



KEMENTERIAN
LINGKUNGAN HIDUP DAN KEHUTANAN



THE GUIDELINES

ADAPTATION TO NEW NORMAL

The Guidelines for the Implementation of SGP Indonesia
in Gunung Leuser National Park and Way Kambas National Park



SGP

Small Grants Programme
by the ASEAN Centre for Biodiversity
German Financial Cooperation
KfW No. BMZ 2011 66 545



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**A Guidelines for the Implementation of SGP Indonesia during the “New Normal” Period for the COVID-19 Disease
in Gunung Leuser National Park and Way Kambas National Park**

A Guidelines for the Implementation of SGP Indonesia during the “New Normal” Period for the COVID-19 Disease in Gunung Leuser National Park and Way Kambas National Park

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i	Table of Contents
iii	Abbreviations
iv	Glossaries
	Foreword
v	Director of the Directorate of Biodiversity Conservation Ministry of Environment and Forestry Republic of Indonesia
vi	
vii	Executive Director of the Penabulu Foundation
viii	Service Provider of SGP Indonesia
ix	Introduction to the Guideline

Chapter 1 Preliminary

1	A	Background
3	B	The Purpose of the Guidelines
4	C	Scope of the Guidelines
4	D	Basic Principles of the Guidelines
5	E	Ethics Code of the Guidelines
6	F	Policy Reference
7	G	SGP Indonesia's Policy on Prevention, Handling, and Control of COVID-19 in Program Implementation

Chapter 2 SGP Indonesia Program Management in the New Normal Period

9	A	General Standard
9	A.1	Maintaining Hand Hygiene
10	A.2	Maintaining Respiratory Hygiene
10	A.3	Maintaining Physical Distance
11	A.4	Reducing and Managing Business Trips
11	A.5	Performing Periodic Cleaning of Equipment and Environment
12	A.6	Conducting Risk Communication, Information, and Education
12	A.7	Implementation the COVID-19 protocol for Staff or Their Contacts
13	B	Management of COVID-19 Prevention and Handling
13	B.1	Individual
15	B.2	Office

17	B.3 When Attending Events/Have Activities Outside the Office
19	B.4 When Organizing Events/Activities
23	B.5 Waste Management
24	B.6 Early Treatment of Staff indicated COVID-19
Chapter 3	
Monitoring and Evaluation	
29	Monitoring and Evaluation
Annexes	
33	Annex 1. Personal Risk Assessment Form
34	Annex 2. Outdoor Duty Check Form
35	Annex 3. Office Cleanliness Check Form
36	Annex 4. Person/Event Gathering Consideration Form
37	Annex 5. Event Preparation Check Form
38	Annex 6. Participant Arrangement Form During Activities
39	Annex 7. Event Reporting Form
40	Annex 8. Communication Tracking Form
41	Annex 9. Self Checking Form for Attending Events
42	Annex 10. Staff PPE (Personal Protective Equipment) Collection and Distribution Form
43	Annex 11. Letter of Assignment
44	Annex 12. Decision Letter
45	Annex 13. Operational Vehicle Usage Form
46	Annex 14. Operational Vehicle PPE (Personal Protective Equipment) Inspection Form
47	Annex 15. Office Floor Plan
48	Annex 16. Meeting Room Plan
49	Annex 17. Field Plan
50	References

AC	:	Air Conditioner
ACB	:	ASEAN Centre for Biodiversity
AHP	:	ASEAN Heritage Park
APD	:	<i>Alat Pelindung Diri</i>
ASEAN	:	Association of Southeast Asian Nations
ASOEN	:	ASEAN Senior Official On Environment
BPTN	:	<i>Bidang Pengelolaan Taman Nasional</i> (National Park Management)
CMP	:	Collaborative Management Plan
COVID-19	:	Coronavirus Disease
Kemenkes	:	<i>Kementerian Kesehatan</i> (Ministry of Health)
KLHK	:	<i>Kementerian Lingkungan Hidup dan Kehutanan</i> (Ministry of Environment and Forestry)
KSDAE	:	Konservasi Sumber Daya Alam dan Ekosistem (Conservation of Natural Resources and Ecosystems)
MSP	:	<i>Memorandum Saling Pengertian</i> (Memorandum of Understanding)
NSC	:	National Steering Committee
NWT	:	National Working Team
ODP	:	<i>Orang Dalam Pemantauan</i> (People Under Monitoring)
YOSL-OIC	:	Orangutan Information Centre
OTG	:	<i>Orang Tanpa Gejala</i> (People Without Symptoms)
PDP	:	Pasien Dalam Pemantauan (Patients Under Monitoring)
PILI	:	<i>Yayasan Pusat Informasi Lingkungan Indonesia</i>
RT	:	Rapid Test
RT PCR	:	Reverse Transcriptase-Polymerase Chain Reaction
SGP Indonesia	:	Small Grant Program in Indonesia
TN	:	<i>Taman Nasional</i> (National Park)
TNGL	:	<i>Taman Nasional Gunung Leuser</i> (Gunung Leuser National Park)
TNWK	:	<i>Taman Nasional Way Kambas</i> (Way Kambas National Park)
WfH	:	Work from Home
WfO	:	Work from Office
WHO	:	World Health Organization

Abbreviations

In this Guideline there are general terms and definitions used related to preventing the spread of COVID-19. These terms and definition are: -

Alat Pelindung Diri (Personal Protective Equipment or PPE)

The tool that should be used to anticipate/avoid work hazards and risks and to maintain staff safety and those other people around them in the working place.

Bencana (Disaster)

An event or series of events that threatens and disrupts life and livelihood of the community which is caused, either by natural factors and/or non-natural factors as well as human factors, resulting in human casualties, environmental damage, property loss, and psychological impacts.

Based on Law no. 24 of 2007, disasters are divided into (1) **Natural disasters** are disasters caused by an event or series of events caused by nature, including, among others, earthquakes, tsunamis, volcanic eruptions, floods, drought, hurricanes, and landslides; (2) **Non-natural disasters** are disasters caused by non-natural events or series of events, which include, among other things, technological failures, modernization failures, epidemics, and disease outbreaks; and (3) **Social disaster** is a disaster caused by an event or series of events caused by humans, which includes social conflicts between groups or between communities, and terror.

COVID-19

Coronavirus Disease 2019 (COVID-19) is an infectious disease caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). SARS-CoV-2 is a new type of coronavirus that has never been previously identified in humans. Common signs and symptoms of COVID-19 infection include acute respiratory symptoms such as fever, cough, and shortness of breath. The average incubation period is 5-6 days with the longest incubation period of 14 days. Severe cases of COVID-19 can cause pneumonia, acute respiratory syndrome, kidney failure, and even death.

Fasilitas Pelayanan Kesehatan (Fasyankes) (Health Care Facilities)

A tool and/or place used to carry out health service efforts, whether promotive, preventive, curative or rehabilitative, carried out by the government, regional government, and/or the community.

Gugus Tugas Percepatan Penanganan Coronavirus Disease 2019 (Task Force for the Acceleration of Handling Coronavirus Disease 2019)

A task force formed by the Government of Indonesia to coordinate inter-agency activities in an effort to prevent and mitigate the effects of the SARS-CoV-2 disease in Indonesia.

**Director of the Directorate of Biodiversity Conservation
Ministry of Environment and Forestry
Republic of Indonesia**

The COVID-19 pandemic has become a biggest challenge to humanity, including to the Ministry of Environment and Forestry (MoEF), in specific to the Directorate General of Natural Resources and Ecosystem Conservation (Directorate General KSDAE) in rolling out conservation programs both in Jakarta and in the sites.

It has been well known, that the implementation of biodiversity conservation programs in Indonesia involves not only the Directorate General of KSDAE, MoEF, but also involves international, regional, national partners and local communities.

Among of programs on biodiversity conservation under the coordination of the Directorate of Biodiversity Conservation of the General Directorate of KSDAE, is a cooperation with the ASEAN Center for Biodiversity (ACB), through the Small Grant Program (SGP) Indonesia in two national parks; i.e. Gunung Leuser National Park (GLNP) and Way Kambas National Park (WKNP). The activity of this program is being implemented by the National Park's partners.

Implementation of the Small Grant Program within the last 6-12 months is certainly a real challenge, considering that most of the programs and Grantee's activities will be conducted at site level and mostly through meetings with the community under COVID-19 pandemic. These challenges are increasing, due to restrictions on people daily activities such as social restrictions and physical distancing.

In response to the current pandemic, this Guideline was developed for the Grantee of SGP Indonesia program to provide a comprehensive information on general standard or protocol for the prevention and control of COVID-19 disease's spread and in accordance to health principle. The Guideline becomes a technical reference for the implementation of SGP Indonesia Program activities at the site level, for Grantees and National Park Officers and related stakeholders.

Furthermore, the Guideline will be guided the Implementation of SGP Indonesia program during the New Normal Period of the COVID-19 pandemic in Gunung Leuser National Park (GLNP) and Way Kambas National Park (WKNP). It is expected, the Guideline will also contribute to the effort optimization in the SGP Indonesia program targets achievement

Last, my appreciation and extended gratitude to colleagues, for their hard work in developing this guideline for the implementation of SGP Indonesia program in GLNP and WKNP. Hopefully this guide can be used to provide directives to all Grantee's activity for rolling out the SGP Indonesia program according to the plan.

Thank you, Stay Healthy and Salam Lestari.

Indra Exploitasia
Jakarta, November 2020

Foreword

ACB

Executive Director of the Penabulu Foundation

Praise and gratitude for the God Almighty for His grace, the book "Guidelines for the Implementation of the SGP Indonesia Program in the New Normal Period of the COVID-19 Pandemic in Gunung Leuser National Park and Way Kambas National Park" has been completed.

As we know, from the first case confirmation of COVID-19 patient in Indonesia in March 2020, we have entered the daily life side by side with COVID-19.

Continuing to work and be consistently productive in the midst of a pandemic situation is not an easy task. Keeping our self, the closest people and the surrounding environment away from the exposure to the COVID-19 disease within various rolling out conservation activities with both with the community and other stakeholders in different program locations, is an absolute task to do. This is the main reason for the preparation of the Guideline.

For the Guideline, Penabulu express our appreciation and gratitude to the parties who have contributed to the development of this Guideline. A big hope that the Guideline will benefit all parties, especially the Grantee of SGP Indonesia Program, who continue to dedicated themselves to conduct conservation's works in Gunung Leuser National Park and in Way Kambas National Park, Indonesia.

Hopefully, through the presence of this Guideline, we could continue our contribution to the conservation of biodiversity and the livelihood sustainability of the communities in surrounding the Gunung Leuser National Park and Way Kambas National Park as the ASEAN Heritage Parks (AHPs), whilst ensuring the implementation of health protocol of COVID-19 pandemic prevention in the New Normal period of Indonesia.

Eko K. Komara
Jakarta, November 2020

Chief of the Service Provider of SGP Indonesia Program

All praise and gratitude to the God Almighty, who always bestows His grace, that allow the writing of the Implementation Guideline for the SGP Indonesia Program in the “New Normal” Period of the COVID-19 Pandemic for Gunung Leuser National Park and Way Kambas National Park has been accomplished.

The COVID-19 pandemic had given impact on all sectors and to common life. The spread of COVID-19 virus resulted in many losses of life. In the nature conservation sector, the COVID-19 pandemic has a major impact on the continuous implementing activities for protection and conservation of national park areas. The spread of the disease and the locking down policies from the Government have halted or delayed the protection and conservation efforts undertaken by the related Government Agencies, Civil Society Organizations, Communities and other parties that play an important part in maintaining the sustainability of national park’s biodiversity and the livelihood of the surrounding communities.

The policy of the “New Normal” of the Government of Indonesia during the COVID-19 pandemic has open an opportunity for all of us to continue and extend the implementation of the SGP Indonesia Program for both Gunung Leuser National Park and Way Kambas National Park, while maintaining and ensuring the safety of all people involved in the programs, the program beneficiaries, and other related parties/stakeholders.

