



Doctor's Legal Protection in Health Services for Covid-19 Patients

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Abstract

Doctors as medical workers are at the forefront of health services for Covid-19 patients. During the pandemic, doctor is the profession that has the highest risk in handling Covid-19 patients. In this case, it is appropriate if doctors get legal protection in carrying out their profession. The main objective of this study is to analyze how the legal protection for a doctor in carrying out medical efforts in handling Covid-19 patients. The method of research which used in this research was normatif by examining the law which is conceptualized as a norm or rule that applied in society, and becomes a reference for everyone's behavior. The results of the study indicated that there were preventive and repressive measures which were as means of legal protection for doctors during Pandemic. Preventive efforts can be interpreted as steps or ways that can be taken to prevent an event that has legal consequences in the form of fulfilling obligations as a doctor, namely by carrying out the profession in accordance with professional standard, professional service standard, and standard operating procedures, completing administration in medical practice such as informed consent. and medical records, getting vaccines, providing incentives. While repressive efforts are defined as steps or method which taken if an event that results in law has occurred in the form of providing compensation to doctors who died, giving awards for services, bearing medical expenses for exposed doctors, and prosecution for criminal acts towards people who do not orderly implement health protocols. The legal protection of medical workers in handling Covid-19 is evident in the fact that these medical workers have received legal protection in the form of supervision and guidance carried out by the Central Government, Regional Government or their Work Agencies. It shows that existing regulations have accommodated legal protection for doctors during the Covid-19 pandemic.

Keywords: Legal Protection, Doctor, Preventive efforts, Repressive efforts, Covid-19.

1. Introduction

The COVID-19 pandemic has passed for the past 2 years, of course, it has a major impact on various aspects of human life, especially in the health sector. Since March 2020, when the Minister of Health, at the first time, announced that there were 2 confirmed Covid-19 patients, this epidemic has spread throughout the country. Confirmed cases increases every day. Medical personnel and health workers are at the forefront in handling the spread of the Covid-19 virus. They are required to be ready whenever needed. All health facilities, hospitals are full with positive Covid-19 patients. But in reality, it is not only medical personnel or health workers who struggle to fight this epidemic, in this case the Government and the community are also required to contribute to the Pandemic condition that attacks not only in Indonesia but also throughout the world.

At first, the stigma of Covid-19 disease as a dangerous new disease has wide impact on people's life. This stigma arises due to the assumption that Covid-19 disease is a threat that not only damages physical but also mental health of patients of Covid-19 itself. The feeling of fear, anxiety about the amount of information through social media, which cannot be trusted, it has created negative stereotypes for community related to Covid-19, both Covid-19 patients, Covid-19 suspects, former Covid-19 patients, and health workers who treats Covid-19 patients themselves (Yufika et al, 2021).

Since March 2020, COVID-19 Pandemic has caused many disruptions with unprecedented impact. Of course, in the context of public health, one aspect that receives the greatest impact is the availability of health services. Handling COVID-19 cannot be separated from medical services carried out by health workers and medical personnel. Medical personnel has an important role in improving maximum quality of health services to the community so that the community is able to increase awareness, willingness, and ability to live in healthy life. The medical personnel which becomes the main discussion in this research refers to doctors.

This stigma encourages people, especially Covid-19 patients or their families, they hide their condition of having this disease to avoid discrimination so that it prevents and even obstruct immediate treatment and also ignores healthy living behavior. These conditions have caused the handling of the spread of this disease during this Covid-19 pandemic (Ornell et al., 2020).

The appearance of social stigma makes people becomes passive and they dont care with the conditions of Covid-19 Pandemic. This condition has made heavier on health condition in the community with the increase number of patients who were confirmed positive for Covid-19. It also exacerbates the performance of medical personnel who directly handle Covid-19 patients. Dishonesty of Covid-19 patients regarding their medical history when accessing health services in hospitals has caused a number of medical personnel, namely doctors and also health workers such as nurses, to have a high risk of being affected by Covid-19 virus. The dishonesty of this patient is very dangerous for the doctor in treating the patient. Patients who do not admit that they have the possibility of being infected with Covid-19 cause doctors to do their duties like handling ordinary patients without personal protection which based on the standard protocol in handling Covid-19 patients. In handling Covid-19, the community, especially patients, should be able to cooperate with health workers and government in breaking the chain of spreading this virus. Having an understanding of this condition can provide progress and also make it easier for medical personnel in carrying out some treatment efforts.

