

Analysis of Policy Implementation of Large-Scale Social Restrictions in the Administrative City of North Jakarta in 2021

Kharis Nasution

Satyagama University, Jakarta, Indonesia

*Email: kharis_n@gmail.com

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ABSTRACT

The formulation of the problem in this research is how to implement, obstacles and efforts to optimize the implementation of the Large-Scale Social Restrictions (PSBB) policy in the Administrative City of North Jakarta. The purpose of this research is to find out and analyze the implementation, obstacles and efforts to optimize the implementation of the Large-Scale Social Restrictions (PSBB) policy in the Administrative City of North Jakarta. This study uses a post-positivism research paradigm with a qualitative descriptive method. In this study, there were 7 informants who were interviewed. The data analysis technique used is data reduction, data presentation and conclusion and verification. The results of this study concluded: (1) The implementation of the Large-Scale Social Restrictions (PSBB) policy in the Administrative City of North Jakarta, was carried out by forming the Covid-19 Task Force based on the Decree of the Governor of DKI Jakarta Province Number 1023 of 2020 concerning the Task Force for Handling Covid-19 in DKI Jakarta Province. The North Jakarta Administrative City Covid-19 Task Force also appealed to all people to implement health protocols by implementing 3M, namely wearing masks, washing hands and maintaining distance and avoiding crowds. As for people who violate the rules will be subject to strict sanctions. (2) Obstacles in the implementation of the Large-Scale Social Restrictions (PSBB) policy in the Administrative City of North Jakarta, include the low awareness and discipline of the community towards applicable regulations, as seen in the presence of places to eat that are open at night, places of worship that are still carrying out activities, the behavior of people who do not wear masks when outside the house, in crowds and so on. In addition, the minimal budget and the inadequate number of law enforcement and enforcement supervisors are factors hindering the optimal implementation of the PSBB policy. (3) Efforts that need to be made to optimize the implementation of the Large-Scale Social Restrictions (PSBB) policy in the Administrative City of North Jakarta, one of which is by forming a Task Force Team for the Acceleration of Handling Corona Virus Disease (Covid-19) consisting of various stakeholders to provide understanding and outreach to the public about the PSBB policy. Next is to fulfill the availability of infrastructure or supporting facilities for the implementation of the PSBB policy in handling Covid-19, such as the availability of masks, disinfectant fluids and also the availability of complete and adequate rapid test equipment.

Another anticipatory step is preventive action from the government, especially the Ministry of Health, which cooperates with immigration in monitoring and preventing the entry of new viruses from outside to Indonesia through screening people who come to Indonesia.

INTRODUCTION

Policy in health care can be viewed as an important aspect of social policy. Because health is a determining factor for social welfare. A prosperous person is not only one who has an adequate income or a house, but a healthy person, both physically and spiritually. In the 1945 Constitution, it is explained that the state is obliged to serve every citizen and resident to fulfill their basic rights and needs within the framework of public services. Public service activities carried out by public service providers are an effort to meet the needs of service recipients, in the implementation of the provisions of laws and regulations.

Health is a form of human rights that is realized through legal protection and government policies with efforts to provide health service facilities to all levels of society. Related to current health problems, the Indonesian state is still facing health problems that have complex social impacts and become development obstacles that must be resolved immediately.

Services in the health sector are one of the most needed forms of service by the community. This is inseparable from the needs of citizens to stay healthy. Adequate health services are the foundation of the community and become one of the basic needs in addition to food and education. The community hopes to get the implementation of health services that are carried out responsibly, safely, quality and equitably and non-discriminatory, so that the rights of patients as recipients of health services can be protected.

A health problem that is currently very worrying in Indonesia and even other countries in the world is the fact of the development of the epidemic caused by the Corona virus. Novel Coronavirus (2019-nCoV) is a new type of virus that is currently developing around the world. Novel Coronavirus (2019-nCoV), a mysterious case of pneumonia was first reported in Wuhan, Hubei Province in December 2019. The source of transmission of this case is still unknown, but the first case was associated with a fish market in Wuhan (Rothan, 2020). Initially, this disease was tentatively named as 2019 Novel Coronavirus (2019-nCoV), then WHO announced a new name on February 11, 2020, namely Coronavirus Disease (Covid-19) caused by the Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) virus (WHO, 2020). This virus can be transmitted from human to human and has spread widely in China and more than 190 other countries and territories (WHO, 2019). On March 12, 2020, WHO declared Covid-19 as a pandemic, this is because the Corona virus outbreak is an extraordinary event attacking humans in almost all countries in the world.

Policies to control the spread of Covid-19 are also carried out in Indonesia called Large-Scale Social Restrictions (PSBB). Through the Regulation of the Minister of Health of the Republic of Indonesia Number 9 of 2020 concerning Large-Scale Social Restrictions in the Context of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19). Large-Scale Social Restrictions (PSBB) is a health quarantine term imposed by the Indonesian government. The PSBB policy has a legal basis, as reflected in Article 1 Number 1 of Law Number 6 of 2018 concerning Health Quarantine. This law defines health quarantine as limiting certain activities of residents in an area suspected of being infected with disease and/or contaminated in such a way as to prevent the possibility of spreading disease or contamination. Meanwhile, based on Article 49 paragraph (1) of the Health Quarantine Law, it is stated that PSBB is a form of health quarantine in the region. Other forms of quarantine are home quarantine, hospital quarantine, and regional quarantine. Meanwhile, the purpose of the PSBB based on Article 59 paragraph (2) of the law is to prevent the spread of public health emergency diseases (KKM), which are currently occurring between people in a certain area.

Large-Scale Social Restrictions (PSBB) is the government's response to emergencies in public health. This PSBB phase is actually a transition period or the first step before entering the New Habit Adaptation (AKB) phase. PSBB only applies to strategic sectors with manageable risks, accompanied by public regulation and compliance. This issue of public compliance is important because it positions

the government in a dilemma, given that many people work in the informal sector. PSBB is considered a failure if the regional and central governments are unable to explain what the benefits of PSBB are for the community (Andriani, 2020). This is because such health quarantine gives birth to several social consequences, such as school and work holidays, restrictions on religious activities, and/or restrictions on activities in public places or facilities. This kind of social consequence has been regulated in Article 4 paragraph (1) of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions in the Framework of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19). Meanwhile, the executor of the PSBB policy is the provincial and district / city level local governments after obtaining approval from the Minister of Health through a Ministerial Decree. This rule is stipulated in Government Regulation Number 21 of 2020 Article 2 paragraph (1), and also Law Number 6 of 2018 Article 49 paragraph (3).

