Module Description: Community Nursing (21R01410903)

Module designation	Course Module
Semester(s) in which the module is taught	IX
Person responsible for the module	Wa Ode Nur Isnah Sabriyati, S.Kep., Ns., M.Kes. (Koordinator) Andi Msyitha Irwan, S.Kep., Ns., MAN., Ph.D Arnis Purpitha R, S.Kep., Ns., M.Kes Framita, S.Kep., Ns.., MSc Kusrini S. Kadar, S.Kp., MN., PhD Nurhaya Nurdin, S.Kep., Ns. MN., MPH Silvia Malasari, S.Kep., Ns., MN Syahrul, S.Kep., Ns., M.Kes., Ph.D
Language	Bilingual, Bahasa Indonesia and English
Relation to Curriculum	This course is a compulsory course and offered in the 9th semester.
Teaching Methods	Teaching methods used in this course are: − Community Side Teaching (CST) − Pre-post conference − Reflective study − One-Minute Preceptorship (OMP) − Case Based Discussion. The class size for lecture is approximately 50-100 students, while for Project Based learning is about 7-10 students for each group.
Workload (incl. contact hours, self-study hours)	Contact hours for practice are 160 hours. For this course, students are required to meet a minimum of 181,33 hours in one semester, which consist of: 160 hours (equals with 5.33 ECTS) for practice.
Credit points	3 credit points (equivalent with 5.33 ECTS)
Required and recommended prerequisites for joining the module	Students must have graduated with Bachelor Science in Nursing (BSN) and must have passed the Fundamental of Nursing Practice, Medical Surgical Nursing, Materninty Nursing, Paediatric Nursing, Emergency Nursing Practice, Critical Care Nursing Practice, Psychiatric and Mental Health Nursing Practice, and Nursing Management Practice.
Module objectives/intended learning outcomes	After completing the course and given with a maternity nursing case, students will be: **Attitude** **CLO1:** Able to provide community care with cultural sensitivity and respect for ethics, religion, and other factors as well as legal aspects in community nursing.**(A)** **Competence** **CLO2:** Apply comprehensive community nursing services. **(C1)** **CLO3:** Able to communicate effectively in interpersonal relationships within the community.**(C2)** **CLO4:** Implement community nursing care through cross-program, cross-sector, and community group collaboration.**(C3)** **CLO5:** Students are able to apply research results in an effort to improve the quality of community nursing services.**(C4)**

	CLO6: Students are able to develop their potential related to improving professional competence in community nursing.**(C5)**
Content	Students will learn about: ● Make effective communication in providing nursing care to communities. ● Using effective interpersonal skills in teamwork. ● Use health technology and information effectively and responsibly. ● Using the nursing process in solving problems related to individuals, families, groups and communities. ● Cooperate with related elements in the community ● Use ethical and legal decision-making steps. ● Providing cultural sensitive care by respecting ethnicity, religion or other factors ● Collaborate on various aspects in meeting the health needs of individuals and families in community. ● Demonstrate nursing technical skills in accordance with applicable standards or creatively and innovatively so that the services provided are efficient and effective. ● Nursing care on aggregate in the Community: school health ● Nursing care on aggregates in the Community: Child and Adolescent Health ● Nursing care on aggregates in the Community: Women's and Men's Health ● Nursing care on aggregate in the Community: elderly health ● Nursing care on aggregates in the community: vulnerable populations: Mental Disability, Disability, and abandoned populations ● Nursing care in aggregate in the community: with Population Health Problems: Infectious Diseases ● Nursing care on aggregate in the community: health problems population: chronic Disease ● Nursing care on aggregate in the community: health problems population: tropical Disease ● Nursing care by developing complementary therapies
Examination forms	A. Written test (MCQ) B. Team based report: • DOPS (Direct Observation of Procedural Skills) • SOCA (Student Oral Case Analysis) • Case Report • Portpholio
Study and examination requirements	**Study and examination requirements:** 1. Students carry out Community Nursing Practice in accordance with the objectives to be achieved. 2. Students must be present 15 minutes before the activity begins, if students are late, they are required to report to the supervisors. 3. Students work in the morning shift only according to community health centres working hours however, students are obliged to extend the shift to afternoon if it is needed to do assessment in communities 4. Students must wear complete attributes, if the attributes used are incomplete, students are not allowed to take part in practical activities and must replace the shift on other day.

