

Law Enforcement and Health Protocols Towards COVID-19 Patients During Self-Isolation

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ABSTRACT

The number of people who have been confirmed positive for Covid-19 continues to grow from time to time. Data for March 2021 shows that 1,419,455 people were who were confirmed positive for Covid-19, 1,243,117 patients recovered, and 38,426 patients died. The Covid-19 pandemic has an impact on increasing the burden of hospital care for symptomatic Covid-19 positive patients. The government has issued a policy to carry out self-isolation for Covid-19 positive patients who are asymptomatic at home or in certain places under supervision. This study aims to find and actualize the national health system, especially in dealing with the Covid-19 pandemic through monitoring, supervision, and law enforcement against health protocol violators by implementing criminal sanctions against health protocol violators. With the implementation of these sanctions, it is hoped that those with Covid-19 who are self-isolating can comply with health protocols so that the spread of Covid-19 can be minimized. This research includes normative legal research, which is carried out by researching literature or secondary data. There are several weaknesses related to the supervision of Covid-19 patients who are self-isolating, such as weak monitoring, supervision, and law enforcement against health protocol violations, causing an increase in the spread of Covid-19. This study concludes that the application of criminal law as an *ultimum remedium* must be applied to Covid-19 patients who violate health protocols during self-isolation at home, one of which is by including criminal sanctions in regulations related to controlling Covid-19.

Keywords: Covid-19, Law Enforcement, Self-isolation, Health Protocols.

1. INTRODUCTION

The The number of confirmed patients with Covid-19 is increasing every day. Data until May 4, 2021, the number of patients who were confirmed positive for Covid-19 was 1,686,373 recovered 1,541,149 died 46,137. This is a serious concern for the Government, because the various ways that have been taken by the Government to reduce the rate of transmission of Covid-19 are considered not yet effective in suppressing the transmission of Covid-19. This has resulted in referral hospitals and emergency hospitals dedicated to treating positive Covid-19 patients being unable to accommodate these patients. Even in some countries such as India, the spread of the virus is quite serious. Therefore, the Indonesian Government has prohibited Indian citizens from visiting Indonesia. Finally, the government issued a policy allowing Covid-19 patients without serious symptoms to carry out self-isolation. This policy is really

a dilemma, on the one hand, the Government wants to isolate people who are exposed to Covid-19 from doing activities outside the house, but on the other hand, the form of supervision of Covid-19 patients who carry out self-isolation at home or in hotels is very weak. That problem may triggers the massive spread of Covid-19. Patients who are exposed to Covid-19 should receive treatment at a hospital that has been designated as a Covid-19 referral hospital, as well as an emergency hospital as if in Jakarta this emergency hospital is at Wisma Atlet. The government has converted the athletes' homestead as an emergency hospital to treat Covid-19 patients. The increasingly massive covid-19 transmission has made the referral hospital and emergency hospital unable to accommodate Covid-19 patients, so the Government issued a policy to allow Covid-19 patients with no symptoms for self-isolation in their respective homes, with several conditions. For example, the DKI Jakarta Provincial Government issued the Decree of the

Governor of the Province of DKI Jakarta Number 979 of 2020 and the Decree of the Governor of the Province of DKI Jakarta Number 980 of 2020 as provisions for self-isolation.

The Provincial Government of DKI Jakarta implements a number of conditions that must be met for the self-isolation of Covid-19 patients in their own place of residence. The following are three procedures and conditions that must be fulfilled when carrying out self-isolation based on the narrative of the Head of the DKI Jakarta Health Office Widyastuti:

- a. Coordinate with local health workers and Covid-19 task forces.
- b. The officer must first carry out a feasibility assessment in accordance with the procedure for implementing controlled isolation.
- c. Once established, patients without symptoms of Covid-19 must undergo self-isolation by adhering to health protocols.
- d. Health workers will monitor it regularly. If the condition worsens, must be referred to a health facility for further treatment.