Since the beginning of the pandemic detected in Indonesia, DKI Jakarta Province as one of the entry gates of thousands of migrants from abroad has carried out a series of policies to deal with this outbreak. Based on the release made by the DKI Jakarta Provincial Government on the <https://corona.jakarta.go.id/id> website related to the chronology of policies from January 22, 2020 to August 5, 2020, various efforts have been made, ranging from circulars and instructions related to patient handling and increasing vigilance against the spread of the Covid-19 virus to various policies. Furthermore, on March 1, 2020 the DKI Jakarta Provincial Government announced that there were 115 people under monitoring and 32 people were being monitored, the day after the DKI Jakarta Provincial Government then formed a Covid-19 Response Team.

The first preventive measure was taken on March 3, 2020 by limiting crowd permits. Then two days later there was a temporary closure of licensing services involving many people. On March 6, 2020, a postponement of work visits and official trips abroad was postponed. On March 11, 2020, the DKI Jakarta Provincial Government made an appeal to self-isolate workers within the DKI Jakarta Provincial Government. On March 13, schools were closed, events were restricted, services for public library buildings and parks and urban forests were also closed. On March 16, a work from home policy was issued. On March 20, the first emergency response status was established from March 20 to April 2. On March 30, the central government announced the implementation of the PSBB. On March 30, an extension of the State of Emergency Response from April 3-19 was announced. On April 3, a call for masks was made in Jakarta. On April 19, the DKI Jakarta Provincial Government temporarily closed 25 companies for violating the PSBB. On April 22, the PSBB was extended again until May 22. In PSBB phase 2, it focuses on law enforcement efforts.

As a result of law enforcement efforts, the DKI Jakarta Provincial Government temporarily closed 52 business units that remained active during the PSBB. On April 27, 2020, 543 companies and workplaces that did not comply with the rules were taken into action. On May 6, restrictions on people's travel were carried out in order to accelerate the handling of Covid-19. On May 14, 2020, the DKI Jakarta Provincial Government imposed strict sanctions on the management of McDonalds Sarinah for violating the PSBB. Furthermore, on May 18, the DKI Jakarta Provincial Government also issued a regulation granting disciplinary punishment for civil servants who travel outside the area and/or homecoming activities during the Covid-19 public health emergency within the DKI Jakarta Provincial Government. On May 19, the DKI Jakarta Provincial Government fined 15 restaurants and hotels that violated the PSBB. On June 4, the PSBB was extended, Jakarta entered a transition period. Starting June 15, an odd-even system is implemented in the market. Extension of the Transitional PSBB from July 3-16. On July 13, the DKI Jakarta Provincial Disnakertrans conducted a hearing on companies that implement WFO. On July 17, the extension of PSBB Phase I. Then, on July 27, the DKI Jakarta Provincial Government encouraged workers to complain about companies that violated health protocols. On July 30, eight companies were shut down due to violations of health protocols. On July 31, the extension of the Transitional PSBB phase I will be carried out again and violators of health protocols in Jakarta will be subject to progressive fines. Reinstatement of odd-even policy on August 2. Furthermore, law enforcement is also enforced for those who travel without wearing masks as stipulated in the Governor's Regulation.

The implementation of the PSBB Policy implemented by Governor Anies Baswedan did not run smoothly or even tended to fail when implemented. From the statistical data released by the DKI Jakarta Provincial Government, it can be seen that there are many violations committed, especially

those related to the use of personal protective equipment while outside the home with many types of violations not using masks while driving, both motorcycles and four-wheeled vehicles. These various kinds of indiscipline correlate with the uncontrolled number of Covid-19 positive patients in DKI Jakarta Province.

North Jakarta Administration City is one of the administrative cities in DKI Jakarta Province which has the highest number of residents with the highest poverty rate according to statistical data, which is 132,730 people in 2021. The lack of information on the rules for implementing the PSBB received by the community, especially the poor because they do not have telecommunication equipment, is one of the causes of poor people tend not to comply with the rules that are being implemented, resulting in an increased chance of Covid-19 transmission. The implementation of PSBB in the North Jakarta Administrative City area also refers to regulations issued by the central government and related ministries. However, in general, the problems that arise in the implementation of PSBB in the North Jakarta Administration City are caused by: (1) The slow response from the central government which directly affects the DKI Jakarta Province, whose position is the main gate for the entrance and exit of Indonesia. (2) Overlapping regulations between the central and regional governments are also considered as one of the factors that make PSBB ineffective, such as differences in views between the Ministry of Health and the Ministry of Transportation regarding online-based two-wheeled transportation operations. (3) Non-synergy occurs between adjacent regions or with governments at the level above. One of the criticisms is related to the failure of the PSBB because at the beginning of this outbreak a number of buffer cities did not immediately implement the same policy. Therefore, to optimize efforts to prevent the spread of the Covid-19 outbreak in several areas around DKI Jakarta Province, the same policy should be applied. (4) The low level of compliance of citizens with policies issued by local governments.

Based on the description above, the researcher tried to raise this theme into a thesis research with the title: "Analysis of the Implementation of Large-Scale Social Restrictions (PSBB) Policy in North Jakarta Administration City in 2021."

METHODS

The research to be carried out is qualitative research with studies or studies on a certain focus, so that researchers hope to obtain relatively complete and in-depth data, as well as interpretations of various phenomena encountered in the field. Judging from the problem of this research, which is about the analysis of the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, this type of research is qualitative. Qualitative studies are research that emphasizes more on the efforts of form investigators who examine naturally the phenomena that occur in their overall complexity (Sutama, 2015: 61).

The data processing procedure is an explanation of the stages of the research instrument explaining the tools used in data collection. The stages of data processing activities are interview guides, photography, film, tape recorders, documents and so on. The data obtained from data collection activities is then processed so that it can produce information used in analyzing data. Data processing begins with the arrangement of raw data obtained from interviews, document reviews, and observations. To avoid confusion, each data is classified according to the material data and symptoms studied. The data obtained from the interview results are compiled in the form of processed data, transcripts of interview results, which contain complete answers from key informants and data from documents, as well as temporary conclusions from these answers. If the provisional conclusion is not satisfactory, the necessary data is sought again until the researcher gets complete data for analysis and after that the final conclusion is made.

This research requires a research locus, to obtain the data and information needed in the preparation of this thesis, then this research was conducted at the Office of the Mayor of North Jakarta City Administration. Meanwhile, the research period will take place from November 2022 to February 2023.