The COVID-19 pandemic has caused many disruptions with unprecedented impact. In the context of public health, one of the aspects that receives the greatest impact is the availability of health services. Handling COVID-19 cannot be separated from medical services carried out by health workers and medical personnel. Medical personnel has an important role in improving maximum quality of health services to the community so that the community is able to increase awareness, willingness, and ability to live in healthy life. During this pandemic, medical personnel, to be exact the medical profession is a profession that has the highest risk in handling Covid-19 patients. Doctors as medical personnel interact with patients intensely regarding the handling of them. The high risk which faces by doctors allows them to be exposed to the Covid-19 virus is very high In this case, doctors as the frontline in handling Covid-19 certainly have the right to obtain legal protection for the implementation of the obligations they have performed. Doctors need more attention so that they can provide maximum health services for the community in this pandemic situation.

Until now, the COVID-19 situation especially at the global level still in high risk. While vaccinations are still in progress, the world is faced with the reality of preparing to live together with COVID-19. Therefore, guidelines are needed as efforts to prevent, to control COVID-19 and to provide guidance for health workers to stay healthy, safe, and productive, so that all Indonesian people can get the health services that meet standards. Guidelines for the prevention and control of COVID-19 are prepared based on WHO recommendations which adapted to the development of COVID-19 pandemic, and the provisions of applicable laws and regulations. Some data on the distribution of confirmed Covid-19

patients increases each day, starting on September 9, 2021, the distribution data in Indonesia, which were confirmed as positive people reached 4,153,355 while those who died were 138,116 (Adzania et al., 2021).

Based on this data, then how is the actual form of legal protection for a doctor in carrying out medical actions in handling Covid-19 patients? As the purpose of this study, of course, the researcher have main aims here to study and analyze how the actual form of legal protection for a doctor in carrying out medical efforts in handling Covid-19 patients because in this pandemic, the medical profession in this case is the doctor which has the highest risk in interacting with the handling of Covid-19 patients.

2. Methodology

Research method has an important position because it will determine the results of the study (Badini and Takhshid, 2019). This article is as a result of research of normative research, namely examining the law which is conceptualized as a norm or rule that applies in society, and becomes a reference for everyone's behavior. In addition, this research can also often be referred to as doctrinal research (Muromtsev, 2021). which is a study that aims to examine the development of legislation (*das sollen*). This research is not only examines the applicable laws and regulations (*das sollen*) but also sees how these laws and regulations are applied in terms of handling Covid-19 patients. This research also included instruments on how the concepts, laws and regulations regarding medical law accommodate the needs of medical personnel in handling Covid-19. Statutory approach and analytical approach were types of approaches which used in this research. By using the statute approach and analytical approach, some main issues which analyzed were the juridical understanding and positive legal provisions relating to what type of legal protection would be obtained by doctors in carrying out medical efforts when handling Covid-19.

3. Results and Discussion

Doctors play important roles in giving medical treatment to the patients of COVID-19. However, this medical action also cannot be separated from its relationship with the patient's presence. Patients as part of community also have an important role in handling this Covid-19 case. The doctor's profession as medical personnel certainly has very tight contact, especially physical contact where they are in direct contact with COVID-19 patients. Of course, it brings a high risk impact for the safety and health of doctors who have direct contact with these patients.

During a pandemic like this, the health and safety conditions of doctors who have an important role in handling COVID-19 patients should also be considered. This is very important to note as a form of legal protection that should be given and obtained by doctors as one of the medical personnel who are at the forefront of health services for COVID-19 patients. Since the first case of Covid-19 was officially announced in this country in March last year, so far there have been 647 medical and health workers who died due to being infected with Covid-19 (Pramana et al., 2021).

Based on the summary of the IDI Mitigation Team from the Indonesian Dentist Association (PDGI), the Indonesian National Nurses Association (PPNI), the Indonesian Midwives Association (IBI), the Association of Indonesian Medical Laboratory Technologists (PATELKI), and the Indonesian Pharmacists Association (IAI), medical staff who died consisted of 289 doctors (16 professors) and 27 dentists (3 professors), 221 nurses, 84 midwives, 11 pharmacists, 15 medical laboratory personnel. While the doctors who died consisted of 161 general practitioners (4 professors), 123 specialist (12 professors), and 5 residents from 26 IDI Regions (provinces) and 116 IDI Branches (City/Regency) (Ardi et al., 2021).

Then, based on the latest data, for doctors themselves, based on data from the Mitigation Team of the Indonesian Doctors Association (IDI) on July 17, 2021, the death of doctors in Indonesia during the Covid-19 pandemic reached 545 cases. It was the highest record of number of deaths occurred in July

2021, which were 114 cases. It was possible that the number increased because July was not over yet. In addition, the number also broke the previous record for the highest doctor's death in January which reached 65 cases (Wang et al., 2021).

