

SBF Project Implementation Monitoring Report

Indonesia: Emergency Response to COVID-19

1. Project Information

Project ID:	000379	Investment Number:	L0379A
Member:	Indonesia	Region:	South-Eastern asia
Sector:	Public Health	Sub-sector:	N/A
AIB Financing Type:	Loan: 250 USD million	Co-financier(s):	World Bank
E&S category:	C	Borrower:	Republic of Indonesia
Red Flags Assigned:	0 (Q1: 0)	Monitoring Regime:	Regular Monitoring
Implementing Agency:	Ministry of Health		
Project Team Leader:	Toshiaki Keicho		
Project Team Members:	Haiyan Wang, Senior Finance Officer Bernardita Saez, Senior Counsel Yi Geng, Senior Financial Management Specialist Jana Halida Uno, Senior Investment Officer-Urban Benedetta Magnaghi, Procurement Associate Gerardo Pio Parco, Senior Environmental Specialist Amy Fang Lim Chua, Environmental Specialist		
Completed Site Visits by AIB:	Sep, 2021 A virtual mission with the World Bank took place on September 13-24, 2021.		
Planned Site Visits by AIB:	Mar, 2022 A virtual mission with the World Bank		

2. Project Summary and Objectives

This CRF project, co-financed with the World Bank was approved by the board in June 2020.

The objective of the Program is to prevent, detect and respond to the threat posed by COVID-19 and strengthen the preparedness of the national health system in Indonesia. It has been designed in accordance with the WB's Policy on Program for Results (PforR). The adoption of PforR design will enable the Government of Indonesia to swiftly augment its rapid responses to the current health emergency, focusing on three result areas: 1) help expand health system preparedness by addressing the immediate needs of designated COVID-19 referral facilities; 2) strengthen the laboratory network and surveillance system to help increase testing and contact tracing; and 3) ensure Ministry of Health's (MOH) support for communications and coordination across sectors and levels of government. The project beneficiaries will be the population at large in Indonesia given the nature of the disease.

The total program cost of USD974 million shall be financed by AIB (USD250 million), World Bank (USD250 million) and the Government of Indonesia (USD474 million).

The closing date of the program is extended from October 2021 to December 31, 2022 to align with the closing date of the proposed Additional Financing for the original loan.

3. Key Dates

Approval:	Jun. 22, 2020	Signing:	Jul. 3, 2020
Effective:	Aug. 11, 2020	Restructured (if any):	Jun. 24, 2021
Orig. Closing:	Oct. 31, 2021	Rev. Closing (if any):	Dec. 31, 2022

4. Disbursement Summary (million)

Currency:	USD		
a) Committed:	250	b) Cancellation (if any):	
c) Disbursed:	250	d) Most recent disbursement: (amount / date)	37.5, Jun. 25, 2021
e) Undisbursed:	0	f) Disbursement Ratio(%) ¹ :	100

¹ Disbursement Ratio is defined as the volume (i.e. the dollar amount) of total disbursed amount as a percentage of the net committed volume, i.e., $f = c / (a - b)$

5. Project Implementation Update

The Indonesia Emergency Response to COVID-19 Program for Results (PforR), jointly co-financed with the World Bank, provides support to the Ministry of Health (MOH) to strengthen their response capacity for COVID-19. Overall, the program is progressing well and has made remarkable progress in the achievements of its disbursement link indicator (DLI) targets. The Government Audit Office (Badan Pengawasan Keuangan dan Pembangunan - BPKP), as the designated independent verification agency, has completed the verification of the DLI achievements and by June 2021, the loan proceeds of USD250 million has been fully released.

The proposed changes to the Original Program entail adjusting its scope of activities. The specific revisions involve changes to two DLRs and addition of one new DLR within the same DLIs to reflect the following developments: (i) significant increase of testing capacity across the country has changed the need to use the rapid molecular test machines for areas where Polymerase Chain Reaction (PCR) tests were not available; and (ii) as testing capacity has improved, the GOI has also scaled up case investigation and contact tracing to prevent further spread of COVID-19. The increased intensity of tracing is enabled with an electronic reporting system that is to be connected with the surveillance information system. In addition, an extension of the Original Loan's closing date is being proposed from October 31, 2021 to December 31, 2022 to align with the closing date of the proposed Loan.

On June 24 2021, the Board approved the above proposed changes and a USD500-million sovereign-backed loan as Additional Financing for the original loan.

