

NINETEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES Second Regular Session

23 JUL 24 P1:25

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SENATE

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S. No. 2342

Introduced by Senator Jinggoy Ejercito Estrada

AN ACT ESTABLISHING A NURSING SCHOLARSHIP AND RETURN SERVICE PROGRAM FOR DESERVING STUDENTS AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

The 1987 Philippine Constitution Article II Section 15 states that it is hereby declared the policy of the State to protect and promote the right to health of the people and instill health consciousness among them. Section 16 further states that the State shall protect and advance the right of the people to a balanced and healthful ecology in accord with the rhythm and harmony of nature.

According to the World Health Organization (WHO) report on Nursing and Midwifery on 18 March 2022, there is a global shortage of health workers, in particular nurses and midwives., who represent more than 50% of the current shortage in health workers. ¹

WHO estimates that the world need an additional 9 million nurses and midwives this year 2023 for all countries to reach Sustainable Development Goals 3 on health and well-being.²

¹ https://www.who.int/news-room/fact-sheets/detail/nursing-and-midwifery

 $^{^2\} https://www.who.int/news-room/fact-sheets/detail/nursing-and-midwifery$

According to the Department of Health (DOH), it will take twelve (12) years for the Philippines to solve our shortage of nurses totaling to approximately 127,000 nurses required to be able to provide optimal healthcare.³

While data presented by the Commission on Higher Education (CHED) in March 2022 showed that there existed around 126,044 gap to meet the number of required nurses as benchmarked by the World Health Organization.⁴

Nurses play a critical role in health promotion, disease prevention and delivering primary and community care. They provide care in emergency settings which will be key to the achievement of universal health coverage. Achieving health for all will depend on there being sufficient numbers of well-trained and educated, regulated and well-supported nurses and midwives, who receive pay and recognition commensurate with the services and quality of care that they provide. ⁵

This bill intends to establish the Nursing Scholarship and Return Service (NSRS) program to deserving Filipino nursing students on the condition that they will render three (3) year mandatory return service and integration into the public health service system on top of their mandatory internship program through the DOH.

This strategy also aims to contribute to the effort in achieving and maintaining the ideal number of practicing nurses in the public health service system and augmenting our health human resources in pursuit of the ideals of the Universal Health Care Law for all Filipinos.

³ https://newsinfo.inquirer.net/1764748/doh-it-will-take-12-years-for-ph-to-solve-shortage-of-nurses-23-years-for-doctors

 $^{^{4}\} https://www.philstar.com/headlines/2023/03/30/2255659/ched-proposes-shorter-nursing-programs-address-shortage$

⁵⁵ https://www.who.int/news-room/fact-sheets/detail/nursing-and-midwifery

In this light, the immediate passage of this bill is highly recommended.

JINGGOY EJERCITO ESTRADA Senator



NINETEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES Second Regular Session

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23 JUL 24 P1:26

SENATE

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S. No. <u>2342</u>

Introduced by Senator Jinggoy Ejercito Estrada

AN ACT

ESTABLISHING A NURSING SCHOLARSHIP AND RETURN SERVICE PROGRAM FOR DESERVING STUDENTS AND APPROPRIATING FUNDS THEREFOR

1 Be it enacted by the Senate and House of Representatives of the Philippines in 2 Congress assembled:

Section 1. *Short Title.* – This Act shall be known as the "*Nars Para Sa Bayan Act".*

6 Sec. 2. *Policy Statement.* – It is hereby declared the policy of the State to 7 protect and promote the right to health of the people and instill health consciousness 8 among them. The State shall protect and advance the right of the people to a 9 balanced and healthful ecology in accord with the rhythm and harmony of nature.

10 It is further declared the policy of the State to assume the responsibility for the 11 protection and improvement of the nursing profession by instituting measures that will 12 result in relevant nursing education, humane working conditions, better career 13 prospects and a dignified existence for our nurses.