Covid-19 patients without symptoms (OTG) who want to self-isolate at home or in private facilities, this can be done if they have fulfilled the feasibility assessment by the local task force or the local village head or sub-district head and health workers.

Several studies have discussed quarantine, including an article by Marulak[1] that discusses national health quarantine. In addition, Muhammad Beni Kurniawan[2] also wrote about the legal politics of handling the Covid-19 pandemic. This study is specifically concern about self-isolation and the legal aspects that have become an important matter in society. This study tries to find a legal solution to the matter of quarantine in the smallest aspect which may have a big impact while facing the Covid-19 pandemic.

The problem statement raised in this study is: How to monitor and enforce the law against violators of health protocols against Covid-19 patients who carry out self-isolation at home? The research objective was to identify and analyze surveillance and law enforcement against violators of health protocols against Covid-19 patients who carry out self-isolation at home.

2. RESEARCH METHOD

The Research method that is being employed in this study is normative juridical, which is carried out by examining literature or secondary data, by reviewing various regulations that have been issued by the Government regarding the prevention of Covid-19, compared with the phenomenon of self-isolation of Covid-19 patients in the society. The purpose of this

study is to find the solution to solve the problem related to law enforcement during the Covid-19 pandemic, especially related to the implementation of self-isolation by the Covid-19 patients. The proper mechanism and law enforcement by the officials during self-isolation may help to prevent the spread of Covid-19.

3. FINDINGS AND DISCUSSION

3.1. Law Enforcement and Order

Law enforcement against Covid-19 patients who commit violations during self-isolation is an absolute requirement for efforts to create a healthy, peaceful and prosperous Indonesia in order to prevent the consequences of a pandemic that does not know when it will end. If health protocols are enforced and order is realized, then certainty, a sense of security, tranquillity or a life free from Covid-19 transmission will be realized.

The implementation of health protocols and law enforcement in an effort to self-isolate is essentially like two sides of a coin that are closely related to each other and even impossible to separate from one another. Because each other needs and complements each other in the framework of implementing good self-isolation. All policies related to the implementation of self-isolation related to policies to reduce morbidity and mortality due to covid-19, achieve immunity to protect community health, maintain productivity and minimize socio-economic impacts, and protect and strengthen overall health, respectively must be based on a mechanism or procedure or procedure established based on a rule outlined in a health protocol provision. The effort to balance law enforcement and the health protocol must always be in touch with all aspects of life in the administration of health, which means all the steps and operations of all of these aspects or fields must and must always be based on certain rules or norms and these rules or norms are nothing but the essence of the existence of self-isolation itself.

Thus, it is undeniable that self-isolation as an effort to prevent the transmission of infectious diseases, eradicate infectious diseases and control the transmission of covid-19 in the framework of implementing comprehensive health care, according to the author's opinion, occupies a strategic and decisive position. It is strategic because self-isolation in the implementation must be manifested in the form of specific rules (both written and unwritten). Meanwhile, it is said to be decisive because of the good and bad law enforcement implemented by implementing isolation being independent of the provisions in all aspects of administering self-isolation will give significant influence in the administration of public health in general.

3.2. Legal System

The implementation of law enforcement against Covid-19 patients who commit violations during self-isolation, requires not only legal norms or statutory regulations as a legal substance, but also an institution or agency that acts as a legal structure supported by legal behaviour of all components of society as a legal culture. This element of alert, by L.M. Friedman, is said to be a legal system structure. However, if we look more closely by focusing on the objective conditions in the framework of law enforcement, we can see that the required coverage in law enforcement includes four major components, namely:

- a. Legal products (legislation)
- b. Law enforcement agencies or agencies and their facilities and infrastructure
- c. Human resources / law enforcement implementers
- d. The behaviour of the people who obey the law or what is known as a legal culture

The implementation and enforcement of the rules that are the basis for the administration of health in all these fields is basically an act or process of law enforcement in a broad sense, so that the action or implementation of law enforcement cannot be assessed as merely and limited to handling and resolving. Covid-19 pandemic which is the right of the community to be protected from the covid-19 virus through self-isolation measures.