Components	Physical Progress	Environmental & Social Compliance	Procurement
Results Area 1 will address hospital and health system readiness and systemic improvements in the quality of care.	Based on data from the RS (hospital) Online as of July 4, 2021, the total intensive beds outside DKI Jakarta for COVID-19 patients is 7,803 beds with 3,973 beds equipped with ventilators.	Continuous implementation of the Program Action Plan as part of the ESSA, was reported. It was also verified that the low risk nature of the financing is valid, no civil works have been financed as part of this project. Total medical wastes has been compiled and recorded from 713 public health facilities. The implementing agency will carried out more structured monitoring on COVID-19 waste management including following up on rapid assessment results and media coverage on waste management issues. All these have been covered in the updated Covid-19 Technical guideline and various training for the personnel involved covering all cities and districts.	Several procurement of goods through various methods (tender, direct procurement and e-catalogue) associated with the activities related to the Program's DLIs have been completed by MOH. Several tasks related to procurement need to be provided by MOH at the soonest: (i) Confirmation that Procurement officers have checked into the Bank's debarment and temporary suspended lists before contract award; (ii) Provision of procurement and contract data under the program; (iii) Conduct socialisation to Procurement officers on this project action plan(PAP).
Results Area 2 will strengthen the GOI's public health laboratory and surveillance systems.	(i) Highest number of tests were on 22-JUL-21: Total test 228,702/day - PCR/NAAT 104,353; ANTIGEN RDT 124,350. (ii) Surveillance System is reported through AllRecord app, it produces weekly risk assessment for categorizing all province and regency into risk zones (green, yellow, orange, red).	Continuous implementation of the Program Action Plan as part of the ESSA, was reported. It was also verified that the low risk nature of the financing is valid, no civil works have been financed as part of this project. Total medical wastes has been compiled and recorded from 713 public health facilities. The implementing agency will carried out more structured monitoring on COVID-19 waste management including following up on rapid assessment results and media coverage on waste management issues. All these have been covered in the updated Covid-19 Technical guideline and various training for the personnel involved covering all cities and districts.	Several procurement of goods through various methods (tender, direct procurement and e-catalogue) associated with the activities related to the Program's DLIs have been completed by MOH. Several tasks related to procurement need to be provided by MOH at the soonest: (i) Confirmation that Procurement officers have checked into the Bank's debarment and temporary suspended lists before contract award; (ii) Provision of procurement and contract data under the program; (iii) Conduct socialisation to Procurement officers on this project action plan(PAP).
Results Area 3 will facilitate communication and coordination for pandemic response and preparedness.	During the period of January to End of August 2021, there were 14,539 calls which contributed to the total of 31,458 interactions via phone. Meanwhile, total interactions recorded in 2021 (Jan - end of Aug) through various channels were 42,217 interactions.	Continuous implementation of the Program Action Plan as part of the ESSA, was reported. It was also verified that the low risk nature of the financing is valid, no civil works have been financed as part of this project. Total medical wastes has been compiled and recorded from 713 public health facilities. The implementing agency will carried out more structured monitoring on COVID-19 waste management including following up on rapid assessment results and media coverage on waste management issues. All these have been covered in the updated Covid-19 Technical guideline and various training for the	Several procurement of goods through various methods (tender, direct procurement and e-catalogue) associated with the activities related to the Program's DLIs have been completed by MOH. Several tasks related to procurement need to be provided by MOH at the soonest: (i) Confirmation that Procurement officers have checked into the Bank's debarment and temporary suspended lists before contract award; (ii) Provision of procurement and contract data under the program; (iii) Conduct socialisation to Procurement officers on this project action plan(PAP).

		personnel involved covering all cities and districts.	
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Financial Management:

The loan proceeds of USD250 million has been fully released which includes USD62.5 million advance to be reported against verified DLIs. The required Program annual financial statement for FY2020 with unqualified audit opinion has been received and follow up action is requested through leading co-financier of WB. Additionally, the internal audit review of the Program is currently ongoing and expected to be complete by end of FY2021.

6. Status of the Grievance Redress Mechanism (GRM)

No ES related complaints have been reported in the last supervision mission. It was verified that the website for the public to register and receive comments/feedback from the public is functioning. The MOH's Feedback and Grievance Redress Mechanism (FGRM) has integrated different grievances received from different source of media (119 hotline, SMS, email, letters and interactive online website).