	5. If students are late to attend at the community health centre (maximum of 15 minutes from the actual schedule), they are required to change their shift for 2 days. 6. If students are absent for 3 days without any information, then their community nursing practice is considered fail. 7. If during the practice, students are absent without any confirmation, students are required to replace the shift for 2 days, while if students report sick, student only required to replace 1 day. 8. The presence of students during this Community Nursing Practice must be 100% 9. Students are not allowed to leave practice site except with the permission of the supervisor 10. All the assignments and log book must be collected maximum of 1 week after the practice takes place. The score of late assignments will be reduced by 1 point per day.
Reading list	1. Iswatun, et.al (2024). *Buku ajar keperawatan komunitas* (E. Efitra & P. I. Daryaswanti, Eds.). PT. Sonpedia Publishing Indonesia. 2. Melnyk, B. M., & Fineout-Overholt, E. (2011). *Evidence-based practice in nursing & healthcare: A guide to best practice*. Wolters Kluwer/Lippincott Williams & Wilkins. 3. Anderson & Mc Farlane. 2011. *Community as Partner: Theory and Practice in Nursing, 6th edition.* USA: Lippincott Williams & Wilkins. 4. Ajzen, I. 2011. Behavioral interventions: Design and evaluation guided by the theory of planned behavior. In M. M. Mark, S. I. Donaldson, & B. C. Campbell (Eds.), *Social psychology for program and policy evaluation* (pp. 74-100). New York: Guilford. 5. Bandura, A. (1989). Social cognitive theory. In R. Vasta (Ed.), *Annals of child development. Vol. 6. Six theories of child development* (pp. 1-60). Greenwich, CT: JAI Press. 6. Departemen Kesehatan RI. 2009. Promosi kesehatan, komitmen global dari Ottawa- Jakarta-Nairobi menuju rakyat sehat. Jakarta: Pusat Promosi Kesehatan, Depkes RI bekerja sama dengan Departemen Pendidikan Kesehatan dan Ilmu Perilaku-FKM UI. 7. Ferry & Makhfudli. 2009. *Buku Ajar Keperawatan Kesehatan Komunitas*. Jakarta : Salemba Medika. 8. Leddy, S.K. 2006. Health promotion mobilizing. Philadelphia: Davis Company. **9.** Lucas dan Lloyd. 2005. Health promotion evidence and experience. London: SAGE Publications. 10. Nies, M.A., McEwen M. 2014. Community/Public Health Nursing. 6th edition.Saunders: Elsevier Inc. 11. Notoatmojo, S. 2010. Promosi kesehatan: teori dan aplikasi. Jakarta: Rineka Cipta. Ridwan, M. 2009. Promosi kesehatan dalam rangka perubahan perilaku. Jurnal Kesehatan Metro Sai Wawai, Volume 2 Nomor 2, hal 71-80. 12. Pender, N. 2011. *The health promotion model, manual.* Retrieved February 4, 2012, from nursing.umich.edu: http://nursing.umich.edu/faculty-staff/nola-j- pender. 13. Yun, *et al*. 2010. The role of social support and social networks in smoking behavior among middle and older aged people in rural areas of South Korea: A cross- sectional study. BMC Public Health: 10:78.