RESULTS

Implementation of Large-Scale Social Restriction Policy (PSBB) in North Jakarta Administration City

Covid-19 cases that are increasingly spreading throughout Indonesia make the government have to quickly and carefully determine a certain policy to be taken. On March 31, 2020, President Joko Widodo held a press conference. In the press conference, he emphasized to all Indonesians what policies will be implemented in dealing with this pandemic. President Joko Widodo said that the policy chosen in overcoming this health emergency was Large-Scale Social Restrictions (PSBB). Law Number 6 of 2018 concerning Health Quarantine is the legal basis for the anticipatory policy.

The Covid-19 case is a pandemic that raises concerns from various parties, especially the community. Concerns continue to occur and peak as positive Covid-19 cases increase. Seeing the high rate of spread of the Covid-19 virus that continues to roll, the government must take strategic steps by establishing policies that have an impact on reducing the Covid-19 positive rate. Large-Scale Social Restrictions (PSBB) according to Law Number 6 of 2018 Article 1 paragraph (11), namely: "Restrictions on certain activities of residents in an area suspected of being infected with disease and/or contaminated in such a way as to prevent the possibility of spreading disease or contamination." This policy limits a person's space to carry out all their activities, all forms of activities must be adjusted to the laws and regulations, thus the Covid-19 pandemic is expected to be overcome.

PSBB is carried out with various applicable regulations, but in the provisions of Law Number 6 of 2018, the minimum is to cover three things, namely in the form of school and workplace holidays and restrictions on religious activities must still consider the educational needs, work productivity, and worship of residents in the region. On the other hand, PSBB policy rules related to restrictions on activities in public places or facilities must still pay attention to meeting the basic needs of the population. The impact caused by the implementation of the PSBB policy will affect all aspects of life, therefore the government is very selective in determining PSBB in certain areas, especially in activities in public places or facilities.

Health quarantine based on Law Number 6 of 2018 article 1 is: "Efforts to prevent and prevent the exit or entry of diseases and / or public health risk factors that have the potential to cause public health emergencies." Health quarantine is carried out with a joint responsibility between the central government and local governments which is a manifestation of public care and protection from diseases and/or public health risk factors.

In the implementation process, health quarantine is carried out through observation activities for a disease and the risks it poses, ranging from means of transportation, people, goods and / or the environment as well as responses to community emergencies in the form of health emergency measures, one of which is Large-Scale Social Restrictions (PSBB). The government in terms of handling Covid-19 cases is based on Law Number 6 of 2018 concerning Health Quarantine.

This Health Quarantine Law regulates the responsibilities of the central and local governments, rights and obligations, public health emergencies, the implementation of health quarantine at the entrance, the implementation of health quarantine in the region, health quarantine documents, health quarantine resources, health quarantine information, guidance and supervision, and criminal provisions.

Health quarantine based on Law Number 6 of 2018, is divided into several quarantines. The definition of self-quarantine according to the law is: "Restrictions on activities and/or separation of a person exposed to infectious diseases as stipulated in laws and regulations even though they have not shown any symptoms or are in the incubation period, and/or separation of containers, transportation equipment, or any goods suspected of being contaminated from goods and/or goods containing causes of disease or other sources of contamination materials to prevent the possibility of dissemination to surrounding people and/or goods."

The quarantine model contained in Law Number 6 of 2018 is divided into several types, namely:

- a. Isolation, which is the separation of sick people from healthy people carried out in health care facilities to get treatment and care.
- b. Home Quarantine, which is the restriction of occupants in a house and its contents suspected of being infected with disease and / or contaminated in such a way as to prevent the possibility of spreading disease or contamination.

- c. Hospital Quarantine, which is the restriction of a person in a hospital who is suspected of being infected with a disease and/or contaminated in such a way as to prevent the possibility of spreading disease or contamination.
- d. Regional Quarantine, which is the restriction of residents in an area including the entrance area and its contents suspected of being infected with disease and / or contamination in such a way as to prevent the possibility of spreading disease or contamination.
- e. Large-Scale Social Restrictions, namely restrictions on certain activities of residents in an area suspected of being infected with disease and/or contaminated in such a way as to prevent the possibility of spreading disease or contamination.

The implementation of the Large-Scale Social Restrictions (PSBB) policy is believed to be able to suppress the decline in Covid-19 cases. This can be seen in several steps taken by the central and regional governments by urging the public to limit certain activities that are gathering with many people, so that the appeal to work from home, study from home, and worship at home can be implemented. The community in the process of implementing Large-Scale Social Restrictions must submit and obey the government's recommendations for the common good and create controlled conditions.

According to Law Number 6 of 2018 Article 2, states that health quarantine is carried out based on nine principles including: humanitarian principles, benefit principles, protection principles, justice principles, non-discriminatory principles, public interest principles, integration principles, legal awareness principles and the last is the principle of state sovereignty. The purpose of enacting a health quarantine policy based on Law Number 6 of 2018 Article 3, namely:

- a. Protect the public from diseases and/or public health risk factors that have the potential to cause public emergencies;
- b. Prevent and counteract diseases and/or public health risk factors that have the potential to cause a public health emergency;
- c. Increase national resilience in the field of public health; and
- d. Provide legal protection and certainty for the community and health workers.

There are several rules that were echoed by the government before the PSBB was actually implemented. Actually, these rules are also included in health quarantine measures, because in simple terms health quarantine means an effort made to separate someone who is exposed to a disease in a certain situation from people who are still in good health. This is shown by several follow-up actions, such as:

- a. Social distancing/physical distancing.
- b. Use a mask both in a sick state and in good health.
- c. Making disinfectants or sterilizing certain places with disinfectants.
- d. Wash hands with soap and running water when touching objects that are not sterile and not kept clean.
- e. Always use hand sanitizer if you do not find soap and running water to wash your hands.
- f. Work, study and worship from home.
- g. There are gradual restrictions on public facilities.
- h. There are restrictions or even gradual closure of entry access.

From this description, related to the informant's understanding of the Large-Scale Social Restrictions (PSBB) policy and the legal basis for its implementation, below are excerpts of interviews with informants as follows.