7. Results Monitoring

The program is making excellent progress in achieving its intended targets. The project has exceeded targets of three project objective level indicators and met one project objective level indicator. Around 7,803 intensive care beds equipped as per national protocol. A remarkable expansion of total capacity for quality assured tests per day from 70, 596 in October 2020 to 228,702 PCR/NAT test perday in July 2021. The number of interactions with the COVID-19 phone line is about 31,458 calls. Surveillance system is improved and reported through AllRecord. The system produces weekly risk assessment for categorizing all province and regency into risk zones (green, yellow, orange, red). Intermediate results indicators also showed success in various DLIs.

Baseline Year: Jun. 1, 2020 End Target Year: Dec. 31, 2022

Project Objective Indicators #1

Reduced service readiness gap in treating serious respiratory illness patients (RA 1) Number of critical care beds fully equipped as per national protocol

Year	Target	Actual	Others, if any
Dec. 31, 2022	3000	7,803	Baseline: 0

Project Objective Indicators #2

Strengthened laboratory capacity (RA2) Total capacity for quality assured tests per day

Year	Target	Actual	Others, if any
Dec. 31, 2022	20,000	228,702	Baseline: 3000

Project Objective Indicators #3

Improved reporting and surveillance system (RA2) Availability of an improved surveillance system that incorporates lessons from the COVID-19 response experience

Year	Target	Actual	Others, if any
Dec. 31, 2022	Yes	Yes. Surveillance system is reported through AllRecord app, it produces weekly risk assessment for categorizing all province and regency into risk zones (green, yellow, orange, red)	Baseline: No

Project Objective Indicators #4

Enhanced community engagement and communication (RA3) The number of interactions with the COVID-19 phone line

Year	Target	Actual	Others, if any
Dec. 31, 2022	5000	31,458	Baseline: 0

Intermediate Result Indicators #1

RA-1: Concrete measures to support and compensate health professionals Concrete measures to support and compensate health professionals for added COVID-19 related workload and risk are implemented

Year	Target	Actual	Others, if any
Dec. 31, 2022	Yes	Yes	Baseline: No

Intermediate Result Indicators #2

Number of beds temporarily converted for patient isolation and/or low intensity medical care

Year	Target	Actual	Others, if any
Dec. 31, 2022	1500	103,479	Baseline: 0

Intermediate Result Indicators #3

Number of COVID-19 cases successfully treated, disaggregated by sex

Year	Target	Actual	Others, if any
Dec. 31, 2022	25,000	4,129,020 (50.4% females)	Baseline: 0

Intermediate Result Indicators #4

Infection prevention and clinical management protocols developed and disseminated to all non-referral facilities

Year	Target	Actual	Others, if any
Dec. 31, 2022	Yes	Yes	Baseline: No

Intermediate Result Indicators #5

RA2 - Cumulative number of COVID-19 suspect cases tested by PCR Cumulative number of COVID-19 suspect cases tested by PCR or rapid molecular testing, disaggregated by sex

Year	Target	Actual	Others, if any
Dec. 31, 2022	300,000	22,208,725	Baseline: 10,000 The data of female beneficiaries will be updated in the next mission.

Intermediate Result Indicators #6

A surveillance mechanism for community-based reporting of outbreaks and new illnesses among humans and animals is functional

Year	Target	Actual	Others, if any
Dec. 31, 2022	Yes	yes.Integration of different information sources to provide inputs for surveillance is functional.	Baseline: No

Intermediate Result Indicators #7

RA3 - Enable communication and coordination for emergency response MOH supports the creation of a multi-sectoral coordination mechanism for COVID-19 response

Year	Target	Actual	Others, if any
Dec. 31, 2022	Yes	Yes	Baseline: No

Intermediate Result Indicators #8

Cumulative number of website visitors to the COVID-19 communication portal set up by the Government of Indonesia

Year	Target	Actual	Others, if any
Dec. 31, 2022	100,000	8,580,000	Baseline: 0

Intermediate Result Indicators #9

Number of times MOH counters COVID-19 related misinformation and posts on its website

Year	Target	Actual	Others, if any
Dec. 31, 2022	200	1,203	Baseline: 0

Intermediate Result Indicators #10

Number of simulation exercises undertaken as per updated national pandemic preparedness plan

Year	Target	Actual	Others, if any
Dec. 31, 2022	3	0	Baseline: 0 Simulation exercise that was initially planned in June/July 2021 is now postponed (Need to check MOH on the new dates)

Remarks: