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# **DIGITAL HEALTH TECHNOLOGIES FOR TUBERCULOSIS INNOVATIVE PLATFORMS FOR SCALE-UP**

## **Indonesia**

**JULY 24-26, 2018  
NEW DELHI, INDIA**



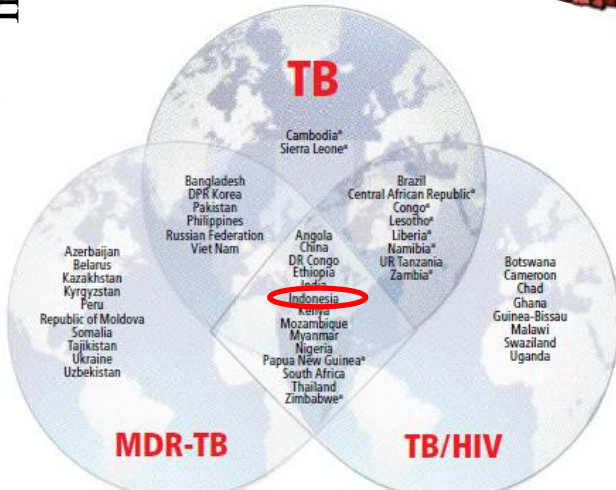
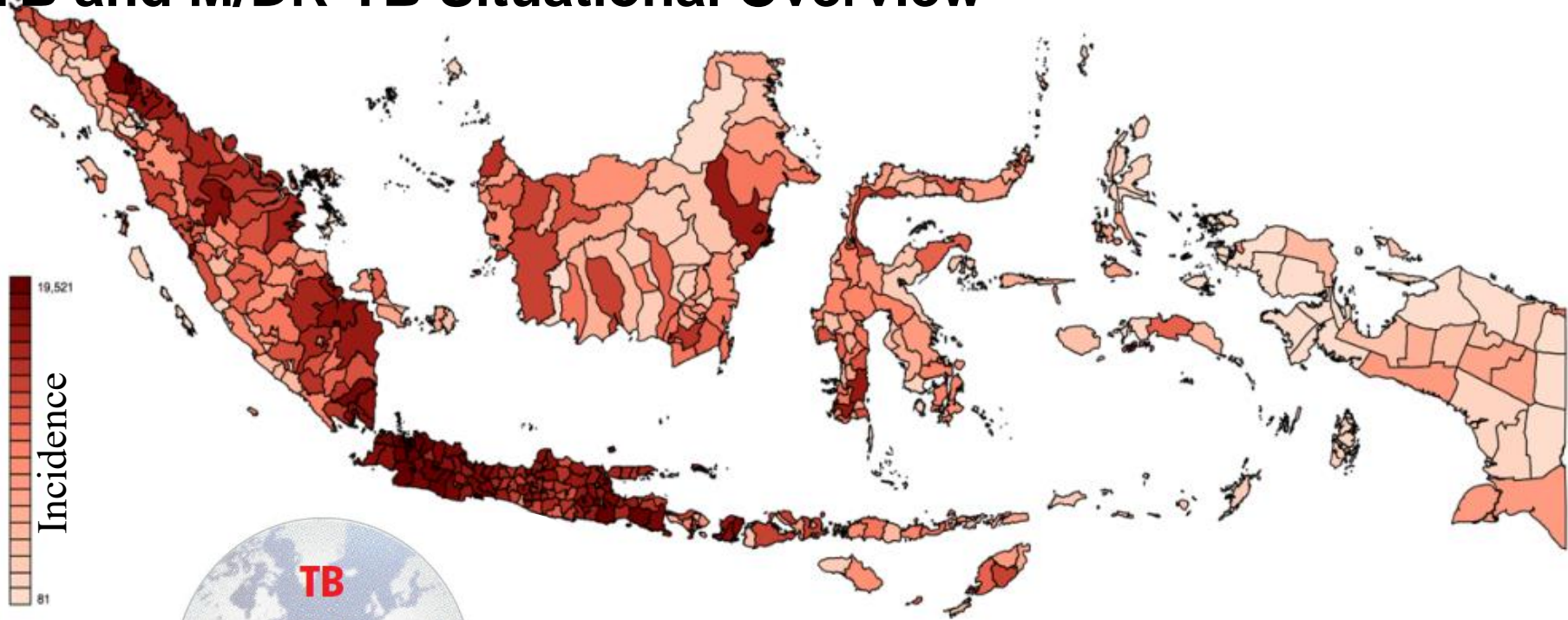
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# TB and M/DR-TB Situational Overview