The SGP Indonesia Service Provider has realized that program implementation in the COVID-19 pandemic situation, urgently requires adjustments based on the updated information and policies on the New Normal adaptation and the available technological developments.

The Guideline for the Implementation of SGP in the “New Normal” Period of the COVID-19 Pandemic in Gunung Leuser National Park and Way Kambas National Park is a way of mitigating and adapting to the current situation. The Guideline is a living document where changes in policies and updated feedback are expected to complement the existing document.

On behalf of the Service Provider of SGP Indonesia, I thank the drafting team, the expert team and all parties who have directly or indirectly involved in the process of developing this Guideline. Hopefully, this Guideline could provide directives to SGP Indonesia Program Grantee and its related stakeholders to stay safe, while continuing efforts to protect and conserve the Gunung Leuser National Park and Way Kambas National Park of ASEAN Heritage Parks (AHPs) in Indonesia.

Adi Nugroho
Jakarta, November 2020

March 2, 2020, The Government of Indonesia confirmed the first case finding of COVID-19 in Depok, West Java. Since then, the number of cases found and the spread of disease caused by the SARS-CoV-2 virus was rapidly increased and threaten the life of community.

In March 31, 2020, President Joko Widodo has signed the Government Regulation of the Republic of Indonesia Number 21, 2020 on the Large-Scale Social Restrictions in the Context of Accelerating Handling of Coronavirus Disease 2019 (COVID-19), followed by the COVID-19 emergency status determination in Indonesia through Presidential Regulation Number 12/2020. These policies underlined the emergence other series of policies to prevent and contained the spread of the COVID-19 disease in various sectors at national to local level.

The Large-Scale Social Restriction Policy (PSBB) has led to the temporary suspension of all community activities, including the use of mass transportation. This situation becomes an additional problem to the implementation of various Conservation Programs by many parties including the **SGP Indonesia Program**.

Not all planned activities can be carried out remotely until the issuance of the Guidelines for the Prevention of the COVID-19 in Offices and Industries in Supporting Business Continuity in Pandemic Situations was published by the Ministry of Health of Indonesia. This Guideline provided opportunity for the continuation of personal mobility under the "**New Normal**" adaptation.

The above mentioned policy is in line with the Circular Letter of the Minister of Environment and Forestry Number SE.1/ MENLHK/ SETJEN/ SET. 1/3/2020 on the Prevention of the Spread of Coronavirus Disease 2019 (COVID-19) at the Ministry of Environment and Forestry, and the Circular Letter of the General Directorate Conservation of Natural Resources and Ecosystems Number: SE.3/KSDAE/SET/PEG.1/3/2020, that temporary suspension to the implementation of program could be excluded with certain limitations.

In response to the current condition and Government policies, **the Guideline for the Implementation of SGP Indonesia Program in the "New Normal" Period of the COVID-19 Pandemic** in Gunung Leuser National Park and Way Kambas National Park was developed by SGP Indonesia Program to ensure the achievement of the predetermined program goals and objectives such as biodiversity protection and sustainable ecosystem management in Indonesia and the ASEAN region as well as contributing to the improvement the livelihoods of local people.

In general, this Guideline aims to **support the continuous implementation of SGP Indonesia Program** and its stakeholders, especially by **the Grantee in carrying out their planned** and mutually agreed activities whilst **carrying out the protection measures to all related parties against the risk of exposure to the COVID-19 virus**. Whereas specified, this Guideline include parts of **capacity building for the Grantee of the SGP Indonesia program to build an integrated response for prevention, dissemination and reduction of the continued impact of the COVID-19 virus spread during the pandemic**.

In specific, this guideline aim at SGP Indonesia Program Grantees and all parties working on the biodiversity conservation sector, especially those who work at site level and are directly involved with communities around the Gunung Leuser National Park and Way Kambas National Park.

In addition, this Guideline also include with reference for the latest information on the development of the protocols and policies for the management of COVID-19 pandemic, visualizations, sample of forms, pocketbooks, and tips to support the prevention of COVID-19 transmission in field.

To end, we hope this Guideline can be used by all SGP Indonesia Grantees and all parties involved in the implementation of the SGP Indonesia Program in the COVID-19 Pandemic.

Stay Healthy, Stay Safe, and Stay Productive.

The Writer Team

Yayasan Kanopi Indonesia

Chapter 1

Introduction

A. Background

The Small Grant Program (SGP) in Indonesia is an inter-regional cooperation program on Small Grant between the ASEAN Centre for Biodiversity (ACB) and the Government of Indonesia through the Ministry of Environment and Forestry.

ACB is a regional institution assigned to formulate regional strategies towards the implementation of the Convention on Biological Diversity. ACB was formed by the ASEAN Member States which emphasizing the importance of cross-border regional biodiversity and supports the National Protection Strategy. These ASEAN member countries have declared selected national parks and nature reserves as ASEAN Heritage Parks (AHPs) based on their uniqueness, diversity, and extraordinary value, and their importance as conservation areas that are valued regionally and internationally.

ACB prepares a grant program with support from the German Development Bank (KfW). The grant program has the objective (achievement) to protect biodiversity and sustainable management of ecosystems in the ASEAN region as well as to contribute to the improvement of the livelihoods of local people. Specifically, ACB has the mandate **to strengthen biodiversity protection and natural resource management in line with the basic needs of local populations in the ASEAN region and to strengthen ACB's role to promote biodiversity protection.**

In Indonesia, the ASEAN Centre for Biodiversity (ACB) and the Indonesian Government through the Ministry of Environment and Forestry (MoEF) cq. Directorate General of Natural Resources and Ecosystem Conservation. Funding support for the program was obtained from the German Government through the German financial cooperation/KfW (BMZ No. 2011 66545). This collaboration is contained in a Memorandum of Understanding (MSP) signed in Jakarta by the Ministry of Environment and Forestry cq. Directorate General of Natural Resources and Ecosystem Conservation together with ACB Executive Director dated 21 May 2015.

The management of the SGP Indonesia Program is managed by the Penabulu Foundation as the recipient and the Service Provider of the Grant from ACB in coordination with the Ministry of Environment and Forestry cq. Directorate General of Natural Resources and Ecosystem Conservation cq. The Directorate of Biodiversity Conservation as the Program Implementing Agency through the National Steering Committee (NSC) and National Working Team (NWT) mechanisms.

SGP Indonesia through the Penabulu Foundation as the Service Provider provides funding support in form of the small and micro-grants for the ASEAN Heritage Parks (AHP) conservation project in Indonesia, in Gunung Leuser National Park (GLNP) and Way Kambas National Park (WKNP).

SGP Indonesia has four (4) program themes: (1) Strengthening Management Capacity, (2) Law Enforcement, (3) Conservation of Habitats and Species, and (4) Community Empowerment. Additionally, there are 4 cross-sector programs: (1) Wildlife Research and Monitoring, (2) Outreach and Public Awareness Raising, (3) Community Based Ecotourism Development, and (4) Sectoral Policy Development.

SGP Indonesia supports civil society organizations in carrying out activities that aim to increase local participation, strengthen law enforcement, and linked habitat management with the efforts to utilize biodiversity sustainably.

This support is expected to be able to overcome the identified problems in the two National Parks, such as **1) Alignment of National Park management with economic development in local administrative areas; 2) Significant funding gap for the National Park; 3) Land conversion in the buffer zone; 4) Limitation of opportunities for sustainable use; 5) Loss of species due to illegal activities, and 5) Conservation of priority species.** Based on those identified problems, the objectives of the implementation of the SGP Indonesia are: **(1) Increasing the protection of biodiversity; (2) Improving the livelihoods of people who directly depend on the resources in and around AHP; and (3) Strengthening the role of ACB in promoting the protection of biodiversity among the ASEAN Member States.**

Based on the results of the Collaborative Management Plan (CMP) conducted by the Orangutan Sumatera Lestari Foundation - Orangutan Information Center (YOSL-OIC) and the Indonesian Environmental Information Center Foundation (PILI), the SGP Indonesia locus is in the Gunung Leuser National Park, that covers BPTN Area III (Bekancan Resort, Bahorok Resort, Bukit Lawang Resort, Tangkahan Resort, Cinta Raja Resort, and Sekoci Resort), and Langkat Regency, North Sumatra Province; and in the Way Kambas National Park, that covers Braja Harjosari Village and Rantau Jaya Udik II Village including PTN I Way Kanan Section and PTN II Kuala Penat Section, East Lampung Province.

Following the program design developed by SGP Indonesia, there are various types of activities that require physical contact with many people, such as training, discussion with policymakers, monitoring and patrolling area, research, and others field activities.

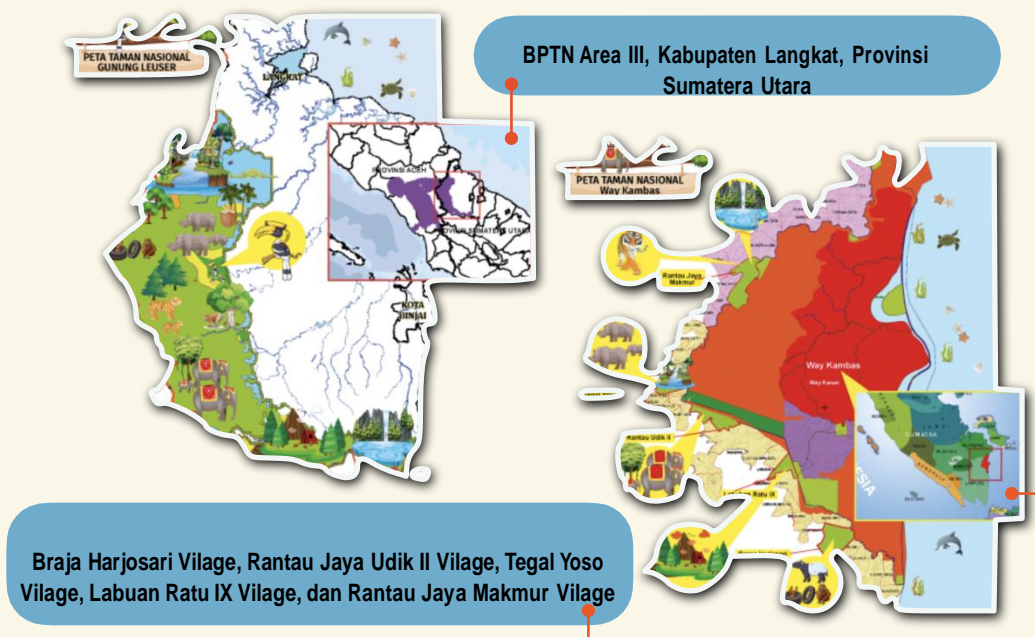


Figure 1. SGP Indonesia Program Area

The PSBB which applies both at the national and local level and the unpredictable distribution pattern of the COVID-19 spread has caused difficulty and risk to the implementation of the SGP Indonesia program where many people are involved. At the same time, SGP Indonesia is mandated to maintain the program's implementation in which accountability becomes the main concern when not all activities can be done through a remote working mechanism due to the restriction.

The above situation has been faced by the management of SGP Indonesia and by the SGP Indonesia's Grantee. The risks of the poor quality/program performance or the risk of dangerous diseases exposure for individual staff of Grantee and its related stakeholders when continuing the program implementation are a tough challenge. The potential for the emergence of new clusters for the spread of COVID-19 from the sustainable activities of SGP Indonesia's Small and Micro Grant Recipients also needs to be considered.

Therefore, the Guideline is prepared as a guarantee for the SGP Indonesia Management National Park and Way Kambas National Park. Implementation of the innovative and effective as well as a complete cautionary approach in the Guideline, the SGP Indonesia Management, and its Grantees will be able to roll out their programs whilst carefully taking care of the safety of the involved partisan its Grantees to achieve the goals through the continuation of programs in the area of Gunung Leuser National Park and Way Kambas National Park.

B. The Purpose of the Guideline

In general, the purpose of this guideline is to prevent the spread of COVID-19 as the result of all of the activities carried out by SGP Indonesia's Grantees that have direct contact with communities and interact with wildlife during the COVID-19 pandemic.

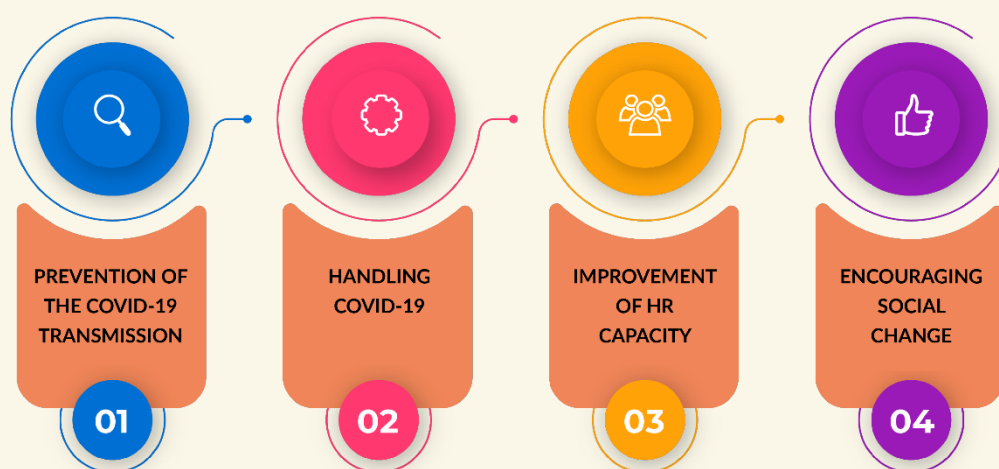


Figure 2. Guideline Purposes

Specifically, this Guideline provides information to Grantee/Program implementers and/or National park officials about the measures to be taken if the case of positive COVID-19 emerged during program implementation.

The guidelines will also aim to strengthen the human resource capacity of the SGP Indonesia Grantee organizations in a better way of handling conservation and community empowerment programs related to the ASEAN Heritage Parks management in the COVID-19 pandemic situation. This effort will contribute to the wider social change in the adaptation to the New Normal period

C. The Scope of Guidelines

In general, the scope of the Guideline will be focused on the SGP Indonesia Service Provider, the SGP Indonesia Grantees as program implementers as well as other closely related communities and stakeholders that are involved in the program implementation on site.

In specific, this Guideline will cover, areas within Grantee organization (individuals and offices), as well as areas of activities off the Grantee organization, such as community assistance and empowerment, research and/or monitoring of biodiversity, research sampling, and/or research samples shipment, patrolling the area, and another type of activities that will be carried out in Gunung Leuser National Park and Way Kambas National Park.

D. Basic Principles of the Guideline

This guideline is prepared with basic principles referring to international humanitarian law and human rights law that are not binding and rely on the **Humanitarian Charter**, namely; **(1) Right to life with dignity, (2) Right to safety protection; and (3) The right to receive humanitarian assistance.**

Humanity	Human suffering must be dealt with wherever it is found. The purpose of humanitarian work is to protect life and health and ensure respect for humans.
Impartiality	Humanitarian Action must be carried out on a need-only basis, giving priority to the most urgent cases and not making distinctions based on nationality, race, sex, religious beliefs, class or political views.
Independence	Humanitarian action must be free from political, economic, military or other objectives that other actors in the area where humanitarian work may carry out.
Neutrality	Humanitarian staff must not take sides in hostilities or engage in conflicts of a political, racial, religious or ideological nature.

In addition, based on **Law Number 24 of 2007 concerning Disaster Management** this guideline is prepared with the following principles:

1. **Fast and Accurate**, means that disaster management must be implemented quickly and accurately in accordance with the demands of situation;
2. **Priority** means that in the event of a disaster, prevention activities must receive priority and prioritize activities to save human lives;
3. **Coordination**, is that disaster management is based on good coordination and mutual support;
4. **Cohesiveness**, means that disaster management is carried out by various sectors in an integrated manner based on good cooperation and mutual support;
5. **Useful**, is that in overcoming community difficulties it is done by not wasting excessive time, energy and costs;
6. **Successful**, is that disaster management activities must be effective, especially in overcoming community difficulties by not wasting excessive time, effort and cost;
7. **Transparency** means that disaster management is carried out openly and can be accounted for;
8. **Accountability**, is that disaster management is carried out openly and can be accounted for ethically and legally.

E. Code of Ethics

The implementation of the prevention and handling of COVID-19 activities carried out by SGP Indonesia and its Grantees should remain within the humanitarian principles based on the 10 Ethical Code of Conducts for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief. These 10 Ethical Codes of Conducts are:

1. Prioritizing humanity;
2. Serves regardless of race, religion, or nationality of the recipients and without any prejudgments. Aid is served solely or purely based on the basis of need;
3. Service or aid will not be linked to a particular political or religious agenda;
4. Service shall not act as instruments of government foreign policy;
5. Respect culture and custom;
6. Build the disaster response on local capacities;
7. Find ways to involve program beneficiaries in the management of the disaster relief aid;
8. Relief aid must strive to reduce future vulnerabilities to disaster as well as meeting basic needs;
9. Responsible to the aid or assistance recipient and the donor or resources provider;
10. In the activities related to providing information, publicity, and advertisement, we shall recognize the dignity of the disaster victims, and not position them as the human with no hope.

F. Policy References

The guideline was prepared with reference to policies for handling and preventing the spread of COVID-19 in Indonesia, these policies include;

1. Law of the Republic of Indonesia Number 24 of 2007 on Disaster Management;
- Law of the Republic of Indonesia Number 6 of 2018 about Health Quarantine;
2. Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions in the Context of Accelerating Handling of Coronavirus Disease 19 (COVID-19);
3. Presidential Decree Number 12 of 2020 concerning the Designation of Non-Natural Disaster for the Spread of Coronavirus Disease 2019 (COVID-19) as a National Disaster;
4. Decree of the Minister of Health Number HK 01.07/MENKES/328/2020 on Guidelines for the Prevention and Control of Coronavirus Disease 19 (COVID-19) in Office and Industrial Workplaces in Support of Business Continuity in Pandemic Situations;
5. Decree of the Minister of Health of the Indonesian Republic Number Hk.01.07/Menkes/413/2020 on the Guidelines for the Prevention and Control of Coronavirus Disease 2019 (COVID-19);
6. Circular Letter of the Task Force for the Acceleration of COVID-19 Handling No. 9 of 2020 on the Amendments to Circular Letter Number 7 of 2020 concerning the Criteria and Requirements for Travel of People in the Adaptation Period of New Normal Towards a Productive and Safe Society of Coronavirus Disease 19 (COVID-19).

In addition, for the COVID-19 concern in the conservation program, this guideline refers to policies from the Ministry of Environment and Forestry (MoEF) and the Directorate General of Natural Resources and Ecosystem Conservation (Dirjen KSDAE), as the following:

1. Decree of the Minister of Environment and Forestry No. SK. 261/MENLHK/KSDAE/KSAO/6/2020 on the Stages of Reactivation of National Parks, Nature Parks and Wildlife Reserves for Nature Tourism Visits in Late Transitional Conditions of COVID-19;
2. Circular Letter of the Director General of KSDAE No. SE.8/KSDAE/KKH/KSA.2/5/2020 on Technical Guidelines for the Release of Wild Animals during the COVID-19 Pandemic;
3. Circular Letter of Director General of KSDAE No. SE.9/KSDAE/PJLHK/KSA.3/6/2020 dated June 23, 2020 on the Directions for Implementation on the Stages of Reactivation of National Parks, Nature Tourism Parks, and Wildlife Reserves for Nature Tourism Visits during the New Normal Pandemic Period Coronavirus Disease 19 (COVID-19);
4. Announcement Number: PG.980/T.3/BIDTEK/P2/08/2020 concerning Reactivation of Ecotourism Locations in the Gunung Leuser National Park Area.

G. SGP Indonesia Policy on Prevention, Handling and Control of COVID-19 in Program Implementation

The guideline was prepared to ensure that the implementation of the SGP Indonesia Program could be rolling out properly in accordance to the Program's objectives. The development of this guideline is part of the journey of SGP Indonesia's Grantees in carrying out program activities while still implementing health protocols to prevent the transmission and spread of COVID-19.

The SGP Indonesia policies related to the implementation of this developed guideline are the following: -

1. This Guideline is an integral part of and is inseparable from the implementation of SGP Indonesia Program.
2. Funds for the prevention, handling and controlling COVID-19 under the implementation program of SGP Indonesia can be allocated from the direct costs and/or "NICRA" in consultation with the SGP Indonesia Service Provider.
3. SGP Indonesia encourages Grantees Recipient to form a Team for the Prevention, Handling and Control of COVID-19 (Task Force) to ensure that the guidelines could properly be rolled out and optimally functioned. This Task Force will closely coordinate with Penabulu Foundation through Penabulu Grant Management as the Service Provider.
4. In the case of emergency caused by and/or as a result of improper implementing the guidelines, SGP Indonesia reserves the right to take a firm action such as conducting an audit of the activity process and giving a warning to the Grantee.

Chapter 2

**SGP Indonesia Program Management
during the New Habit Adaptation
Period**

In accordance with the scope, the governance of COVID-19 prevention, control and handling in the New Normal period focuses on the individual managers and program implementers of the Grantee of SGP Indonesia, the immediate interacting environment such as in organization and family, society, and other surrounding area of Gunung Leuser National Park and Way Kambas National Park as the locations of the implementation of SGP Indonesia Program.



Figure 3. Scope of the Guidelines

A. General Standard

The general standard for the COVID-19 prevention, control and handling of the SGP Indonesia refers to the policy of the Ministry of Health and the policy of the Ministry of Environment and Forestry of the Republic of Indonesia. The detail covers:

A.1 Maintaining Hand Hygiene

Maintaining hand hygiene by regularly washing hand with clean running water and liquid soap is compulsory for staff. The staff must be washing their hand before starting work, before eating, after making contact with colleagues/guests/assisted communities/stakeholders in coordinating activity and also before and after accessing public facilities and using equipment. Hand washing is the most effective way for preventing the spread of COVID-19 disease.

Under a particular condition, where are difficulty of getting running water occur (i.e. in the field), staff could clean their hands using hand sanitizer with 70% alcohol concentration. It must be understood by staff, that **the use of hand sanitizers is maximum 5 (five) times in a sequence** [1]. Afterwards, staff should wash their hands with soap and running water before they could re-apply hand sanitizer.