The State hereby guarantees the delivery of quality basic health services through an adequate nursing personnel system throughout the country through the formulation and implementation of policies and strategies for the appropriate generation, recruitment, retraining, regulation, retention and reassessment of the health workforce making it more attuned to the needs of the population. It is also the

declared policy of the State to promote social justice by expanding access to quality
 education and creating opportunities for underprivileged individuals.

3 Towards this end, the State shall establish a nursing scholarship and return 4 service program that will help deserving nursing students pursue nursing education 5 and training in the field of health and medicine who shall eventually render services in government public health offices or government hospitals in their hometown or in 6 7 any municipality in their home province or in underserved municipality in any province, 8 as part of their integration in to the public health service system. This shall ensure 9 the availability of nurses who will provide quality basic, promotive, preventive and curative health care services in every municipality in the country, especially the 10 11 underserved, remote, economically underdeveloped, distressed, conflict-afflicted, and 12 geographically disadvantaged areas.

13 Sec. 3. Establishment of the Nursing Scholarship and Return Service Program. 14 - There shall be established a Nursing Scholarship and Return Service (NSRS) Program 15 for deserving students in state universities and colleges (SUCs) or in partner private higher education institutions (PHEIs) in regions where there are no SUCs offering 16 17 nursing course: *Provided*, That the Commission on Higher Education (CHED) may designate more than one (1) partner higher education institutions (HEIs) in the region, 18 19 including regions where there are existing SUCs offering the Bachelor of Science in 20 Nursing program as deemed necessary, upon consultation with the Department of 21 Health (DOH).

In all cases, qualified applicants from municipalities without sufficient number of government nurses shall be prioritized in the allocation of scholarship slots to ensure the assignment of at least (1) nurse for every municipality in the country.

Sec. 4. *Coverage*. – The NSRS Program established under this Act shall be made
 available to deserving Filipino students who want to pursue a degree in Bachelor of
 Science in Nursing. The student financial assistance for the NSRS Program shall include
 the following:

- 29 a)
 - a) Free tuition and other school fees;
- 30 b) Allowance for prescribed books, supplies and equipment;
- 31 c) Clothing or uniform allowance;
- 32 d) Allowance for dormitory or boarding house accommodation;

1	e) Transportation allowance;
2	f) Internship fees, including financial assistance during mandatory internship;
3	g) Nursing board review fees;
4	h) Licensure fees;
5	i) Annual medical insurance; and,
6	j) Other education-related miscellaneous subsistence or living allowance.
7	Sec. 5. Qualification Requirements. – An applicant for the NSRS Program must
8	possess the following qualifications;
9	a) Must be Filipino citizen residing in the Philippines; and,
10	b) Must have obtained a passing grade in the entrance examination
11	recommended for prospective nursing students administered by the SUCs or
12	PHEIs where the student intends to enroll in.
13	Sec. 6. Conditions for the Grant of Scholarship. – Deserving students accepted
14	to the NSRS Program shall be subject to the following conditions:
15	a) Must sign an agreement stating the terms and conditions of the scholarship
16	on a form prescribed by the CHED and the DOH pursuant to the provisions
17	of this Act;
18	b) Must carry full load of subjects prescribed per semester by the SUC or PHEI
19	and shall not, under any circumstance drop a course which will result in
20	underloading;
21	c) Must finish the entire BS Nursing program within the prescribed time frame
22	of the SUC or the PHEI where the scholar is enrolled in, subject to the
23	retention policies of the SUC or the PHEI: Provided, That the deserving
24	student accepted to the NSRS Program, before actual enrollment in the first
25	semester as a scholar, may be allowed for valid and justifiable reasons, to
26	defer enrollment or to file a leave of absence: Provided, further, That a
27	scholar who is already enrolled, may be allowed, for valid and justifiable
28	reasons, to file a leave of absence;
29	d) Must undertake the mandatory internship in the SUC's or PHEI's base
30	hospital on the last year of the BS Nursing Program: Provided, That in the
31	event that no more slots are available in such SUC's or PHEI's base hospital,
32	the mandatory internship program must be undertaken in a DOH-accredited

