



TECHNIUM
SOCIAL SCIENCES JOURNAL

Vol. 22, 2021

**A new decade
for social changes**

www.techniumscience.com

ISSN 2668-7798



9 772668 779000

Restaurant Readiness in the implementation of Health Protocols during Covid-19 Pandemic in Simalungun Regency

Abdul Kadir Ritonga

Tourism and Hospitality Department, Medan Polytechnic of Tourism

abdulkadir@poltekparmedan.ac.id

Abstract. This pandemic has had a major impact on all sectors including the economy. Currently, many countries are preparing for a new normal in the midst of the Covid-19 pandemic, including Indonesia. Restaurant is one of the public places and hospitality service that must be prepared for the New normal. The purpose of this study was to determine the readiness of restaurants in Simalungun Regency, North Sumatera during the new normal period. The research design used observation and quantitative research. The number of samples was 40 restaurant visitors in Simalungun Regency which were selected by proportional random sampling. Data collection techniques through direct observation. Data analysis was carried out descriptively to determine the readiness of restaurants during the new normal period. The results showed that most restaurants in Simalungun Regency had implemented health protocols. Health promotion for behavior change is needed continuously through health campaigns and strict supervision of the implementation of health protocols in restaurants to suppress the transmission of Covid-19. It can be concluded that restaurants in Simalungun Regency are ready to implement health protocols in the New Normal Era in the face of covid 19.

Keywords. readiness restaurant, pandemic covid-19, health protocol, hospitality

1. Introduction

This year is the third year our country has experienced the corona pandemic. This pandemic not only hinders the progress of the country but also hampers the economic development of all elements of the world's economic actors. Recently, the Adaptation of New Habits (IMR) or commonly known as the new normal has begun to be implemented. New normal is a new way of life or a new way of carrying out life activities in the midst of the unfinished Covid-19 pandemic, with the addition of implementing health protocols to prevent transmission of Covid-19 based on adaptation to cultivate clean and healthy living behavior. Health protocols are rules and regulations that need to be followed to maintain health and avoid Covid-19 by all parties so that all parties can carry out activities safely during a pandemic (Pinasti 2020). Health protocols are established with the aim that people can continue to carry out activities safely and do not endanger the safety or health of others. If people can follow all the rules listed in the health protocol, then the transmission of Covid-19 can be minimized. The implementation of the tourism industry in the food and beverage service business in the restaurant business sector which is a place to provide food and beverages has become a highly developed area in the community. The development of the restaurant business is influenced by changes in people's lifestyles that are all practical in meeting personal and group food needs.

Culture, reference groups and lifestyle tendencies can also cause people to change circumstances as they wish in meeting their needs. This has an impact on the development of the business world today is increasingly creative and innovative (Ali *et al.* 2021). According to the Regulation of the Minister of Tourism and Creative Economy of the Republic of Indonesia Number 12 of 2014, that "Restaurant business is a business of providing food and beverages equipped with equipment and supplies for, storage and presentation in a fixed place that does not move with the aim of obtaining profits and / or profit".

The development of the culinary business is currently very fast, starting from developed and developing countries following the development of this culinary business, as well as in Indonesia the pattern of people's consumption of food has experienced a shift where people prefer to consume food outside the home, especially for people who are busy working. and activities outside the home, this pattern of public consumption has led to an increasing number of culinary businesses that provide ready-to-eat food to meet the community's need for places to eat outside the home. However, at the beginning of 2019, culinary growth and development seemed to have stalled along with the corona outbreak that hit the world, including Indonesia (Pratiwi 2021). However, does the impact of the pandemic affect people's consumption of food and drink at home, or do restaurants and customers apply health protocols during the lockdown and new normal? The results of the survey conducted are still found in many restaurants that do not comply with health protocols in the new normal era. This can be seen from the unavailability of hand washing and soap, hand washing facilities are available but no soap is available, there is no appeal for visitors/consumers to adjust the seating distance at the dining table, do not adjust the distance for visitors when ordering food or paying, not using masks for both the seller and the owner of the restaurant. The importance of implementing health protocols in restaurants is one of the efforts to prevent the transmission of Covid-19. Compliance and awareness are the keys to success in breaking the chain of the spread of the Covid-19 outbreak.

This research is important because at the time the research was conducted there was no similar research evaluating the application of health protocols in the new normal era, especially in restaurants in the Simalungun Regency area. Based on the background of the problem, researchers are interested in raising the title of Restaurant Readiness in the Implementation of Health Protocols during the Covid-19 Pandemic Period in Simalungun Regency.