[1] *J. Agromedicine*,
Volume 6, Nomor 1,
Juni 2019, 153

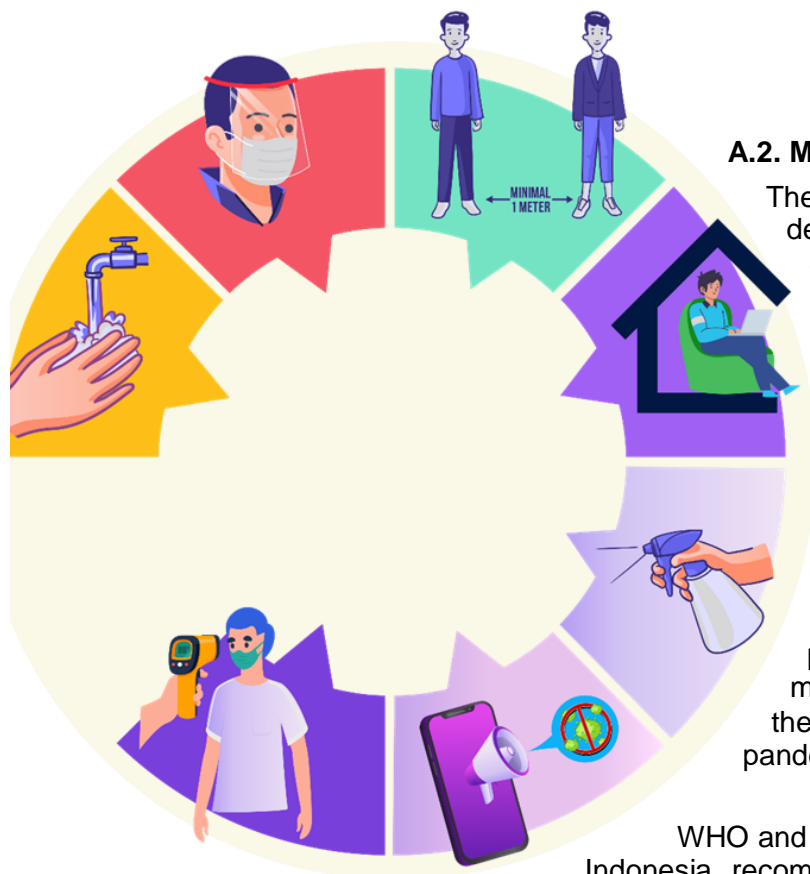


Figure 4. General Standards

A.2. Maintaining Respiratory Hygiene

The rapid spread and the difficulty in detecting the severe acute respiratory syndrome coronavirus 2 or SARSCoV-2 have caused the global pandemic of COVID-19. The coronavirus spread control is globally difficult; hence, this virus is being considered as dangerous and deadly.

When a person is sneezing, coughing, or talking, the SARS-CoV-2 virus could be spreading through respiratory droplets from an infected person to a healthy person. Therefore, maintaining respiratory hygiene is one of the important measure during the pandemic situation.

WHO and the Ministry of Health of the Republic of Indonesia recommend the standard mask to prevent contact to SARS-CoV-2 virus. The recommended mask comprises three layers of a waterproof non-woven layer (front), a microfiber melt-blown non-woven fabrics (middle), and an ordinary non-woven fabrics (back).

Other than wearing mask, staff and their institution/organization could take further measures to prevent the spread of COVID-19 viruses by keeping respiratory hygiene such as:

- All staff must be understood and promoted the coughing and sneezing etiquette in the workplace, public place, or in event.
- Institution/organization provides tissues at the workplace, especially for staff who are experiencing cold or cough in the workplace.
- Staff should dispose his/her personal used tissues in the provided place, especially when the tissue was used to cover mouth when sneezing and/or coughing.
- Janitor should covers the inner part of trash bin with trash bag, and trash bin should be remained closed until the trash is disposed in hygienic ways.
- The head of institution/organization should ask the sick staff to work at home. If symptoms of illness occur at work, the staff should be given a three-layer mask immediately and should be requested to go home early and having rest.

A.3 Maintaining Physical Distance

The World Health Organization (WHO), in the Report of the WHO-China Joint Mission on Coronavirus Disease 2019 (COVID-19), explained that COVID-19 virus spread through droplets or vomiting (fomites) that occur during close contact between people who have been infected with COVID-19 and healthy people. Prevention of transmission is being imposed by maintaining physical distance between people. The policy should be implemented by institution/organization to maintain the physical distance between staffs. The policy consists of:

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- a) Maintaining a minimum distance between staff at least one meter apart and avoiding direct physical contact with others (hugging, touching, and shaking hands).
- b) Application of a queuing management policy for event organizer (marking on the floor and set up dividers) on activities/events that creates queuing.
- c) Reduces people densities in the meeting room (maximum of two people per ten square meters).
- d) Minimizes meetings and optimizes the online facilities for program implementation.
- e) Reducing the number of staff in the shared and in the team office;
- f) Arrangement of an effective and efficient team work division mechanism.
- g) Postponing events for event organizer that will be held in High-Risk areas related to the potential increase of COVID-19 cases, especially events with possible contact between participants for a long period.

A.4 Reducing and Managing Business Trips

Institutions/Organizations must manage official travel effectively and efficiently, taking into account the risk of COVID-19 potential transmission. The business coordination should be carried out through online meetings, and not necessarily have to be held face-to-face. If the case that staff requires to take a business trip, specific measures must be taken as follows: -

- a) Institutions/organizations must provide personal protective equipment packages to staff who have to travel for business.
- b) Institutions/organizations should always urge all staff to pay attention and abide to the government institutions' instructions at the travel destination.
- c) Program implementers should provide safety information on all of their facilities, including the contact of the nearest health service for the travelling staff.
- d) Institutions/Organizations should ensure that returning staff after a travel to a High-Risk COVID-19 area, are monitored, checked, and being self-quarantine for 14 days, before returning to the work.

A.5 Performing Periodic Cleaning of Equipment and Environment

Environmental hygiene is also an essential factor in preventing the spread of COVID-19 disease. In general, the actions that should be taken to keep the environment hygiene are:

- a) The office cleaning using neutral soap or detergent, water, and mechanical measures (brushing and scrubbing) to remove the dirt, dust, and other potential disease caused materials.
- b) The office cleaning using disinfectants as recommended in the Indonesian Government policies.
- c) The use of disinfectants in cleaning office and meeting areas, especially of the frequently touched surfaces (the commonly used areas, such as door and window handles, light switches, kitchen and food preparation areas, bathroom surfaces, toilets and taps, touch screens on a personal device, computer keyboards, and other work surfaces). The disinfectant also necessities to be sprayed on staff who have mobilized animal in rehabilitation areas.
- d) Regular cleaning and disinfection of animal rescue equipment and medical equipment to keep the equipment always clean and ready to use at any time (YOSL-OIC, 2020)

- e. Disinfectant liquid should always be provided and used according to the manufacturer's instructions, including instructions to protect staff safety and health, and follows the use of personal protective equipment when carrying out the disinfection. Staff should always remember not to mix different disinfectants chemical for disinfecting purpose.

A.6 Conducting Communication, Information, and Risk Education

Institutions/organizations are required to provide education about the COVID-19 disease to all staff. Providing sufficient information is a form of effort to increase awareness on the potential spread of the COVID-19. The essential actions required for increasing staff capacity on the COVID-19 prevention are: -

- a) Institutions/Organizations should disseminate information through posters, videos, and/or electronic messaging boards to socializing the risk of COVID-19 to all staff.
- b) Institutions/Organizations should promote the implementation of COVID-19 prevention standards to individuals in the workplace.
- c) Institutions/Organizations should regularly collect feedback from staff on the applied preventive measures.
- d) Institutions/Organizations should provide the regular updated information about the risk of COVID-19 increasing cases from various official sources, such as information from government institutions and WHO.
- e) Institutions/organizations should monitor the effectiveness in their implementing protective measures.

A.7 Implementing the COVID-19 Protocol for Staff and Their Contacts

It is very crucial for SGP Indonesia's program implementing institutions/organizations to avoid the addition of the new cluster of COVID-19 spread from the workplace. The measures must be taken such as: -

- a) Institutions/Organizations instruct staff who feel unwell or staff that experience symptoms similar to COVID-19 symptoms to stay at home, isolate themselves, and contact the local medical personnel or COVID-19 information services for advice on the screening and medication.
- b) Institution/Organization should ask all staff to also monitor their personal health. Health monitoring can be done by filling out a self-check health questionnaire and regularly measuring their body temperature.
- c) Institutions/Organizations should assign personnel to carry out temperature screening in the workplace.
- d) Institutions/organizations should provide a special room for sick people at work and suspected COVID-19 staff.
- e) Restricted staff from the contact people to the sick person, and should ensure the use of personal protective equipment, and the immediate cleaning and disinfection.
- f) Institutions/organizations should immediately communicate to the nearest COVID-19 Prevention Task Force, if someone is sick at work and is suspected of having COVID-19.
- g) Recording attendance to facilitate or carrying out contact tracing.
- h) Applying 14 days quarantine from the last contact to staff who has close contact at work to people with positive COVID-19 test.

B. The procedures of Prevention, Handling and Control the COVID-19 in SGP Indonesia



Figure 5. Personal Protection Equipment

B.1. Individual

Each **individual** should **equip her/himself** the **Personal Protective Equipment (PPE)** which consists of; (1) **Three-layers mask**, (2) **Face shield**, (3) **Gloves**, (4) **Hand washing soap**, (5) **Hand Sanitizer** containing at least 70% alcohol, (6) **Personal stationery**, (7) **Personal cutlery**.

If an **individual** is required to **carry out activities** or **work outside the office**, **additional PPE**, should be provided; (1) **Rubber gloves**, (2) **manual thermometer**, (3) **jackets/long sleeves**, and (4) **supplements (vitamins C and E)**, and (5) **safety shoes**.

As a further prevention, the following measures should be done by each individual: -

- a) Staff must always comply with government policies on the prevention of the spread of COVID-19 in their working environment.

- b) Staff must] comply with the organizations' decision regarding the application of Work from Home (WFH) until the decision is revoked.
- c) Staff must stay at home for the duration of Work from Home (WFH) decision. Unless if, there is an urgent need or is forced to leave the house, staff should always wear three layers mask and should avoid places with crowds/mass gathering. Staff must maintain her/his minimum distance of one meter from other people and return home immediately after finishing her/his work.
- d) Staff must maintain their hygiene at home.
- e) Staff should optimize air circulation and sunlight penetration in their home and allow morning air and sunlight to enter the house.
- f) Staff should always wash their hands using soap and running water whenever hands are dirty/after doing activities, such as: after handling work equipment, before and after eating, after defecating/urinating, and other related potential disease spread.
- g) Staff should continue to practice coughing/sneezing etiquette by covering the mouth and nose with the inner upper arm or tissue.
- h) Staff should always wear a three layers mask when in a cough/cold/fever condition
- i) Staff should provide isolated room for sick family members.
- j) If staff experiences a health complaint of suspected COVID-19 symptoms, she/he must immediately consult with the nearest health worker or health facility. Consultation can also be done through telemedicine such as [sehatpedia.kemkes.co.id](https://sehatpedia.kemkes.go.id), halodoc.com, gooddoctor.co.id, local COVID-19 call center, etc.
- k) If there is no urgent or emergency need, staff should avoid visiting health care facilities during the pandemic period, especially in areas that have tested positive for COVID-19. However, if there is urgent need to visit, staff should always wear three-layer mask, maintain a safe distance and follow the established protocols.
- l) Staff should be able to optimize the use of technology for coordination and communication at work.
- m) If staff wants to return to work at the office, they should implement COVID-19 Self-Risk Assessment to ensure that they are not at risk of being exposed to COVID-19. [Annex 1]

When staff is conducting activities in the national park, they should be optimizing the use of hand sanitizers from natural ingredients such as Piper betle leaf mixed with Aloe vera, essential oil, and water. The alcohol content in hand sanitizers is flammable and could cause forest fires as well as disturbing wildlife due to its strong odor (Margo Utomo, 2020 in the guideline socialization discussion).

B.2. Office

Institution/organization must **ensure that the office** is a **safe and healthy environment for all staff**, thus office must be equipped with; (1) **Digital thermometer/infrared/thermometer gun**, (2) **Washbasin**, (3) **Hand washing soap**, (4) **Hand sanitizer containing at least 70% alcohol**, and (5) **Disinfectant liquid (only for goods)**



Figure 6. COVID-19 Safe Office Illustration

The measures that should be taken to protect the office from being a potential new cluster for the spread of COVID-19 disease are:

- 1) Institutions/organizations must conduct outreach and training on the use of tools and materials in the prevention of COVID-19 to janitor in charge of the office.
- 2) Institutions/organizations should provide hand washing stations with running water and equipped with liquid soap. This hand washing station should be provided at each entrance.
- 3) Institutions/organizations should also provide disinfectant spray equipment for disinfecting goods that are arriving in the office.
- 4) Institutions/organizations should facilitate body temperature check using a thermometer gun to every person who enters the office.
- 5) The implementation of COVID-19 Self-Risk Assessment should be done by every staff who will enter the office. This self-check is for ensuring that persons who will enter the office area are not having potential infection of COVID-19.
- 6) Institutions/organizations should adjust the working hour to provide staff with sufficient breaking time that is good for maintaining their immune system/immunity.
- 7) Institutions/organizations should ask every staff who will enter the office to wear a three-layer masks from/to the home, and while at work.
- 8) Janitors should ensure that all work areas are clean and hygienic through regular cleaning and apply disinfectant every 4 hours, especially on door handles, stairs, and other shared office equipment.
- 9) Janitors should maintain the air quality at workplace by optimizing air circulation and sunlight penetration to the workspace, and cleaning the Air Conditioning filter on regular basis.

