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TOURISM AND PRIVATE SECURITY FUNCTION IN HEALTH CARE AGAINST INFECTIOUS DISEASES

Abstract

The aim of this paper is to highlight the specificity of the environment in which the tourism industry and corporate security of business organizations and companies during the epidemic (SARS-COV-2) known as COVID 19. Simultaneously, the devastating economic effects of the pandemic on tourism and accommodation facilities were emphasized. Additionally, the authors want to emphasize the role of private security entities and crisis management during emergency management. However, many problems arose due to the fact that many activities were unrelated to the risk itself. Hence, it was obvious there was a lack of standards for emergency management in a systematic way. At the same time, it has been shown that the assessment standards prescribed by the existing laws and regulations are insufficient to develop and appropriate assessment methodology when it comes to infectious deseases. The COVID-19 epidemic is a crisis

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quite different from the events commonly studied under the term crisis, so the name „Modern Crisis" can be used for it. Finally, it seems that the topicality of the phenomenon of endangering human health and the tourist economy imposes the need for its analysis.

***Keywords**: security guard, protective measures, contagious desease, hotel, catering facilities*

INTRODUCTION

The COVID 19 pandemic is in the center of public interest, starting from its identification, conceptual definition and onwards. This contagious disease has caused great contradictions and huge health and economic destruction of the world community in a short period of time. In addition to the above, it is accompanied by the phenomenon of so-called psychopandemics and social engineering, whether it is the appearances of health laymen, health officials or executive authorities. At the same time, the world community declared war on the invisible enemy. Finally, during a pandemic, regardless of all infrastructural and other conditions that attract the arrival of tourists, the epidemiological situation in a tourist country is one of the decisive conditions in making a tourist's decision to travel and choose a tourist destination. Therefore, the epidemic and pandemic of infectious diseases, and thus the appearance of the COVID19 virus, represent an emergency situation that humanity is facing on a global level, and thus the tourism economy. The National Security Strategy in Montenegro identifies natural or artificially caused epidemics and pandemics as security challenges, risks and threats, i.e. as biological hazards, so organizing an adequate health care system and combating epidemics and pandemics is a great challenge.

In case of infectious diseases, besides the national level, and at the level of companies also, the planned establishment of an institutional framework for the response is of special importance. This also applies to security agencies and security services of hotels and restaurants, i.e. companies

that operate on the basis of several laws that will be treated in this paper as subjects of private security or subjects of physical and technical protection (PTP).

The organization of private security entities in the conditions of the epidemic aims at systematizing the work, defining the structure of the PTP, specialist training of security members and defining the level of their responsibility. At the same time, the management has the task of creative organization, maintenance of work discipline and motivation of employees in order to carry out security work in an efficient and rational way.

PTP subjects have a significant role in the prevention and control of infectious diseases. Of course, regardless of the way the FTZ is organized, an integral part of the subject of private security are people, both at the managerial and executive level. Starting from the basic reason for organizing private security entities, that an individual cannot independently solve security problems, there was a need for synchronized action of several individuals and groups with the division of competencies according to pre-defined management rules. This applies in particular to monitoring information on the increase of the threat, taking preparatory measures for specific tasks, if ordered by the authorities. The architecture of the subjects of private security consists of managerial parts, responsible persons by lines of work and direct executors (so-called operatives).

In accordance with the recommendations of the health authorities, with the help of security guards, tourist businessmen established order in the facilities and beaches in order to maintain adequate distances. In addition to the above, it was necessary to implement preventive measures in accommodation facilities in accordance with hygienic and safety conditions. Improving the system of protection against infectious diseases and effectively counteracting these threats require strategic planning and organization not only of state bodies but also of all entities, including hotel and catering facilities. Experience during 2020 indicates that the risks and threats related to the pandemic spread of infectious diseases may be underestimated or not

taken seriously enough. Therefore, health care, besides its role in health care, also has the role of influencing people's consciousness in order to properly understand the importance of prevention, suppression and control of infectious diseases, but also the role of individual subjects in all of this measure and procedures.

THEORETICAL AND LEGAL REVIEW OF HEALTH CARE

Health care is a social activity whose role is to organize and implement a process of measures to preserve and improve human health and treat injured and sick people[1]. Within this process, the employer is also recognized, which is obliged to implement measures of specific health care of employees, i.e. to introduce and implement measures in the process of work in order to prevent and suppress infectious diseases. Specific health care represents preventive activities that create and maintain a safe and healthy work environment and which ultimately achieve optimal physical and mental health of people[2]. In addition to these duties of the employer, it should be emphasized that no one must endanger the health of other citizens and that citizens have the right to be informed about the protection of their health in case of epidemics. Health care is based on many principles, and we emphasize the principle of comprehensiveness because it involves all citizens in the implementation of appropriate health care[3].

Legal entities and entrepreneurs also participate in the protection of the population from epidemics, which means that this includes companies that deal with various activities, but also security companies that deal with the protection of people and facilities. These entities not only participate but are also obliged to cooperate with state bodies, implement measures related to the distance of people, the number of people in an area or facility

[1] Jović, R. C., Jović N. R. (1999). *Zdravstvena i socijalna zaštita*, Fakultet odbrane i zaštite, Beograd, 1999, p. 155.

[2] Zakon o zdravstvenoj zaštiti. (2016). „Sl. list Crne Gore", br. 003/16, 039/16, 002/17, član 19 i 20.

[3] *Ibid*, član 2 -10.

that are in their jurisdiction, wearing protective equipment etc. This implies that all public and private sector entities, whether government agencies, institutions, hotels and restaurants or individuals, have the right to protection against infectious diseases and must be involved in the health care process in case of epidemics, that is emergencies by implementing the necessary activities and measures.

In emergencies, health care carries out its tasks in several basic forms, namely: preventive medical care, care for the sick and medical supply. *Preventive-medical protection (italic-authors)* includes a set of measures to improve human health and the occurrence and prevention of the disease spreading and consists of hygienic measures, anti-epidemic measures and medical measures of anti-radiation, chemical and biological protection. *Patient care (italic-authors)* includes measures to find sick persons (patients) and provide the necessary treatment and care, as well as the assessment of ability for certain types of work tasks. *Medical supply (italic-authors)* is a significant form of health care. The efficiency of health care in emergency situations depends on the way of organizing medical supply. Material needs (equipment, medicines…) in such conditions increase many times over, and in relation to large needs, the main problem that arises is the lack of medical supplies[4].

Hygienic measures are the basic elements of preventive medical care and relate to personal hygiene, hygienic accommodation, occupational safety measures, rodent control, hygienic-epidemiological reconnaissance and surveillance, disinfection, disinsection (DRCD) and other measures, and are carried out constantly and daily until they become habits[5]. In practice, this includes: washing and disinfecting hands, brushing clothes, exposing clothes and shoes to the sun, washing general use items, washing fabrics with hot water and detergents, treating items in the most frequently touched objects, ventilation, dusting common areas and objects…

[4] Jović, R. C., Jović, N. R., *Op. cit.*, pp. 14 and 155.

[5] *Ibid*, pp. 39-40.

Hygienic-epidemiological reconnaissance and observation provide data on one area. These measures are carried out in emergency situations or in the event of an epidemic. They include all health workers but also members of civil protection who constantly monitor the situation. Hygienic-epidemiological survey and observation collect data on human health (type, frequency, prevalence), reveal the focus of the disease, determine the number of sick persons, topographic distribution, route of transmission…DRCD hygienic measures, ie disinfection (italic-authors) as an action, destroy pathogenic microorganisms (bacteria, viruses and parasites) – the causes of infectious diseases. It is performed before, during and after the illness and refers to: hand washing, toilet disinfection, sanitary treatment of patients and suspects of infectious diseases, sterilization of objects, disinfection of drinking water, etc. Disinsection destroys harmful insects, vectors of infectious diseases (mosquitoes, beetles, ticks, flies). Pest control is harmful to rodents and is used indoors and outdoors[6]. For the needs of hygienic-epidemiological reconnaissance and monitoring of the situation, as part of the civil protection units, protection units can be formed either as general purpose units or as specialized units.

Anti-epidemic measures include procedures that detect and suppress the occurrence of infectious diseases and their spread in the form of epidemics. The basis on which the suppression of an epidemic is based on an epidemiological survey which reveals the sources and ways of spreading the disease. The epidemiological survey collects data on the patient, collects data on the collective and draws a conclusion. Patient data refer to personal data, clinical data (symptoms of the disease, onset of the disease), data on the movement and stay of the patient. By collecting data about the collective, the existence of previous diseases, hygienic conditions, the existence of wastewater etc., are determined. In the conclusion, all data showing the source of infection, the place of infection, the number of patients, measures to combat the epidemic etc., are sublimated. Anti-epidemic measures actively

[6] *Ibid*, pp. 87-109.

detect patients (sick people) by *measuring temperature (italic authors)*, taking swabs and other material. Also, a significant anti-epidemic measure is quarantine and health surveillance. In quarantine, sanitary treatment of persons, isolation of persons, medical examination is carried out, while health supervision is carried out over persons who come from infected areas or have been in contact with patients[7].

Medical measures for radiation, chemical and biological protection (RCB) are implemented at several levels. For the purposes of this paper, we will single out the level of self-protection and the general level of protection. At the initial level of RCB health care is the self-protection of the individual using the means of personal and collective protection In medical measures, a special place is occupied by medical technical measures, which means that every person has a protective mask, protective suit, gloves, protective paste. General level implies detection (use of detectors) for various agents and decontamination of all contaminated means and objects[8].

Considering medical measures of radiation, chemical and biological protection, we can also rely on sanitary-technical, biological, chemical and health protection measures that are applied in the protection of persons and objects.

Thus, according to *Rajko Rađenović*, the following sanitary-technical, biological and chemical measures are applied: sanitary-technical inspection of certain facilities, insight into the sanitary status of staff, insight into health and quality of food and other items, control of transport hygiene and food and medicines storage, biological and chemical control of food, water, air and general use items, disinfection, disinsection and deratization measures (DRCD protection), engagement of certain inspection services (sanitary, health, veterinary, market) and certain specialized institutions[9].

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[7] *Ibid*, pp. 86-94.

[8] *Ibid*, pp. 110-121.

[9] Rađenović, R. (2003). *Bezbednost ličnosti i objekata*, Izdavač-autor, Beograd, p. 130.

ORGANIZATIONAL LEVEL IN HOTEL AND CATERING FACILITIES FOR RESPONSE TO INFECTIOUS DISEAS

Citizens have the right to protection from infectious diseases, but also the obligation to protect others from infectious diseases. In addition to this role of citizens, all companies implement general measures for the protection of facilities under sanitary supervision, so they have the obligation to implement DRCD measures in settlements, housing, public transport facilities, public places intended for gathering people[10]. In addition to the implementation of general measures in these facilities, all companies must participate in suppressing the risk to public health from infectious diseases.

The occurrence of a contagious disease epidemic belongs to an emergency situation when a contagious disease endangers the health and life of people on a larger scale and there is a danger of mass transmission of infectious diseases[11]. Therefore, all business organizations should have an elaborate answer that refers to the established organization and specified duties of those parts of the system that are the bearers of activities in emergency situations. For this purpose, the business organization forms in advance an *ad hoc* body called the General Staff of the business organization for emergency[12] and crisis[13] situations. The composition of this staff includes the president of the board of directors, the executive director, the so-called director of operations, financial director, director of security and safety and a person in charge of public relations who make decisions at the strategic level of the business organization.

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[10] Zakon o zaštiti stanovništva od zaraznih bolesti. (2018). „Sl. list Crne Gore", br. 012/18, čl. 22.

[11] *Ibid*, Art. 53.

[12] An emergency is a broader term than a crisis because an emergency does not have to be a crisis and on the other hand a crisis is also a situation. An emergency system with existing routine mechanisms and existing resources can respond to emergency requests, in: Zoran Keković, Želimir Kešetović, *Koncept upravljanja u vanrednim situacijama*, u: Vanredne situacije-zbornik radova, Vojnoizdavački zavod, Beograd, 2009, str. 134.

[13] For an organization, a crisis is an environment in which it cannot function normally, prevents the achievement of goals, and sometimes endangers the survival of the organization. The crisis is characterized by unexpectedness, unpreparedness and time pressure, in: Želimir Kešetović, *Teorijski*

The General Staff of the business organization for emergency and crisis situations:

- reviews and approves the Infectious Disease Response Plan,
- decides on the activation of the Infectious Disease Response Plan in case of infectious disease,
- decides on the establishment of a communication system and chain of command in emergency situations which ensure the rapid transfer of the issued command, as well as its execution,
- decides on the need to engage the Operational Staff for the prevention and suppression of infectious diseases
- adopts the necessary internal legal acts of the business organization,
- decides to establish a system for detecting potentially infected employees,
- makes a decision to prevent the introduction of infectious diseases into the business organization,
- approves the engagement of additional security guards on the perimeter of the building,
- determines the needs of the company for the procurement of funds and services in order to suppress infectious diseases,
- prohibits the procurement of goods from certain areas and suppliers,
- determines additional financial resources and other resources for the suppression of infectious diseases,
- if necessary, issue a press release that will contain minimal information that will not endanger employees and guests or negatively affect the further course of resolving the emergency situation,
- makes a decision on conducting training for all entities that carry out their business activities in the business organization area,
- decides on the establishment of a crisis management center,
- decides on the employment of employees on the principle of „work from home",
- supervises the implementation of measures for the prevention and suppression of infectious diseases.

koncept krize, Krizni menadžment I - hrestomatija, Fakultet bezbednosti, Beograd, 2006, str. 27.