The problems

Based on the background of the problem, the formulation of the problem to be discussed is obtained, namely:

1. What is the difference in the response of restaurant visitors to the readiness of restaurants in implementing health protocols during lockdown and during new normal?
2. How is the treatment of restaurant managers in Simalungun Regency in the face of the Covid-19 pandemic?

Research purposes

Based on the formulation of the problem above, the objectives of this study are as follows:

1. To find out whether there are differences in the response of restaurant visitors to the readiness of restaurants in implementing health protocols during lockdown and during new normal?
2. To find out how is the treatment of restaurant managers in Simalungun Regency in dealing with the covid-19 pandemic?

2.Literature Review

Sanitation and hygiene guidelines all employees are required to wash their hands with soap regularly. Restaurants must provide hand sanitizer at the entrance and cashier areas. Employees are also required to use hand sanitizer every time they touch cash or make contact with other people. Employees are required to always wear masks and gloves. Work uniforms are only used directly at the outlet. Employees may not wear uniforms outside the restaurant area. Surfaces that are in frequent contact with guests should always be regularly sanitized, including spraying the area with a disinfectant solution (Lakshmi and Shareena 2020).

Guidelines for work rules Restaurants must provide a non-contact thermometer to measure the employee's body temperature before work. Employees whose body temperature is above 38 degrees Celsius or other flu symptoms should be sent home or referred to a doctor. Employees may eat in the outlet or food production area but must keep their distance from each other. Employees must set meal times in turns, eat individually and maintain a distance of at least one meter. Employees must leave the dining area clean after eating (Shahbazet *al.* 2020).

The smoking area guide must be located outside the restaurant, outdoor area, or specially prepared area and not in direct contact with the indoor area. The table operating guide must be at least 1 meter apart from other tables. Families who are at home and want to sit together are allowed but still have to wear masks. If there is a queue, a boundary marker must be provided at least 1 meter apart. Guests must wait in front of the restaurant area while maintaining a distance. The cashier should always suggest cashless payments. If payment is made in cash, you must use an intermediary in the form of a money-tray. Baskets containing cutlery should not be placed on the table if guests have not arrived. Unused cutlery should be washed immediately and unused paper towels should be discarded. Sanitation of cutlery baskets must be carried out after each use. The presentation of all types of condiments cannot be directly placed on the table but must be brought according to guest requests. For pick-ups, a contactless pick-up system is preferable. Restaurants must designate waiting areas for taking orders with boundary markers 1 meter apart from each other (Darmawan and Rachmaniyah 2020).

Guidance for outsiders to enter the restaurant area Vendors or third parties must always have their body temperature checked, with body temperatures above 38 degrees Celsius are not allowed to enter. Vendors or third parties who enter restaurants must always wear their own masks and gloves.

Health protocol

Health protocols that need to be implemented in restaurants, namely restaurant owners require the use of masks for visitors/consumers, provide body temperature check equipment at the entrance area, the entrance area is cleaned with disinfectant/other safe and appropriate cleaning fluids at least three times a day, provide disinfection booths, adjust the distance of the queue of visitors when ordering food and paying or given a special sign on the floor, arranging seats and the distance between visitors with a minimum safe distance of one meter or carrying out technical engineering such as installing partitions between guests on the dining table, providing facilities Washing Hands with Soap (CTPS) / hand sanitizer in the food and drink service area, employees remind guests if they do not comply with health protocols, if possible there is a guest barrier with a cashier in the form of a plastic or glass wall and install an appeal for the application of health protocols in the restaurant area on the premises. - a place that is easily visible (Ghostet *al.* 2020).

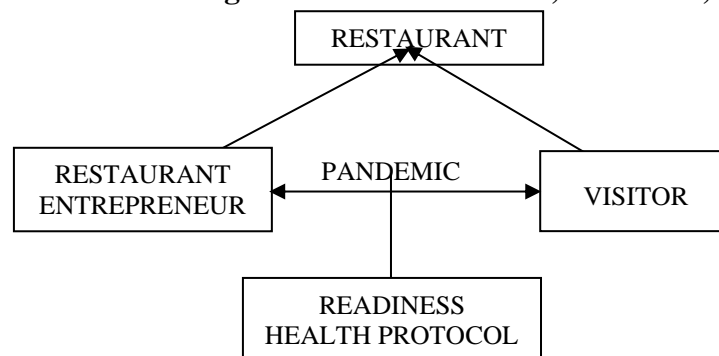
Restaurant Readiness

One of the places and public facilities that have the potential to spread the Covid-19 outbreak is restaurants. The Covid-19 pandemic that has hit all regions of the world has an impact on various sectors, including the culinary sector.