- public health facility or hospital or any accredited government health facility
 or hospital, subject to compliance with the requirements of the association
 which credits such internship program;
- e) Must take the board examination within a maximum period of one (1) year
 after completion of the mandatory internship program; and,
- 6 f) Must render return of service as provided under Section 8 of this Act; 7 The scholar who fails to pass the licensure examination within one (1) year 8 after graduation and completion of the mandatory internship and other 9 academic requirements shall shoulder all the necessary expenses for the 10 succeeding professional licensure examinations;

Sec. 7. *Disqualifications*. – The scholarship grant shall terminate, and the scholar shall repay the full cost of scholarship and related benefits received, including all the expenses incurred during participation in the scholarship program in case of the following circumstances:

- 15 16
- a) If the scholar accepts another scholarship from other government or private agency or entity while enjoying the benefits under this Act;
- b) If the scholar fails to meet the academic requirements or to complete the course within the prescribed period without valid cause as may be determined by the SUC or PHEI, or the CHED or DOH through appropriate regulations, such as but not limited to, absence without notice, willful neglect or other causes within the control of the scholar;
- 22 c) If the scholar fails to obtain a passing grade in the Nursing Licensure Examination (NLE) within five (5) years from the time the scholar has 23 completed the mandatory internship program: Provided, That instead of 24 repaying the full cost of the scholarship and related expenses, the scholar 25 26 whose scholarship has been terminated under Section 7B or 7C of this Act may opt to engage in work within the public health service system, such as 27 engaging in health-related research work for the government or teaching 28 29 health-related subjects in a public educational institution, or being integrated 30 into the public health service system for a period prorated to the number of 31 years of mandatory return service provided under this Act: *Provided, further*, That the alternative return service shall exclude the period of mandatory 32

internship and residency training that is undertaken in a private health
 institution or facility; and,

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d) While being a scholar, the scholar commits gross misconduct in a manner that would bring significant damage to the SUC or PHEI concerned or to the community as a whole.

6 Sec. 8. Mandatory Return Service and Integration of the Scholar into the Public 7 Health Service System. – Upon passing the NLE administered by the Professional 8 Regulation Commission (PRC) and conferment by the PRC of the license to practice 9 nursing, the scholar shall be integrated into the public health service system through 10 the DOH and shall receive the appropriate civil service rank, salary and related 11 benefits. The scholar shall serve in a government public health office, government 12 hospital or any accredited government health facility in the scholar's hometown or, in 13 the absence of a need thereat, in any municipality within the scholar's home province, 14 or in any underserved municipality closest to the scholar's hometown determined by the DOH as a priority area, for at least one (1) year for every scholarship year availed 15 of: *Provided*, That scholars from municipalities with no government nurses shall render 16 17 the return service work in the scholar's hometown: Provided, further, That the scholar 18 who assumed the slot intended for a resident of another municipality, no resident of 19 which qualified to be a scholar under this Act, shall render the return to service work 20 in the same municipality where the slot was originally intended: *Provided, finally*, That 21 in all cases, the scholar shall only be required to serve in such municipality if no threat 22 to the scholar's life is present.

23 The scholar shall render the mandatory return to service within three (3) years 24 from the time of passing the NLE: *Provided, however*, That in times of pandemic or public health emergency, the DOH may require the scholars to serve in any public 25 26 health office or a government hospital where their services may be needed: *Provided*, *further*, That the mandatory return service and integration into the public health 27 service system under this Act shall be separate and distinct from the mandatory 28 29 internship required prior to taking the licensure examination for nurses: *Provided*, 30 *furthermore*, That the number of years served by the scholar in the public health 31 service system as part of the return service requirements if any, of the SUC or PHEI concerned, or health or medical research within the Philippines in a public institution 32

or any international organization accredited by the DOH for work for the underprivileged areas within the Philippines, or full-time teaching in a public institution shall be counted in the required number of years of return service under this Act: *Provided, finally*, That the nurses shall receive appropriate salaries and other benefits for service rendered under the mandatory integration into the public health service system.