After the General Staff, the Operational Staff for the prevention and suppression of infectious diseases is formed with specialized teams, i.e. the Team for the prevention and suppression of infectious diseases, the Team for the supply of medical equipment and means and the administrative support Team. The Operational Staff for the prevention and suppression of infectious diseases of the business organization for emergencies and crisis situations is an ad hoc body that implements the decisions and orders of the General Staff, is the holder of operational activities and has an executive command. The Operational Staff consists of: the Director of Security and Safety who manages this staff, the Safety Manager or a representative of the business organization dealing with occupational safety, Safety Manager, Director of Technical Service, Director of Human Resources, Director of Information Technology and systems, director of customer relations (reception, sales, event organization), manager of administrative service, procurement manager, horticultural manager, director of a private health institution with which cooperation has been established or an expert in the field of epidemiology.

The Operative Staff after the onset of an infectious disease:

- proposes to the General Staff the adoption of amendments to internal acts and proposes new acts (rules, instructions, guidelines, SOPs),
- develops Protection Plans in the event of an infectious disease,
- issues excerpts from binding rules, SOPs and guidelines for the protection of employees and guests from infectious diseases,
- gives advice and recommendations,
- plans, organizes and ensures the implementation of measures for the prevention and suppression of infectious diseases,
- conducts education and training of employees and members of their families on infectious diseases,
- controls the ban on gathering employees and guests indoors and outdoors within the business organization,
- restricts movement in the building or in the zones of the building or space,
- orders the implementation of DRCD measures,

- requires mandatory medical examinations for employees working in food service facilities, pharmacies, private health facilities located in the resort, beauty salons,
- strengthens measures to control access to the facility and space,
- oversees the removal and disposal of waste,
- requires the submission of daily and periodic reports from the teams,
- provides assistance, support and cooperation to all entities involved in resolving the emergency situation,
- cooperates and communicates with the competent state bodies (inspections, health institutions…) and institutions and local bodies and carries out other activities determined by the Emergency Plan,
- collects available information on the current situation in the building and space,
- submits information on the current situation to the General Staff,
- keeps records during his work.

As already mentioned, the Operational Staff manages the executive bodies – the Team for the prevention and control of infectious diseases, which consists of managers, security guards, occupational safety specialists, technicians, gardeners, IT experts, human resources employees… This team operates directly in the facility and space and gives orders and manages the entire staff, including security guards who further exercise their authority towards all persons (employees, visitors and guests) who enter the facility or space. At the perimeter of the entrance to the space, the entire protected area or at the entrances to the facility, this team organizes all activities related to the prevention of infectious diseases, detection of possibly infected and thus potential carriers of infectious diseases. In addition to this, the team has no less important role in the suppression of the already existing infectious disease in order to reduce its frequency.

In addition to this team, a *Team for the supply of medical equipment and resources (Logistics Team)* is organized, which consists of procurement employees and consultants for certain professional areas (occupational

safety, health care, technical service). The Team establishes cooperation with suppliers of goods and services, procures, stores and releases equipment and resources, supervises medical equipment and resources, communicates with all entities involved in the suppression of infectious diseases during the procurement process of goods and services.

Last but not least is the *Administrative Support Team*, which provides administrative support related to the interpretation and drafting of all acts of the business organization, provides various useful data (maps, plans, drawings, photographs), keeps minutes of meetings.

At the level of the security agency or security service of the business organization, PTP (physical and technical protection) establishes bodies: operational center to which all signals of the technical protection system are directed, stationary positions of security guards, patrols, check-in at the entrance to the protected area or facility, checkpoint (economic entrance or entrance for employees). In relation to the mentioned bodies of the PTP, such an organizational solution enables comprehensive monitoring of all activities and threats in the facility and the protected area.

LEGAL BASIS FOR THE ENGAGEMENT OF PTP SUBJECTS IN THE CONTROL OF INFECTIOUS DESEASES

The European Convention on Human Rights[14] protects human life as the highest value. At the same time, in order to protect life – some human rights

[14] Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocols 11 and 14, with Protocols 1, 4, 6, 7, 12 and 13, Council of Europe, Rome, 4 November 1950 - The text of the Convention contains amendments in accordance with the provisions of Protocol No. 14 (CETS, No. 194) from the date of its entry into force on 1 June 2010. The text of the Convention was previously amended in accordance with the provisions of Protocol 3 (ETS, No. 45) which entered into force on 21 September 1970, Protocol 5 (ETS, No. 55) which entered into force on 20 December 1971, Protocol 8 ETS, No. 118) which entered into force on 1 January 1990. It also contains the text of Protocol 2 (ETS, No. 44) which, in accordance with Article 5 § 3, became an integral part of the Convention after 21 September 1970. .when it came into force. Any provisions which have been amended or added to these Protocols shall be amended by Protocol 11 (ETS No. 155), from the date of its entry into force on 1 November 1998. From that date Protocol 9 (ETS, no. 140), which entered into force on 1 October 1994, was repealed and Protocol 10 (ETS, no. 146) lost its purpose.

may be restricted (e.g. deprivation of liberty) in situations of preventing the spread of a contagious disease.