All legal actions and health protocol processes, both in the implementation of self-isolation and others, are only part of the process within the framework of law enforcement. It cannot be denied that the law enforcement process related to or related to the process of protection and prevention from exposure to Covid-19 has always attracted the attention of the public / all levels of society, both by the public, politicians, practitioners, academics, economists or government or state officials. The question arises why there is so much public attention to law enforcement practices, especially related to self-isolation. This is due to considerations or things as follows:

1. Problems that must be resolved through health protocols are directly related to and touch on aspects of the public interest;
2. The implication or consequence of the implementation of law enforcement in the health sector is related to human life and life, (related to human fate, whether someone can still live in the wild or have to live an isolated life independently, either at home or in a hotel);
3. The implications or consequences of law enforcement in the health sector will result in a

change in position / or social status for someone who is undergoing self-isolation (change in status from a healthy person to a Covid-19 patient);

4. From the economic aspect, due to the execution of law enforcement through a process of prosecution including self-isolation, it is possible that a person will become impoverished as a result.

Thus, it cannot be denied that law enforcement within the framework of implementing self-isolation, occupies a strategic and decisive position. Strategic, because the provisions of health protocol which are manifested in the form of rules will always be in contact with all aspects of life in health administration, especially self-isolation which means that all steps and operationalization of all these aspects or fields must always be based on certain rules or norms and those rules are none other than the core of the existence of the health protocol itself.[3] Meanwhile, it is said to be decisive, because the good or bad law enforcement which is implemented with the implementation of health protocols and provisions in all aspects of health administration will give a significant influence on the implementation of self-isolation.

Law enforcement with the principle of "truth" means that in the implementation of law enforcement by legal officials in the form of steps, actions or policies must always be based on the provisions of the applicable law. This means that the implementation of duties and authorities carried out by law enforcement officials is in accordance with the scope and stages are carried out in a straightforwardly manner in accordance with the mandate or as stated in the provisions of the prevailing laws and regulations.

Meanwhile, law enforcement with the principle of "justice" means that all steps, actions or policies taken, issued or stipulated by law enforcement officials must always be based on and with due regard to the demands of conscience and the inner voice of humans in general. The measurement, of course, can be done through an assessment from the community, based on the qualifications of conformity, which is what the community considers to be appropriate or as a matter of reasonableness. Even the demand for a sense of justice in handling a case is first recognized by the law enforcement executor himself in every stage of handling a case whether the actions, decisions and policies he undertakes are appropriate or not in his mental heart.

Fulfilling the demands for truth and justice in improving law enforcement for people with Covid-19 who carry out self-isolation should be the main objective and at the same time a commitment from all components of society, especially law enforcement officers because with actions, the policies of law enforcement officials who have committed to carrying out self-isolation,

carrying out duties and authorities based on the principles of truth and justice is expected to be a motivation for law enforcers to carry out their duties, powers and functions as mandated by statutory provisions that behave properly and correctly. This is in line with the demands for good governance. A self-isolation implementation can be said to be good if in the process of administering and enforcing the law it has been able to create a harmonious relationship between the actions taken as an input, the process with the output and the benefits as the outcome from the whole process of self-isolation and law enforcement.

The manifestation of implementation of self-isolation and good law enforcement includes:

1. The implementation of the duties and authorities as well as the functions of all law enforcers have been carried out in accordance with those mandated in the prevailing laws and regulations.
2. Services of the public interest have been able to be maximized or community services have increased.
3. Because all the implementation of duties and authorities in the context of administering self-isolation and law enforcement have been carried out correctly and have provided results (contributions) in maximizing community services, the expected accumulation as the final result is the level of public health to prevent the Covid-19 pandemic from becoming to increasing.

