This is not an ADB material. The views expressed in this document are the views of the author/s and/or their organizations and do not necessarily reflect the views or policies of the Asian Development Bank, or its Board of Governors, or the governments they represent. ADB does not guarantee the accuracy and/or completeness of the material's contents, and accepts no responsibility for any direct or indirect consequence of their use or reliance, whether wholly or partially. Please feel free to contact the authors directly should you have queries.

SMILE – Sistem
Monitoring
Imunisasi
Logistik Secara
Elektronik
"Electronic
logistic
monitoring
system"

## SECURE WEBINAR SERIES #1 VACCINATION DAYS IN SOUTHEAST ASIA

- 1. Indonesia context and challenges of cold-chain supply
- 2. SMILE description
- 3. Interface and technical usage
- 4. Distribution pathway
- 5. SMILE key progress
- 6. Challenges in the implementation
- 7. Enablers and solutions
- 8. Key messages

## OUTLINE





Estimated 5.3 million pregnancies annually



23.9 million children under 5



Around 10 000 public primary care facilities

### Challenges

Stock of vaccine and storage temperature cannot be monitored real-time

Difficult geography and disaster-prone

Uncomplete and unstandardized documentation system

Unmatched supply and demand

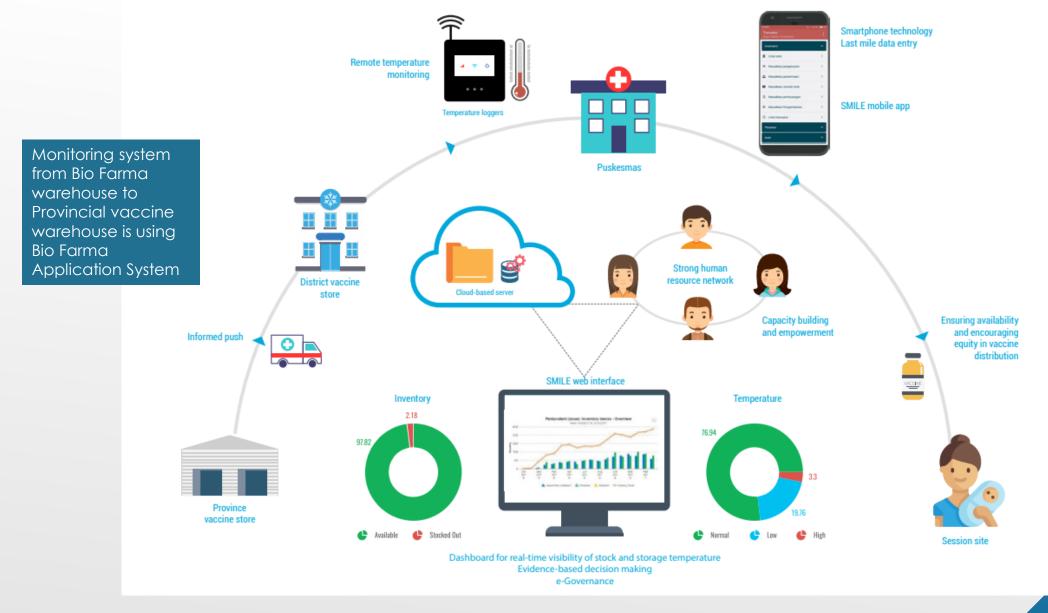
Lack of vaccine data consumption

## INDONESIA CONTEXT AND CHALLENGES OF COLD-CHAIN SUPPLY



- SMILE: A technological solution that aims to strengthen the immunization supply chain system in Indonesia by enabling real-time visibility of vaccine cold chain logistics and digitizing stock supplies and storage temperature across vaccine cold chain points
- Launched in 2018 initially to support the national immunization program (currently have two different system –for COVID19 and for national immunization program)
- Initially, piloted in 54 public primary care in Kota Bogor and Kota Tangerang Selatan