Kotler (2006) states "A service is any activity or benefit that one party offers to another that is essentially intangible and does not result in the physical product". From the above understanding, services are various actions or benefits offered by one party to another which are basically invisible and do not result in ownership rights to something. However, the production of services is usually associated with physical products or not. Many culinary businesses and restaurant owners in the world have temporarily closed their businesses and suffered losses and even went bankrupt due to this pandemic. From the results of an initial survey conducted to restaurant business owners, the corona virus outbreak has resulted in a decrease in the income of the culinary industry, compared to restaurants, currently people prefer food and household ingredients to meet their needs. They say the coronavirus pandemic has had a huge impact on their business.

The chart below (shows the relationship between restaurants, customers, the pandemic and the implementation of health protocols in anticipation of it.

Chart 1. Relation Design between Restaurants, Customer, and Pandemic



3. Research Method

The type of research that will be conducted is a quantitative research type with a descriptive approach. Quantitative research method is one type of research whose specifications are systematic, planned, and clearly structured from the beginning to the making of the research design.

According to Sugiyono (2014), quantitative research methods can be interpreted as research methods based on the philosophy of positivism, used to examine certain populations or samples, sampling techniques are usually carried out randomly, data collection with research instruments, data analysis is quantitative/statistical. with the aim of testing the hypothesis. This study uses a descriptive approach with the aim of describing the object of research or research results.

Variable Measurement

The measurement of variables in this study uses a Likert scale which is used if the researcher wants to get data about the weight of each answer given by the respondent. Likert scale is used to measure attitudes, opinions and perceptions of a person or group of people about social phenomena (Sugiyono 2008).

The instruments used are questionnaires and observation sheets. The questionnaire was used to collect data on the reasons for implementing or not implementing health protocols, while

the observation sheet was to collect data on the readiness to implement health protocols addressed to restaurant owners which included adjusting seating distances, providing hand washing facilities, availability of soap, hand sanitizer, conducting disinfection, availability disinfection booths, set the distance for visitors when ordering or paying, requiring the use of masks for visitors/consumers, providing temperature checking devices at entrances, installing appeals for the application of health protocols in the restaurant area in easily visible places.

Sample and population

The sample is part of the number and characteristics possessed by the population (Sugiyono 2008). The sampling method in this study was non-probability sampling, namely the Accidental Sampling technique. Accidental Sampling is a technique of determining the sample by chance, or anyone who coincidentally (incidentally) meets a researcher who is considered suitable for the characteristics of the specified sample will be used as a sample.

The number of samples in this study were 40 restaurant customers who were selected by proportional random sampling. Data collection techniques through direct observation. Data analysis was carried out descriptively to determine the readiness of restaurants during the COVID-19 pandemic.

The population is a generalization area consisting of: objects/subjects that have certain qualities and characteristics determined by researchers to be studied and then drawn conclusions (Sugiyono 2008). The population in the study is the area that researchers want to study. Population is not only people, but also objects and other natural objects. Population is also not just the number of objects/subjects studied, but includes all the characteristics/properties possessed by the subject/object.

Research Design

This research design is a quantitative research design by collecting data through observation and distributing questionnaires to a sample of customers. The data obtained will be discussed later and conclusions will be drawn through the analysis process of the independent T test.

In this study, a research design is needed to assist research in collecting and analyzing data, so that the data obtained are in accordance with the existing problems, the following research designs are used:

1. Research Design. Based on the objectives, this research is an applied research. Applied research is carried out with the aim of applying, testing and evaluating the ability of a theory that is applied in solving practical problems (Sugiyono 2014). The design of this research is intended to carry out structured and informative academic activities so that it can facilitate the activities of researchers in adding data and searching for data with sources in the field.
2. Research Design Based on Research Methods. The research method includes survey research. According to Sugiyono (2014) that the survey method is used to obtain data from certain natural (not artificial) places, but researchers carry out treatments in collecting data, for example by distributing questionnaires, tests, and structured interviews.
3. Research Design Based on Data Types and Analysis. Based on the type of data this research includes quantitative data research, using statistical analysis.

Analysis Prerequisite Test Phase

a. Normality test

The normality test is needed to test whether the data distribution is normally distributed or not and as a beginner for the t-test to see the difference in means. To test the normality of scores in each group, the Lillifors test and the Kolmogorov-Smirnov test are used.

b. Test of Homogeneity of Variances From Both Groups

The homogeneity of variance test is used to test whether the two data are homogeneous by comparing the two variances. The homogeneity of variance test used two independent variables variance test and Levene's test. The variance test of two independent variables was calculated using spss 25.