- 10) The applied standard hand sanitizers should contain at least 70% alcohol and provided in the designated places (such as office entrance, entrance to each room, entrance to the meeting room, bathroom entrance, and at each working table).
- 11) Office Manager should organize staff working position to impose physical distancing. The minimum distance setting between staff is one meter. [Annex 15]
- 12) Every staff must wash their hands upon arrival at work, before eating, after contact/meeting with other people, after going to the bathroom, and after handling objects that could be contaminated.
- 13) Institutions/Organizations should urge everyone in the office to implement cough etiquette (by covering mouth and nose with the inner upper arm and if using the tissue to cover coughs and colds, used tissue must be disposed of in a closed trash can and followed by washing hand with soap and running water).
- 14) Institutions/organizations should provide vitamin C supplements to all staff.
- 15) Everyone in the office is prohibited from sharing personal tools such as prayer equipment and cup and cutlery.
- 16) Institutions/organizations should prohibit any staff with symptoms of fever/sore throat/cough/ running nose/breathless from coming to the office.
- 17) Institutions/organizations should allow staff for conducting self-quarantine/isolation.
- 18) Institutions/organizations should provide a separate area/room for observation of staff/guests/invitees who show symptom of COVID-19 during screening process.
- 19) Institutions/organizations should conduct strict supervision of the room arrangement and cleaning. [Annex 3]
- 20) During work, each unit/division should monitor their staff for fever/cough/running nose symptom.
- 21) Institutions/organizations should implement regular reminder to all staff to conduct self-monitoring and reporting if they experience of fever/sore throat/cough/running nose while working.
- 22) Staff is allowed to take self-quarantine at home when they just returned from an official trip from country/region with COVID-19 identified cases, as well as to conduct independent monitoring for 14 days of symptoms that arise and measure the temperature 2 times a day. [Annex 8]
- 23) Financial activities of institutions/organizations are optimized with non-cash transactions. If cash transactions are inevitable, the staff must wash their hands using soap and running water or using a Hand Sanitizer after handling cash.

Learn from YOSL-OIC

Animal rescue and medical equipment must always be in hygienic condition and ready for use when needed. Spraying the cage with disinfectant is a necessary measure before and after the evacuation process.

- 24) Institutions/organizations need to urge everyone in the office to minimize touching the face or eyes directly with their hands before washing their hands first. Staff must cover their hands with clean tissue if forced to touch their faces.
- 25) Institutions/organizations must provide communication and the information and education (IEC) media regarding the prevention and handling of COVID-19 in the office area.

In addition to rooms, equipment, and office supplies that must be cleaned and disinfected regularly, operational vehicles is also a subjects to be monitored and disinfected by grantee of SGP Indonesia Program. **The share usage of operational vehicle could potentially transmit COVID-19 virus to staff and/or other people.**

The following activities should be taken to reduce these risks, such as:

- 1) Staff should frequently disinfected the most touchable parts of the operational vehicles; such as doors, rearview mirror, dashboard, seats, armrests, seat belts, and handbrakes handle.
- 2) Program organizer should limit the number of passenger to at least 50% of the vehicle capacity ^[2].
- 3) Institutions/organizations should provide PPE in operational vehicles; i.e. hand sanitizer with 70% alcohol concentration, wet wipe, and dry wipe. Staff must also wear mask when they are in the vehicle.
- 4) Institutions/organizations should conduct monitoring on the use of operational vehicle.
- 5) Institutions/organizations should provide PPE checklist form in each operational vehicles.

[2]
<https://peraturan.bpk.go.id/Home/Details/135886/permenhub-no-18-tahun-2020>

B.3. When Attending Events/Conducting Activities Outside the Office

As previously explained, there are numbers of offline off the office activities such as village assistance, field survey, educational activity, or other stakeholder coordination.

Activities off the office could be implemented if it complies to the enacted local standard/protocol and policy of national park or local government and other related authorities. Close coordination with the National Park Manager or Local Government is mandatory before entering the area or before carrying out activity.

Learn From ALERT

‘Staff should always carry mask and hand sanitizer when patrolling. Patrol staff/officer is required to wear mask while onboard of the ship or operational vehicle if the possible to maintain distance between staff/officer is low.

If the patrol staff/officer does not wear mask on duty, maintaining distance between staff/officer is mandatory.



Figure 7. Illustration of Being Prepared for Outdoor Activities and Staying Safe from COVID-19

The actions that should be taken to protect yourself and your surrounding environment from the exposure to the COVID-19 disease while doing activities off the office. These actions are:

- 1) Staff must carry out a COVID-19 Self-Risk Assessment to ensure staff are healthy and have not contracted COVID-19. If the staff has symptoms of fever/sore throat/cough/runny nose/breathless, the staff is prohibited from continuing outside activities. [Annex 1]
- 2) Staff should do a COVID-19 Self-Risk Assessment to ensure his/her healthiness and not contacted with potential COVID-19 spreader. If staff has symptoms of fever/sore throat/cough/running nose/breathless, he/she will be prohibited from taking off office activities. [Annex 1]
- 3) Staff are required to do rapid test before traveling or conducting activities at the program location (such as village assistance, outreach, patrol/monitoring, camera trap installation, rescue, release, sampling, etc.), especially for the staff originating or domiciled in a high-risk areas.
- 4) Staff should understand the potential risks that may exist at the activity locations when he/she is working off the office. [Annex 3]
- 5) Staff should carry a valid medical certificate from the officially designated health personnel/health institution and carry letter of assignment and related travel document signed by supervisor.
- 6) Staff should be equipped with full PPE if they are conducting off office duty.
- 7) Staff should wear personal protective equipment (PPE) while working off the office, especially for staff who will make direct interactions with wildlife. The PPE comprises of: mask, face shield, glove, long sleeve, and clean trouser (wear pack) and safety shoe (YOSL-OIC, 2020).

- 7) Staff should maintain safety distance (at least one meter) when interacting with other people.
- 8) Staff should complete the communication tracking form while on duty off the office. [Annex 8]
- 9) Staff should maintain personal hygiene after completing work off the office and comply to the implemented COVID-19 Prevention Standard policies.
- 10) Staff should wash their hands with liquid soap and running water every time after conducting activities, and immediately clean themselves (showering and changing clothes) before touching appliances/equipment in their house and making physical contact with other family members.
- 11) Staff must notify the supervisor before carry out quarantine and independent monitoring for 14 days at home after a business trip in High-Risk areas related to the increase in Covid-19 cases. If the staff feels unwell, they must immediately carry out a health check.

B.4. Organizing Events/Activities

Organizing events/activities with large numbers of people in pandemic is a challenge. **The event/activity should be implemented under a strict protocol to reduce the risk of personal exposure to COVID-19.**

In principle, there is **no fundamental difference in the management or organizing activities indoor and outdoor**. For these activities, the committee should ensure the availability of the standard equipment such as; **(1) Handwashing basin with soap and running water, (2) Thermometer gun, (3) PPE for participants, and (4) Information media for participants**. It also important to implements crowd management such as; **(1) Arranging safety distance, (2) Measuring body temperature, (3) Minimizing direct contact, and (4) Coordinating with the local Task Force or Medical Service (Fasyankes)**.

In this section, there are 4 stages that must be carried out by organizer to safely continue the event/activity and minimizing risks. These 4 stages are:

a. Event Planning Stages

- 1) The Event Organizer should conduct a Potential Risk Analysis before carrying out activity. [Annex 4]
- 2) If the organization has a team/task force for handling COVID-19, the event organizer must coordinate with them to get recommendations.

Learn from YOSL-OIC

'Workers who must be in healthy condition (checked with rapid test) and always wear PPE: i.e. mask, face shield, glove, long sleeve and clean trouser (wear pack) and shoes (safety). They should always carry hand sanitizer and keep safety distance (1 meter) on work.

During the evacuation, only the HOCRU team could come into direct contact with animals (orangutans).



Figure 8.a. Illustration of Indoor Covid-19

3. The person in charge of the organization and event organizer should actively **communicate with the nearest Health Service Facilities (Fasyankes) and/or with the Task Force at the event location for their monitoring.**
- 4) The person in charge of the organization and activity organizer should inspect the preparedness of facilities and infrastructure for the event. [See Annex. 5]
- 5) The event organizer should minimize the use of paper such as attendance list, material handout, and other supporting equipment to avoid the potential of direct contact. Event organizer could use online form for attendance list and electronic documents for material.
- 6) The event organizer should minimize the use of cash during the event.
- 7) The event organizer should facilitate non-cash transactions if the event requires financial transactions.

b. The Event Pre-Implementation Step

- 1) The committee should have obtained permission from the COVID-19 Prevention Team before rolling out the event.
- 2) **The committee should have communicated and obtain permission from the local government as well as inform the nearest task force post (POSKO) to the venue on the COVID-19 prevention.**
- 3) The committee should ensure that the event is not being held in the red zone or in high/moderate risk areas of COVID-19 cases.
- 4) The committee should prepare a detail invitation that includes letter of permission in point 1 and 2 above in the attachment.
- 5) The committee should obtain data and confirm the participants' attendance no later than D-2 from the implementation agenda. This data will enable committee to assess the participants with potential risk.
- 6) The committee should utilize online form participants' attendance list. The committee should also ensure that all materials are in the form of electronic documents (docx, pptx, xlsx, pdf, mp4, and so on).

- 7) The committee should ensure that the ratio of number the participant who will attend is under the availability of event space so that it still meets the standard COVID-19 prevention protocol.
- 8) The committee must ensure that all participants and resource persons have filled in and submitted the COVID-19 Independent Risk Assessment Sheet.
- 9) The committee should include a statement letter of participant's statement on the willingness to comply with all activity rules, particularly the use of mask for participants or face shields for resource person, and maintain safety distance during the agenda implementation.
- 10) The committee should provide standard personal protective equipment for the staff on duty off the office and for several participants, as a backup and anticipation for participants who do not bring personal protective equipment.
- 11) The committee should be present at the venue at least one hour before the event start to check event facilities and infrastructure preparedness.
- 12) The committee should provide name tag that can be self-filled in by participants (to be distributed during the agenda implementation).
- 13) The committee should prepare seating arrangements according to the name of each participant/speaker.
- 14) The committee should prepare a step-by-step arrangement plan during the event.
- 15) The committee should prepare warning posters related to handwashing protocol, maintaining a distance, and wearing three-layer mask.

c. Event Implementation Step

- 1) All committees on duty should take a personal assessment and have rapid/swab certificate supported by an assignment letter.
- 2) All committees should always wear the minimum of Personal Protective Equipment (three-layer mask/face shield and rubber gloves).
- 3) The committee should provide officers to carry out examinations and directions in the entrance.
- 4) The committee should provide entrances and exits, controlled by the appointed officer.

Learn from VESSWIC

"Officers who work with wildlife must be in healthy condition and minimize interactions with the wildlife. The wild animal's health condition is checked regularly through a routine animal welfare care whilst minimizing their interactions with officers."