An integral part of every human life is health, which is a priority and whose endangerment may restrict other constitutional rights[15] such as access to information, freedom of peaceful assembly, freedom of enterprise, expression of religious beliefs. In addition, the Constitution of Montenegro does not allow procedures and activities that impair the health of consumers who meet their various needs in everyday life and buy in their physical environment – food, drink, toys and many other items. It is this physical environment that refers to crowds or facilities – potentially places where consumers can be exposed to infectious diseases.

The protection of human rights, including the right to life, has been recognized as the basis of internal security policy and one of the vital interests of Montenegro[16] which may be endangered by dangers such as natural or artificially caused epidemics and pandemics. Montenegro's strategic interest is, among other things, the prevention and suppression of security challenges and threats, which include these dangers. Furthermore, an important interest of Montenegro is the protection of critical infrastructure (which includes the field of health) which is achieved through cooperation between state bodies and the private sector. Cooperation between state bodies and the private sector in the protection of critical infrastructure, in terms of security, is achieved through the engagement of agencies and security services that are recognized as a special element of the national security system. Bearing in mind that the field of health is recognized in the Law on Critical Infrastructure[17] as critical infrastructure, we find a strong legal basis for the engagement of agencies and security services in protection against infectious diseases in either the private or public sector.

Let us point out that critical infrastructure means an asset, system, or part of

[15] Ustav Crne Gore (2007). „Sl. list Crne Gore", br. 1/2007 i 38/2013 - Amandmani I-XVI.

[16] Strategija nacionalne bezbjednosti Crne Gore. (2018)., „ Sl. list Crne Gore", br. 085/18.

it that is necessary to maintain vital social functions such as health or safety and whose disruption would have a significant impact on the maintenance of those functions.[18] The proposal for the Directive of the European Commission states the list of critical infrastructure sectors, where in the 4th Sector – health, subsectors are listed: medical and hospital care, drugs, serums, vaccines and medicines, bio laboratories and bio agents[19]. Critical infrastructure includes health care (eg. hospitals, health and blood supply facilities, laboratories and medicines, emergency services).[20]

The mentioned agencies and security services are established on the basis of the law[21] which has its legal basis in the Constitution of Montenegro[22], according to which issues of interest for Montenegro are regulated, which is certainly the protection of persons and property. Among other tasks in this law, the activity of protection includes activities of protection of persons life, personal rights, as well as protection of safety of persons from other forms of endangerment. Endangering people can be caused by an epidemic of infectious diseases that belongs to the so-called. natural hazards.

Furthermore, in addition to the aforementioned activities for the protection of human life, for the purposes of this labour, the activities of surveillance of technical protection systems and devices such as video surveillance, alarms (detectors), access control devices and other electronic protection devices that are connected into a functional unit. These funds are monitored from the central operations center or from the local monitoring point.

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[17] Zakon o određivanju i zaštiti kritične infrastrukture. (2019). „ Sl. list Crne Gore", br. 72/2019.

[18] Council Directive 2008/114/EC of 8 December 2008, on the identification and designation of European critical infrastructures and the assessment of the need to improve their protection, Official Journal of the European Union, L 345/75, Article 2.

[19] Commission of the European Communities, Communication from the Commission to the Council and the European Parliament, Critical Infrastructure Protection in the fight against terrorism, COM(2004) 702 final, 20.10.2004, Brussels.

[20] Commission of the European Communities, Communication from the Commission to the Council and the European Parliament, Critical Infrastructure Protection in the fight against terrorism, COM(2004) 702 final, 20.10.2004, Brussels.

[21] Zakon o zaštiti lica i imovine. (2018). „Sl. list Crne Gore", br. 043/18.

[22] Ustav Crne Gore, *Op. cit.*

Therefore, protection activities are realized through the activity of protection in the form of physical and technical protection, which is directly carried out by security guards and who have at their disposal numerous technical means.

The peculiarity of the Law on protection of persons and property is that it recognizes the so-called „mandatory protected facilities" which means facilities in which activities of public interest are performed or those facilities whose endangerment may pose risks to the life and health of a large number of people. These are facilities of strategic importance: bus and railway stations, airports, ports, larger shopping centers, stadiums, halls, banks, gas stations, water sources, food factories, electricity generation facilities (hydropower plants, thermal power plants, wind farms…), post offices, telecommunications facilities, museums, state archives, libraries – some of which are attractive or traffic tourist factors that encourage tourists to move. In addition to these facilities, all public and private entities have the right to establish protection of their property or persons who, on any basis, are located in these facilities or space.