Sec. 9. *Sanctions.* – A nurse who has availed of the NSRS Program but fails or refuses to comply with the mandatory return service and integration provided under the Act shall be required to pay two (2) times the full cost of scholarship, including other benefits and expenses incurred by reason of participation in the NSRS Program.

In case of non-payment, as provided in the preceding paragraph, the PRC shall deny the renewal of the license: *Provided*, That the above-mentioned penalties shall not apply to nurses who fail to comply with the required return service on account, or by reason of, severe or serious illness.

Sec. 10. *Harmonization of all Nationally-Funded Nursing Scholarship Programs*. – Upon the effectivity of this Act, all nationally-funded nursing scholarship programs shall be harmonized rationalized and consolidated under the NSRS Program. The harmonization, rationalization and consolidation of scholarship programs under the NSRS Program shall be in coordination with the UNIFAST Board created under RA 10687 or the Unified Student Financial Assistance System for Tertiary Education (UniFAST) Act.

22 Sec. 11. *Training While Serving the Mandatory Return Service*. – The CHED and 23 DOH shall develop programs for the continuous training of scholars while serving the 24 mandatory return service under this Act.

Sec. 12. Nursing Schools and Plantilla Positions. - In order to have a holistic 25 26 solution and address the scarcity of nurses in the country, the CHED, in coordination 27 with the DOH, shall ensure that each region shall have at least one (1) nursing school. 28 For this purpose, the CHED shall also streamline the requirements for the application for authority to offer BSN. The CHED and DOH shall also issue the appropriate 29 guidelines within sixty (60) days from the effectivity of this Act to facilitate the 30 31 partnership between SUCs and DOH hospitals with a view of increasing the number of 32 nursing schools throughout the country with one (1) region having at least one (1)

state-operated nursing school: *Provided*, That within three (3) years from the effectivity of this Act, there shall be a state-operated nursing school in at least half of the regions with no existing state-operated nursing school: *Provided, further*, That within five (5) years form the effectivity of this Act, there shall be at least one (1) state-operated nursing school in each region in the country.

In addition the Department of Budget and Management (DBM), DOH and local government units (LGUs) where applicable, shall ensure that all scholars required to render return service under this Act shall be appointed to appropriate plantilla positions commensurate to their merit and fitness;

Sec. 13. *Role of the CHED*. – The CHED shall perform the following functions in
the implementation of the NSRS program;

- a) Conduct regular information dissemination of, and recruitment to the NSRS
 program in SUCs and PHEIs to ensure that there will be an adequate number
 of nurses in all the municipalities and provinces;
- b) Review modify and enhance the nursing education curriculum standards to
 prepare graduates to work in community-based health grams in to ensure
 that nurses that nursing programs remain up-to-date and of comparable
 quality to nursing education in other countries;
- c) Together with the DOH, develop programs for the continuous training of
 scholars while serving the mandatory return service under this Act;
- d) Coordinate with the DOH, SUCs and PHEIs for the integration of the nursing
 scholar into the public health service system;
- e) Formulate, promulgate, disseminate and implement the necessary policies,
 standards, guidelines and rules and regulations for the effective
 implementation of the NSRS program under this act;
- f) Develop strategies to improve the quality of the nursing program and
 implement a system of quality control for the offering of BS Nursing Program
 in SUCs and PHEIs;
- g) Require SUCs and PHEIs to implement and submit a tracking, monitoring,
 evaluation and assistance system in order to determine the whereabouts of
 the nursing scholars after graduation from SUCs and PHEIs;