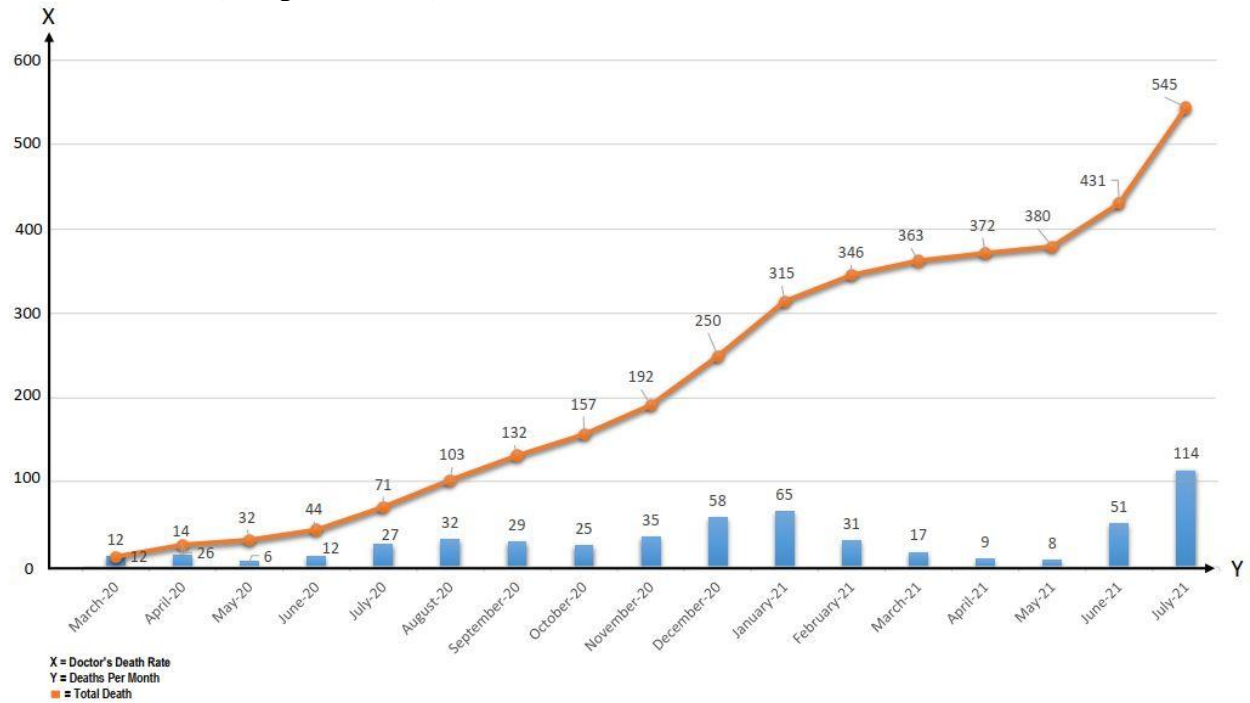


Figure 1. Doctor's Death Due to Covid-19
Data Source: IDI Mitigation Team, July 17, 2021

The death of doctor could certainly be an obstacle in doing efforts which deal with COVID-19. Even though the government had increased health facilities for COVID-19 patients, it was meaningless if it were not balanced with an adequate number of medical personnel, especially doctors. It was caused when medical and health workers were exposed or even die, human resources were urgently needed to substitute for the sick or the dead one. This condition must also be considered and taken into account how many capabilities and needs of existing human resources which were able to provide health efforts in handling COVID-19 patients.

The reduction in the number of doctors due to COVID-19 was also a threat in fulfillment of the right of public health. Based on the regulation of Minister of Law and Human Rights, Number 34 of 2016 concerning Criteria for Districts/Cities Concerned with Human Rights, the ideal ratio of doctors per population is 1:2500 or 1 doctor for 2,500 people. If we refer to the profile data of Indonesia Health 2019, there were only 8 provinces that meet these criteria (Lugito et al., 2021). The need for doctors could only be filled by new graduates of medical education who had passed the authority, competence, and had been registered or it could be internship program, like working in places that required medical personnel. In the end, the Ministry of Health had also opened vacancies for COVID-19 volunteers to overcome the shortage of health workers, especially doctors. It proved that the role of doctors as medical personnel was needed much as efforts to treat COVID-19 patients.