	14. Rogers. 2003. *Diffusion of Innovations*. Fifth Edition. Free Press, New York, p221 Siagian, S. 2004. Teori motivasi dan aplikasinya. Jakarta: Rineka Cipta. 15. Stanhope M. & Lancaster J. 2013. *Foundation of Nursing in the Community:Community-Oriented Practice, 4th edition*. Mosby:Elsevier Inc. 16. Kotler dan Lee. 2007. Social marketing: influencing behavior for good. London: SAGE Publication 17. Kalsum, W. O. U., Sabriyati, W. O. N. I., Utami, N., & Monalisa, M. (2020). Trio Dispa: Effort to Establish Family Health Experts in Acute Respiratory Infections. *Indonesian Contemporary Nursing Journal* , *4*(2), 64-71. https://doi.org/10.20956/icon.v4i2.4461 18. Patandung, V., Kadar, K., & Erika, K. (2018). Tingkat Literasi Kesehatan Pasien Diabetes Mellitus Tipe 2 Di Puskesmas Kota Tomohon. *Interest : Jurnal Ilmu Kesehatan*, *7*(2), 137-143. https://doi.org/10.37341/interest.v7i2.22 19. Fitriasari, E., Syahrul. (2019). Pengetahuan, Sikap dan Praktik Pencegahan Filariasis pada Masyarakat di Daerah Endemik Filariasis: A Literatur Review. Jurnal Penelitian Kesehatan SUARA FORIKES 10(3). http://dx.doi.org/10.33846/sf10314 20. Sari, H., Jafar, N., & Malasari, S. (2018). Healthy Environment Development in School Health Units of Public Primary Schools in Bontobahari Bulukumba. *Indonesian Contemporary Nursing Journal* , *1*(2), 76-85. https://doi.org/10.20956/icon.v1i2.3448 21. Andi Masyitha Irwan, Mayumi Kato, Kazuyo Kitaoka, Teruhiko Kido, Yoshimi Taniguchi, Miho Shogenji, Self-care practices and health-seeking behavior among older persons in a developing country: Theories-based research,International Journal of Nursing Sciences,Volume 3, Issue 1,2016,Pages 11-23,ISSN 2352-0132,https://doi.org/10.1016/j.ijnss.2016.02.010.(https://www.sciencedirect.com/science/article/pii/S2352013215300193) 22. Nurdin, N., Sjattar, E.L, Arafat,R., Amal, A.J., Puspitha, A. 2018.Decoupage Art Therapy as an Alternative Activity to Reduce Gadget Dependence on Primary School Students in Makassar [Seni Decoupage Sebagai Kegiatan Alternatif Mengurangi Ketergantungan Gadget Pada Siswa Sekolah Dasar di Makassar. Proceeding of Community Development. Vol (2).https://doi.org/10.30874/comdev.2018.332 23. Puspitha,A.,Erika, KA.Saleh. U.2020.Pemberdayaan Keluarga dalam Perawatan Tuberkulosis.Media Karya Kesehatan, 3(1). https://doi.org/10.24198/mkk.v3i1.24040 11. Rahman, F., Bahtiar, B., Permana, A. F., & Kurniawan, M. A. (2021). Factors Associated With Quality Of Life People Living With Hiv/Aids At Yayasan Peduli Kelompok Dukungan Teman Sebaya (YPKDS) In Makassar City. *STRADA Jurnal Ilmiah Kesehatan*, *10*(1), 670–678. https://doi.org/10.30994/sjik.v10i1.684
Cluster of Competence	Nursing Clinical Sciences and Skills
Form of Assessments	- Team based project report: 70% - Structured assignments (Journal reading resume) : 5% - Class discussion participation: 15% - UKOM Computer based test: 10%

Date of last amendment made	March 2025

Course Learning Outcome Assessment of Learning Outcomes for Course Modules

Course Module Name : **Community Nursing**
Code : **21R01410903**
Semester : IX
Person responsible for the module : Wa Ode Nur Isnah Sabriyati, S.Kep., Ns., M.Kes. (Coordinator)
Lecturers :

1. Wa Ode Nur Isnah Sabriyati, S.Kep., Ns., M.Kes. (Coordinator)
2. Andi Msyitha Irwan, S.Kep., Ns., MAN., Ph.D
3. Arnis Purpitha R, S.Kep., Ns., M.Kes
4. Framita, S.Kep., Ns.., MSc
5. Kusrini S. Kadar, S.Kp., MN., PhD
6. Nurhaya Nurdin, S.Kep., Ns. MN., MPH
7. Silvia Malasari, S.Kep., Ns., MN
8. Syahrul, S.Kep., Ns., M.Kes., Ph.D

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
1	**Attitude (A):** Nursing graduates are individuals who are pious and maritime spirited, exhibit professional behaviors, ethical principles,	**CLO1**: Able to provide community care with cultural sensitivity and respect for ethics, religion, and other factors as	● Attendance ● Assignment results ● Timeliness of assignment submission ● Suitability of assignments ● Activity in activities	1. Health Center orientation and secondary data collection 2. Practice area orientation 3. Socialization/visits of religious and community leaders	Team-based project: **Case report (a,b,d)** Team-based project: **DOPS (Direct Observation of Procedural Skills) (a)**	Team-based project 1 rubric Team-based project 2 rubric	Iswatun, et.al (2024). *Buku ajar keperawatan komunitas* (E. Efitra & P. I. Daryaswanti, Eds.). PT. Sonpedia Publishing Indonesia. Chapter 1, 2, 3, 4, 5