Rahmad Fauzi, as Head of Public Peace and Order at the North Jakarta City Administration Civil Service Police Unit, revealed:

In my opinion, the Large-Scale Social Restrictions policy or PSBB, refers to Law Number 6 of 2018 concerning Health Quarantine, where in the law it is stated that PSBB is a restriction on certain activities of residents in an area suspected of being infected with disease and / or contaminated in such a way as to prevent the possibility of spreading disease or contamination. The legal basis for implementing the Large-Scale Social Restrictions policy is Law Number 6 of 2018 concerning Health Quarantine. Furthermore, this PSBB policy is regulated in Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions in the Framework of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19). (Excerpt of interview, Tuesday, January 17, 2023)

Based on the informant's answer, it can be concluded that the Large-Scale Social Restrictions policy is guided by Law Number 6 of 2018 concerning Health Quarantine, where in the law it is stated that PSBB is a restriction on certain activities of residents in an area suspected of being infected with disease and / or contaminated in such a way as to prevent the possibility of spreading disease or contamination. The legal basis for implementing the Large-Scale Social Restrictions policy, namely Law Number 6 of 2018 concerning Health Quarantine and Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions in the Framework of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19).

Large-Scale Social Restrictions are the most effective policy in breaking the chain of spread of Covid-19. Despite the fact that many offices are closed, public services such as health services remain open in order to achieve health stability in accordance with these health emergencies. PSBB is implemented because it is considered more appropriate than the lockdown policy, PSBB still provides an opening for someone to be able to carry out certain activities with all strict rules in proportion to the level of awareness of the Indonesian people which is still lacking, if the lockdown is imposed then someone cannot leave the house at all for a long time, all means of public transportation or transportation are not allowed to operate. Therefore, the government chose the PSBB step as the right policy in handling the spread of Covid-19 which is adjusted to the conditions of the Indonesian people.

In article 10 paragraph (3) of the Health Quarantine Law, it is stated that further provisions regarding procedures for determining and revoking health quarantine policies are regulated by Government Regulations. On March 31, 2020, a regulation was stipulated which became one of the regulations of the PSBB policy, namely Government Regulation Number 21 of 2019 concerning Large-Scale Social Restrictions in the Context of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19).

In Government Regulation Number 21 of 2020, in the explanation section, it is stated that the spread of Covid-19 cases in Indonesia has even expanded to the regional and country levels with a high number of cases and even causing death. The increase in the number of positive Covid-19 cases has greatly impacted political, social, economic, cultural, defense and security aspects, as well as the welfare of the Indonesian people, so acceleration is needed in terms of handling this pandemic outbreak.

Government Regulation Number 21 of 2020 explains that the implementation of PSBB policy in an area must be based on certain conditions including Article 2, namely:

- (1) With the approval of the minister in charge of government affairs in the health sector, local governments can carry out large-scale social restrictions or restrictions on people and goods for a particular province or district / city.
- (2) Large-Scale Social Restrictions as provided for in article (1) shall be based on epidemiological considerations, the magnitude of the threat, effectiveness, resource support, technical operations, political, economic, social, cultural, defence and security considerations.

In Article 3 of Government Regulation Number 21 of 2020, it is explained that this PSBB activity must meet the criteria set by the government, namely at least: First, the number of cases or the number of deaths due to a disease must increase and spread significantly and quickly to several regions. Second, there is an epidemiological link with similar events in other regions or countries.

Based on the provisions of Law Number 6 of 2018 concerning Health Quarantine and Government Regulation Number 21 of 2020, it has not discussed in detail how the PSBB can be enforced and what the procedures are for its implementation. Article 15 paragraph (4), Law Number 6 of 2018 explains that the provisions regarding Health Quarantine measures are regulated by a Ministerial Regulation. In this case, on April 3, 2020, the Indonesian government issued Ministry of Health Regulation (Permenkes) Number 9 of 2020.

In the Minister of Health, it is explained in detail about the guidelines for the implementation of the PSBB. Starting from the status of its determination, each region must have certain conditions so that its territory can be implemented this PSBB policy. The rules contained in article 3 of Government Regulation Number 21 of 2020, as stated in article 2 of Ministry of Health Regulation Number 9 of 2020, namely: first, the number of cases and the number of deaths due to the disease

increased and spread significantly and quickly to several regions. Second, there is an epidemiological link to similar events in other regions or countries.

If it is related to the Large-Scale Social Restriction (PSBB) policy, the public policy process consists of five stages, which are as follows:

- a. Agenda preparation, which is a process so that a problem can get attention from the government.
- b. Policy formulation, namely the process of making policy choices by the government.
- c. Policy making, which is the process when the government chooses to take an action or not to take an action.
- d. Policy implementation, which is the process of implementing policies in order to achieve results.
- e. Policy evaluation, namely the process of monitoring and selecting work or policy results.

The government is very careful in determining an area to be able to implement the PSBB policy, because this has a direct impact on all living conditions such as economic, social and health. This policy determination is measured through an epidemiological curve of cases or deaths. Furthermore, observations were also made of certain areas or areas affected by Covid-19 with cases continuing to increase. The following are the rules contained in the Ministry of Health Regulation Number 9 of 2020 concerning the Technical Implementation of Large-Scale Social Restrictions (PSBB).

a. Criteria for Establishing Large-Scale Social Distancing

- 1) The prerequisites for the implementation of Large-Scale Social Restrictions are the fulfillment of disease situation criteria in the form of a significant increase in the number of cases and/or deaths due to disease, rapid spread of cases to several regions, and epidemiological links with similar events in other regions or countries. Therefore, the determination of Large-Scale Social Restrictions by the Minister is based on the occurrence of a significant increase in the number of cases and/or deaths within a certain period of time, the rapid spread of cases in other regions within a certain period of time, and there is evidence of local transactions.
- 2) That Cases are patients under confirmed surveillance based on the results of Reserve Transcription Polymerase Chain Reaction (RT-PCR) or even to the point of causing rapid death in the region within a certain period of time.
- 3) The increase in the number of positive cases and deaths should be based on observations of the epidemiological curve of positive cases or deaths. The increase in cases over a period of time is evidence of a meaningful increase.
- 4) The speed of the spread of the Covid-19 virus in a certain area must be done by observing the area of spread of the disease both daily and weekly. The increase in the area affected within a certain period of time is evidence of the rapid spread of the disease.
- 5) The presence of local transmission in one region causes that the disease virus has circulated in that region and is not a case from another region.

b. Ordinances Large-Scale Social Distancing Measures

Large-Scale Social Restrictions are determined by the Minister based on a request from the Governor/Regent/Mayor, or the Head of the Task Force for the Acceleration of Handling Corona Virus Disease 2019 (Covid-19). The application mechanism is carried out as follows:

- 1) The Governor, Regent / Mayor conveyed his proposal regarding the determination of PSBB in their regions by including data on epidemic descriptions and other aspects such as the availability of logistics and various other needs such as health facilities, health workers, as well as medicines and medical devices. The data submitted to the Minister must also contain a picture of the readiness of the Task Force for the Acceleration of Handling Corona Virus Disease 2019 (Covid-19) in the regions.
- 2) The chief executive of the Task Force for the Acceleration of Handling Corona Virus Disease 2019 (Covid-19) in submitting a proposal to the Minister to establish Large-Scale Social Restrictions in certain areas, based on an assessment of the criteria for Large-Scale Social Restrictions.
- 3) Requests made by the Governor, Regent / Mayor can be done individually or together.
- 4) The request submitted from the Governor is intended for the scope of one province or certain districts / cities in the provincial area.

