint and entering the roads	No, During the site visit, it was observed that there was no	0		

			designated area for cleaning truck tires			

Construction Activity		Mitigation Measure	Mitigation Implemented Yes/No/NA	Mitigation Effective* 1 to 5	Corrective Action Request (CAR) including deadline for ef- fective CA.	Resolution Status of pre- vious CAR (resolved / outstanding actions)
Earth works	36.	Excavated waste is either hauled from work site or is retained temporary on-site in spoil dumps	Yes	5		
Construction waste management						
Removal of construction waste	37.	Construction waste is disposed of in approved sites	Yes	5		
Earth works, demolition of structures, dismantling of utilities	38.	Non-hazardous waste (excavation material, rocks, concrete and metallic parts, etc.) is managed in accordance with EMP	Yes, waste management was carried out in accordance with good environmental practices	5		
Dismantling of structures	39.	Hazardous waste (including asbestos- contain- ing waste) is	NA, No hazardous or			

		managed in accordance with ERP	asbestos-containing waste was identified.			
Use of chemicals, fuel, lubricants, etc. while all activities	40.	Leakages and liquid waste, contaminated soil is managed in accordance with ERP	Yes	5		
Dump sites						
Use of territory	41.	All permits and SMP for the use of, dump sites are available	Yes	5		
Use of territory	42	SMP for the site use is available	Yes	5		
Use of territory	43	The use of the site is in accordance with SMP	Yes	5		
POST- CONSTRUCTION STAGE: DLP						
Site re-instatement and rehabilitation (including dump sites)						
All activities	44.	All the waste and material are removed from the site The site is clean	NA, Construction works are ongoing.			
All activities	45.	All machinery is removed from the site	NA, Construction works are ongoing.			

All activities	46.	Trees (shrubs and other vegetation) are planted and maintained	NA, Construction works are ongoing.			

Construction Activity		Mitigation Measure (as per PAR/EMP)	Mitigation Implemented Yes/No/NA	Mitigation Effective 1 to 5	Corrective Action Request (CAR) including deadline for ef- fective CA.	Resolution Status of pre- vious CAR (resolved / outstanding actions)
OPERATION STAGE						
Healthcare facility opera- tion	47.	The contract with licensed company for haz- ardous medical waste handling is available by the end of DLP.	NA			
Healthcare facility opera- tion	48.	The contract with licensed company for e- waste handling or the hand- over agreement with State Property Management Committee	NA			

Mitigation effective summary[2]					
Fully compliant		Partly compliant		Non-compliant	
Totally	% to applicable items	Totally	% to applica-ble items	Totally	% to applicable items
35	94.59%	1	2.7%	1	2.7%

[2] NA items are excluded from the calculation of mitigation effectiveness summary