**TB Burden**  
**1,020,000 TB**  
**32,000 DR TB**



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## Overview digital health solutions for TB in Indonesia

Current TB Health Information System :

1. SITT (TB Integrated Information System) – TB Sensitive.



2. e-Manager software – DR TB



3. Quant TB – Quantification SLD



QuanTB 4.1



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## SITT (TB Integrated Information System)



- RR for Sensitive TB
- System has online and offline version
- Cases, drug stock and report module.
- Individual cases data and aggregate presumptive TB
- Lowest data entry at Health Unit Center > District Health Office
- Data Entry by TB staff at Health Unit Center
- Developed by local company with “PHP” language program





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## e-Manager software – DR TB

- RR for DR TB.
- System only available in online version.
- Cases, Logistic, Laboratory, Management module
- Individual TB case registration.
- Lowest data entry at Hospital and Xpert site.
- Data entry by TB staff at clinic, Pharmacist and Lab staff.
- Develop by MSH with Java program language

**eTBManager**  
TB Management Information System

HOME

CASES

MEDICINES

MANAGEMENT

CARTRIDGE

ADMINISTRATION



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## Quant TB



QuanTB 4.1

- QuanTB is an electronic quantification and early warning system designed to improve procurement processes, ordering, and supply planning for TB treatment.
- QuanTB is a downloadable desktop tool that transforms complicated calculations into user-friendly graphs displaying key information for managing medicines.
- QuanTB serves as an early warning system, providing information on actual versus planned consumption, potential expiries, and stock outs of medicines.



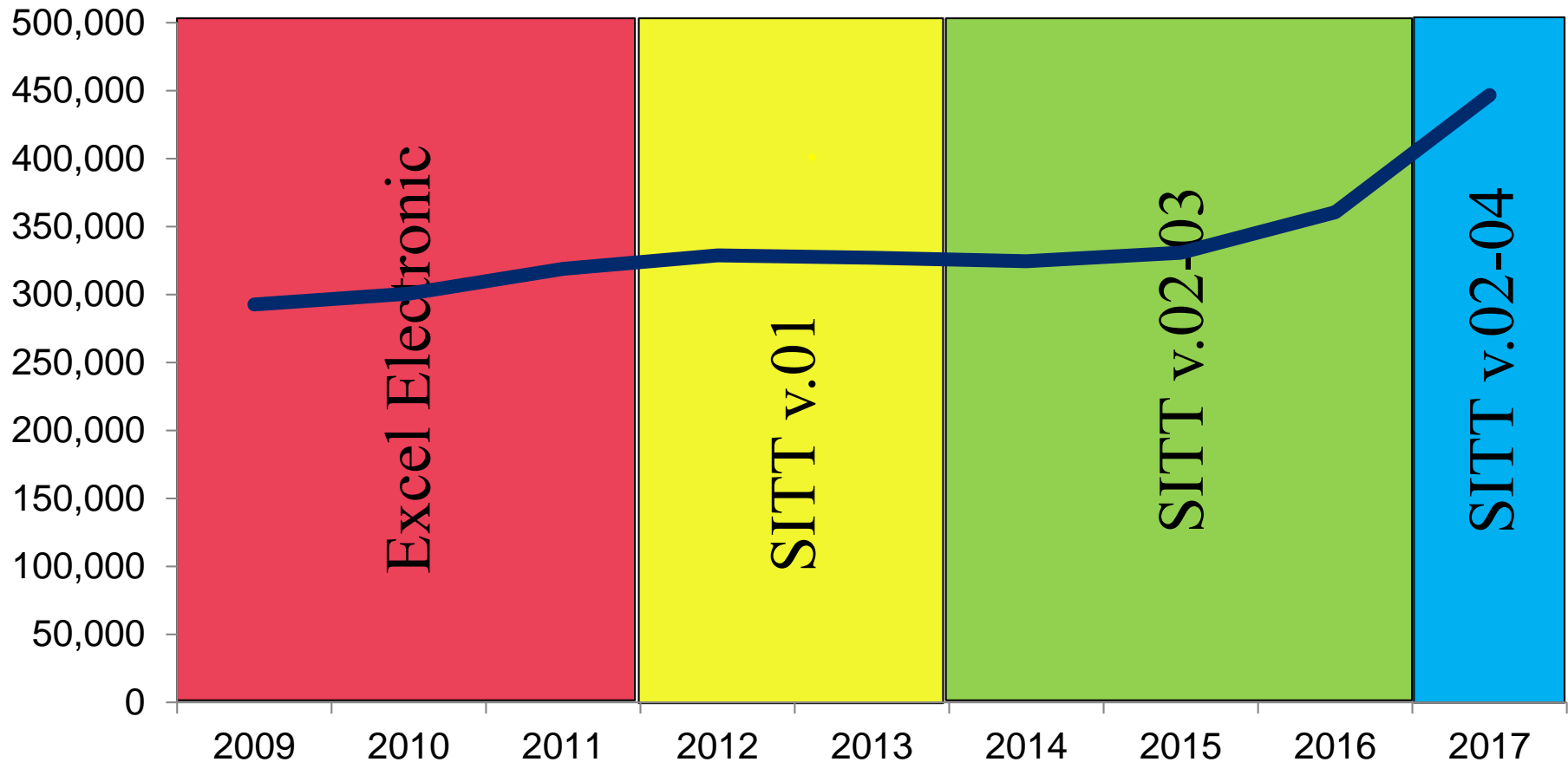
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## Digital Health Impact to TB Notification, 2009 - 2017