- 5) The request submitted by the Regent / Mayor is intended for the scope of one Regency / City in its area.
- 6) If the Regent / Mayor who wants to propose that his area be designated Large-Scale Social Restrictions, they must first consult the Governor and a letter requesting the establishment of Large-Scale Social Restrictions is penetrated to the Governor.
- 7) If there is an agreement between local governments across provinces for the establishment of Large-Scale Social Restrictions together, then the request to the Minister is carried out by the Head of the Task Force for the Acceleration of Handling Corona Virus Disease (Covid-19).
- 8) In terms of speed of the determination process, applications can be submitted via email psbb.covid19@kemkes.go.id.
- 9) Furthermore, the status of the determination of Large-Scale Social Restrictions by the Minister is carried out based on study recommendations from a special team consisting of elements of the ministry of health, other relevant ministries/institutions and experts to conduct studies on the area which have coordinated with the Task Force for the Acceleration of Handling Corona Virus Disease (Covid-19). The study consists of epidemiological studies as well as studies on political, economic, social, cultural aspects of defense and security.
- 10) Minister then will submit a decision on the proposal of Large-Scale Social Restrictions for certain provinces/districts/cities within a maximum of 2 (days) from the receipt of the application for determination.
- 11) In the event that the application for determination has not been accompanied by supporting data, then the local government must complete it no later than 2 (two) days from receiving the notification and then submitted back to the Minister.
- 12) The determination was carried out based on the consideration of the team's recommendations and took into account the considerations of the Chief Executive of the Task Force for the Acceleration of Handling Corona Virus Disease 2019 (Covid-19).
- 13) Consideration from the Task Force for the Acceleration of Handling Corona Virus Disease (Covid-19) is submitted to the Minister no later than 1 (one) day from the receipt of the determination application. If within that time it is not fulfilled, the Minister can still determine it by taking into account the provisions of laws and regulations.

c. Large-Scale Social Distancing Implementation

The implementation of Large-Scale Social Distancing is carried out during the longest incubation period (14 days). If there is still evidence of spread in the form of new cases, it can be extended within 14 days from the discovery of the last case.

1) School Holidays

- a) School holidays are the termination of the teaching and learning process at school and replace it with the most effective method of learning from home with the most effective media.
- b) Impose restrictions on all educational, training, research, coaching, and similar institutions. This can be done with the most effective learning process through media done from home. This is done to anticipate the risk of Covid-19 transmission.
- c) In this case, there are exceptions for school holidays, namely in educational, research and training institutions related to health services.

2) Workplace Vacationers

- a) Workplace vacation is a restriction on the process of working at work and replacing it with working from home to maintain the productivity of workers' performance.
- b) Workplace holidays may be excluded if the office provides services related to defense and security, public order, food needs, fuel oil and gas, health services, economy, finance, communications, industry, export and import, distribution, logistics, and other basic needs, namely:

(1) Office Government at the central and regional levels, State-Owned Enterprises, Regional-Owned Enterprises, and certain public companies, namely:

- (a) Office The government related to security defense aspects, namely the Indonesian National Army (TNI) and the Indonesian National Police (POLRI), this office must work with a minimum number of employees and still prioritize efforts to prevent the spread of disease in accordance with workplace protocols.
 - (b) Bank Indonesia, financial institutions, and banking.
 - (c) Public utilities (including ports, airports, crossings, distribution and logistics centers, telecommunications, oil and gas, electricity, water and sanitation).
 - (d) Power plants and transmission units.
 - (e) Post office.
 - (f) Firefighter.
 - (g) Navel National informatics.
 - (h) Institution state penitentiary and detention center.
 - (i) Tax Excise duties at ports/ airports/ land borders.
 - (j) Quarantine of animals, fish and plants.
 - (k) Office tax.
 - (l) Institutions/bodies that responsible for disaster management and self-warning.
 - (m) Units that Responsible for operating and maintaining zoos, nurseries, wildlife, forest firefighting, plant minyiram, patrol and transportation movements as needed.
 - (n) Units that Responsible for the management of orphanages, nursing homes and other social institutions.
- (2) Company Commercial and private
- (a) All shops related to materials and goods or basic necessities and essential goods (rice, soybeans, chili, onions, garlic, onions, sugar, cooking oil, wheat flour, fruits and vegetables, beef, chicken meat, chicken eggs, fish, milk, and bottled drinking water) including food stalls/restaurants/restaurants, as well as essential goods related to seeds, seeds, livestock fertilizers, pesticides, livestock drugs and vaccines, animal feed, LPG gas, plywood, cement, construction steel and mild steel.
 - (b) Bank insurance offices, payment system operators, ATMs, including ATM charging vendors and IT vendors for banking operations, banking call centers and ATM operations.
 - (c) Different types of electronic print media.
 - (d) Telecommunications Internet services, broadcasting and cable services. IT and IT-enabled services (for various essential services) are strived to work from home as much as possible, except those working on the mobility of telecommunications providers, telecommunications vendors/suppliers/IT and data infrastructure providers.
 - (e) Delivery of all foodstuffs or staples as well as essential goods including food, medicine and all medical equipment.
 - (f) Gas stations, LPG, retail outlets, and oil and gas storage.
 - (g) Power plants, transmission and distribution units and services.
 - (h) Capital market services as determined by the Jakarta Stock Exchange.
 - (i) Freight forwarding services, including application-based two-wheeled transportation facilities with restrictions only for transporting goods and not for passengers.
 - (j) Cold storage and warehousing services.
 - (k) Personal security services.