Appendix 4. CORRECTIVE ACTION PLAN

CORRECTIVE ACTION PLAN

Loan 4521: Health Care Quality Improvement Program

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
Ambulatory in Lenughi community, Armavir marz (CONTRACTOR – Lilanarm LLC)						
1.	A project information board had been installed inside the construction site; however, it lacked important project details. The board included information only on one of the PIUs (ATDF), as well as the design, supervision, and construction companies, and the information were provided only in Armenian. Information regarding the second PIU (HPIU), financing	Replace and install new information board containing all relevant information	Contractor	22 May 2026	Completed. The project information board was updated with all missing data. (Pic.2).	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
	organizations, the name of the ambulatory facility (construction site), commencement and planned completion dates, contact details, and other relevant project information was absent (Pic. 1).					
2.	A temporary toilet had been installed at the construction site; however, no handwashing facilities were provided nearby. As a result, workers were required to cross the construction site to wash their hands (Pic.3).	Provide handwashing facilities near toilet	Contractor	22 May 2026	A portable handwashing facility has been installed near the toilet. (Pic. 4)	
3.	Temporary electrical wires have been laid out on the ground,	Electrical wires should ideally be laid underground whenever	Contractor	22 May 2026	Electrical wires have been elevated (Pic.	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
	posing a risk of damage to the cables and increasing the likelihood of electric shock, particularly in adverse weather conditions (Pic.5).	feasible. Alternatively, if above-ground placement is necessary, they should be raised and securely fastened above human height to minimize the risk of accidental contact.			6)	
4.	The construction site was generally clean; however, some construction waste, domestic waste, and unsuitable materials were observed across the site.	The site should be cleaned regularly, and proper housekeeping practices should be consistently implemented. Additional waste bins should also be installed, particularly in areas where construction activities are ongoing.	Contractor	22 May 2026	Daily housekeeping has been reinforced.	
Ambulatory in Vardanashen community, Armavir marz (CONTRACTOR – Kankarshin LLC)						
5.	The entrance to the construction site was not secured, as the previously installed fencing had been removed.	The Contractor should ensure the installation of appropriate fencing to secure the site and prevent access by unauthorized persons.	Contractor	22 May 2026	**Resolved with clarification.** The temporary fencing was removed to allow the movement of heavy machinery	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
					for active landscaping. Asphalt paving works were completed a few days after the mission (May 2026). A permanent fence is not planned under the approved design.	
6.	A project information board had been installed inside the construction site; however, it lacked important project details. The board included information only on one of the PIUs (ATDF), as well as the design, supervision, and construction companies, and the information was provided only in Armenian. Information	Replace and install new information board containing all relevant information	Contractor	22 May 2026	Resolved.	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
	regarding the second PIU (HPIU), financing organizations, the name of the ambulatory facility (construction site), commencement and planned completion dates, contact details, and other relevant project information was absent.					
7.	Not all workers provided with the proper PPE. All workers should be provided with proper PPE.	All workers should be provided with proper PPE. The wearing of PPE on the construction site is obligatory!	Contractor	22 May 2026	All workers have been provided and wear PPE.	
8.	The scaffolding erected at the site was found to be improperly constructed and unsafe. The platforms were too narrow, lacked guardrails, and showed signs of structural.	Reconstruct scaffolding in line with international and local safety standards, ensuring sufficient platform width, proper guardrails, and stable foundations. Conduct regular inspections by a qualified safety engineer to verify	Contractor	22 May 2026	The non-compliant scaffolding was reconstructed in accordance with national and international occupational health and safety	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
		scaffolding integrity. Provide workers with training on safe scaffolding practices, including wearing PPE, assembly, use, and maintenance of scaffoldings.			standards. Furthermore, an on-site safety training session was conducted for all workers regarding safe scaffolding installation, PPE compliance, and usage.	
9.	First aid kits and fire extinguishers were not available on-site. The Contractor is requested to immediately ensure the availability of adequate first aid kits and fire extinguishers at the construction site.	The Contractor is requested to immediately ensure the availability of adequate first aid kits and fire extinguishers at the construction site.	Contractor	22 May 2026	The first aid kits and fire extinguishers are at the construction site.	
10.	Several electrical devices were connected without proper plugs.	The Contractor must ensure strict compliance with electrical safety requirements at all times.	Contractor	22 May 2026	All non-compliant electrical connections were replaced with proper, industrial-grade plugs.	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
11.	Electrical panels were improperly installed or absent, creating significant safety hazards. Cables and connections were inadequately insulated, and temporary panels lacked proper grounding.	Electrical panels must be installed on specially designed insulated platforms. In addition, a qualified person responsible for electrical safety should be assigned to each construction site. Access to electrical panels must be restricted exclusively to the designated licensed specialist, with all other personnel prohibited from accessing them.	Contractor	22 May 2026	All electrical panels have been properly reinstalled on insulated wooden platforms, and secure grounding systems have been successfully established for all temporary panels. All exposed cables and connections were fully insulated to eliminate electrocution hazards.	
12.	Temporary electrical cables had been laid directly on the ground, posing a risk of cable damage and increasing the likelihood of electric shock, particularly during adverse weather conditions.	Electrical cables should, where feasible, be installed underground. Where above-ground installation is necessary, the cables should be elevated and securely fastened above head height to minimize the risk of accidental contact	Contractor	22 May 2026	The temporary electrical cables were removed and fully mitigated the risk of electric shock and cable damage	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
13.	Wastewater and washout discharge from stone-cutting equipment were observed spreading across the construction site. A designated collection pool or septic tank for washout water had not been established (Pic. 14). Additional training should be provided to all personnel on clean working practices and proper housekeeping measures, including the proper management and discharge of concrete washout water	Additional training should be provided to all personnel on clean working practices and proper housekeeping measures, including the proper management and discharge of concrete washout water.	Contractor	22 May 2026	The uncontrolled spreading of washout water across the construction site was halted and prevented from reoccurring. A site-wide cleanup and housekeeping operation was conducted to remove all accumulated stone-cutting slurry and sediment from the active work areas.	
14.	The construction site was not adequately maintained, and construction waste, domestic waste, and unsuitable materials were scattered throughout the	The construction site should be cleaned regularly, and proper housekeeping practices should be consistently implemented.	Contractor	22 May 2026	A comprehensive site cleanup was organized. All scattered construction waste, domestic waste, and unsuitable materials	

#	Issues	Action to be Taken	Responsibility	Timing (Target Dates)	Description of Resolution and Timing (Actual)	If not yet resolved, indicate the reason why and specify further required action and timeframe.
	site.				were gathered, and removed from the construction site to designated disposal areas.	

Appendix 5. Photos of the construction site

Lenughi Ambulatory

Non-compliance

Picture 1

Correction

Picture 2

Picture 3

Picture 4

Picture 5

Picture 6

Vardanashen Ambulatory

During the follow-up site verification, it was confirmed that all previously identified observations had been adequately addressed. Photographic evidence is not available because the construction works had already been completed.