

Module Description: Student Community Services

Module name	Course Module
Module level, if applicable	Bachelor of Science in Nursing (BSN)
Code, if applicable	449UU4
Subtitle, if applicable	-
Course, if applicable	Student Community Service
Semester(s) in which the module is taught	VII
Person responsible for the module	Dr. Takdir tahir, S.Kep.Ns.,M.Kes.
Lecturer	<ol style="list-style-type: none"> 1. Nuurhidayat Jafar, S.Kep.Ns.,M.Kep. 2. Tuti Seniwati, S.Kep.Ns.,M.Kes 3. Akbar Harisa, S.Kep.Ns.MN 4. Nurhaya Nurdin, S.Kep.Ns.MN.MPH. 5. Sahrul Ningrat,S.Kep.Ns.,M.Kep.Sp.Kep.MB.
Language	Indonesian Language [Bahasa Indonesia]
Relation to Curriculum	This course is a compulsory course and offered in the 7 th semester.
Type of teaching, contact hours	<p>Teaching methods used in this course are:</p> <ul style="list-style-type: none"> - Project Based Learning - Pre-post conference - Reflective study - Case Based Discussion - Problem solving approach <p>The class size for lecture is approximately 10 students Clinical fieldwork is 186.00 hours.</p>
Workload	For this course, students are required to meet a minimum of 186 hours for clinical fieldwork.
Credit points	4 credit points (7.47 ECTS)
Requirements according to the examination regulations	Students' presence must 100%
Recommended prerequisites	Students has met 130 credits
Module objectives/intended learning outcomes	<p>After completing the course and given with community service cases:</p> <p>Skill CLO1: Students will have task competencies in community service that are able to compete nationally and globally(S2)</p> <p>Competence CLO2:Able to perform therapeutic communication and give accurate information during the community service within the scope of its</p>

	<p>responsibilities through collaboration with other professionals and community groups to reduce morbidity, improve lifestyles and a healthy environment.(C2)</p> <p>Attitude</p> <p>CLO: Students will be able to show attitude with cultural sensitivity based on ethical principles and nursing legal aspects in providing community services (A1)</p> <p>CLO4: Students will be able to work professionally using the steps of the community process and its implementation using community service-based learning projects (A2)</p>
Content	<p>Students will learn about:</p> <ul style="list-style-type: none"> - how to think and work in an interdisciplinary manner, so that they can appreciate the existence of linkages and collaboration between sectors. - use of science, technology and art that they learn for the implementation of development. - Carry out development & development programs with the community that are based on local work culture. - science and technology in planning and implementing development. - plan, formulate and implement development - Evaluating program
Forms of Assessment	<ol style="list-style-type: none"> 1. DOPS (Direct Observation of Procedural Skills) 2. CIR (Critical Incidence Report) 3. Case Report 4. Portopholio
Study and examination requirements and forms of examination	<p>Study and examination requirements:</p> <ol style="list-style-type: none"> 1. Participants who have been registered are required to follow the debriefing according to a predetermined schedule. 2. Participants are required to maintain order during the debriefing. 3. The presence of participants in the debriefing will be validated by the Task Force / Supervisor. 4. Guidebooks and participant journals must be taken during debriefing. 5. Participants who do not take part in the debriefing are not eligible to take part in the next KKN activity process and are declared to have failed. 6. Participants who are unable to attend must submit verbally or in writing to the Task Force. 7. Participants of the Health Professional KKN are required to attend meetings with their respective supervisors. 8. The final assessment of debriefing will be carried out by SATGAS KKN-PK based on the assessment guidelines for Health Professional KKN 9. Participants must attend the release event to the location according to the specified schedule. 10. Participants who do not join the departure collectively must submit to the Task Force and outside the responsibility of the Task Force 11. Participants must be at the location for the specified time (8 weeks). 12. Participants are required to make organizational structures for posko, gant charts, absences, Plan of Action (POA), and Term of reference (TOR). 13. Participants carry out activities with a high sense of responsibility and dedication and live and adapt to life at the location.

	<ol style="list-style-type: none"> 14. Participants must establish good cooperation with the community, government agencies / services, and related parties. 15. Participants must wear the attributes of the Health Professional KKN and dress neatly and politely while carrying out activities at the location. 16. Participants are prohibited from leaving the location without the permission of the resident Supervisor in writing. 17. Participants who leave the location without permission will get sanctions. 18. Participants who are in the location <80% are declared as not passing. 19. Participants with special problems, permission to leave the location is only given by the Chair of the Task Force. 20. Participants must uphold the good name of the alma mater in every activity at the location, do not carry out practical political activities, immoral acts, and other activities that violate the law. 21. Participants are not permitted to make agreements both orally and in writing in the name of Unhas KKN-PK institutions in seeking binding sponsors / assistance. 22. Participants are required to record all activities related to the implementation of the Health Professional KKN program in the Daily Journal / Notes that are filled in every day and signed by the Village Head / Lurah every week and will be checked by the Supervisor / Task Force when visiting in conducting monitoring at the Health Professional KKN location <p>Form of examination: DOPS</p>
Media employed	N/A
Reading list	<ol style="list-style-type: none"> 1. 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. 2. 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. 3. 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. 4. Leddy, S.K. 2006. Health promotion mobilizing. Philadelphia: Davis Company. 5. Lucas dan Lloyd. 2005. Health promotion evidence and experience. London: SAGE Publications. 6. Notoatmojo, S. 2010. Promosi kesehatan: teori dan aplikasi. Jakarta: Rineka Cipta. 7. Ridwan, M. 2009. Promosi kesehatan dalam rangka perubahan perilaku. Jurnal Kesehatan Metro Sai Wawai, Volume 2 Nomor 2, hal 71-80. 8. Rogers. 2003. Diffusion of Innovations. Fifth Edition. Free Press, New York, p221 9. Siagian, S. 2004. Teori motivasi dan aplikasinya. Jakarta: Rineka Cipta.

	10. Kotler dan Lee. 2007. Social marketing: influencing behavior for good. London: SAGE Publication
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