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
	legal perspective, and embrace culturally sensitive aspects in nursing	well as legal aspects in community nursing.**(A)**		4. Formulation/compilation/determination of aspects of Community Nursing Care assessment			
1,2,3,4	**Competence** C1. Graduates are able to provide comprehensive and continuous nursing care that ensures research-based patient safety in accordance to nursing care standards in all areas of nursing particularly of diseases that are common in Indonesia as a	**CLO2:** Apply comprehensive community nursing services. **(C1)**	● Attendance ● Assignment results ● Timeliness of assignment submission ● Suitability of assignments ● Activity in activities	5. Data collection of supervised areas and creation of community health center target mapping 6. Analysis of Health and Nursing Data 7. Preparation of Community Nursing Care Plan	Class discussion participation: **SOCA (Student Oral Case Analysis) (a,b,c)**	Discussion based on case study scenario	Iswatun, et.al (2024). *Buku ajar keperawatan komunitas* (E. Efitra & P. I. Daryaswanti, Eds.). PT. Sonpedia Publishing Indonesia. Chapter 6, 7, 8, 9
1,2,3,4		**CLO3:** Able to communicate effectively in	● Attendance ● Assignment results ● Timeliness of	9. Implementation of research-based Community	Team-based project: **Case Report (e)**	Team-based project 1 rubric	Iswatun, et.al (2024). *Buku ajar keperawatan komunitas* (E. Efitra & P. I. Daryaswanti, Eds.).

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
	tropical and maritime country. C2. Graduates are able to implement therapeutic communication with clients, and to provide accurate information for clients and/or families/companions/counsellors to obtain consent regarding nursing care for clients being cared. C3. Graduates are able to manage nursing and health care	interpersonal relationships within the community. **(C2)**	assignment submission ● Suitability of assignments ● Activity in activities	Nursing: Preparation of Deliberations and other activities based on the renpra 10. Implementation of research-based Community Nursing Care: Initial Community Deliberation 11. Implementation of research-based Community Nursing Care: Preparation of Plan of			PT. Sonpedia Publishing Indonesia. Chapter 6, 7, 8, 9

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
	system based on competence and responsibility through cooperation with fellow nurses and collaboration with allied healthcare teams and community groups to reduce sickness-rate and to improve quality of live and healthy environment. C4. Graduates are able to improve the quality of nursing and health services			Action with the community 12. Implementation of research-based Community Nursing Care: Implementation of Programs according to POA with the community 13. Implementation of research-based Community Nursing Care: Activity Supervision Community			

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
	by implementing research skills and integrating nursing theories into practices. C5. Graduates are able to improve professional expertise in nursing field through long life learning.			14. Implementation of Research-Based Community Nursing Care: Final Community Deliberation 15. Evaluation of Community Nursing Care 16. Documentation of Community Nursing Care: Preparation of Report			
1,2,3,4		**CLO4:** Implement community nursing care	● Attendance ● Assignment results ● Timeliness of	9. Implementation of research-base	Team-based projec: **Case Report (c)**	Team-based project 1 rubric Team-based project 2 rubric	Iswatun, et.al (2024). *Buku ajar keperawatan komunitas* (E. Efitra & P. I.

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
		through cross-program, cross-sector, and community group collaboration.**(C3)**	assignment submission ● Suitability of assignment ● Activity in activities	d Community Nursing: Preparation of Deliberations and other activities based on the renpra 10. Implementation of research-based Community Nursing Care: Initial Community Deliberation 11. Implementation of research-based Community Nursing Care: Preparation	Team-based projec: **DOPS (Direct Observation of Procedural Skills) (b,c,d)** **Portopholio**	Team-based project 4 rubric	Daryaswanti, Eds.). PT. Sonpedia Publishing Indonesia. Chapter 6, 7, 8, 9

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
				of Plan of Action with the community 12. Implementation of research-based Community Nursing Care: Implementation of Programs according to POA with the community 13. Implementation of research-based Community Nursing Care: Activity			

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
				Supervision Community 14. Implementation of Research-Based Community Nursing Care: Final Community Deliberation 15. Evaluation of Community Nursing Care 16. Documentation of Community Nursing Care: Preparation of Report			