- | | |
|-----------------------|----------------------------|
| A. ENTRANCE | F. PUBLIC DISCUSSION SPACE |
| B. REGISTRATION STAND | G. HAND WASHING FACILITIES |
| C. MEDICAL ROOM | H. EXIT |
| D. TOILET | I. PARKING AREA |
| E. EXHIBITION HALL | |

Figure 8b. Illustration of Outdoor COVID-19 Safe Meetings/Events

- 5) The committee must provide handwashing means with running water and liquid soap, along with educational posters on how to wash hands properly. The committee must also provide hand sanitizers with an alcohol concentration of at least 70% in a place where a sink is not possible.
- 6) The committee should provide a body temperature gauge and take body temperature measurements for each participant who will attend the event.
- 7) The committee must ensure that all participants, speakers, and committee members have taken body temperature check and wash their hands using soap and running water before entering the event room/area.
- 8) The committee should provide a separate space/special room (self-quarantine) for participants who is not passing body temperature check.
- 9) All those attendants should keep wearing mask according to standard, not make physical contact and maintain a minimum distance of one meter during the event.
- 10) The committee should not provide table and chair for the attendant other than seats provided for submitting the name tag.
- 11) The committee should provide at least personal protective equipment such as three-layer mask/face shield and rubber gloves for the speaker/facilitator.
- 12) Speaker/facilitator can be stand/placed in the middle or in front of the participants with a minimum distance of one (1) meter.
- 13) The committee must explain the arrangements that will be rolling out step by step during the event.
- 14) The auxiliary committee should be at least one meter away and remain polite so as not to offend the dignity of all participants
- 15) The committee should not distribute the snack packages during the coffee break to avoid the mass gathering.
- 16) The committee should not provide lunch (or replace it with a takeaway lunch) to limit the meeting duration.
- 17) During the event, the committee should monitor contact and distance between participants.
- 18) The committee should provide a special table with a transparent protective barrier to take care of event administrative needs.

d. Post Event Step

- 1) All minimum personal protective equipment (Three-layer mask/Face Shield and Rubber glove) should be worn by facilitator, and committee must collect all used PPE and put them in a special place to be destroyed/managed hygienically, therefore, the used PPE will not pollute the environment (see point B. 5).
- 2) All office equipment used in the event must be placed in a separate container, which will then be sterilized by disinfecting/heating method.
- 3) The committee should submit a report on the activities for preventing the spread of COVID-19 during the event to the COVID-19 Prevention Implementation Team. [Annex 7]
- 4) After the event organizing task is completed, when the committee return to the office, they should follow the applied procedure for the COVID-19 Prevention Standards in the office.
- 5) Staff returning home should wash their hands with soap and running water, then immediately clean themselves (change clothes and take a shower) before touching household appliances and making physical contact with other family members.

B.5. Waste Management

The use of mask is one of the measure to prevent the spread of COVID-19 within the SGP Indonesia Program implementation. The use of disposable mask without a proper disposal management can lead to new environmental problem.

Based on the **Guidelines for the Management of Mask Waste from the Community (Ministry of Health)** [3]; the used mask of the community/healthy people are not included in the category of medical waste. Used mask of people/healthy people are included in the category of domestic waste; thus, the treatment is similar to domestic waste management as regulated in **Law Number 18 of 2018 on Waste Management**. However, the Indonesian Ministry of Health has issued guidelines for the handling process of masks used by people/healthy people as an effort to reduce health risks. The stages of the handling process are as follows:

[3] https://covid19.kemkes.go.id/Pedoman_Kelola_Limbah_Masker_Masyara

- 1) Collect used masks to avoid misuse by irresponsible people by recycling masks and selling them back to the market. Collect the masks in a safe container.
- 2) Disinfect the collected used masks before disposal by soaking it in a disinfectant/chlorine/bleach liquid.

*Refer to the **Circular Letter of the Director General of KSDAE No: SE.8 / KSDAE/KKH/KSA.2/5/2020**, dated 20 May 2020 on technical instructions for releasing wild animal during the COVID-19 pandemic. Be sure to adhere to health protocols during COVID-19 pandemic and carry out the necessary procedures to protect team and animal from potential exposure to COVID-19.*

- 3) Break the mask (change shape), by breaking the straps and tearing the middle of the mask to prevent them from being reused.
- 4) Dispose the masks into domestic trash can. If the event location is far from the landfill area, it should be managed by burning it.
- 5) Wash hands after handling the used mask waste, staff/personnel are required to wash hands with soap and running water.



Besides wearing mask, washing hand using soap and running water are forms of other effective measures to prevent the spread of COVID-19. Guidelines on the provision of handwashing facilities have been described in the manual for the “Washing Hands with Soap” published by the Ministry of Health of the Republic of Indonesia. In the manual, one of the basic principles of handwashing facilities is not to pollute the surrounding environment. There are requirements for handwashing facilities to avoid pollution to the environment. Those are:

- 1) Wastewater must be funneled to the nearest sewer/drainage with a correct size pipe.
- 2) Pipes, faucets, and sinks must be leak-free.

Learn from VESSWIC

PPE that has been used should be disposed and destroyed immediately (masks/gloves) or should be washed before reuse (cover clothes, etc.)

B.6. Early Treatment for Staff with indication of COVID-19

Grantee of the SGP Indonesia Program have high risk of being exposed to the COVID-19 virus during the pandemic period. SGP Indonesia Program grantees require early detection through monitoring trends in the development of COVID-19 transmission, conducting rapid detection and staff screening, and close coordination with local COVID-19 task force, as stated in the objectives of epidemiological surveillance for early handling of COVID-19 spread.

Based on KMK.No.HK.01.07/MENKES/413/2020 on the guidelines for the Prevention and Control of 2019 CORONAVIRUS DISEASE (COVID-19), the operational definition of COVID-19 case is explained: suspected cases, probable cases, confirmed cases, close contact, traveler, discarded, completed isolation, and death.

In suspect cases, probable cases, confirmed cases, close contact, the terms used in the mentioned above Guideline are Under Observation Person (ODP), Under Surveillance Patient (PDP), *Asymptomatic* Person (OTG).

A. Suspected Cases

A person who has one of the following criteria:

- 1) People with Acute Respiratory Infections (ARI)/ Infeksi Saluran Pernapasan Akut (ISPA)* and in the last 14 days before symptoms developed, had a history of travel or live in countries/regions of Indonesia that are reported local transmission **.
- 2) People with any of the symptoms/signs of ARI * and in the last 14 days before symptoms developed had a history of contact with a confirmed/probable COVID-19 case.
- 3) People with severe ARI/severe pneumonia**, require hospitalization and there is no other cause based on a convincing clinical picture.

B. Probable Case

Probable cases is suspected cases with serious ARI *** / died with a convincing clinical description of COVID-19 AND no RT-PCR laboratory test results.

C. Confirmed Case

A person who tested positive for the COVID-19 virus as proven by an RT-PCR laboratory examination. Confirmed cases are divided into 2:

- a. Confirmed case with symptoms (symptomatic)
- b. Confirmed case without symptoms (asymptomatic)

D. Close Contact

People who have a history of contact with probable cases or confirmed cases of COVID-19. The contact history in question includes:

- 1) Face to face contact with probable or confirmed cases within a radius of 1 meter and within 15 minutes or more.
- 2) Direct physical touch with probable or confirmed cases (such as shaking hands, holding hands, etc.).
- 3) People who provide immediate care for probable or confirmatory cases without wearing standard-compliant PPE.

- 4) Any other situation indicating contact based on a local risk assessment established by the local epidemiological investigation team (explanation as attached).

In probable or symptomatic confirmation cases, to find close contact, the contact period was calculated from 2 days before the case developed symptoms and up to 14 days after the case developed symptoms. In asymptomatic confirmed cases, to find close contact, the contact period was calculated from 2 days before and 14 days after the date of specimen collection of confirmed cases.

Notes:

- The term Patient Under Surveillance Patient (PDP) is now recognized as a suspect case.
- ARI, namely fever ($\geq 38.0^{\circ}\text{C}$) or a history of fever; and accompanied by any of the symptoms/signs of respiratory disease such as cough/breathless/sore throat/runny nose/ pneumonia from mild to severe.
- Local transmission of country/region is the country/region that reports a confirmed case where the source of transmission originates from the region where the case was reported. Local transmission country is a country that is included in the classification of cluster and community transmission cases, which can be seen on the website <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>.
- The local transmission area in Indonesia can be seen on the website <https://infeksimerging.kemkes.go.id>
- The definition of severe ARI/severe pneumonia is (1) Adolescent or adult patients with fever or under surveillance for respiratory infections, plus one of: respiratory rate > 30 x/minute, severe respiratory distress, or oxygen saturation (SpO_2) $< 90\%$ in air room. (2) Pediatric patients with cough or difficulty in breathing, plus at least one of the following: -
 - ✓ central cyanosis or $\text{SpO}_2 < 90\%$;
 - ✓ severe respiratory distress (such as snoring, heavy chest wall traction); signs of severe pneumonia: inability to breastfeed or drink, lethargy or decreased consciousness, or seizures.

E. Traveler

A person who has traveled from within the country (domestic) or abroad in the last 14 days.

F. Discarded

Discarded if it meets one of the following criteria: -

- 1) A person with a suspect case status with negative RT-PCR examination results 2 times for 2 consecutive days with an interval of > 24 hours.
- 2) A person with close contact status who has completed the 14 days quarantine period.

Complete isolation if it meets one of the following criteria:

- ## H. Death

```
graph TD
    Find[Find] --> SUSPECT[SUSPECT]
    SUSPECT --> PROBABLE[PROBABLE]
    PROBABLE --> ISOLATION[ISOLATION]
    ISOLATION --> CASE_INVESTIGATION[CASE INVESTIGATION]
    CASE_INVESTIGATION --> PCR[PCR SPECIMEN EXAMINATION]
    CASE_INVESTIGATION --> CONTACT_ID[CONTACT IDENTIFICATION]
    CONTACT_ID --> CONTACT_TRACING[CONTACT TRACING]
    CONTACT_TRACING --> QUARANTINE[QUARANTINE, DAILY MONITORING FOR 14 DAYS*]
    QUARANTINE --> SYMPTOMATIC[SYMPTOMATIC]
    QUARANTINE --> ASYMPTOMATIC[ASYMPTOMATIC]
    ASYMPTOMATIC --> DISCARDED[DISCARDED]
    SYMPTOMATIC --> COVID_SUSPECT[COVID-19 SUSPECT]
    PCR --> NOT_COVID[NOT COVID-19]
    PCR --> CONFIRM[CONFIRM]
    NOT_COVID --> REMOVED[REMOVED FROM THE SUSPECT LIST (DISCARDED)]
    CONFIRM --> THERAPY[THERAPY ACCORDING TO COVID PROTOCOL]
```

(Restarting From Suspect Groove)

*counted since last contact with the case

Based on the above categories, if the SGP Indonesia Program Grantee finds any indicated staff that meet the criteria for suspicion/probable, they should take measures:

- 27

- 2) Immediately ask the indicated staff to take isolation or **self-quarantine** in the place provided by the workplace or by the government. The implementation of self-quarantine can be seen on the website www.covid19.kemkes.go.id.
- 3) Immediately take laboratory swab test for Reverse Transcriptase-Polymerase Chain Reaction (RT-PCR) by competent health workers.
- 4) When the RT-PCR test result is positive and the patient is declared as a confirmed case, administer therapy according to the protocol should be implemented.
- 5) Contact tracing should be carried out immediately after a suspected case is found, and close contacts will be quarantined for 14 days.
- 6) If there are no symptoms after 14 days of quarantine, then monitoring can be stopped.
- 7) If symptoms occur during close contact monitoring, they should be immediately isolated and examined for swabs (RT-PCR).
- 8) Immediately carry out cleaning and disinfection of rooms/work areas exposed to sick staff from ODP, PDP, or positive confirmation of COVID-19. (Disinfection guidelines can be seen on www.covid19.kemkes.go.id):
 - a. Closing the room/work area that has been used by the confirmed staff for at least 1 x 24 hours before the cleaning and disinfection process is carried out to minimize the potential for exposure the respiratory droplets.
 - b) Cleaning the surfaces of all work areas that are frequently touched by the confirmed staff or who have been exposed to the Covid-19 virus with disinfectant (for example, desks/work areas, door handles, stair railings, elevators, water taps, etc.).
 - c) Spraying with disinfection liquid in rooms contaminated by the confirmed staff or who have been exposed to the Covid-19 virus (such as workrooms, meeting rooms, toilets, prayer rooms, etc.).
 - d) Opening doors and windows to open spaces to increase air circulation in the place in question. If it is possible, wait for another 1 x 24 hours after the cleaning and disinfection process is carried out.
 - e) Coordinate with the local COVID-19 task force to anticipate the possibility of an emergency. You must have clear information about the existence of a COVID-19 handling task force at your activity location to facilitate the regional risk assessment process.