1 h) Ensure the timely and adequate release to partner SUCs and PHEIs of the 2 funds necessary for the implementation of the NSRS program and monitor 3 the timely and adequate release of the same by the partner-SUCs and PHEIs 4 to the scholar-beneficiaries under the NSRS program; and, 5 i) Recommend in coordination with partner SUCs and PHEIs to the DBM the amount necessary for the effective implementation of this Act. 6 7 Sec. 14. Role of the SUCs and PHEIs. - The SUC and PHEIs shall perform the following functions in the implementation of the NSRS Program: 8 9 a) Monitor the progress of all scholars in their respective educational institutions, identify those who have low or failing grades and counsel them 10 11 to improve their academic performance; b) Coordinate with the CHED to ensure the timely release and accurate 12 13 distribution of allowances and other fees to the scholars; 14 c) Make an annual report to the CHED on the performance of nursing scholars and other necessary or vital information regarding the NSRS program; 15 d) Assist the CHED in the conduct of regular information dissemination on and 16 17 recruitment to the NSRS program; 18 e) Review, modify and enhance the nursing education curriculum to prepare 19 the scholars to work in community- based health programs to ensure that 20 nursing education programs remain up to date with recent medical 21 developments; f) Recommend strategies to CHED and DOH to improve nation the 22 23 implementation of the NSRS program; g) Conduct a tracer study on the whereabouts of their respective nursing 24 scholars after graduation from their institution and submit the results 25 thereof to the CHED: 26 h) Recommend to the CHED and the DBM the budget necessary to implement 27 the NSRS program in their respective institutions, based on their projected 28 capacity and evaluation of the adequacy of the funding under the Program; 29 30 and, i) Perform such other functions as may be deemed necessary for the success 31 of the NSRS program. 32

1	Se	c. 15. Role of the DOH. – The DOH shall perform the following functions in	
2	the implementation of the NSRS program:		
3	a)	In coordination with the CHED, SUCs, and PHEIs, determine the initial	
4		number and distribution of nurses needed for each municipality or province	
5		which determination shall be made every five (5) years from the effectivity	
6		of this Act;	
7	b)	Ensure that all regions in the country have at least one level one (1) Level	
8		III DOH hospital to ensure the availability of a possible partner or base	
9		hospital of nursing schools;	
10	c)	Ensure the integration of scholars into the public health service system and	
11		monitor their performance during the mandatory return service period;	
12	d)	Assist the CHED in the conduct of the regular information dissemination on	
13		the NSRS Program and in the recruitment of scholar-applicants;	
14	e)	Craft a career pathway for nurses who are beneficiaries of the NSRS	
15		program in the public health service system to incentivize scholar-nurses to	
16		continue serving therein;	
17	f)	Coordinate with the LGUs for the mandatory integration of scholar-nurses	
18		into the public health services system; and,	
19	g)	Recommend to the DBM the creation of plantilla positions for scholar-nurses	
20		with salary grades commensurate to their educational achievement, training	
21		and other qualifications.	
22	Se	c. 16. Role of LGUs. – LGUs are mandated to support the integration of the	
23	scholar ir	to the public health service system by performing the following functions:	
24	a)	Create a mechanism or system to provide the necessary support including	
25		support to ensure their safety and protection, for the integration of nurses	
26		who will be assigned to the LGU;	
27	b)	Coordinate with the DOH and the nurses to determine the specific health	
28		needs or requirements of the community and provide the necessary	
29		assistance, including involvement in the research component of the nursing	
30		service system;	

- 1 c) As far as practicable and subject to availability of funds, maintain a regular 2 counterpart fund to be used for providing the balance of the scholarship 3 budget for scholars enrolled in SUCs or PHEIs;
- 4 d) Provide other forms of financial assistance, subject to availability of funds, to support the integration program of nurses in the LGUs;