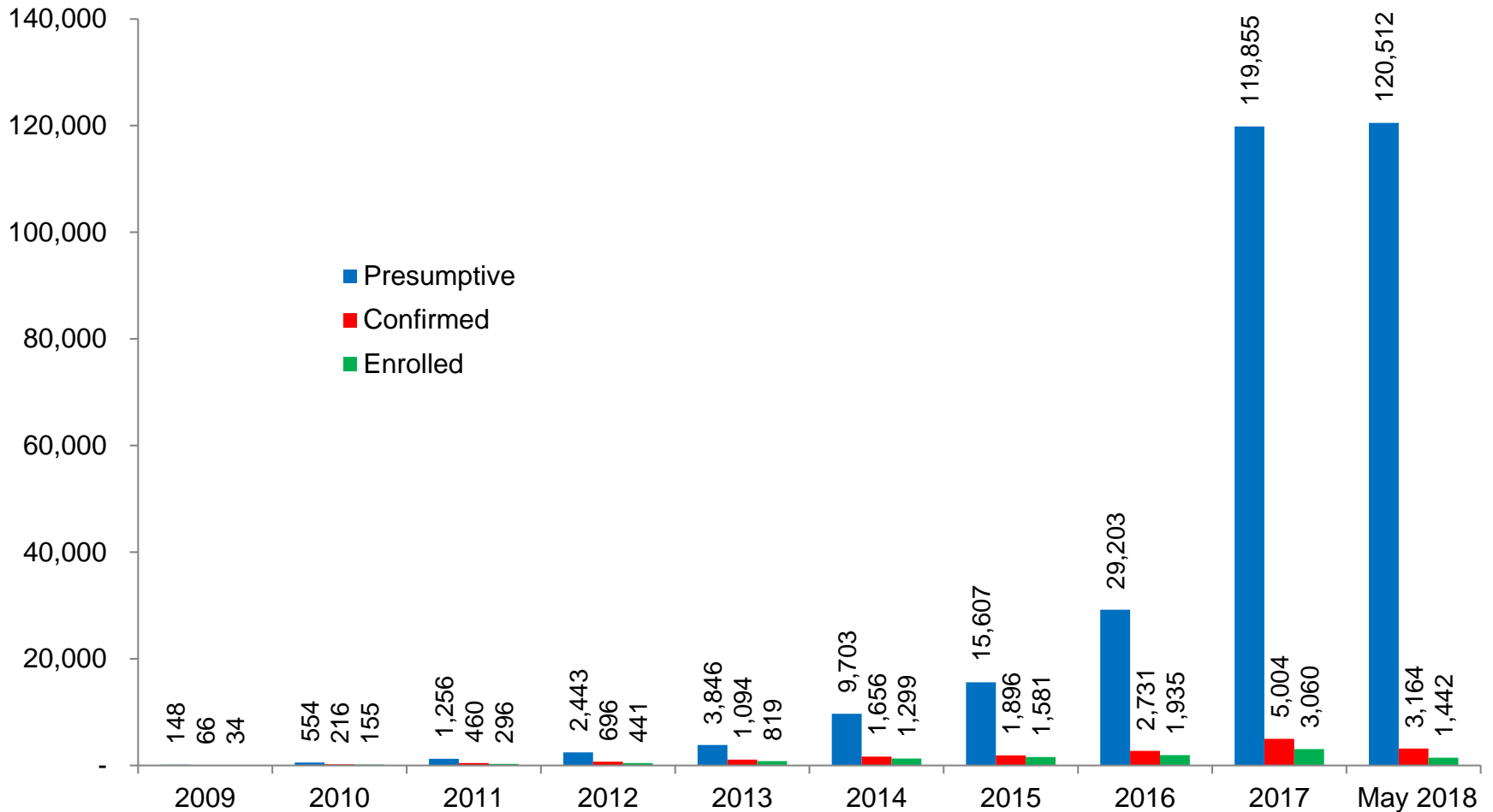
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## Digital Health Impact to DR TB Notification, 2009 - 2017