The offices mentioned above must work with a minimum number of employees and still prioritize efforts to prevent the spread of disease (breaking the chain of transmission) in accordance with workplace protocols.

- (3) Company Industry and production activities
- (a) Unit production of essential commodities, including pharmaceuticals, pharmaceuticals, media devices or medical devices, households, raw materials and intermediates.
 - (b) Unit production that requires a continuous process, after obtaining the necessary permits from the Ministry of Industry.
 - (c) Production of oil and gas, coal and minerals and activities related to mining operations.
 - (d) Unit manufacturing of packaging materials for food, medicine, pharmaceuticals, and medical devices.

- (e) Staple agricultural and horticultural activities. Production unit of export goods.
- (f) Unit production of agricultural goods, plantations, as well as the production of micro, small and medium enterprises.

The office mentioned above must work with a minimum number of employees and still prioritize disease prevention efforts (breaking the chain of transmission) in accordance with workplace protocols.

(4) Company Logistics and Transportation

- (a) Company Land transportation for export and import food materials and goods, logistics, distribution, raw materials and auxiliary materials for industry and micro, small and medium enterprises.
- (b) Company Voyages, crossings and flights for freight transport.
- (c) Company transportation management services and postal operators.
- (d) Company Warehousing services including cold chain.

The aforementioned offices must work with a minimum number of employees and still prioritize preventing the spread of disease (breaking the chain of transmission) in accordance with workplace protocols.

3) Restrictions on Religious Activities

- a) A form of restriction on religious activities is religious activities carried out at home and attended by a limited family, while maintaining everyone's distance.
- b) All places of worship are closed to the public.
- c) Exemptions for religious activities carried out at home are still carried out based on laws and regulations and fatwas or views of official religious institutions recognized by the government.
- d) Burials of people who died not due to Covid-19 with a number of attendees of no more than twenty people can be permitted by prioritizing efforts to prevent the spread of the disease (breaking the chain of transmission).

4) Restrictions on Activities in Public Places or Facilities

In the form of restrictions on public places or facilities by taking into account the fulfillment of the basic needs of the population, except:

- a) Supermarkets, minimarkets, markets, shops, or points of sale of medicines and medical devices, food necessities, basic necessities, essential goods, fuel oil, gas and energy.
- b) Health service facilities or other facilities in order to fulfill health services. Hospitals and all health-related agencies, both production and distribution units, both public and private sectors, such as pharmacies, blood transfusion units, drug stores, chemical and medical equipment stores, laboratories, clinics, ambulances. All forms of transportation for medical personnel, nurses, medical staff, other hospital support services are still allowed to operate.
- c) Hotel lodging places, lodges and motels, which house tourists and people affected by Covid-19, medical and emergency staff, air and sea crews.
- d) Any company used for quarantine facilities.
- e) Public facilities for individual sanitation needs,
- f) Public places or facilities for the fulfillment of other basic needs of the population including sports activities.
- g) These exceptions are carried out while taking into account crowd restrictions and are guided by protocols and laws and regulations.

5) Restrictions on Social and Cultural Activities

This restriction of social and cultural activities is implemented in the form of prohibiting crowds of people in these activities and remains guided by the views of official customary institutions recognized by the government and laws and regulations. This includes all political, sporting, entertainment, academic and cultural gatherings or meetings.

6) Restrictions on Transportation Modes

a) Transport carrying passengers

This transportation is all air, sea, rail, road transportation services (public transportation and private vehicles) continue to run with restrictions on the number of passengers.

b) Transport transporting goods

All these transportation services including air, sea, land transportation continue to run for essential and essential goods.

- (1) Freight trucking for medical, health and sanitary needs.
 - (2) Freight transportation for basic necessities.
 - (3) Transport for food and beverages includes vegetables and fruits that need distribution to markets and supermarkets.
 - (4) Transport for the circulation of money.
 - (5) Fuel / BBG Transportation.
 - (6) Freight truck transportation for all purposes of raw material distribution for the manufacturing and assembling industries.
 - (7) Freight trucking for import-export purposes.
 - (8) Freight truck and bus transportation for the purposes of distributing consignments (service couriers, express deposits and so on).
 - (9) Bus transportation for employees of the manufacturing and assembling industry as well as boat crossing.
- c) Transportation that works for fire services, law and order services, and emergency services remains running.
- d) Railway, airport and port operations, including TNI/POLRI airports and ports whose purpose is to move cargo, relief and evacuation, and related operational organizations continue to run.

7) Restrictions on other activities specific to defense and security aspects

Restrictions on other activities, specifically this aspect, are excluded from military/police operations activities both as the main element and supporting elements with certain scopes including:

a) Military Operation Activities

- (1) Military operations, war and other activities.
- (2) Military operations carried out by the TNI in supporting the handling of Covid-19, both at the national and regional levels.
- (3) Military operations carried out by the TNI in the event of facing state emergencies in accordance with laws and regulations.

b) POLRI Operation Activities

- (1) Police operations are centralized and regional.
- (2) Police activities carried out in supporting the handling of Covid-19, both at the national and regional levels.
- (3) Routine police activities to ensure public security and order.

The existence of disease outbreaks that occur in almost all parts of the world, makes Indonesia very careful in making a policy, everything that is considered must be related to various aspects, not only health, but also considering economic aspects and strategic regional aspects as areas to be designated for PSBB areas. Large-Scale Social Restrictions as explained in Law Number 6 of 2018 Article 1 paragraph (11), namely: "Large-Scale Social Restrictions (PSBB) are restrictions on certain activities of residents in an area suspected of being infected with disease and/or contaminated in such a way as to prevent the possibility of spreading disease or contamination."

This shows that PSBB is an action taken by the government in terms of safeguarding and protecting its people from exposure or contamination of the virus by limiting certain things that can be at risk of transmission or spread of Covid-19. The government is very careful in issuing this policy, because in any case the most important thing is the safety or survival of its people.

The PSBB policy is not only regulated in Law Number 6 of 2018 concerning Health Quarantine, but there are other regulations that are interrelated as an explanation of the law, namely Government Regulation Number 1 of 2020 concerning Large-Scale Social Restrictions in the Context of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19) and Minister of Health Regulation Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions in the Context of Accelerating Handling Corona Virus Disease 2019 (Covid-19).

The PSBB policy set by the government is basically a manifestation of the constitutional mandate contained in the preamble to the 1945 Constitution which states that: "Then instead of

that to form an Indonesian State Government that protects the entire Indonesian nation and all Indonesian bloodshed." It can clearly be concluded that the government should be responsible for protecting against the threat of danger, including during a pandemic.