Therefore, it is necessary to pay attention to what legal protection should be given and obtained by a doctor who certainly has a major role in the critical period of current COVID-19 pandemic which increases each day. Talking about legal protection, actually the legal protection in question is related to the existence of a person's rights and obligations, in this case that is owned by humans as legal subjects

in their interactions with other people and their environment. As legal subjects, humans have rights and obligations to take legal action (Utomo et al., 2021). In previous chapter, the concept of rights and obligations of a doctor has been discussed, both from the opinions of experts and those regulated in laws and regulations. As doctors, apart from being obligated and having responsibility to carry out all their duties related to their noble profession, they are also have rights related to their profession, including obtaining legal protection as long as carrying out their duties based on professional standards and standard operating procedures. Satjipto (2012) relates the existence of an element of interest to legal protection. He said that an interest is the target of a right, It is not because it is protected by law, but also because of the recognition of it. Legal protection must be given to doctors so that doctors can work professionally in right manner and get legal certainty (Pradana et al., 2019). Actually, in carrying out their profession as a doctor, they must follow several things, namely the following Medical Professional Standard, Informed Consent, and also medical record. In principle, these three things must always be used as a guide for doctors to be able to seek legal protection in carrying out their profession, especially during this pandemic.

3.1 Medical Professional Standard and Standard Operating Procedures

Services. Third, internal regulation, namely Standard Operating Procedures. Related to medical services, the guidelines which used are medical service standard, which are mainly focused on medical procedures, especially during this pandemic. A doctor must pay attention to standard operating procedures in providing healing efforts for Covid-19 patients.

The most important point, the Guidelines of Doctors Protection Standard in this Covid-19 Era that have been compiled by the Mitigation Team of Doctors in the PB IDI in this Covid-19 Pandemic, it Hierarchically, laws and regulations on medical service standard can be grouped into three types of legislation. First, the legislative act, namely Law No. 29 of 2004 concerning Medical Practice. Second, the executive act, namely the regulation of Minister of Health No. 1438/MENKES/PER/IX/2010 concerning Medical Service Standard and National Guidelines for Medical has been explained explicitly and widely how the standard operating procedures are for doctors who provide health services during Covid-19 Pandemic. As doctors, in principle, they must be careful in carrying out their profession, especially in the midst of the Covid-19 pandemic, they are required to pay more attention to both patients and themselves to be protected from the spread of this virus. Therefore, in standard operating procedures that must be followed by medical personnel, there are several things that must be specific concern to support the performance of medical personnel and become a reflection of the existence of Standard Operating Procedures, namely as follows: Prioritizing Physical Distancing, Using Personal Protective Equipment (APD), and of course paying attention to their Health.

3.2 Informed Consent

In handling Covid-19 patients, of course, a medical effort is carried out in the context of treatment. This is always done based on an agreement, which in medical field is known as a "Therapeutic Agreement". The therapeutic agreement is an agreement formed because of legal relationship between doctor and patient. What is meant by legal relationship is the relationship between legal subjects or between legal subjects and legal objects, which are regulated by law (Hedman-Robertson et al., 2021). The object of agreement in a therapeutic transaction is not the patient's recovery but rather looking for the right effort for the patient's recovery. As a form of agreement in a legal relationship between the parties in this therapeutic transaction, namely the agreement of parties in this case, the doctor and patient which is manifested in an agreement between the doctor and patient

Furthermore, based on the provisions of Article 45 of Law Number 29 of 2004 concerning Medical Practice, it is stated that essentially every treatment of patient action which done either by a doctor or a

dentist must obtain approval, which is given after the patient has received a complete explanation, at least covers the diagnosis and procedures for medical treatment; the purpose of medical action taken; alternative courses of action and their risks; possible risks and complications; and prognosis of the action taken. This agreement can be given either in form of writing or orally. In condition if after receiving an explanation from the doctor, the patient has agreed to the things that have been mentioned by the doctor, then medical action can be taken, whether it is normal care or surgery. The patient's agreement to what has been conveyed by the doctor or dentist is known as Informed Consent.

Informed consent according to Komalawati is an agreement/approval of patient for medical efforts that will be given by doctor on him, after the patient has received information from the doctor regarding medical efforts that can be taken to help himself, along with information regarding all possible risks (Grubb and Kennedy, 2000). Informed Consent is currently one of the most interesting issues related to Covid-19 pandemic. This happens because there are some patients who may convey dishonest information (covering some information) when carrying out medical services with health workers, especially doctors. In fact, sometimes, there are also those who refuse even though they have been given a complete diagnosis and explanation of the treatment efforts that should be done. This, of course, often has a fairly serious impact on patients themselves, health workers and the community. As a result, the therapy that will be given to the patient is not optimal or treatment efforts cannot be given properly. This of course has potential to be bad for the doctors and other health workers because they could be exposed to Covid-19 if the patient they are examining suffered from Covid-19. This is concerning because several laws and regulations have mandated that patients convey information honestly when accessing medical services.