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## Challenges in implementation

- Geographically (5 big islands and >17,000 small islands).
- Dissemination information and training for 34 Provinces, 514 districts, more than 10.000 health unit centres, 2,600 Hospitals.
- Various infrastructure in different level
- Human resources availability and capabilities
- Budget implementation for nation wide
- Obedience to follow policy and regulation > completeness and timely on TB report.

# SITB TIME PLAN DEVELOPMENT AND IMPLEMENTATION

YEAR  
2016

LANDSCAPE  
ANALYSIS AND  
ASSESSMENT HIS

YEAR  
2017

NATIONAL SITB  
WORKSHOP

HIGH LEVEL DOC  
SPESIFICATION

MASTER PLAN  
TECHNICAL  
DOC SITB

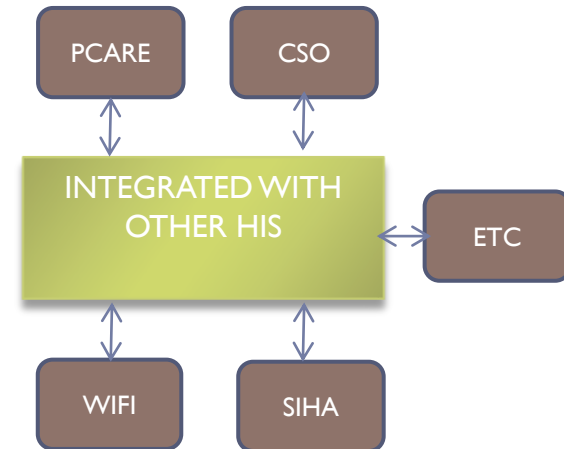
YEAR  
2018

SOFTWARE  
DEVELOPMENT

PILOT  
IMPLEMENTATION

YEAR 2019

FINAL SOFTWARE  
AND NATIONAL  
IMPELEMENTATION





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## Opportunities to advance digital solution for TB at scale

Software Name	Status	Description
WiFi TB	RELEASED	TB notification For Clinic and Stand alone doctor
SITRUS	RELEASED	Sputum transportation
ENAM	RELEASED	MDR TB enabler payment monitoring
SITB	IN PROGRESS	Replacing SITT & e-TB Manager
EMPATI	IN PROGRESS	MDR TB treatment monitoring
GxAlert or Data To Care	IN PROGRESS	Diagnostic Device connectivity
Video Tutorial	RELEASED	Training SITT,ETB, WiFi



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# PATHFINDER DIGITAL HEALTH PRODUCTS AND THEIR LINK TO THE END TB STRATEGY

## PILLARS AND COMPONENTS

### 1. INTEGRATED, PATIENT-CENTRED CARE AND PREVENTION

- A. Early diagnosis of tuberculosis including universal drug-susceptibility testing, and systematic screening of contacts and high-risk groups
- B. Treatment of all people with tuberculosis including drug-resistant tuberculosis, and patient support
- C. Collaborative tuberculosis/HIV activities, and management of co-morbidities
- D. Preventive treatment of persons at high risk, and vaccination against tuberculosis

### 2. BOLD POLICIES AND SUPPORTIVE SYSTEMS

- A. Political commitment with adequate resources for tuberculosis care and prevention
- B. Engagement of communities, civil society organizations, and public and private care providers
- C. Universal health coverage policy, and regulatory frameworks for case notification, vital registration, quality and rational use of medicines, and infection control
- D. Social protection, poverty alleviation and actions on other determinants of tuberculosis

### 3. INTENSIFIED RESEARCH AND INNOVATION

- A. Discovery, development and rapid uptake of new tools, interventions and strategies
- B. Research to optimize implementation and impact, and promote innovations

GxAlert/Data To Care  
SITB SOFTWARE

SITRUS  
MOBILE

EMPATI MOBILE

WIFI TB  
MOBILE

ENAM SOFTWARE

TRAINING VIDEO  
TUTORIAL



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**THANK YOU**