

Module Description: Community Aggregate Nursing (21R01130503)

Module designation	Course Module
Semester(s) in which the module is taught	V
Person responsible for the module	Framita Rahman, S.Kep.,Ns.,MSc
Lecturer	<ol style="list-style-type: none"> 1. Andi Masyitha Irwan S.Kep.,Ns.,MAN.,Ph.D 2. Syahrul Said, S.Kep.,Ns.,M.Kes.,Ph.D 3. Kusrini Kadar S, S.Kep.,Ns.,MN.,Ph.D 4. Wa Ode Nur Isnah Sabriyati S.Kep.,Ns.,M.Kes 5. Arnis Puspitha S.Kep.,Ns.,M.Kes 6. Nurhaya Nurdin, S.Kep.,Ns.,MN.,MPH 7. Silvia Malasari, S.Kep.,Ns.,MN
Language	Indonesian Language [Bahasa Indonesia]
Relation to Curriculum	This course is a compulsory course and offered in the 5 th semester.
Teaching methods	<p>Teaching methods used in this course are:</p> <ul style="list-style-type: none"> - Lecture (i.e., Small Group Discussion (SGD), video-based learning, SBL, role play) - Structured assignments (i.e., essays and reflective paper) - Field Observation <p>The class size for lecture is approximately 60 students and for the small group discussion/ group investigation is about 3-12 students for each lecturer. For field observation the students can up to 10 for each lecturer.</p> <p>Contact hours for lecture is 26.67 hours.</p>
Workload (Incl. contact hours, self-study hours)	<p>For this course, students are required to meet a minimum of 136 hours in one semester, which consist of:</p> <ul style="list-style-type: none"> - 26.67 hours for lecture, - 32 hours for structured assignments, - 32 hours for private study, - 45.33 hours for field observation
Credit points	3 credit points (equivalent with 4.53 ECTS)
Recommend and requirements prerequisites for joining the module	Students must have attended all classes and submitted all class assignments before the deadline and final test. Students must have taken community nursing concept.

Module objectives/intended learning outcomes	<p>After completing the course students will be:</p> <p>Knowledge: CLO1: Students can understand programs, concepts, and community care strategies.</p> <p>Skill: CLO 2: Students can demonstrate the process of implementing community aggregate nursing care.</p> <p>Competence: CLO3: Students can provide comprehensive and sustainable nursing care according to community aggregates through collaboration with fellow nurses, other professionals, and community groups to reduce morbidity, improve lifestyle, and create a healthy environment. CLO4: Students can integrate research results into community aggregate nursing care. CLO5: Students can develop self-potential and critical thinking skills in providing aggregate nursing care.</p>
Content	<p>Students will learn about:</p> <ol style="list-style-type: none"> 1. Review of program concepts and concepts and strategies for care in the community. 2. Home care concept & Home care program. 3. Community Organizing (SMD/MMD/Pokjakes, Lokmin etc.) 4. The concept of school health nursing, school health nursing care & School Health Business Program. 5. Aggregate Nursing Care in the Community: Child and Adolescent Health 6. Aggregate Nursing Care in the Community: Women's and Men's Health. 7. Aggregate Nursing Care in the Elderly Community (Society). 8. Community Health Assistant for Vulnerable Populations: Mental Illness and Disability 9. Community Assistant with Population Health Problems: Infectious Diseases, Tropical Diseases, and the COVID-19 Pandemic 10. Community Nursing Care for Population Health Problems: Chronic Diseases 11. Complementary Therapy 12. Types of Complementary Therapy 13. Focus on complementary therapy. 14. The Role of Nurses in Complementary Therapy 15. Complementary Therapy Techniques
Examination forms	<p>Form of examination: Written exam: Multiple Choice Questions using Vignettes</p>
Study and examination requirements	<p>Study and examination requirements:</p> <ul style="list-style-type: none"> - Students must attend 15 minutes before the class starts. - Students must switch off all electronic devices. - Students must inform the lecturer if they will not attend the class due to sickness, etc. - Students must submit all class assignments before the deadline. - Students must attend all the exams/tests to obtain final grade.