You must have clear information about the existence of a COVID-19 handling task force at your activity location to facilitate the regional risk assessment process. Coordinate with the local COVID-19 task force to anticipate the possibility of an emergency.

Chapter 3

Monitoring and Evaluation

Monitoring and Evaluation (M&E) are the important components in the guidance for Covid-19 spread's prevention of the SGP Indonesia in the adaptation to New Normal. For effective and useful M&E's implementation, a Task Force for Covid-19 prevention, handling, and control should be established in each SGP Indonesia grantee's organization. The Task Force conducts M&E following the director/chairman/head of grantee's organization directive and in coordination with the SGP Indonesia Service Provider.

The Monitoring in the guidance defines as the effort to provide information on the status and trends of Covid-19 spread based on the collected data of the assessment. Monitoring will be repeated from time to time. The Monitoring is carried out to re-examine the Covid-19 prevention process carried out by the grantee organizations, measure the level of risk, and assess the progress of implementing Covid-19 prevention activities to achieve the desired goals.

Regarding the guidance's implementation monitoring, the SGP Indonesia stipulated;

- a) Monitoring shall be carried out regularly by the Covid-19 Task Force in the grantee's organization.
- b) Monitoring shall be carried out by the Data, Monitoring and Evaluation Unit of the Covid-19 Task Force, regularly, based on the staff and activity implementers form analysis.
- c) Data shall be collected online through the grantee organization's official email.
- d) Forms submission to the Covid-19 Task Force is a responsibility of the program manager/head of the service unit/head of implementing agency.
- e) The grantee must report their analysis results to SGP Indonesia through Penabulu Grant Management.

The Evaluation in the guidance refers to the process for determining a score for compliance and success in Covid-19 spread prevention by the Grantee organization. Evaluation for the implementation of Covid-19 prevention guidance will be done on regular basis. Grantee shall be utilized as the result of the evaluation as a foundation for the building of Covid-19 spread prevention strategy.

Learn from Vesswic

In the case of the newly domesticated Sumatran elephants and Sumatran elephants showing clinical symptoms leading to COVID 19 or other infectious diseases, then quarantine procedures are enforced. It is important to ensure the use of Personal Protective Equipment (PPE) such as gloves and hazmat suit for management officer, staff, mahout, and veterinarian when carrying out tests and treatments to prevent the risk of being infected.

The Evaluation framework in Covid-19 prevention of SGP Indonesia program comprises of;

- a) Service Provider SGP Indonesia conducts an evaluation of Covid-19 prevention implementation by the Grantee organization at least once per three months or quarter.
- b) The Evaluation of the implementation of Covid-19 spread prevention will be conducted based on Grantee organization's report submitted to the Service Provider of SGP Indonesia.
- c) Based on the evaluation result, the Service Provider of SGP Indonesia will provide recommendation strategic decision to the Grantee organization for the Covid-19 spread prevention measure on the working grant recipient and their staff.

Annexes

Annex 1. Personal Risk Assessment Form

Date :

Name :

Title :

Unit/Program :

Symptoms

**Fill in with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
Condition/Current Symptoms			
1	I have a fever	<input type="checkbox"/>	<input type="checkbox"/>
2	I have a cold	<input type="checkbox"/>	<input type="checkbox"/>
3	I have shortness of breath	<input type="checkbox"/>	<input type="checkbox"/>
4	I have a sore throat	<input type="checkbox"/>	<input type="checkbox"/>
5	Symptoms less than 14 days	<input type="checkbox"/>	<input type="checkbox"/>
Contact History			
1	Have a history of close contact with a person with confirmed or probable COVID-19. Have physical contact, or stay in the same room, or visit (within 1 meter radius of with patient under surveillance, probable or confirmation) within 2 days before the case develops symptoms and up to 14 days after the case develops symptoms.	<input type="checkbox"/>	<input type="checkbox"/>
2	Have been out of your house to go to public place in the last 1 week (market, social, crowd, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
3	Have been ever used public transportation in the last 1 week	<input type="checkbox"/>	<input type="checkbox"/>
4	Has participate in activities that involve many people in the past week	<input type="checkbox"/>	<input type="checkbox"/>
Mobility History			
1	Have a history of travel or living abroad that carries out local transmission within last 14 days	<input type="checkbox"/>	<input type="checkbox"/>
2	Have a history of travel or living in a local area of infection in Indonesia in the last 14 days	<input type="checkbox"/>	<input type="checkbox"/>
Body temperature when filling out the form: °C			

1. High risk (≥ 5), investigations are carried out and are not allowed to work. Staff takes the RT-PCR examination, if not available, a Rapid-Test can be carried out by the local health facility officer.
2. Small (0) and moderate risks (1-4), are allowed to work. With temperature checks will carried out at the entrance to the workplace. If you get a body temperature > 37.3 °C, the staff should investigate and examine by health workers. If it is confirmed that the staff does not meet the OTG, ODP or PDP criteria, the staff can come to work

Annex 2.

Outdoor Duty Check Form

Date :
 Name :
 Title :
 Unit/Program :
 Destination District, City/Regency :
 Departure Date :
 Return Date :
 Vehicle/Seats Number :
 Health Condition When Leaving :
 Health Condition When Return :

No	Question	Yes (Point 1)	No (Point 0)
Destination Assessment			
1	Is the destination in the red-zone area	<input type="checkbox"/>	<input type="checkbox"/>
2	Is the destination in the yellow-zone area	<input type="checkbox"/>	<input type="checkbox"/>
3	Is the destination in the green-zone area	<input type="checkbox"/>	<input type="checkbox"/>
4	Have ever visited the destination for less than 14 days	<input type="checkbox"/>	<input type="checkbox"/>
5	Do you have emergency contact with the COVID-19 Task Force or Health Care Facilities at the destination	<input type="checkbox"/>	<input type="checkbox"/>
6	I have a sore throat	<input type="checkbox"/>	<input type="checkbox"/>
7	Symptoms less than 14 days	<input type="checkbox"/>	<input type="checkbox"/>
Contact History			
1	Have a history of close contact with a person with confirmed or probable COVID-19. Have physical contact, or stay in the same room, or visit (within 1 meter radius of with patient under surveillance, probable or confirmation) within 2 days before the case develops symptoms and up to 14 days after the case develops symptoms.	<input type="checkbox"/>	<input type="checkbox"/>
2	Is you most likely to meet many people in your destination	<input type="checkbox"/>	<input type="checkbox"/>
3	Are you likely to meet people who come from the area where the COVID-19 spreads in your destination	<input type="checkbox"/>	<input type="checkbox"/>
Personal Protection Equipment			
1	3 layer mask	<input type="checkbox"/>	<input type="checkbox"/>
2	Manual body thermometer	<input type="checkbox"/>	<input type="checkbox"/>
3	Rubber gloves	<input type="checkbox"/>	<input type="checkbox"/>
4	Handsanitizer (70% alcohol)	<input type="checkbox"/>	<input type="checkbox"/>
5	Personal stationery	<input type="checkbox"/>	<input type="checkbox"/>
6	Personal drinking bottle	<input type="checkbox"/>	<input type="checkbox"/>
7	Face shield	<input type="checkbox"/>	<input type="checkbox"/>
8	Jacket	<input type="checkbox"/>	<input type="checkbox"/>
9	Suplemen (Vitamin C dan E)	<input type="checkbox"/>	<input type="checkbox"/>

Annex 3. Office Hygiene Check Form

Date :
Name :
Title :

Checking Time
☐ 09:00 – 13:00
☐ 13:00 – 17:00

Equipment
**fill with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
At the office entrance			
1	Wash basin	<input type="checkbox"/>	<input type="checkbox"/>
2	Hand soap	<input type="checkbox"/>	<input type="checkbox"/>
3	Thermo gun	<input type="checkbox"/>	<input type="checkbox"/>
4	Handsantizer	<input type="checkbox"/>	<input type="checkbox"/>
5	Dry tissue and wet tissue	<input type="checkbox"/>	<input type="checkbox"/>
6	Disinfect spray	<input type="checkbox"/>	<input type="checkbox"/>
At the room entrance			
1	Handsantizer	<input type="checkbox"/>	<input type="checkbox"/>
2	Dry tissue and wet tissue	<input type="checkbox"/>	<input type="checkbox"/>
Room arrangement			
1	Seats are > 1m appart	<input type="checkbox"/>	<input type="checkbox"/>
2	Tissue are available on each table	<input type="checkbox"/>	<input type="checkbox"/>
3	Hand soap are available in every wash basin and bath room	<input type="checkbox"/>	<input type="checkbox"/>
Indoor hygiene			
1	Doors and handles	<input type="checkbox"/>	<input type="checkbox"/>
2	Windows	<input type="checkbox"/>	<input type="checkbox"/>
3	Telephones	<input type="checkbox"/>	<input type="checkbox"/>
4	Meeting Rooms	<input type="checkbox"/>	<input type="checkbox"/>
5	Working desk and chairs	<input type="checkbox"/>	<input type="checkbox"/>
6	Floor in each rooms	<input type="checkbox"/>	<input type="checkbox"/>
7	Trash bin	<input type="checkbox"/>	<input type="checkbox"/>
8	Bath room / toilet	<input type="checkbox"/>	<input type="checkbox"/>
9	Kitchen	<input type="checkbox"/>	<input type="checkbox"/>
10	Cutlery and drinking utensils	<input type="checkbox"/>	<input type="checkbox"/>
11	Water dispenser	<input type="checkbox"/>	<input type="checkbox"/>
12	Stairs and banisters	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor hygiene			
1	Front and back yard	<input type="checkbox"/>	<input type="checkbox"/>
2	Terrace	<input type="checkbox"/>	<input type="checkbox"/>
3	Mat	<input type="checkbox"/>	<input type="checkbox"/>
4	Trash bin	<input type="checkbox"/>	<input type="checkbox"/>
5	Gateway lane	<input type="checkbox"/>	<input type="checkbox"/>

Person/Event Gathering Consideration Form

Name of responsible person of the event :
Name of person in charge :
Unit/Program :
Duration :

Event date	:
Event time	:
Venue	:
Number of participant	:

Risk Assessment

***fill with tick mark**

No	Question	Yes (Point 1)	No (Point 0)
1	Do you know the zone category of COVID-19 of the event location area?	<input type="checkbox"/>	<input type="checkbox"/>
2	Can you control the attendees and performers?	<input type="checkbox"/>	<input type="checkbox"/>
3	have you prepared the rules of the implementing the event?	<input type="checkbox"/>	<input type="checkbox"/>
4	Can you get the self risk assessment results of participants and performers?	<input type="checkbox"/>	<input type="checkbox"/>
5	Do you have control the arrangement of the venue?	<input type="checkbox"/>	<input type="checkbox"/>
6	Have you communicated / made permission with the COVID-19 task force and the nearest health facility of the venue?	<input type="checkbox"/>	<input type="checkbox"/>

0 = Low Risk
1-2 = Moderate Risk
≥ 3 = High Risk

Annex 5. Event Preparation Check Form

Name of responsible person of the event :	Event date :
Name of person in charge :	Event time :
Unit/Program :	Venue :
Duration :	Number of participant :