Taken as a whole, for the performance of their duties in the protection of mandatory protected facilities and critical infrastructure facilities – security guards have at their disposal powers that are, in relation to the law, very similar to police powers.

Another basis for the actions of security guards and companies is on the order[23] issued by the Ministry of Health to companies and citizens in order to combat infectious diseases. It is emphasized that any non-compliance with the order entails responsibility[24] which is sanctioned by business organization and citizens.

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[23] Zakon o zaštiti stanovništva od zaraznih bolesti (2018). *Op. cit.,* Art. 15 and 55.

[24] Failure to comply with regulations, decisions and orders determining measures to combat a dangerous contagious disease shall result in a fine or imprisonment. In a situation where a person's health is severely impaired due to non-compliance with decisions and orders of measures to combat infectious diseases, the perpetrator of such an act shall be punished by imprisonment in: Krivični zakonik Crne Gore, „Sl. list Crne Gore", br. 070/03, 013/04, 047/06, „Sl. list Crne Gore", br. 040/08,

Taking in consideration that there are laws and bylaws that create legal preconditions for the application of activities and measures for the prevention and suppression of infectious diseases in this place, we believe that the powers of security guards should be stated. In order to carry out all his tasks in the field of protection against infectious diseases, the security guard is authorized to: determine the identity of the person, issue warnings, issue orders, detain a person caught committing misdemeanors and criminal offenses and other powers that we will not consider further. He applies the powers at his disposal on the space and in the facility he provides.

The authority to determine the identity of a person is exercised by inspecting a public document with a photograph, for those persons who enter or are found in a protected space or facility. This authorization is effective especially for employees in hotel and catering facilities who have the obligation to „work from home" or if they are under supervision or isolation measures. By ordering authority, the security guard warns by voice or written warnings and prohibitions all persons who by their actions or omissions may endanger their safety, the safety of the protected object and thus do not allow access to the object or space. For this purpose, written warnings and prohibitions related to: wearing a mask, mandatory disinfection of the body or vehicle, physical distance between persons... The security guard issues an order to prevent entry into the protected facility when a person does not act on the warning. When a security guard in a protected facility or space finds a person committing a misdemeanor and a criminal offense, he is authorized to detain such a person until the arrival of the police. Misdemeanor and criminal offense of a person refers to a situation when the security guard is aware that a person has received a measure of health supervision, isolation in quarantine or in other conditions, when he does not respect

025/10, 073/10, 032/11, 064/11, 040/13, 056/13, 014/15, 042/15, 058/15, 044/17, 049/18, član 287 i 302, and non-compliance with the provisions of the Law on Protection of the Population from Infectious Diseases „Sl. list Crne Gore", br. 012/18, član 69-74 - entails a fine.

the ban on assembly, does not comply with the limit of presence of citizens in public place and issued physical distance or when other orders of the Ministry of Health are not respected.

THE ROLE OF PTP SUBJECTS IN THE CONTROL OF INFECTIOUS DESEASES

The tourism industry is of great importance for Montenegro. Namely, revenues from tourism make up a quarter of the country's gross domestic product (GDP), so that the decline in tourist visits caused by the COVID 19 pandemic induced an economic recession and other instabilities. Due to the nature and seasonal character of Montenegrin tourism, the largest number of tourists come during the summer months. Thus, the tourism economy suffered a large drop in tourism earnings during the pandemic, especially due to the cancellation of foreign guest arrangements. According to the data of the Ministry of Sustainable Development and Tourism of Montenegro for 2020 (Table 1), the decline in the arrival of foreign tourists was over 70%, so it was impossible to compensate the overall decline in tourism earnings with domestic guests.

From everything presented so far, we will try to concretize the role of PTP subjects in the suppression of infectious diseases. In order to reduce the risk of infection and the spread of infection, the subjects of physical protection perform a series of general preventive measures. The measures are predominantly related to limiting the number of people entering buildings and gatherings indoors. Namely, the immediate – operational use of PTP subjects and the application of PTP technical means in the control of infectious diseases is recognized.

Direct – operational use of PTP entities is carried out at the level of the security agency or security service of the hotel and catering facility by establishing internal bodies that apply the autorizations given by law. Besides facilities that are protected either by law or all facilities for the

protection of which the private sector is interested – security agencies may also provide facilities designated for quarantine.

Regardless of the character of the facility, during their direct activities, PTP subjects are focused on compliance with measures and giving binding orders related to: visual display of prohibition and warning signs in the hybrid space[25], measurement of facial temperature at the entrances to the protected facility and space with hand-held contactless thermometers; hand washing and disinfection, filling of dispensers with disinfectants, wearing personal protective equipment (masks, visors, gloves, protective caps, suits, trousers), maintaining the required physical distance and the prescribed number of people in a certain place, restrictions on the movement of people in space and facilities in ownership of a hotel and catering facility, ban on organizing public events in a hybrid space, disinfection of private and hotel vehicles at the entrances to facilities and premises, disinfection of hotel and catering facilities, calling the competent services to remove stray dogs and other animals, emptying bags with used protective and dezinfectious means, keeping the prescribed records in relation to the regulations on the protection of personal data.