Data Analysis

For the data processing stage in this study, researchers used a simple linear regression test independent sample test which would be processed in the SPSS version 2.5 program.

Decision making basis:

1. If the value of sig. (2-tailed) < 0.05 , then there is a significant difference between the response during the lockdown and the new normal.
2. If the value of sig. (2-tailed) > 0.05 , then there is no significant difference between the response during the lockdown and the new normal.

Hypothesis Testing

The hypothesis test that was tested to analyze the formulation of the first problem was the independent T test. The hypothesis is as follows: There is a significant difference between the response during the lockdown and the new normal.

There is no significant difference between the response during the lockdown and the new normal. Statistical hypothesis:

$$H_0 : \mu_N \leq \mu_L$$

$$H_a : \mu_N > \mu_L$$

Where:

L is visitor response during lockdown

N is the response of visitors in the new normal period

Meanwhile, to answer the second and third problem formulations, observations and documentation were carried out at restaurants in Simalungun Regency.

4. Findings and Results

The purpose of this study is to describe the readiness of restaurant managers in Simalungun Regency to implement health protocols in the face of the Covid-19 corona pandemic. For this reason, several data were collected, namely restaurant activities during the pandemic and questionnaires were taken by 40 respondents at random.

1. The results of the questionnaire on the application of health protocols

Questionnaires were taken to restaurant customers to see customer responses to the application of health protocols during the corona pandemic with a Likert scale model which would then be mapped by looking at the percentage of customer responses.

To start the analysis we have to find out if the distribution table is normally distributed with the help of SPSS 25 with the following results:

Table 1. One-Sample Kolmogorov-Smirnov Test

		Unstandardized Residual
N		40
Normal Parameters ^{a,b}	Mean	,0000000
	Std. Deviation	4,10351232
	Most Extreme Differences	
	Absolute	,187
	Positive	,127
	Negative	-,187
Test Statistic		,187
Asymp. Sig. (2-tailed)		,001 ^c

- a. Test distribution is Normal.
b. Calculated from data.
c. Lilliefors Significance Correction.

Decision making basis:

1. If the Asymp value. Sig. (2-tailed) < 0.05 , then the data is normally distributed.
2. If the value of Asymp. Sig. (2-tailed) > 0.05 , then it is not normally distributed.

From the table above, we can see that the data is normally distributed because of the Asymp value. Sig. (2-tailed) is $0.001 < 0.05$. Then continue the next analysis, namely homogeneity which we can see in the table below:

Table 2. Test of Homogeneity of Variances

		Levene Statistic	df1	df2	Sig.
Reponpengunjung	Based on Mean	,955	1	78	,331
	Based on Median	,001	1	78	,975
	Based on Median and with adjusted df	,001	1	64,588	,975
	Based on trimmed mean	,647	1	78	,424

Decision making basis:

1. If the Asymp value. Sig. (2-tailed) < 0.05 , then the data is normally distributed.
2. If the value of Asymp. Sig. (2-tailed) > 0.05 , then it is not normally distributed.

From the table above, we can see that the data is normally distributed because of the Asymp value. Sig. (2-tailed) is $0.001 < 0.05$. Then continue the next analysis, namely homogeneity which we can see in the table below:

Table 3. Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Reponpen gunjung	Equal variances assumed	,955	,331	4,384	78	,000	4,725	1,078	2,579	6,871
	Equal variances not assumed			4,384	74,250	,000	4,725	1,078	2,578	6,872

Decision making basis:

1. If the value of sig. (2-tailed) < 0.05 , then there is a significant difference between the response during the lockdown and the new normal.
2. If the value of sig. (2-tailed) > 0.05 , then there is no significant difference between the response during the lockdown and the new normal.

From the table above we can see that the value of sig. (2-tailed) of $0.000 < 0.05$, so we can conclude that there is a significant difference between the response during the lockdown and the new normal.

In this case, the significant difference is the decrease in the response of restaurant visitors to the health protocol for preventing the transmission of covid 19 between the lockdown period and the new normal period.

2. Results of observations

Observations were made to see how the manager managed the restaurant during the pandemic. Researchers took some documentation at the restaurant and monitored the activities in the restaurant, especially the implementation of health protocols.