Reading list

1. Nies, M.A., McEwen M. 2014. Community/Public Health Nursing. 6th edition. Saunders: Elsevier Inc.
2. Standhope, M., & Knollmueller, R. N. (2010). *Praktik Keperawatan Kesehatan Komunitas* (E. Wahyuningsih & K. E. Yudha (eds.); 2nd ed.). EGC.
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. Lucas dan Lloyd. 2005. Health promotion evidence and experience. London: SAGE Publications.
8. 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.
9. 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>.
10. 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.
11. Rogers. 2003. *Diffusion of Innovations*. Fifth Edition. Free Press, New York, p221 Siagian, S. 2004. Teori motivasi dan aplikasinya. Jakarta: Rineka Cipta.
12. Kotler dan Lee. 2007. Social marketing: influencing behavior for good. London: SAGE Publication
13. Allender, J.A., Rector, C., Warner, K.D., (2010), *Community Health Nursing: Promoting & Protecting the Public's Health*, Philadelphia:Lippincott William & Wilkins
14. Luawo, H. P., Sjattar, E. L., Bahar, B., Yusuf, S., & **Irwan, A. M.** (2019). Aplikasi e-diary DM sebagai alat monitoring manajemen selfcare pengelolaan diet pasien DM. *NURSCOPE: Jurnal Penelitian Dan Pemikiran Ilmiah Keperawatan*, 5(1), 32. <https://doi.org/10.30659/nurscope.5.1.32-38>
15. Mardiana, M., **Irwan, A. M.**, & Syam, Y. (2020). Hubungan health literacy dengan perilaku mencari bantuan kesehatan pada lansia dengan prehipertensi. *Jurnal Endurance: Kajian Ilmiah Problema Kesehatan*, 5(2), 313–320.

	<p>16. Risal, A., Irwan, A. M., & Sjattar, E. L. (2018). Stigma Towards People Living With Hiv/Aids Among Counseling Officers in South Sulawesi, Indonesia. <i>Belitung Nursing Journal</i>, 4(6), 552–558. https://doi.org/10.33546/bnj.543</p> <p>17. Wirda, W., Irwan, A., & Saleh, A. (2019). Hubungan Antara Self-Care Dan Kontrol Glikemik (Hba1c) Pada Pasien Dengan Diabetes Melitus Tipe 2. <i>Jurnal Keperawatan Muhammadiyah</i>, 74–80. https://scholar.google.co.id/scholar?start=20&q=cerita+dengan+teman+kontrol+perilaku+alkohol+2019&hl=id&as_sdt=0,5</p> <p>18. Susanto, T., Rahmawati, I., Wuryaningsih, E. W., Saito, R., Syahrul, Kimura, R., Tsuda, A., Tabuchi, N., & Sugama, J. (2016). Prevalence of factors related to active reproductive health behavior: a cross-sectional study Indonesian adolescent. <i>Epidemiology and Health</i>, 38, e2016041. https://doi.org/10.4178/epih.e2016041</p> <p>19. Susanto, T., Syahrul, Sulistyorini, L., Rondhianto, & Yudisianto, A. (2017). Local-food-based complementary feeding for the nutritional status of children ages 6–36 months in rural areas of Indonesia. <i>Korean Journal of Pediatrics</i>, 60(10), 320–326. https://doi.org/10.3345/kjp.2017.60.10.320</p> <p>20. Syahrul, Kimura, R., Tsuda, A., Susanto, T., Saito, R., & Agrina, A. (2016). Parental Perception of the Children’s Weight Status in Indonesia. <i>Nursing and Midwifery Studies</i>, inpress(inpress). https://doi.org/10.17795/nmsjournal38139</p> <p>21. Kadar, K. S., Gani, N. F., Erfina, E., & Hariati, S. (2020). Self-care management and health outcomes among Indonesian pregnant women. <i>Enfermeria Clinica</i>, 30, 111–114. https://doi.org/10.1016/j.enfcli.2019.07.046</p> <p>22. Kanang, S. W. Y., Kadar, K., & Arafat, R. (2021). Proses Teach Back Dalam Edukasi Kesehatan. <i>Scientific Journal of Nursing</i>, 7(1), 86–96.</p> <p>23. Nurjannah, E., Nurdin, N., Andriani, & Kadar, K. (2020). Perception and psychosocial burden of people with epilepsy (PWE): Experience from Indonesia. <i>Enfermeria Clinica</i>, 30, 622–625. https://doi.org/10.1016/j.enfcli.2019.07.175</p>
Cluster of Competence	Nursing Clinical Sciences and Skills
Forms of Assessment	<ul style="list-style-type: none"> - Class attendance and participation (5%) - Assignment (paper and presentation) (30%) - Written Test (20%) - Case Study (20%) - Early Exposure (25%)
Date of Last Amendment Date	June 2023