Informed Consent or defined as Medical Action Agreement is an important part that appears as a result of a legal relationship between doctor and patient. Informed consent is about delivering information from a doctor or nurse to a patient before a medical action is taken. This is important because every patient has right to know the risks and benefits of medical procedure he or she will get (Paterick et al., 2008). Having clear and good informed consent, patients will understand all the benefits and risks as well as the goals of treatment which will be given by the doctor, including the level of success of the action or therapy. This is important to prevent misunderstanding of patients who often consider an action as malpractice if the results are not as expected.

Informed consent actually consists of right to inform and the right to give consent. Informed consent is as foundation in relationship between doctor and patient. Regarding informed consent, there is a regulation that specifically (*lex specialis*) regulates, namely, the Decree of the Minister of Health of the Republic of Indonesia Number 290 of 2008 concerning Approval of Medical Actions. During the Covid-19 Pandemic, the issue of informed consent becomes interesting to be discussed regarding the presence of several patients who conveyed information dishonestly (or covered some information) when accessing health services with doctors (hukumonline.com).

3.3 Medical Records

In the implementation of health services, there is an obligation to make medical records, so that basically both medical profession and patient receive protection. Patients get protection because in the medical record, everything is recorded fully about what the doctor does to the patient and if there are errors or infelicity things, the patient can see or re-check his medical record. In addition, based on the medical record, a patient can also ask for a second opinion so that it is clearer whether the medical profession has broken the professional standard and standard operating procedures or not. Furthermore, in medical profession, the medical record profession also has efforts to provide protection for their profession.

By making medical records, medical profession becomes more professional in carrying out their profession so that there is no need for any worries as long as what is stated in medical record is

something that should be done in accordance with professional standard or standard operating procedures (SOP).

In other words, medical profession is actually a profession that has immune from the law as long as the medical profession performs its work professionally in accordance with existing standard, but on the other hand, the medical profession can also be said as a crime if the medical profession breaks the standard that should be done by medical profession. Thus, legal protection applies equally to both patients and the medical profession.

During this Covid-19 pandemic, medical record files must also be done carefully. Because this medical record file must be very vulnerable to the transmission of Covid-19. There is special attention on how this medical record file will be stored. Recovery of medical record documents after medical service, medical records of COVID-19 patients will be entered in a plastic folder, it is recommended to use a yellow plastic folder (infection). And stored in a box/container, the file must be left for 4-5 days to minimize the spread of the COVID-19 virus (Tasri and Tasri, 2020).

After reviewing those three things above, namely SOP, Informed Consent, and also Medical Records as important things that must be held by a doctor in handling and providing medical actions related to the handling of Covid-19 patients. The legal protection is an effort to organize various interests in society so that there are no clashes between interests and they can enjoy all the rights granted by law (Satjipto, 2012). Organizing is done by limiting certain interests and giving power to others in a measurable way. The theory of legal protection is a development of the concept of recognition and protection of human rights (HAM) which developed in 19 century. The direction of the concept of recognition and protection of human rights is limitation and placing of obligations to the community and government (Mafruhah et al., 2012). The theory of legal protection from Satjipto (2012) was inspired by Fitzgerald's opinion about the purpose of law, which is to integrate and coordinate various interests in society by regulating the protection and limitation of these various interests. Legal protection is divided into two, namely preventive and repressive legal protection. Preventive legal protection is legal protection that aims to prevent disputes, which directs government to be careful in making decisions based on discretion, while repressive legal protection is legal protection that aims to resolve disputes.

Regarding legal protection for doctors as medical personnel in health services for Covid-19 patients, it is necessary to examine clearly from a preventive or repressive perspective. Actually, talking about legal protection, of course, it cannot be separated from rights and obligations. Unprotected health workers and medical personnel, in this case, the medical profession, it can occur when doctors do not get their rights or there are violations committed by patients who do not carry out their obligations. Suchnoffences of doctors' rights related to Covid-19 patient services that often occur are patients who do not provide honest information about their condition as ODP or PDP so that they are more susceptible in the transmission of Covid-19 virus which of course has a domino effect on doctors, paramedics, other patients and even his family. This offense is clearly contrary to the provisions of Article 50 letter c of Law Number 29 of 2004 concerning Medical Practice that doctors have the right to obtain complete and honest information from patients or their families.

The rights and obligations of doctors are fully stated in Article 50 of the Medical Practice Act. Doctors have right to carry out their medical practice. In addition to the violation of the right of honest information, the protection that must be given to health workers, whether doctors or nurses, is the availability of Personal Protective Equipment (APD). Personal Protective Equipment (APD) is a doctor's right that must be fulfilled for his safety and in order to be able to work according to his professional standard, as mandated in Article 50 letter (b) of the Medical Practice Law which states that doctors in carrying out medical practice have the right to provide medical services according to professional standard and standard operating procedures. Medical service standard in taking care of patients in the category of infectious disease, it must be equipped with APD in accordance with medical standard.