The ideals contained in the meaning of the preamble to the 1945 Constitution based on protection are a state responsibility, where the state as a refuge and its government ranks who act as actors or movers for every policy are things that must be done by the state and the rules issued by the government are a necessity for the community.

The PSBB policy is only one of the policy options issued by the government to take action to mitigate risk factors in certain areas experiencing public health emergencies. Other options besides PSBB are home quarantine, regional quarantine, or hospital quarantine. The policies taken by the government related to PSBB really consider the epidemiological side, the magnitude of the threat, effectiveness, resource support, operational technical, economic, social, cultural, and security considerations.

In order to achieve the perfect goal, although in practice there are still shortcomings, in determining the area into the list of PSBB areas, it must meet the predetermined conditions. This aims to balance regional conditions with the needs that will be needed in the PSBB implementation process. Based on the applicable provisions in Article 11 paragraph (1) of Law Number 6 of 2018 concerning Health Quarantine, the implementation of health quarantine must achieve certain elements, namely: "The implementation of Health Quarantine in Public Health Emergencies is carried out by the Central Government quickly based on the magnitude of the threat, effectiveness, resource support, and operational techniques by considering state sovereignty, security, economy, social and culture."

There are several reasons why all of this must be met, if an area has an increase in Covid-19 cases but does not have the availability of resources such as inadequate hospitals, insufficient health workers, this can cancel the implementation of PSBB in the region, one solution, namely patients exposed to the Covi-19 virus can be referred to larger areas and have adequate health facilities. In addition, the region with the condition of the community affected by Covid-19 can be carried out self-isolation at each house or family member who is feared to be infected by maintaining health, a healthy lifestyle and always prioritizing health protocols anywhere and anytime.

Obstacles to the Implementation of Large-Scale Social Restrictions (PSBB) Policy in North Jakarta Administration City

If studied in depth, the factor of citizen indiscipline is not the only cause of the increasingly uncontrolled spread of the Covid-19 outbreak. There are several other causes that also have a significant influence, including:

- a. The slow response of the central government in deciding to take PSBB steps. Various institutions believe that the unreported positive cases of the Covid-19 virus and the total of all positive people are actually far more than what was released by the government. The President finally officially released the first positive case of Covid-19 in Indonesia on March 2, 2020. However, it is actually suspected that Covid-19 existed in Indonesia before that and someone has contracted Covid-19. However, the government, either through the Minister of Health or various parties, is adamant in claiming that Covid-19 cases are not found in Indonesia. The slow response from the government directly affects Jakarta, whose position as the main gate for entry and exit of Indonesia.
- b. Overlapping policies. Overlapping rules between the central and regional governments are also considered as one of the factors that make PSBB ineffective. For example, differences in views between the Ministry of Health and the Ministry of Transportation regarding online-based two-wheeled transportation operations. Although in the end the Ministry of Transportation handed over the implementation of the regulation to the regional government, the regulation was still confusing. Ambiguity in central government policy also occurred with the issuance of the Circular Letter of the Minister of Industry Number 4 of 2020 concerning the Implementation of Factory Operations During the 2019 Corona Virus Disease Public Health Emergency. This circular keeps many factories/industries including non-essential industries operating. This is exacerbated by the absence of law enforcement for violators.

- c. The insynergy of local governments in implementing PSBB policies. Non-synergy occurs between adjacent regions or with governments at the level above. One of the criticisms is related to the failure of the PSBB because at the beginning of this outbreak a number of buffer cities did not immediately implement the same policy. Therefore, to optimize efforts to prevent the spread of the Covid-19 outbreak in several areas around DKI Jakarta Province, the same policy should be applied. Around DKI Jakarta Province, there are 5 regions incorporated in West Java Province, namely Bogor City, Bogor Regency, Depok City, Bekasi City and Bekasi Regency only began issuing PSBB policies five days after the PSBB policy was implemented in DKI Jakarta. This disagreement makes the policy ineffective because the majority of people working in Jakarta live in the buffer area. In addition, this condition also indicates the seriousness of the government in fighting this outbreak.
- d. Many Citizens who do not comply with the policy. When viewed from the data on violations committed by residents during the implementation of the PSBB, it can be concluded that the low level of compliance of residents with the policies that have been issued by this regional government. In general, there are two causes. First, many citizens do not know or care about the PSBB policy. This is experienced by residents who do not continuously or rarely receive news. Most of these groups come from the poor. In addition, it can also come from the upper middle class who really do not have a sense of concern in seeing this case. Second, citizens who are pressed by economic demands. Although they understand the PSBB policy that has been taken, due to the high demands of life, they take the risk to continue carrying out economic activities outside the home. This group is residents whose types of work cannot be done at home, such as drivers, construction workers, street vendors. The lack of government assistance also affects them to continue carrying out economic activities as usual.

Efforts to Optimize the Implementation of Large-Scale Social Restrictions (PSBB) Policy in North Jakarta Administration City

The high number of Covid-19 cases in Indonesia and in DKI Jakarta Province as the capital is a sign that prevention efforts have not been carried out properly. The inability of the government to respond to existing problems is caused by a lack of strong bureaucracy, bureaucratic structure, and disposition that is not responsive to various health problems such as pandemics. Lack of strong coordination between local and central governments is a problem that always arises. This indicates that there is a policy and management crisis in handling the Covid-19 outbreak.

Covid-19 has actually caused a policy crisis and governance crisis in dealing with the pandemic situation. A number of important things that can be done to build a Covid-19 pandemic policy and governance system for both central and local governments include:

- a. A single policy. The foundation is with human values and mobilizing available resources so that policies will be comprehensive, starting from responsiveness, addressing economic and social effects and preparedness models.
- b. Resilient leadership, courage to take risks that are carried out in a measured manner and public communication effectively.
- c. Institutional and coordination in handling Covid-19 is not only in government, but also multisector and society.
- d. Availability and mobilization capacity of resources owned.
- e. Effective communication between the central and regional governments is needed, especially in making policies in the midst of this pandemic. A one-voice command will facilitate the implementation of Covid-19 handling policies.

Discussion

The implementation of the PSBB Policy implemented by DKI Jakarta Province does not run smoothly or even tends to fail when implemented. From the statistical data released by the DKI Jakarta Provincial Government, it can be seen that there are many violations committed, especially those related to the use of personal protective equipment while outside the home with many types of violations not using masks while driving, both motorcycles and four-wheeled vehicles. These

various kinds of indiscipline correlate with the uncontrolled number of Covid-19 positive patients in DKI Jakarta Province.