Course Learning Outcome Assessment of Learning Outcomes for Course Modules

Course Module Name : Community Aggregate Nursing
Code : 21R01130503
Semester : V
Person responsible for the module : Framita Rahman, S.Kep.,Ns.,MSc
Lecturers :

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7. Silvia Malasari, S.Kep.,Ns.,MN

Intended Learning Outcomes	Course Module Objectives	List of Assessments	List of Rubrics
<p>Knowledge:</p> <p>Nursing graduates master nursing science and also information system and technology to provide patients with nursing care based on scientific nursing process and approaches</p>	<p>Knowledge:</p> <p>CLO1: Students can understand programs, concepts, and community care strategies.</p>	<p>Assignment:</p> <p>Paper and presentation</p> <p>Written exam: Multiple Choice Questions using Vignettes.</p> <ul style="list-style-type: none"> ● Mode of delivery: Online through Learning Management System (LMS) ● Total number of questions: 50. ● Duration of exam: 55 minutes 	<p>Rubric for presentation and paper</p> <ul style="list-style-type: none"> - Scored 1, if the answer is correct. - Scored 0, if the answer is wrong. - Final grade= Total corrected items multiply 2.

Intended Learning Outcomes	Course Module Objectives	List of Assessments	List of Rubrics
<p>Skill:</p> <p>Graduates are possessing working competence in delivering nursing care and services that meet the competitive global and national standards.</p>	<p>CLO2: Students can demonstrate the process of implementing community aggregate nursing care.</p>	<p>Assignment: Paper and presentation</p> <p>Written exam: Multiple Choice Questions using Vignettes.</p> <ul style="list-style-type: none"> ● Mode of delivery: Online through Learning Management System (LMS) ● Total number of questions: 50. ● Duration of exam: 55 minutes 	<p>Rubric for presentation and paper</p> <ul style="list-style-type: none"> - Scored 1, if the answer is correct. - Scored 0, if the answer is wrong. - Final grade= Total corrected items multiply 2.
<p>Competence (C1):</p> <p>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 tropical and maritime country.</p>	<p>CLO3: Students can provide comprehensive and sustainable nursing care according to community aggregates through collaboration with fellow nurses, other professionals, and community groups to reduce morbidity, improve lifestyle, and create a healthy environment.</p>	<p>Early Exposure: Team based project report</p>	<p>Rubric for nursing care (group)</p>

Intended Learning Outcomes	Course Module Objectives	List of Assessments	List of Rubrics
<p>Competence (C4):</p> <p>Graduates are able to improve the quality of nursing and health services by implementing research skills and integrating nursing theories into practices.</p>	<p>Competence (C4)</p> <p>CLO4: Students can integrate research results into community aggregate nursing care.</p>	<p>Assignment:</p> <p>Case study</p>	<p>Rubric for nursing care (individual)</p>
<p>Competence (C5):</p> <p>Graduates are able to improve professional expertise in nursing field through long life learning</p>	<p>CLO5: Students can develop self-potential and critical thinking skills in providing aggregate nursing care.</p>	<p>Assignment:</p> <p>Case study</p>	<p>Rubric for nursing care (individual)</p>

Proportion of assessment aspects according to the course learning outcomes.