Protection on health workers has also been regulated in Articles 8 and 9 of Law Number 4 of 1984 concerning Infectious Diseases. Article 8 paragraph (1) of the law states that those who have suffered

property losses caused by efforts to control the epidemic as referred to in Article 5 can be given compensation. Likewise, in Article 9 paragraph (1) it has also been explicitly regulated that certain officers who carry out efforts to control the epidemic as referred to in Article 5 can be rewarded for the risks in carrying out their duties. Article 9 of the Infectious Disease Law is truly fair and appropriate with the risks faced by health workers. The role and responsibility of the state to carry out the mandate of the provisions of Article 9 is mandatory because it is a legal obligation that affects the rights of health workers which must be fulfilled. Once again, that legal protection is always related to rights and obligations. The unfulfillment of rights and obligations of course has legal consequences.

Legal protection for health workers can also be provided through criminal prosecutions for people who are still disorganized to implement health protocols for controlling infectious disease which have an impact on infecting health workers or even resulting in the death of health workers and other people who are exposed to it. The disorganized implementation of standard health protocol in Covid-19 prevention can be said that it deliberately has obstructed the implementation of the control of Covid-19. This is stated in Article 14 of the Infectious Disease Law.

Likewise, when certain parties intentionally or negligently do not properly manage the materials used in controlling the Covid-19 infectious disease, such as the management of materials containing disease or causing disease which are declared to cause plague, for example the delivery/carrying materials containing Disease germs must be carried out based on strict requirements and supervision, so that these materials cannot cause plague, they can be punished with Article 15 of the law of infectious Disease.

Health workers still have to continue to struggle in providing medical services to patients exposed to Covid-19. It means that medical personnel and their families are still at risk of being infected. This high risk certainly needs to be a common concern of both the community and the state to continue to provide moral support and legal protection for their rights.

In addition, it is also a form of protection for doctors as medical personnel and other health workers, namely the provision of vaccines. Until now the Corona virus pandemic does not end yet. In order to reduce the increase number of cases, the COVID-19 vaccine has been administered. The government also recommends that everyone can get it. Currently, the COVID-19 vaccine is being distributed to all Indonesian people. Giving this vaccine is the most appropriate solution to reduce the number of cases of infection with the SARS-CoV-2 virus which causes COVID-19 disease.

Health workers are are forefront in providing health services to the community, they have a high risk of getting infected by the Covid-19 so that it is a priority for the state in receiving vaccines. The government through the Ministry of Health will make various efforts to fulfill all aspects that should be met because the safety of health workers is also the priority of state. This is also an effort to provide protection for health workers and medical personnel to continue to work optimally in handling Covid-19 patients.

Indeed, vaccines have been given to the health workers as well as the supporters of health personnel. Even now, the Ministry of Health also starts to carry out a third vaccination for health workers. The third dose of vaccination for health workers using the Moderna brand of vaccine which is a grant from the United States. The third vaccination is intended as a booster or immunity booster considering that health workers are at the forefront in handling Covid-19.

Back to legal protection, actually in carrying out and providing the required legal protection (in this case for medical personnel such as doctors) a place for its implementation is often called as means of legal protection. In this preventive legal protection, legal subjects are given the opportunity to submit their objections or opinions before a government decision gets a definitive form. The aim is to prevent disputes. Preventive legal protection is very meaningful for government actions based on freedom of action because with the existence of preventive legal protection, the government is encouraged to be careful in making decisions based on discretion. In Indonesia, there is actually no special regulation regarding preventive legal protection. The most important point, it can be concluded that preventive protection efforts are steps or ways that can be taken to prevent an event that has legal

consequences. Repressive legal protection aims to resolve disputes. Handling legal protection by general courts and administrative courts in Indonesia involves this category, namely legal protection. The principle of legal protection towards government actions is based on and originates from the concept of recognition and protection of human rights because according to history from the west, the birth of concepts regarding the recognition and protection of human rights is directed at restrictions and placed community obligations and government. The main point here, repressive legal protection is a step or method taken when an event that has legal consequences has occurred.