The implementation of PSBB in the North Jakarta Administrative City area also refers to regulations issued by the central government and related ministries. However, in general, the problems that arise in the implementation of PSBB in the North Jakarta Administration City are caused by: (1) The slow response from the central government which directly affects the DKI Jakarta Province, whose position is the main gate for the entrance and exit of Indonesia. (2) Overlapping regulations between the central and regional governments are also considered as one of the factors that make PSBB ineffective, such as differences in views between the Ministry of Health and the Ministry of Transportation regarding online-based two-wheeled transportation operations. (3) Non-synergy occurs between adjacent regions or with governments at the level above. One of the criticisms is related to the failure of the PSBB because at the beginning of this outbreak a number of buffer cities did not immediately implement the same policy. Therefore, to optimize efforts to prevent the spread of the Covid-19 outbreak in several areas around DKI Jakarta Province, the same policy should be applied. (4) The low level of compliance of citizens with policies issued by local governments.

Based on the results of the analysis of policy implementation along with obstacles and efforts to optimize the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, it can be concluded that the Large-Scale Social Restrictions policy is guided by Law Number 6 of 2018 concerning Health Quarantine, where in the law it is stated that PSBB is a restriction on certain activities of residents in an area suspected of being infected disease and/or contaminated in such a way as to prevent the possibility of spreading disease or contamination. The legal basis for implementing the Large-Scale Social Restrictions policy, namely Law Number 6 of 2018 concerning Health Quarantine and Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions in the Framework of Accelerating the Handling of Corona Virus Disease 2019 (Covid-19).

The implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City is carried out by forming a Covid-19 Task Force based on the Decree of the Governor of DKI Jakarta Province Number 1023 of 2020 concerning the Covid-19 Handling Task Force in DKI Jakarta Province. The North Jakarta City Administration Covid-19 Task Force also appealed to all people to implement health protocols by implementing 3M, namely wearing masks, washing hands and maintaining distance and avoiding crowds. As for people who violate the regulations, strict sanctions will be imposed.

Furthermore, the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City was carried out by setting a curfew and implementing restrictions on community activities. Enforcement of these regulations is quite effective in suppressing the rate of spread of Covid-19 in DKI Jakarta Province as a whole.

Then obstacles in the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, including low public concern and discipline for applicable regulations, such as it can be seen that there are still eating places that are open at night, places of worship that are still carrying out activities, community behavior that does not wear masks when outside the home, crowding and so on. In addition, the minimal budget and inadequate number of supervision and enforcement officers are factors inhibiting the optimal implementation of the PSBB policy.

Meanwhile, efforts need to be made to optimize the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, namely forming a Task Force Team for the Acceleration of Handling Corona Virus Disease (Covid-19) consisting of various stakeholders. Then provide understanding and socialization to the public more intensively about the PSBB policy. Furthermore, it is by fulfilling the availability of infrastructure facilities or supporting facilities for the implementation of PSBB policies in handling Covid-19 such as the availability of masks, disinfectant fluids and also the availability of complete and adequate rapid test kits.

The results of this study are in line with previous research conducted by Hartini (2021), which in her research found that the PSBB policy is a regional quarantine measure based on Law Number 6 of 2018, which is implemented as a policy that has a role to protect the sustainability of human

life, by limiting certain activities to the community, it will reduce the risk of exposure to Covid-19. PSBB in the view of maqasid al-shari'ah is a policy based on hifz al-nafs (guardianship of the soul). Safeguarding one's life to avoid or even reduce mortality due to the Covid-19 pandemic is very important, while keeping ourselves healthy, we can continue the obligation to carry out the commandments of guarding religion (hifz al-din), guarding reason (hifz al-'aql), guarding offspring (hifz al-nasl), and property (hifz al-mal).

Then the previous research conducted by Santoso (2021), where his research found that the implementation of the Large-Scale Social Restrictions policy in Handling Corona Virus Disiase 2019 (Covid-19) in Marpoyan Damai District, Pekanbaru City in 2020 has not been carried out properly because policy socialization activities have not been implemented evenly to all levels of society. Resources and facilities as well as the budget for the implementation of the Large-Scale Social Restrictions policy in Marpoyan Damai District are very limited and the low attitude of concern and discipline of the community in Marpoyan Damai District in complying with all the rules set by the Pekanbaru City Government. For this reason, it is expected that the Pekanbaru City Government will further increase the allocation of funds to overcome the Covid-19 outbreak. To all apparatuses in charge of always improving policy socialization activities so that the level of public understanding of the impact of Covid-19 becomes better. To the community, they should always comply with all the rules of the Pekanbaru City Government in an effort to overcome the impact of the spread of Corona Virus Disiase 2019 (Covid-19).

CONCLUSION

Based on the data collected and the analysis that has been carried out, conclusions can be drawn and also answers to research questions that have been asked, namely the Implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, carried out by forming a Covid-19 Task Force based on the Decree of the Governor of DKI Jakarta Province Number 1023 of 2020 concerning the Covid-19 Handling Task Force in DKI Jakarta Province. The North Jakarta City Administration Covid-19 Task Force also appealed to all people to implement health protocols by implementing 3M, namely wearing masks, washing hands and maintaining distance and avoiding crowds. As for people who violate the regulations, strict sanctions will be imposed.

Obstacles in the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, including low public concern and discipline for applicable regulations, such as it can be seen that there are still eating places that are open at night, places of worship that are still carrying out activities, community behavior that does not wear masks when outside the home, crowding and so on. In addition, the minimal budget and inadequate number of supervision and enforcement officers are factors inhibiting the optimal implementation of the PSBB policy.

Efforts need to be made to optimize the implementation of the Large-Scale Social Restrictions (PSBB) policy in the North Jakarta Administration City, one of which is by forming a Task Force Team for the Acceleration of Handling Corona Virus Disease (Covid-19) consisting of various stakeholders in order to provide understanding and socialization to the public about the PSBB policy. Furthermore, it is by fulfilling the availability of infrastructure facilities or supporting facilities for the implementation of PSBB policies in handling Covid-19, such as the availability of masks, disinfectant fluids and also the availability of complete and adequate rapid test kits. Another anticipatory step is preventive action from the government, especially the Ministry of Health which collaborates with immigration authorities in monitoring and preventing the entry of new viruses from outside into Indonesia through screening people who come to Indonesia.

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