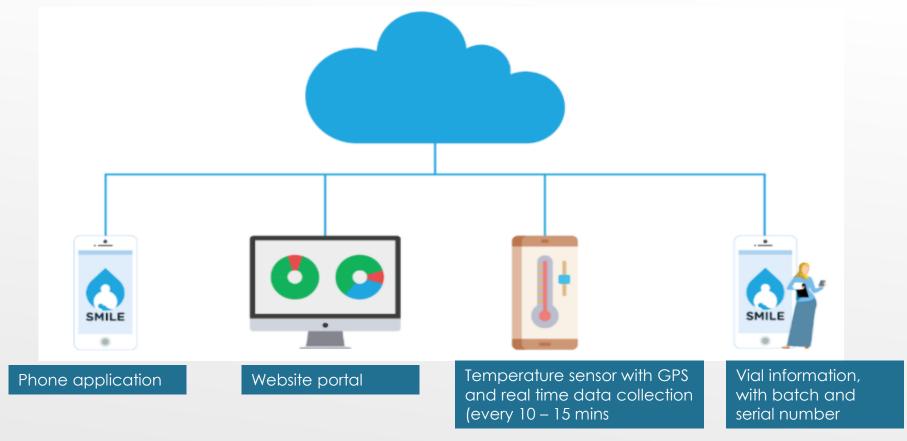
## **DESCRIPTION**



PUSKESMAS is SMILE main institution for the vaccine distribution – supervise private facilities and hospital in their area

## INTERFACE & TECHNICAL USAGE

## Key Features of SMILE



## INTERFACE & TECHNICAL USAGE

Dashboard for planning and budgeting Demand management Supply-chain management

BIO FARMA

Production
Provision management
Distribution planning

Reservation and demand management Provision management Temperature control

Reservation and demand management Provision management Temperature control

Stock calculation and waste management Booking management Temperature control SMS notification

Vaccine delivery point

# Private Hospitals Midwive

clinics

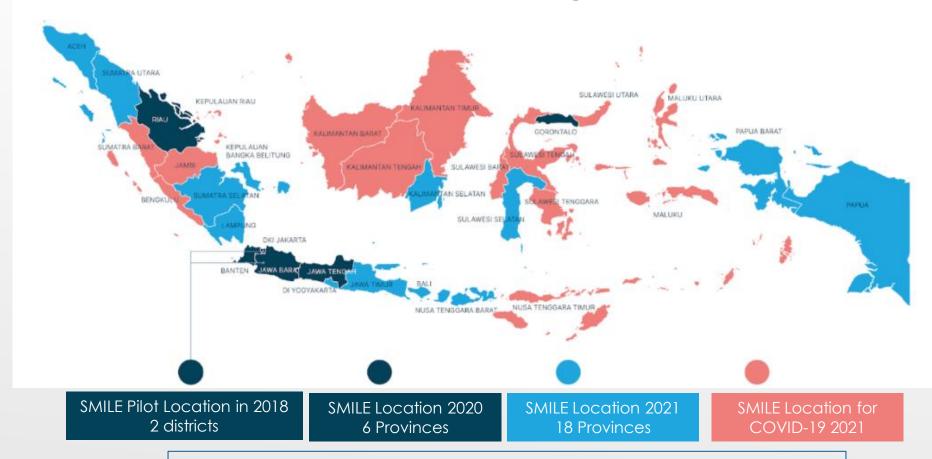
practices

**PROVINCIAL HEALTH POSTS** 

MINISTRY OF HEALTH

## DISTRIBUTION PATHWAY

## SMILE Location Coverage 2018 - 2021



Target to reach 12 000 public primary health care (Puskesmas) and hospitals in 514 districts and 34 provinces

## KEY PROGRESS

- ▶ Policy makers' skepticism
- Hesitancy due to assumed lack of healthcare worker capacity and their adherence of data entry
- ▶ Internet signal at the health facility
- ► Glitches with other application when it was needed to be integrated

## CHALLENGES IN THE IMPLEMENTATION

- Strong political willingness (e.g. support from MoH and Coordinating Minister of Economic Affair and supporting regulations)
- ► Experienced implementers (from implementation of routine immunisation program)

## ENABLERS AND SOLUTIONS

- COVID-19 pandemic has accelerated the progress and scaling-up implementation of SMILE program
- The importance of strong political willingness in the introduction of new health solutions
- Match between the existing needs with the solutions offered by SMILE application

## KEY MESSAGES