3.3. The Responsibility of The State In Protecting The Safety Of Indonesian People

The 1945 Constitution of the Republic of Indonesia is the basis of all arguments related to protecting the safety of all Indonesian people. In the preamble of the constitution the final paragraph states that the government was actually formed to protect the entire Indonesian nation and all Indonesian bloodshed. The Constitution mentions protection in Article 28B concerning protection from violence and discrimination, Article 28D concerning equal protection before the law, Article 28G concerning personal protection from the threat of fear, Article 28I concerning protection against discriminatory treatment, and in Article 30 concerning the obligations of government organs. TNI and Police in protecting public safety. In the context of the Covid-19 pandemic that is happening in Indonesia, the Government as the country's representative has an obligation to provide protection to the community. The government is obliged to provide protection for the community by fulfilling all basic rights during the Covid-19 pandemic. One of the rights that must be fulfilled during the Covid-19 pandemic is the right to public health, the right of the

public to be protected from the Covid-19 virus. The right to health has a broad scope, it does not only concern the rights of individuals, but includes all the factors that contribute to a healthy life for individuals, such as environmental problems, nutrition, housing and others. Meanwhile, the right to health and the right to medical services are the rights of patients, which are a more specific part of the right to health.

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Self-isolation is the separation of people who are not sick or infected from other people so as to prevent the spread of infection or contamination carried out at home or in other places provided as quarantine places. Self-isolation appears as an effort to overcome the capacity of health facilities in the form of Hospitals and Emergency Hospitals which are increasingly filled with Covid-19 patients and there are also Covid-19 patients who feel they have no symptoms preferring to use the house as a place to carry out self-isolation.

Guidelines regarding self-isolation have been issued by the Ministry of Health of the Republic of Indonesia at the beginning of the Covid-19 pandemic with the issuance of Circular Letter Number HK.02.01 / MENKES / 202/2020 concerning Self-Isolation Protocols in Handling Coronavirus Disease (Covid-19). The circular states that people who are sick (with symptoms of fever or cough / pain / runny nose / sore throat / other symptoms of respiratory disease) and People Under Supervision (ODP) or people who have close contact with Covid-19 patients should carry out self-isolation for 14 days until the results of the sample examination in the laboratory are known. Self-isolation must be carried out strictly, must not go to work and to public spaces, use separate rooms, use masks, take temperature measurements, use separate eating utensils from other family members, and keep the isolation area clean. If the laboratory results show a positive Covid-19 result, Covid-19 patients are given the option to carry out self-isolation if there are no symptoms. The implementation of self-isolation in the circular states that the supervision and monitoring of health workers and Covid-19 patients must actively report their health progress.

In its development, self-isolation is also regulated by regional level regulatory instruments in each city / district and province. Several regulations at the regional level include: Governor Decree Number 980 of 2020 concerning Controlled Isolation Management Procedures

in the Context of Handling Corona Virus Disease 2019 (Covid-19); Circular Number 443/15578 / SE / 2020 concerning the Role of Cross-Sector in Organizing Self-isolation for Confirmed Patients Without Corona Virus Disease (Covid-19) Symptoms in the Region; Pekanbaru Mayor Regulation Number 180 of 2020 concerning Guidelines for the Self-Isolation of Patients with Corona Virus Disease 2019 Confirmed Without Symptoms and Mild Symptoms in Pekanbaru City; East Java Governor Regulation Number 18 of 2020 concerning Guidelines for Large-Scale Social Restrictions in Handling Corona Virus Disease 2019 (Covid-19) in East Java Province; and Bantul Regent Regulation Number 106 of 2020 concerning Obligations of Quarantine or Isolation in the Context of Prevention and Control of Corona Virus Disease 2019 (Covid-19). In general, regional level regulations govern the implementation of self-isolation, from the criteria for people who can carry out self-isolation, the person in charge of implementing self-isolation, and the mechanism for implementing self-isolation.

The criteria for Covid-19 patients who can carry out self-isolation at home are those who meet the requirements, namely criteria without symptoms, following health protocols and meeting the eligibility of self-isolation places. Health protocols that need to be adhered to are related to the use of cutlery and clothing that are separate from others, take routine body temperature measurements, and always provide information about health conditions to the *puskesmas*. The feasibility of a self-isolating place is determined by adequate ventilation and light and has its own isolation room.