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
2		**CLO5:** Students are able to apply research results in an effort to improve the quality of community nursing services.**(C 4)**	● Attendance ● Assignment results ● Timeliness of assignment submission ● Suitability of assignments ● Activity in activities	8. Reading of Community Nursing Care Journal	Structured assignments (Journal reading resume) DOPS (Direct Observation of Procedural Skills) (f)	Reflective paper rubric	Melnyk, B. M., & Fineout-Overholt, E. (2011). *Evidence-based practice in nursing & healthcare: A guide to best practice*. Wolters Kluwer/Lippincott Williams & Wilkins. Chapter 11

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
3,4		**CLO6:** Students are able to develop their potential related to improving professional competence in community nursing.**(C5)**	● Attendance ● Assignment results ● Timeliness of assignment submission ● Suitability of assignment ● Activity in activities	9. Implementation of research-based Community Nursing: Preparation of Deliberations and other activities based on the renpra 10. Implementation of research-based Community Nursing Care: Initial Community Deliberation 11. Implementation of research-base	Team-based project: Case Report (f) Class discussion participation: SOCA (Student Oral Case Analysis) (d) UKOM Computer based Test (MCQ)	Team-based projec 1 Discussion based on case study scenario **Rubric for Multiple Choice Questions** - Scored 1, if the answer is correct. - Scored 0, if the answer is wrong. Final grade= Total corrected items divided by total items multiply 100.	Iswatun, et.al (2024). *Buku ajar keperawatan komunitas* (E. Efitra & P. I. Daryaswanti, Eds.). PT. Sonpedia Publishing Indonesia. Chapter 6, 7, 8, 9

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
				d Community Nursing Care: Preparation of Plan of Action with the community 12. Implementation of research-based Community Nursing Care: Implementation of Programs according to POA with the community 13. Implementation of research-based Community			

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
				Nursing Care: Activity Supervision Community 14. Implementation of Research-Based Community Nursing Care: Final Community Deliberation 15. Evaluation of Community Nursing Care 16. Documentation of Community Nursing Care:			

Week/ Meeting	Intended Learning Outcomes	Course Learning Objectives	Performance Indictor	Topic	List of Assessments	List of Rubrics	Reading List
				Preparation of Report			

Proportion of assessment aspects according to the course learning outcomes.

No	Code	CLO	Sub CLO	Learning Method	Evaluation Method						Proporsi
					Participatory Analysis	Project result	Assignment	Quis	Mid-test	Final Test	
1	A	CLO 1	Sub CLO 1	– Community Side Teaching (CST) – Pre-post conference – Reflective study – One-Minute Preceptorship (OMP) – Case Based Discussion.		Team based project report 1 (a,b,d) 7%					**7%**
			Sub CLO 2								
			Sub CLO 4								
			Sub CLO 9			Team based project report 2 (a) 1%					**1%**
2	C1	CLO 2	Sub CLO 6		Discussion based on case study scenario (a,b,c) 7%					UKOM Computer based	**17%**
			Sub CLO 7								
			Sub CLO 15								

										Test (MCQ) 10%	
3	C2	CLO 3	Sub CLO 5			Team based project report 1 5%					**5%**
4	C3	CLO 4	Sub CLO 3			Team based project report 1 (c) 3%					**3%**
			Sub CLO 10			Team based project report 2 (b,c) 5%					**5%**
			Sub CLO 11								
			Sub CLO 12			Team based project report 4 - 20%					**20%**
			Sub CLO 14			Team based project report 2 (d) 4%					**4%**
5	C4	CLO 5	Sub CLO 8				Journal reading resume 5%				**5%**
			Sub CLO 13			Team based project report 3 - 15%					**15**
6	C5	CLO 6	Sub CLO 16			Team based project report 1 (f) 10%					**10**
					Discussion based on case study scenario (d) 8%						**8%**
											10%
Total					15%	70%	5%			10%	**100%**

Example of Written Test Exam

The number of suspected cases of measles in the slum areas assisted by the health center is 32 cases. There were no deaths, 6 suspected cases were treated. Posyandu and immunization did not work because the community was not present. The results of the interviews showed that the people objected to the side effects of the vaccine. Based on observations, people go to health services only if the disease is severe. What is the most appropriate nursing problem in this scenario? **(CLO2)**

A. Community health deficit

B. Community coping is not effective

C. Health management is ineffective

D. Health care is ineffective

E. Health behavior tends to be risky