The Table 1 is an analysis of legal protection for medical personnel, namely doctors, which can be concluded from the existing laws and regulations in Indonesia:

Table 1 Legal Protection for Doctors in Indonesian Legislation

No	Laws and regulations	Doctor
1.	1945 Constitution of the Republic of Indonesia	<p><u>Article 28 D paragraph (1)</u> "Everyone has right to recognize, guarantee, protect and fair legal certainty and equal treatment in law."</p> <p><u>Article 28 G paragraph (1)</u> "Everyone has the right to protect himself, his family, honor, dignity, and property under his control, and has the right for a sense of security and protection from the threat of fear to do something which is a human right."</p> <p><u>Article 28 I paragraph (4)</u> "Protection, promotion, enforcement and fulfillment of human rights is the responsibility of the state, especially the government."</p>
2.	Law Number 36 Year 2009 concerning Health	<p><u>Article 24 paragraph (1)</u> "Health workers must fulfill the provisions of the code of ethics, professional standard, rights of health service users, service standard, and standard operating procedures."</p> <p><u>Article 27 paragraph (1)</u> "Health workers have the right to receive compensation and legal protection in carrying out their duties in accordance with their profession."</p> <p>Article 29 "In case that health workers are suspected of negligence in carrying out their profession, the negligence must be resolved first through mediation."</p>
3.	Law Number 36 of 2014 concerning Health Workers	<p><u>Article 48 paragraph (1)</u> "For the implementation of quality health personnel practices and protection for the community, it is necessary to do coaching practice for health workers."</p> <p><u>Article 57 letter a</u> "Health workers in carrying out their practice have rights to get legal protection as long as they carry out their duties based on Professional Standard, Professional Service Standard, and Standard Operating Procedures."</p>

Article 57 letter c

"Health workers in carrying out their practice can get protection for occupational safety and health, treatment in accordance with human dignity, morals, decency, and religious values."

Article 75

"Health workers in carrying out their practice can get legal protection in accordance with the provisions of the legislation."

4. Law Number 29 of 2004 concerning Medical Practice

Article 44 paragraph (1)

"Doctors or dentists in carrying out medical practice are responsible to follow the standard of medical or dental services."

Article 45 paragraph (1)

"Every medical or dental action that will be carried out by a doctor or dentist on a patient must obtain approval."

Article 46 paragraph (1)

"Every doctor or dentist in carrying out medical practice has responsibility to make a medical record."

Article 50

"Doctors or dentists in carrying out medical practice have the right to

- a. obtain legal protection as long as they carry out their duties based on professional standard and standard operating procedures;
- b. provide medical services based on professional standard and standard operating procedures;
- c. obtain complete and honest information from patients or their families; and
- d. receive a service fee."

5. PP Number 32 of 1996 concerning Health Workers

Article 24

"Legal protection is given to health workers who carry out their duties based on the professional standard of health workers."

6. Law Number 4 of 1984 concerning Infectious Disease plague.

Article 8 paragraph (1)

Compensation can be given to those who have suffered property losses caused by efforts to overcome the epidemic.

Article 9 paragraph (1)

Certain officers who do some efforts in controlling the plague can be given awards for the risks in carrying out their duties.

From the table above, it can be explained that:

1. According to the provisions of the 1945 Constitution of the Republic of Indonesia, the Government has guaranteed legal protection for doctors who do medical practices because legal

protection is a right that must be obtained by a doctor as a medical worker, especially during the handling of Covid 19 patients;

2. According to the Health Law, basically doctors will also get legal protection for themselves as long as the doctor follows the provisions of the code of ethics, professional standard, rights of health service users, service standard, and standard operating procedures. Even if there is negligence, the doctor will still get protection by conducting a mediation first, of course if the medical action which done has met the predetermined standard.
3. According to the Medical Practice Law, it is almost the same with what has been regulated in the Health Law in essence that a doctor will receive legal protection as long as carrying out his duties based on professional standard and standard operating procedures.
4. Furthermore, PP Number 32 of 1996 concerning Health Workers which states that legal protection is given to health workers who carry out their duties based on professional standard of health workers. Article 24 of PP Number 32 of 1996 has explicitly provided a basis as the basis which used to provide protection to medical profession, namely that the medical profession must work under professional standard. Professional standards are the basic or standard and measurement based on scientific knowledge and medical experience that are always used by the medical profession wherever they are. Thus, professional standards are based on universal standards, namely knowledge and experience, not personal measurements of doctors.
5. In Law Number 4 of 1984 concerning Infectious Diseases, it is clear in the provisions both in Article and Article 9 based on norm that there is a form of protection provided by the government to Health workers. What is stated in these provisions can be said that they have provided fair legal protection and commensurate with the risks faced by health workers, especially in handling this Covid-19 pandemic. The role and responsibility of the state to carry out the mandate of the provisions of Article 9 is mandatory because it is a legal obligation that affects the rights of health workers that must be fulfilled. Once again, that legal protection is always related to rights and obligations. The unfulfillment of rights and obligations of course has legal consequences.