- e) Recommend to the CHED any strategies to improve the implementation of 6 7 the NSRS program;
- 8 f) In Coordination with the CHED, SUC or PHEI concerned, conduct an 9 information dissemination campaign on the NSRS program within the municipality or province with the objective of attracting gualified applicants 10 to the said program; 11
- 12 q) Execute and enforce laws, ordinances and regulations which may, directly 13 or indirectly, have a positive impact on the NSRS program; and,
- 14 h) Perform all other acts to assist the scholar to ensure that the scholar finishes the Bachelor of Science in Nursing Program within the time frame provided 15 16 by the nursing school or the CHED.
- 17 Sec. 17. *Funding.* – The amount necessary to carry out the implementation of this act shall be charged against the current years appropriation of the participating 18 19 SUC, DOH and CHED.
- Thereafter, the amount necessary for the continuous implementation of the 20 nursing scholarship provided under this act shall be included in the scholarship 21 22 program of SUCs and CHED in the annual General Appropriations Act.
- 23 Sec. 18. *Transitory Provisions*. – Upon the effectivity of this Act, current scholars under the existing nursing scholarship programs of the DOH and CHED shall 24 25 automatically be eligible to avail the benefits under this Act.
- Sec. 19. Joint Congressional Oversight Committee on NSRS Program. There 26 27 is hereby created a Joint Congressional Oversight Committee to oversee, monitor and 28 evaluate the implementation of this Act.
- 29 The Oversight Committee shall be composed of five (5) members each from the Senate and from the House of Representatives, and shall include the following: 30
- a) Chairperson of the Senate Committee on Higher, Technical and Vocational 31 32 Education;

- b) Chairperson of the House Committee on Higher and Technical Education;
- 2 c) Chairpers

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- c) Chairperson of the Senate Committee on Health and Demography;
- d) Chairperson of the House Committee on Health; and,
- e) Three (3) members each to be chosen from the membership of the Senate
 Committee on Higher, Technical and Vocational Education and the House
 Committee on Higher Technical and Vocational Education, and the House
 Committee on Higher and Technical Education by the Senate President the
 House Speaker respectively: *Provided*, That at least one (1) member from
 the respective nominees of the House of Representatives and the Senate
 shall be chosen from the minority party.

11 Sec. 20. Determination of Number and Allocation of Scholars to be Admitted.-12 Every five (5) years from the effectivity of this Act, the DOH and CHED shall, upon assessing the shortage of health human resource workforce in the country against the 13 14 ideal standards and the National Health Human Resource Masterplan created under 15 Section 23 of Republic Act 11223 or the "Universal Health Care Act", and the upon 16 consultation with participating SUCs and PHEIs, the DBM and the PRC, determine the 17 number and geographical location of scholars to be admitted every school year 18 allocating at least one (1) scholarship slot in municipalities without government 19 nurses: *Provided*, That in determining the allocation quota of the scholars to be 20 admitted to the Program, utmost priority is given to regions with low nurses-to-21 population ratios: *Provided, further*, That in order to ensure an adequate number of 22 competent human resource for health for the entire country the DOH shall submit to 23 Congress the National Health Human Resource Master Plan, and any updates thereto 24 in accordance with the Universal Health Care Law.

25 Sec. 21. Implementing Rules and Regulations. - Within one hundred and twenty (120) days from the effectivity of this Act, the CHED and the DOH shall, in a 26 coordination with the Philippine Association of State Universities and Colleges, 27 28 Coordinating Council of Private Educational Associations, League of Municipalities, Association of Municipal Health Officers, Non-Government Community-Based Health 29 Programs, PRC, DBM, SUCs, PHEIs, associations of nursing schools and nursing 30 students and other relevant stakeholders, formulate and issue the rules and 31 regulations to fully implement the provisions of this Act: Provided, That the absence 32

of the implementing rules and regulations shall not affect the effectivity of this Actand the grant of benefits provided herein.

Sec. 22. *Separability Clause.* – If any provision or part hereof is held invalid or
 unconstitutional, the remainder of the law or the provision or part not otherwise
 affected shall remain valid and subsisting.

6 Sec. 23. *Repealing Clause.* – All laws, presidential decrees or issuances, 7 executive orders, letters of instruction, administrative orders, rules and regulations 8 contrary to or inconsistent with the provisions of this Act are hereby repealed, 9 modified, or amended accordingly.

Sec. 24. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication in the *Official Gazette* or in at least two (2) newspaper of general circulation.

Approved,