Invitation Completeness

**fill with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
1	Did a survey of the venue has been carried out?	<input type="checkbox"/>	<input type="checkbox"/>
2	Did the participant's Self-Assessment Form been attached?	<input type="checkbox"/>	<input type="checkbox"/>
3	Are there nametags for everyone involved in the event? (duplicate 2)	<input type="checkbox"/>	<input type="checkbox"/>
4	Have you got permission with the COVID-19 task force and the nearest health facility of the venue?	<input type="checkbox"/>	<input type="checkbox"/>
5	Have you got letter of permission from COVID-19 task force?	<input type="checkbox"/>	<input type="checkbox"/>
6	Are there any tools for socializing the prevention of COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>
7	Are there any guidelines for participants chairs and tables arrangement?	<input type="checkbox"/>	<input type="checkbox"/>

Facilities and Infrastructure Completeness

**fill with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
1	Thermogun	<input type="checkbox"/>	<input type="checkbox"/>
2	Body thermometer	<input type="checkbox"/>	<input type="checkbox"/>
3	Handsoap	<input type="checkbox"/>	<input type="checkbox"/>
4	Handsanitizer (70% alcohol)	<input type="checkbox"/>	<input type="checkbox"/>
5	Disinfectant spray	<input type="checkbox"/>	<input type="checkbox"/>
6	3 layer mask	<input type="checkbox"/>	<input type="checkbox"/>
7	Rubber gloves	<input type="checkbox"/>	<input type="checkbox"/>
8	Personal stationery	<input type="checkbox"/>	<input type="checkbox"/>
9	Personal drinking bottle	<input type="checkbox"/>	<input type="checkbox"/>
10	Face shield	<input type="checkbox"/>	<input type="checkbox"/>
11	Wash basin	<input type="checkbox"/>	<input type="checkbox"/>
12	Jacket	<input type="checkbox"/>	<input type="checkbox"/>
13	Supplement (Vitamin C and E)	<input type="checkbox"/>	<input type="checkbox"/>
14	Wet tissue	<input type="checkbox"/>	<input type="checkbox"/>
15	Dry tissue	<input type="checkbox"/>	<input type="checkbox"/>

Annex 6.

Form of Participant Arrangement Form During Activities

Name of responsible person of the event : Event date :
 Name of person in charge : Event time :
 Unit/Program : Venue :
 Duration : Number of participant :

Rules Completeness

**fill with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
1	Are there any instructions for taking body temperature and using the handsanitizer at the entrance?	<input type="checkbox"/>	<input type="checkbox"/>
2	Are there any instructions for the specific place for collecting participant nametags?	<input type="checkbox"/>	<input type="checkbox"/>
3	Have material kits been provided for the COVID-19 prevention appeal?	<input type="checkbox"/>	<input type="checkbox"/>
4	Has there been any distribution of seats for participants who attended?	<input type="checkbox"/>	<input type="checkbox"/>
5	Are there any instruction to use the loudspeaker for the attendees?	<input type="checkbox"/>	<input type="checkbox"/>
6	Are there any COVID-19 prevention sign board in the event room?	<input type="checkbox"/>	<input type="checkbox"/>
7	Are there any instruction for chair arrangement in the event rundown?	<input type="checkbox"/>	<input type="checkbox"/>

Annex 7.

Form of Participant Arrangement During Activities

Name of responsible person of the event : _____ Event date : _____
 Name of person in charge : _____ Event time : _____
 Unit/Program : _____ Venue : _____
 Duration : _____ Number of participant : _____

Regulations Compliance

**fill with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
1	Entrance body temperature chek and handsanitizer usage	<input type="checkbox"/>	<input type="checkbox"/>
2	Every attendees collect the name tags	<input type="checkbox"/>	<input type="checkbox"/>
3	Every attendees collect the COVID-19 Self Risk Assessment	<input type="checkbox"/>	<input type="checkbox"/>
4	Every attendees use mask and face shield before entering the meeting room	<input type="checkbox"/>	<input type="checkbox"/>
5	Every attendees get the COVID-19 prevention material kit	<input type="checkbox"/>	<input type="checkbox"/>
6	Every attendees comply the seats arrangement	<input type="checkbox"/>	<input type="checkbox"/>
7	Every attendees comply the loudspeaker use arrangement	<input type="checkbox"/>	<input type="checkbox"/>
8	Every attendees comply the distance rules along the event	<input type="checkbox"/>	<input type="checkbox"/>
9	Do participants disperse while adhering to the rules of keeping distance and still using PPE	<input type="checkbox"/>	<input type="checkbox"/>
If there "No" answer on the questions above, give the remarks below			
1	How many attendee don't want to take body themperature chek and not used the handsanitizer at the entrace?	<input type="checkbox"/>	<input type="checkbox"/>
2	How many attendees are not collect the name tag?	<input type="checkbox"/>	<input type="checkbox"/>
3	How many attendees are not collect the COVID-19 Self Risk Assessment Form?	<input type="checkbox"/>	<input type="checkbox"/>
4	How many attendees are not wearing mask or face shield before entering the room?	<input type="checkbox"/>	<input type="checkbox"/>
5	How many attendees are not got the COVID-19 prevention material kit?	<input type="checkbox"/>	<input type="checkbox"/>
6	How many attendees are not got the chair?	<input type="checkbox"/>	<input type="checkbox"/>
7	How many attendees are not comply the loudspeaker usage?	<input type="checkbox"/>	<input type="checkbox"/>
8	How many attendees are not keeping the distance during the event?	<input type="checkbox"/>	<input type="checkbox"/>
9	How many attendees are not keeping the distance and use minimum PPE when the event end?	<input type="checkbox"/>	<input type="checkbox"/>

Annex 8.

Communication Tracking Form

Date	:	
Name	:	
Title	:	
Unit/Program	:	
Destination District, City/Regency	:	
Departure Date	:	
Return Date	:	

Contact Tracking
**fill with tick mark*

No	Question	Yes (Point 1)	No (Point 0)
1	Do you meet people who have a confirmed or probable COVID-19 at the place where you are attended the event?	<input type="checkbox"/>	<input type="checkbox"/>
2	Is you most likely to meet many people in your destination?	<input type="checkbox"/>	<input type="checkbox"/>
3	Are you likely to meet people who come from the area where the COVID-19 spreads in your destination?	<input type="checkbox"/>	<input type="checkbox"/>

Who makes contact (communicating / sitting / standing less than 1m away, borrowing stationery and changing seats, taking turns holding loudspeakers, taking turns holding communication devices, and borrowing other personal equipment)?

No	Name	Institution	Contact Place	Contact Duration	Contact Type

Annex 9.

Self Check Form for Attending Events/Invitations

Date :
 Name :
 Title :
 Unit/Program :
 Invitee :

No	Question	Yes (Point 1)	No (Point 0)
1	Is the destination in the red-zone area	<input type="checkbox"/>	<input type="checkbox"/>
2	Is the destination in the yellow-zone area	<input type="checkbox"/>	<input type="checkbox"/>
3	Is the destination in the green-zone area	<input type="checkbox"/>	<input type="checkbox"/>
4	Did any official invitation send by email	<input type="checkbox"/>	<input type="checkbox"/>
5	Have ever visited the destination for less than 14 days	<input type="checkbox"/>	<input type="checkbox"/>
6	Did the organizer provide a COVID-19 Self Risk Assessment Form?	<input type="checkbox"/>	<input type="checkbox"/>
7	Did the organizer provide the COVID-19 PPE?	<input type="checkbox"/>	<input type="checkbox"/>
8	Did the organizer has event permitted from local COVID-19 Task Force	<input type="checkbox"/>	<input type="checkbox"/>
9	Is there an emergency contact included by the organizer on the event invitation	<input type="checkbox"/>	<input type="checkbox"/>
Contact History			
1	Have you met the same persons at the event in the last 14 days?	<input type="checkbox"/>	<input type="checkbox"/>
2	Is there any person who got COVID-19 symptoms like cough / fever / shortness of breath during the event?	<input type="checkbox"/>	<input type="checkbox"/>
3	Is the event applies the distances restrictions?	<input type="checkbox"/>	<input type="checkbox"/>
Personal Protection Equipment			
1	3 layer mask	<input type="checkbox"/>	<input type="checkbox"/>
2	Manual body thermometer	<input type="checkbox"/>	<input type="checkbox"/>
3	Rubber gloves	<input type="checkbox"/>	<input type="checkbox"/>
4	Handsanitizer (70% alcohol)	<input type="checkbox"/>	<input type="checkbox"/>
5	Personal stationery	<input type="checkbox"/>	<input type="checkbox"/>
6	Personal drinking bottle	<input type="checkbox"/>	<input type="checkbox"/>
7	Face shield	<input type="checkbox"/>	<input type="checkbox"/>
8	Jacket	<input type="checkbox"/>	<input type="checkbox"/>
9	Suplemen (Vitamin C dan E)	<input type="checkbox"/>	<input type="checkbox"/>

Destination District, City/Regency :
 Departure Date :
 Return Date :
 Vehicle/Seats Number :
 Self Risk Assessment Result when :
 Departure
 Self Risk Assessment Result when :
 Return

Annex 10.

Staff Protective Equipment Collection and Distribution Form

Distribution Person In-Charge :
PPE Receiver :
Distribution Needs :
Distribution Date :

No	Equipments	Amount	Unit	Condition
1	Digital Thermometer/infra-red/thermo gun			
2	Body Thermometer			
3	Handsoap			
4	Handsabitizer (70% alcohol)			
5	Disinfectan spray			
6	3 layer mask			
7	Rubber gloves			
8	Personal stationery			
9	Personal drinking bottle			
10	Face shield			
11	Jacket			
12	Suplemen (Vitamin C dan E)			
13	Wash basin			
14	Dry and wet tissue			

I hereby receive a number of COVID-19 PPE provided by (name of institution) which will be distributed and used in COVID-19 Prevention.

.....,DD/MM/YYYY

PPE Receiver

(.....)
Sign and Name

Annex 11. Letter of Assignment

(Letter Head)

LETTER of ASSIGNMENT

Number:.....

The undersign below,

Name :

Title :

Hereby assigns the following names,

Name :

ID Number :

Title :

To attend (*event name*) at (*DD / MM / YYYY*) at (*venue / location*).

Thus this assignment letter is made to be used properly and with full sense of responsibility.

.....,DD/MM/YYYY

Sign&Name

Title

Annex 12. Decision Letter

(Letter Head)

DECISION LETTER

Number:.....

The undersign below,

Name :

Tittle :

Hereby assigns the following names,

Name :

Tittle : Head of COVID-19 Task Force

Name :

Tittle : Member of COVID-19 Task Force

Name :

Tittle : Member of COVID-19 Task Force

To carry out COVID-19 prevent and spread response, both within internal organization and in relation with external parties.

This decree is valid from the date of stipulation.

.....,DD/MM/YYYY

Sign&Name

Tittle

Annex 13. Operational Vehicle Usage Form

User			
Unit	:		
Destination	:		
Route	:		
Necessity	:		
Number of passengers	:		
Program Manager	User		
(.....)		(.....)	
Vehicle			
Driver's Name	:		
Type of vehicle	:		
Police ID	:		
Program Manager	User		
(.....)		(.....)	
Time			
Depart		Return	
Day	:	Day	:
Date	:	Date	:
Mileage	:	Mileage	:
Disinfect	:	Disinfect	:
PPE	:	PPE	:
Security	Security	Driver	
(.....)		(.....)	(.....)

Annex 14. Operational Vehicle PPE Inspection Form

[illegible]

Annex 15. Office Floor Plan



Annex 16. Meeting Room Plan



Annex 17. Field Plan



A. ENTRANCE
B. REGISTRATION STAND
C. MEDICAL ROOM
D. TOILET
E. EXHIBITION HALL

F. PUBLIC DISCUSSION
SPACE
G. HAND WASHING FACILITIES
H. EXIT
I. PARKING AREA

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