On the example of a hotel and catering facility in Budva, one can see the activities against infectious diseases (COVID 19) during 2020 by a business company with an international reputation that deals with PTP.

Observing Table 2, we notice the application of an anti-epidemic measure – temperature measurement (over 37 ^{o}C) and that the measurement began in March with the outbreak of the epidemic when the first cases of infection were registered. In April, May and June, the number of people whose temperature was measured decreased because some employees worked from home, and the number increased significantly from July

[25] The term hybrid or quasi-public space is defined as an area (facility) in private ownership, within which activities and services of public importance are located and provided. Examples of hybrid space are shopping malls, hotels, restaurants and sports facilities, amusement parks and similar, u: Zoran Kesić, *Specifični pojavni oblici privatnog obezbeđenja u svetu*, Bezbednost br. 1-2, Beograd, 2009, str. 197.

because epidemiological measures were mitigated, so the movement of guests and the presence of this facility employees increased. It is interesting that the number of people warned to use personal protective equipment was the highest in March, and later that number decreased primarily due to the raised awareness of employees and guests about the need to wear protective equipment. A total of 191 people were warned to use personal protective equipment at the entrances to the facility and in the protected area, while in only one case was an order issued and entry into the facility prevented.

On the other hand, technical means, i.e. electronic protection devices of PTP, in the control of infectious diseases have not been used significantly, although they are diverse, so video surveillance, access control devices, alarms and detectors should find their full use…

Modern possibilities of using video surveillance can significantly help in the control of infectious diseases, namely: by measuring the temperature of the face and body, counting people, recognizing a person's face (face recognition), adhering to distance measures and gathering people.

Measuring temperature determines a person's health, while an elevated temperature indicates that a person has health problems. The thermogram (thermovision, gr. *thermo* – warm, and lat. *video* – watch) registers persons but also objects in place or in movement during the day, night and conditions of poor visibility. Identification of personal characteristics is achieved using infrarred camers in the CCTV system (Table 2).

Thermal cameras detect a person's fever either on exposed parts of the body (face, hands) or under clothing. Infrared cameras detect the emitted thermal radiation of subcutaneous blood system as unique physiological characteristics of each individual. Using this so-called. biometric methods, we get a thermogram of the face and body, so it is easy to determine elevated temperature, sincee you can set the parameter from which body temperature the alarm sounds, and thus draws attention to the fact that a person has

elevated temperature and is a possible carrier of infectious disease.

This type of camera is placed at the entrance to a protected area or facility. The security operator at the central operative center or at the local control point monitors the movement of people on monitors, and the system can be set to automatically report and mark people with fever or to be noticed directly by the operator if there is not a large flow of people. The detected persons are separated and their temperature in the room prepared in advance for this purpose is subsequently measured again with a precise thermometer.

The modern possibility of CCTV is video analytics where the person's face is analyzed (so-called „face recognition") or adherence to distance measures and gathering of persons is analyzed. Software solutions in the CCTV system can determine facial recognition, but also – whether a person has a face mask.

The use of information and alert systems is effective in emergency situations, which include an epidemic of infectious diseases, so that messages about mandatory compliance with the ordered measures are broadcast in the facilities and protected area.

The unification of the direct work of security guards and the application of technical means of FTZ in the control of infectious diseases can be shown when using the disinfection tunnel at the entrance and exit to the building and the protected area. The disinfection tunnel is equipped with motion sensors and a system for spraying disinfectant and pressurized water in the form of tiny droplets. The disinfection tunnel, which is also for mobile purposes, is used for economic entrance, entrance for employees, but also at the entrance or space for guests and visitors. The motion sensor detects the person entering the tunnel, transmits a signal to the disinfectant spray system and a fine drop curtain is created in the tunnel, which disappears when the person leaves the tunnel, which previously also detects the motion sensor. A security guard and CCTV are placed in front of the mentioned entrances, which control whether everyone passes through the disinfection

tunnel.

In addition to this, when entering specially protected zones or facilities, it is known that there are modern access control technologies or biometric methods that measure the shape of the face, handprint, eye scan, based on which entry is allowed or not allowed. Similarly, a measured elevated temperature can prevent entry, that is, a person's normal temperature will allow entry into an object or protected area. Also, entry may or may not be allowed to persons whose CCTV video analytics detects whether they are wearing protective masks.