From filling out a special questionnaire for the new normal, we can see the results in the following table:

Table 4. Result of Observations

NO	ITEMS	Value Respondents Level					Description	
		5	4	3	2	1	Sum	Score Indexes
1	Item 1	1	3	36	-	-	125	62,5%
2	Item 2	3	26	11	-	-	152	76%
3	Item 3	-	8	13	19	-	109	54,5%
4	Item 4	5	30	5	-	-	160	80%
5	Item 5	31	1	7	1	-	182	91%
6	Item 6	34	1	5	-	-	189	94,5%
7	Item 7	30	-	9	1		179	89,5%
8	Item 8	33	-	6	1		185	92,5%
9	Item 9	32	-	7	1		183	91.5%
10	Item 10		5	35			125	62,5%
11	Item 11	1	30	9			152	76%
	TOTAL	170	104	143	23	-	1741	779%

From the table above, we can see that each point on the questionnaire got a positive answer score of more than 50%. The average value of the percentage of respondents' answers per point is $779\%:11=70.1\%$, which means that they have a good response from the average interpretation of respondents' answers. From this incident, we can conclude that the level of respondents' satisfaction with the implementation of health protocols in restaurants has been achieved.

From the SPSS 25, table above we can see that the value of sig. (2-tailed) of 0.000 < 0.05, so we can conclude that there is a significant difference between the response during the lockdown and the new normal. In this case, the significant difference is the decrease in the response of restaurant visitors to the health protocol for preventing the transmission of covid 19 between the lock down period and the new normal period.

5. Conclusion

The readiness of the restaurant in Simalungun Regency has implemented a health protocol. Starting from making health regulations to the procurement of health media. Restaurant managers also routinely spray disinfectants in restaurant rooms and the traffic environment for restaurant workers and customers activities. However, restaurants in Simalungun Regency have not fully implemented health protocols, including there are still restaurants that do not require visitors to wear masks, there are no calls for physical distancing, there are still restaurants that do not install health regulations. Most restaurants already provide hand washing facilities, but not all of them provide hand soap. Restaurants in Simalungun Regency are not ready to implement health protocols in the new normal era.

It is hoped that the local government and the entire community will be able to evaluate the implementation of the implementation of the adaptation of new habits in public places, especially in restaurants. For further researchers, it is hoped that they will be able to examine the factors that influence the application of health protocols in public places such as restaurants.

References

- [1] Ali S, Khalid N, Javed HMU and Islam DM. (2021). Consumer Adoption of Online Food Delivery Ordering (OFDO) Services in Pakistan: The Impact of the COVID-19 Pandemic Situation. *Journal of Open Innovation: Technology, Market, and Complexity*. 7(10):1-23.
- [2] Dharmawan V and Rachmaniyah N. (2020). Kajian Perilaku Sehat Pelanggan Restoran di saat Pandemi Studi Kasus: Restoran Cepat Saji di Surabaya. *Jurnal Desain Interior*. 5(2):53-62.
- [3] Ghosh S, Nath A, Manna B and Ghosh K. (2020). Implementations of Food Safety Measures Inside Food Processing Industries & Prepared Food Outlets During COVID-19 Pandemic. *Agriculture & Food E-Newsletter*. 2(6):564-568.
- [4] Kotler P. (2006). *Manajemen Pemasaran*. Jakarta (ID): PT. Intan Sejati Klaten.
- [5] Kementerian Pariwisata dan Ekonomi Kreatif. (2014). Peraturan Menteri Pariwisata dan Ekonomi Kreatif Republik Indonesia Nomor 14 Tahun 2014 tentang Standar Usaha Angkutan Jalan Wisata. Jakarta (ID): Kementerian Pariwisata dan Ekonomi Kreatif
- [6] Lakshmi BM and Shareena P. (2020). Impact of Covid 19 on the Restaurant. *Journal of Interdisciplinary Cycle Research*. 12(8):1327-1334.
- [7] Pinasti FDA. (2020). Analisis Dampak Pandemi Corona Virus Terhadap Tingkat Kesadaran Masyarakat dalam Penerapan Protokol Kesehatan. *Wellness and Healthy Magazine*. 2(2):237-249.
- [8] Pratiwi AI. (2021). "Startup": Bisnis Kuliner Rintisan di Masa Pandemi Covid-19. *Emik*. 4(1):1-18.
- [9] Shahbaz M, Bilal M, Akhlaq M, Moiz A, Zubair S and Iqbal HMN. (2020). Strategic Measures for Food Processing and Manufacturing Facilities to Combat Coronavirus Pandemic (Covid-19). *Journal of Pure and Applied Microbiology*. 14(2):1087-1094.
- [10] Sugiyono. (2014). *Metode Penelitian Kuantitatif Kualitatif dan R&D*. Bandung (ID): Alfabeta