No	Code	CLO	Sub CLO	Learning Method	Metode Evaluasi						Proporsi		
					Participatory Analysis	Project result	Assignment	Quis	Mid-test	Final Test			
1	K	CLO1	Sub-CLO 1	<ul style="list-style-type: none"> - Lecture (i.e., Small Group Discussion (SGD), video-based learning, SBL, role play) - Structured assignments (i.e., essays and reflective paper) 	<ul style="list-style-type: none"> • Activeness in discussions (5%) 						5%		
			Sub-CLO 2			Paper and presentation (10%)					10%		
			Sub-CLO 3							MCQ (Multiple Choice Questions) 10%	10%		
1	S	CLO 2	Sub CLO 4	<ul style="list-style-type: none"> - Lecture (i.e., Small Group Discussion (SGD), video-based learning, SBL, role play) - Structured assignments (i.e., essays and reflective paper) 		Paper and presentation (10%)							
			Sub CLO 5										10%
			Sub CLO 6									10% MCQ (Multiple Choice Questions)	10%
			Sub-CLO 7										
			Sub-CLO 8										
	C1	CLO 3	Sub-CLO 9	Field Observation		Team Based Project (25%)					25%		

	C4	CLO4	Sub-CLO 10			Paper and presentation (10%)						10%
	C5	CLO5	Sub-CLO 11				Case study (20%)					20%
TOTAL					5%	55%	20%	0%	0%	20%		100%

Example of Written Test Exam

ASKEP KOMUNITAS KESEHATAN POPULASI: PENYAKIT INFEKSI, PENYAKIT TROPIS DAN PANDEMI COVID-19

1. Yang bukan merupakan tanda-tanda infeksi yaitu....
 - a. Rubor
 - b. Kalor
 - c. Bolor**
 - d. Dolor
 - e. TumorJawaban: C

2. Perawat A mendapatkan data 87% siswa belum mengetahui tanda dan gejala dari penyakit DBD, 95% Siswa belum mengetahui tindakan yang dilakukan untuk mencegah DBD, 80% siswa mengatakan belum pernah mendapatkan informasi atau penyuluhan tentang DBD dari puskesmas maupun perawat komunitas, informasi dari guru di sekolah mengatakan ada siswa yang dirawat karena DBD dan terlihat banyaknya jentik nyamuk di bak WC sekolah serta kaleng bekas sebagai genangan air disekitar sekolah. Apakah masalah keperawatan utama untuk kasus di atas?
 - a. Gaya hidup monoton
 - b. Defisiensi kesehatan komunitas
 - c. Ketidakefektifan koping komunitas
 - d. Perilaku kesehatan cenderung berisiko
 - e. Ketidakefektifan pemeliharaan Kesehatan**Jawaban: E

3. Di Desa X terdata penyakit TB Paru 10%, ISPA 5%, Asma 7 % dan 30% penduduk perokok, belum pernah ada kegiatan penyuluhan kesehatan tentang akibat merokok. Apakah prioritas tindakan pada kasus tersebut ?
 - a. Pemeriksaan Kesehatan secara berkala
 - b. Imunisasi BCG untuk setiap bayi
 - c. Rehabilitasi kesehatan
 - d. Promosi Kesehatan**
 - e. Perawatan di rumahJawaban: D

4. Sebuah Puskesmas yang terletak di wilayah kumuh dengan pemukiman padat penduduk, ditemukan informasi 20% balita menderita ISPA, 50% rumah penduduk yang tidak memenuhi syarat kesehatan dan 5% balita meninggal akibat ISPA. Apakah pengkajian tambahan yang tepat dilakukan untuk menentukan penatalaksanaan pada kasus tersebut?

- a. Komposisi penduduk
- b. Kondisi lingkungan**
- c. Gambaran geografis
- d. Mobilitas
- e. Jumlah penduduk

Jawaban: B

5. Ditemukan satu kasus polio di Aceh tepatnya di Kabupaten Pidie setelah dilakukan penelusuran RT-PCR. Pemerintah setempat kemudian menetapkan sebagai Kejadian Luar Biasa (KLB) Polio. Pada kasus tersebut, apa yang perlu diperhatikan pada analisa data komunitas?
- a. Keluhan yang paling banyak dirasakan
 - b. Pola/perilaku yang tidak sehat
 - c. Pemanfaatan layanan kesehatan yang kurang efektif**
 - d. Target/cakupan program kesehatan yang kurang tercapai
 - e. Lingkungan yang tidak sehat

JAWABAN: C