Apart from that, legal protection for health workers can also be provided through criminal prosecutions for people who are not disciplined in implementing protocols for overcoming infectious disease which have an impact on infecting the health workers or even resulting in the death of health workers and other people who are exposed to it. Undisciplined implementation of the standard health protocol in controlling the covid pandemic can be said as deliberately obstructing the implementation of the control of Covid-19. This is stated in Article 14 of the Infectious Disease Law.

Likewise, when certain parties intentionally or negligently do not properly manage the materials used for the control of infectious disease like Covid-19, such as the management of materials containing disease, causing disease for example the delivery/carrying materials containing Disease germs must be carried out based on the requirements and strict supervision, so that these materials cannot cause plague, they can be punished with Article 15 of the Infectious Disease Law. Health workers still have to continue to struggle in providing medical services to patients exposed to Covid-19. It means that medical personnel and their families are still at risk of being infected. This high risk certainly needs to be a common concern of both the community and the state to continue to provide moral support and legal protection for their rights.

So from the descriptions that have been discussed previously, it can be concluded that the form of legal protection for doctors, especially during the Covid-19 pandemic can be seen in Table 2.

Table 2 Preventive and Repressive Efforts as a Form of Legal Protection for Doctors in Handling Covid-19

Preventif Effort	Repressive Effort
1. Fulfilling obligations as a doctor, namely by carrying out the profession based on Professional Standard, Professional Service Standards, and Standard Operating Procedures to avoid the transmission of the Covid-19 virus, such as using APD in accordance with the provisions of the Ministry of Health.	1. Providing compensation to doctors who died due to exposure from Covid in the form of compensation to their families or heirs.
2. Complete the administration in medical practice or in carrying out medical actions, such as informed consent and medical records. Of course, in every medical action carried out by doctors in handling Covid-19 patients, it is necessary to pay attention to several things: informed consent and medical records can be as guide in giving protection for them.	2. Giving awards to medical personnel who have contributed and sacrificed their lives in the prevention and treatment of Covid-19 patients.
3. Getting vaccines as a form of government responsibility in providing protection for the medical profession.	3. Bearing, in this case, the Government, bearing for all costs that must be paid by medical personnel during the treatment period due to exposure to Covid-19 in carrying out their duties.
4. Provide rewards in the form of incentives for doctors who take medical actions related to Pandemic as a form of appreciation to doctors for giving all their thoughts and energy in helping the handling of Covid-19 patients.	4. Demands for criminal acts to people who are still not indiscliplined implement protocols in controlling infectious disease that have an impact on infecting health workers or even resulting in the death of health workers and other people who are also exposed to them.

Legal protection for doctors, especially in handling Covid-19 patients, has actually been protected by the government, of course, through various existing regulations, although they are not directly stated in these regulations. However, protection can be seen through the rights and obligations of the doctor when taking medical actions to patients during handling of the Covid-19 Pandemic.

4. CONCLUSION

Actually, in carrying out and providing legal protection, a place is needed in its implementation which is often called as means of legal protection, namely preventive legal protection efforts and repressive legal protection efforts. The main point here, preventive legal protection efforts, especially for doctors in handling Covid-19, are related to steps or ways that can be taken to prevent an event that has legal consequences as concluded in the discussion, namely fulfilling obligations as a doctor, namely, firstly, by carrying out a profession based on Professional Standard, Professional Service Standards, and Standard Operating Procedures during the Covid-19 Pandemic, such as using APD based on the provisions of the Ministry of Health, then also secondly, completing administration in medical practice or in carrying out medical actions, such as informed consent and medical records. Of course, in every medical action taken by doctors in handling Covid-19 patients, it is necessary to pay

attention to several things: informed consent and medical records can be as guide in providing protection for them, third, giving vaccines as a form of government responsibility in providing protection for the medical profession and fourth, giving rewards in the form of incentives for doctors who take medical actions related to the pandemic as a form of appreciation from doctors in giving all their thoughts and energy in helping the Covid-19 patients. Furthermore, in doing some efforts, especially in term of repressive legal protection for doctors in handling the patients of COVID-19, this can be considered as a step or method taken if an event that has legal consequences has occurred, in this case, it can be seen that there are several efforts, first, to provide compensation to doctors who died due to exposure from covid in the form of compensation to their families or heirs, second, to give appreciation to medical personnel who have contributed and sacrificed their life in the prevention and treatment of Covid-19 patients, third, to bear in this case the Government, for all costs that must be paid by medical personnel during the treatment period due to exposure from Covid-19 in carrying out their duties, and fourth, to demand as criminal action for people who are still indiscliplined in implementing protocols to controll infectious disease that have an impact on infecting health workers or even resulting in the death of health workers and other people who are exposed to them.

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