Responsible for the implementation of monitoring and supervision of self-isolation at home are cross-sectoral government organs. The Health Office and *Puskesmas* monitor the condition of Covid-19 patients who are isolating and providing health services. The task of the Regional Disaster Management Agency to carry is to out disinfection in the vicinity of self-isolation and provide protective equipment for families. The assignment of the social office is to assess logistical needs and follow up according to the results of the assessment. The task of the *Satpol PP* is to carry out supervision, guidance, and discipline of health protocols and self-isolation procedures, maintain order and peace in the community around the self-isolation place, and educate people so that people care for Covid-19 patients who carry out self-isolation. The assignment of the Governance and People's Welfare Section to coordinate with the Head of Sub-district and Urban Village regarding the implementation of duties in organizing the self-isolation of Covid-19 patients, assignments in Sub-Districts, Sub-Districts, and below to convey information in stages related to Covid-19 patients who are doing self-isolation.

Self-isolation must be carried out in accordance with the existing mechanism by involving the person in charge in accordance with existing provisions. Self-isolation at home is an option if the isolation place meets eligibility standards, however, Covid-19 patients will be placed in controlled isolation if the self-isolation place at home does not meet eligibility. The procedure for determining self-isolation at home is as follows:

- a. People who are confirmed with COVID-19 with no symptoms or with mild symptoms who will carry out controlled isolation of COVID-19 in other facilities in the form of homes or other private facilities
- b. Contact the local village head for an assessment of the feasibility of a controlled isolation location in the form of a house or other private facility
- c. The *Lurah* together with *Puskesmas* Officers conduct a feasibility assessment, if it meets the standards, the *Lurah* determines the location as a place for self-isolation, and the patient undergoes self-isolation
- d. However, if it does not meet the standards, then:
 1. Referral Procedure Number 1, regarding Referral of Persons with Covid-19 Confirmation to the Location of the Kemayoran Self-isolation Facility
 2. Referral Procedure Number 2, Regarding Referral of Persons with Covid-19 Confirmation to Controlled Isolation Locations for Hotels, Lodging or Guesthouses.

3.4. Treatment of Covid-19 in Other Country

3.4.1. New Zealand

New Zealand citizens returning from China are required to self-isolation for 14 days. As the coronavirus spreads to various countries, New Zealand has banned flights to and from Iran. New Zealand's first positive case of Covid-19 came from Iran. New Zealand entry restrictions also apply to anyone arriving from South Korea, Italy, or those who experience clinical symptoms of Covid-19. As of March 16, everyone is required to undergo self-isolation upon arrival in New Zealand. Only migrants from the Pacific region are exempt from this provision. New Zealand's Prime Minister, Jacinda Ardern, claims the regulation is the strictest in the world. There will be no mercy for violating the rules in New Zealand. A few days later, Ardern shut down New Zealand that applies to almost all foreign nationals. Efforts to tackle the Covid-19 Pandemic in New Zealand rely on: [4]

1. Early quarantine,
2. Effective communication,
3. Public compliance,
4. Maintain a downward trend in the number of cases,
5. New Zealand's isolated location and relatively low population density.

3.4.2. *South Korea*

South Korea became one of the states in the world categorized as a successful during the Covid-19 pandemic. The number of infections and deaths related to the Covid-19 is quite low with the implementation of 3T in South Korea, namely:[5]

1. **Test**, As soon as the SARS-like disease outbreak broke out, the government in Seoul in March 2020 immediately opened 600 rapid test centres across the country. South Korea with a population of 52 million, until 1/3/21 recorded 90 thousand positive cases with 1,600 deaths and 81,000 patients recovered.
2. **Trace**, Positive case tracking, so the second very important part. Every case was contact traced and everything was taken seriously. The government in Seoul is better prepared for the pandemic, after the bitter experience with the 2013 SARS outbreak. Medical officers are also trained to handle disease cases.
3. **Treat**, Patients exposed to Covid-19 immediately receive help to be hospitalized. Those in contact but asymptomatic were isolated and closely controlled. Health workers come every day to monitor their health. Also immigrants from abroad, must undergo isolation for 2 weeks, until they are tested negative.