CONCLUSION

Concluding this paper, we must emphasize that the research is associated with a number of difficulties. First, it is still not possible to determine the exact and scientifically proven conditions that caused the epidemic, the consequences for the tourism industry are serious, the degree of harm to communities is high and they still cannot be objectively assessed.

Hence, the health and safety challenges that affect the tourism industry, and thus the safety of the community, are more complex today than ever before. It is quite certain that this trend will continue with the constant complication of various threats and risks. In this regard, it is primarily about phenomena of human or natural origin, risks that are usually associated with human health as well as the creation of new values and products. Finally, the assessment when it comes to epidemics, must be based on expert basis and harmonized with the national platform for the prevention of infectious diseases. The COVID 19 epidemic proved to be almost unpredictable and unmanageable, with tremendous destructive potential. The health community's responses to the pandemic were insufficient, and preparation for them was practically impossible. Based on all the above, we notice that the tasks of private security entities are becoming more complex, it is necessary to improve the regulatory framework that will increase the

efficiency of their work, especially in preventing epidemics. The timing of the spread of the infectious disease-epidemic is a challenge for private security entities. In emergency situations, PTP is established in order to take general measures to prevent and eliminate infectious diseases, its action is reflected in the division and training of individual tasks. These tasks are mainly related to the implementation of the imposed rules of gathering and movement of people in buildings and open space. Electronic protection devices in the control of infectious diseases have not found their application either due to unpreparedness or due to unbudgetary funds, which may be the subject of another research.

Finally, concluding this paper, we must point out that only modernly conceived, organized and equipped private security entities can provide results and justify the invested funds. A well-established security management must create an insight into the dangers and endangerment of people, and by its actions disable or reduce to an acceptable level the effects of harmful factors on the tourism economy.

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Appendix

Table 1.

Comparative overview of the number of tourists and realized overnight stay in Montenegro, in months of August in 2019 and 2020

Tourists / nights	2019		2020		Index-es	
	August	Since the beginning of the year	August	Since the beginning of the year	Monthly	Since the beginning of the year
Tourists	**220915**	**913981**	**60384**	**201566**	27.3	**22.05**
- domestic	16453	86625	20926	68340	127.19	**78.89**
- foreign	204462	827356	39458	133226	19.30	**16.10**
Nights	**1048037**	**3508608**	**280535**	**671825**	26.8	**19.15**
- domestic	85869	357336	88360	265031	102.90	**74.17**
- foreign	962168	3151272	192175	406794	19.97	**12.91**

Note. Data of the Ministry of Sustainable Development and Tourism of Montenegro for 2020.

Table 2.

The authors' research

Ord. Nr.	Month	Number of persons whose temperature was measured		Number of persons with elevated temperature		Measures taken		Number of persons warned to use personal protective equipment
		Employed	Guests, visitors	Employed	Guests, visitors	Allowed entrance to the building	Not allowed entrance to the building	
1.	March	230	5	1	0	234	1	48
2.	April	215	8	0	0	223	0	26
3.	May	220	4	0	0	224	0	22
4.	June	275	7	0	0	282	0	31
5.	July	470	49	0	0	519	0	35
6.	August	490	62	0	0	552	0	29

Note. The reques of the security agency and the hotel and catering facility to which these data referer is to preserve their anonimity.

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ТУРИЗАМ И ФУНКЦИЈА ПРИВАТНЕ БЕЗБЈЕДНОСТИ У ЗДРАВСТВЕНОЈ ЗАШТИТИ ОД ЗАРАЗНИХ БОЛЕСТИ

Апстракт

У овом раду имали смо за циљ да истакнемо специфичности амбијента у ком се нашла туристичка привреда и корпоративна безбједност привредних друштава и компанија током епидемије (SARS-COV-2) познатој као COVID 19. Истовремено, истакнути су разорни економски ефекти пандемије према туризму односно објектима смјештаја. Поред наведеног аутори желе да истакну улогу субјеката приватне безбједности и кризног менаџмента током управљања ванредном ситуацијом. Међутим, појавили су се многи проблеми због чињенице да су многе активности биле неповезане са самим ризиком. Дакле, манифестовао се недостатак стандарда за управљање ванредном ситуацијом на системски начин. Истовремено, показало се да су стандарди за процјену прописани постојећим законским и подзаконским прописима недовољни за израду одговарајуће методологије процјене када се ради о заразним болестима. Епидемија COVID 19 је криза сасвим различита од догађаја који су уобичајено проучавани под појмом криза, па се за њу може користити назив „Модерна криза". Најзад, чини се да актуалности појаве угрожавања здравља људи и туристичке привреде намеће потребу њене анализе.

Кључне ријечи: *заштитар, заштитне мјере, привредна друштва, хотел, угоститељски објекти*