Justin Fendos, a Professor in Dongseo University mentioned the tracing strategy in South Korea, the method of collecting information related to the Covid-19 is similar to that used by law enforcement to trace criminals in taxation. The method has been modified to trace the spread of Covid-19. There are three types of information used in this method:[6]

1. Credit and debit card transactions - they can show where someone is shopping or eating, and how that person is traveling on the transportation network.
2. Cell phone location history from telephone operators provides an overview of a person's location while he is connected via cell phone signal transmitters in the vicinity.

3. Details of the movements captured by South Korea's extensive network of surveillance cameras.

This collection of information is used to track the whereabouts of an infected person and track their movements in the days before they test positive so that people who may have direct contact with them can be notified. Regarding the privacy issue, this series of methods is difficult for citizens of Western countries, such as the UK, to accept. However, data ethics specialist Stephanie Hare stresses that the question should not be raised about whether methods are acceptable but whether they are necessary.

For the objective of controlling the Covid-19 pandemic on February 10, 2021, South Korea gave Oxford's first approval of the Covid-19 vaccine - AstraZeneca, which allows a two-shot regimen to be given to all adults, including the elderly. Consent comes with the caveat that consideration is needed when administering vaccines to individuals over the age of 65 because of the limited data on demographics in clinical trials.[7] Then, on April 14, 2021, South Korea reported 731 new confirmed cases, the most since January 2021, as the authorities anticipated a possible fourth wave. Also, an additional 250,000 doses of the Pfizer / BioNTech vaccine arrived in the country.[8]

In providing information, the government of South Korea provides services in various languages about how to prevent the infection and to prevent the spread of Covid-19, generally about the topic of healthy protocols.[9] The government also provides daily information in detail about the location of infections and the current update and status related to the Covid-19.[10]

3.5. *The National Health System*

While there is strong global consensus on the need to strengthen health systems, there is no established framework for doing so in developing countries, and no formulas to apply or packages of interventions to implement. Many simple health systems cannot measure or understand their weaknesses and constraints, which effectively leaves policymakers with no scientifically sound idea of what they can and should strengthen. In such an uncharted and misunderstood system, interventions - even the simplest - often fail to achieve their goals. This is not always due to an inherent flaw in the intervention itself, but to the behaviour of the surrounding system. Every intervention, from the simplest to the most complex, affects the entire system, and the entire system affects each intervention.[11]

Indonesia as a developing country has the framework set in strengthening the Health System. This framework is known as the National Health System (SKN), which is health management that is carried out by all components of the Indonesian nation in an integrated and mutually

supportive manner in order to ensure the attainment of the highest public health status.[12] In line with this understanding according to Prof. Wiku Adisasmito, is an arrangement that brings together various efforts of the Indonesian nation in an integrated and mutually supportive manner, in order to ensure the highest degree of health as the manifestation of the general welfare as referred to in the Preamble to the 1945 Constitution. In essence, SKN is also a form and method of implementing health development. , which combines the various efforts of the Indonesian Nation in one step to ensure the achievement of health development goals.[13]

The health management components compiled in the SKN are grouped into several subsystems:

1. Health efforts;
2. Health research and development;
3. Health financing;
4. Health human resources;
5. Pharmaceutical preparations, medical devices and food;
6. Health management, information, and regulation; and
7. Community empowerment.

SKN Subsystem Is an arrangement that brings together various public health efforts (UKM) and individual health efforts (UKP) in an integrated and mutually supportive manner in order to ensure the attainment of the highest public health status, implementing health efforts that are accessible, affordable, and of quality. In order to achieve these objectives, SKN is held on a continuous and plenary basis; quality, safe and as needed; fair and equitable; non-discriminatory; affordable; appropriate technology; and work in teams quickly and precisely.[13]

The purpose of implementing the SKN is to promote health development by all components of the nation, including the Government, Regional Government, and / or the public including legal entities, business entities and private institutions in a synergistic, effective and efficient manner, so as to create the highest public health degree. SKN is implemented in a sustainable, systematic, directed, integrated, comprehensive, and responsive manner to change by maintaining national progress, unity and resilience. The implementation of SKN is emphasized on improving community behaviour and independence, professionalism of health human resources, as well as promotive and preventive efforts without neglecting curative and rehabilitative efforts. As for the implementation of the SKN must pay attention:[12]

1. Coverage of health services that is of high quality, fair, and equitable;

2. Providing health services that are beneficial to people;
3. Public health policies aimed at improving and safeguarding public health;
4. In the field of health development, leadership and professionalism are essential;
5. Innovations or breakthroughs in science and technology that are ethical and proven to be useful in the implementation of health development in a broad manner, including strengthening the referral system;
6. Approach globally by taking into account systematic, sustainable, orderly and gender-responsive health policies and children's rights;
7. Family and demographic dynamics;
8. The wishes of the community;
9. Epidemiology of disease;
10. Ecological and environmental changes; and
11. Globalization, democratization and decentralization in the spirit of national unity and integrity as well as partnerships and cooperation across sectors.

It is hoped that the SKN can be used as a basis and reference in the formulation of various policies, guidelines, and directions for the implementation of health development and health-oriented development. SKN is an open system that interacts with various other national systems in a supra system, is dynamic, and always follows developments. Therefore, it is not closed to adjustments and improvements. The success of the implementation of SKN is very dependent on the enthusiasm, dedication, perseverance, hard work, ability and sincerity of the organizers, and also very much depends on the guidance, grace and protection of God Almighty.[13]

4. CONCLUSION

Most of the regulations in Indonesia are reactive in nature, resulting in less than optimal application. Lack of coordination, between the central government and local governments, is still an obstacle in overcoming Covid-19; a centralized regulation should be at the centre. The absence of sanctions in regulations that regulate the supervision of Covid-19 patients who carry out self-isolation at home or in hotels is also an obstacle in breaking the chain of covid-19 transmission. This is evidenced by the fact that there are still many people who are supposed to carry out independent isolation at home and in hotels, but they still carry out activities outside the house. Sanctions in the *Perda* regulating self-isolation

are still limited, especially for regional governments that do not have a regulation on tackling covid 19, this is a legal vacuum (anticipation and control). Regarding the response to covid-19, there are several strategies carried out by other countries, such as South Korea. One strategy South Korea has pursued is to use information-gathering methods commonly used by law enforcement officials to arrest people who evade taxes or track criminals and change the way they are used for public health. The types of information used are: credit card and debit card transactions. Cell phone location history from telephone operators provide an overview of a person's location while he is connected via cell phone signal transmitters in the vicinity; and details of movements captured by South Korea's extensive network of surveillance cameras.

5. RECOMMENDATION

From the results of the discussion related to the study of Optimizing Law Enforcement Against Covid-19 Violations Committed by Individuals During Independent Isolation, rules are needed that include sanctions for violations of health protocols against Covid-19 patients, as well as families who are in close contact with patients who carry out independent isolation at home or at the hotel. Increased surveillance of Covid-19 patients, including families who are in close contact with patients who are self-isolating at home or in hotels. The need for self-isolation treatment and guidelines at home or hotel for the patients are especially related to supervision. The need for socialization is related to self-isolation at home, and isolation from the surrounding community, which emphasizes that Covid-19 patients who are self-isolating at home need our help.

AUTHORS' CONTRIBUTIONS

All authors contributed equally to the work of this paper. Starting from drafting or designing writing, data collection, data analysis, interpretation, designing articles, revisions, until this writing is approved for publication.

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