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SENATE

S. No. 622

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Introduced by Senator Ralph G. Recto

Explanatory Note

Nursing is one of the top career choices of Filipinos as illustrated by the enrolment in 2000 at 30,000 and 450,000 in 2007 as reported by the Commission on Higher Education.¹ From just 40 schools offering nursing courses in 1970, the country now has 481 schools offering nursing courses. In the 1990s, there were 170 schools; in June 2003: 251; in April 2004: 370; in June 2005: 441; and in June 2006: 470 schools.² The rising enrolment mirrors the rising demand for the services of professional nurses in the Philippines and in other countries. By 2011, the CHED had noted with alarm that "there is a massive surplus of nursing graduates numbering approximately 280,000, most of whom are currently unemployed /underemployed."³

Despite the large pool of nursing graduates, many nursing positions in public and private health facilities in the country remain unfilled due to many factors, not least of which are the low compensation and generally poorer working environment in the country. For one, there is a wide disparity between earnings in local nursing positions against foreign employment. The Occupational Wages Survey undertaken by the Bureau of Labor and Employment Statistics in 2010 showed average monthly salaries of nurses in the country at P10,905.⁴ This amount is about ten times more than what they can earn abroad. The ideal nurse to patient ratio of 1:4 per shift has yet to be realized in our country. The Philippine General Hospital has a nurse to patient ratio of 1:15-26 per shift while Davao del Sur has a province-wide ratio of 1:44-45 per shift.⁵

The large pool of nursing graduates also spawned an abusive practice wherein hospitals collect so-called "training fees" from nursing graduates forced to "volunteer" their services in hospitals supposedly to gain "experience" required for employment, here or abroad.⁶

Filipino nurses including doctors turned nurses continue to migrate in droves making the Philippines one of the top source country of nurses. The Philippine Overseas Employment Administration (POEA) reported that in 2007, nurse deployment at 12,263 was already double that of 6,410 nurse deployment in 2000. Deployments continued to grow in 2009, at 13,004; in 2010, at 12,082; in 2011: 17,236; and in 2012: 15,655 nurses. Top ten destination countries in

¹ <http://www.ched.gov.ph/chedwww/index.php/eng/Information/Statistics>

² <http://www.doh.gov.ph/sites/default/files/Vol.%20%20Issue%20%20August%202008.pdf>

³ CHED Memorandum Order No. 18, s. 2011

⁴ Bureau of Labor and Employment Statistics. Occupational Wages Survey 2010.

⁵ Dept. of Health. Health Facilities and Government Health Manpower. 1999-2009.

⁶ Department of Health. Memorandum No. 2011-0238, August 22, 2011

2010 were as follows: Saudi Arabia, 8,513; Singapore, 722; United Arab Emirates, 473; Libya, 417; Kuwait, 409; United Kingdom, 350; Qatar, 294; Taiwan, 186; Oman, 92; and Bahrain, 91.⁷

With more doctors joining the nursing diaspora, the nursing profession had to contend with an expected tapering off of demand for nurses on the heels of rising demand for Filipino doctors. The problem was aggravated when some individuals and institutions in the nursing education sector were embroiled in the 2006 licensure examination controversy. The negative effect on Filipino nurses and nursing graduates caused the international employers to take a hard second look and impose stringent requirements.

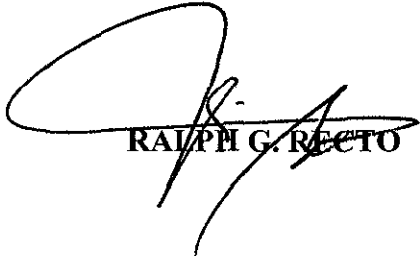
Similarly, the CHED was forced to target the improvement of the quality of nursing education nationwide. It observed declining passing rates: 1970s to 80s: 80-90%; in 1991: below 81%; 2001 to 2003: 44-48%; in 2004: 55.9%; in 2005: 40.7%; and, in 2006: 42.42%. In 2010, the low passing rate in July of 41.4% further declined in December to 35.26 % with 29,711 passers out of 84,287 examinees.⁸ Earlier in May 2010, the CHED recommended the closure of 147 schools for dismal performance in five successive years. Thereafter, the CHED issued a moratorium on nursing enrolments to stem the oversupply of nursing graduates now at 280,000, most of whom are presently unemployed or underemployed.⁹

Since the enactment of RA 9173 almost a decade ago, these significant events critical to the development of nursing practice in the country have emerged. The Philippine Nursing Act of 2002 must remain responsive to the Filipinos' need for nursing care and to the demand of new destination-countries.

It is therefore imperative that reforms to further develop the nursing profession, increase protection for nursing professionals and raise the standard of nursing education be adopted by amending the Philippine Nursing Act of 2002 or Republic Act No. 9173. This Bill proposes to restructure the scope and practice of nursing by including specific mandates on certification, specialization and educational requirements of nursing graduates; to expand the powers of the Board of Nursing by strengthening its role in decision-making processes; to strengthen the nursing professionals including the faculty and administration of nursing schools; to upgrade the standards in nursing education, practice and guidelines for nursing career progression; and, to provide a better environment for nursing practice.

The Bill is envisioned to enhance the protection and welfare of Filipino nurses to make them responsive to the needs of their patients and the public and private health systems.

In view of the foregoing, approval of this Bill is earnestly sought.



RALPH G. RECTO

⁷<http://www.poea.gov.ph/stats/2010%20Deployment%20by%20Occupation,%20Destination%20and%20Sex%20010%20-%20New%20hires.pdf>

⁸ <http://www.scribd.com/doc/122928870/Performance-of-Schools>

⁹ <http://www.scribd.com/doc/64698492/64666926-DOH-Termination-of-Nurse-Volunteer-Programs#download>

1 The State hereby guarantees the delivery of quality basic health services
2 through an adequate nursing personnel system throughout the country.”

3 SEC. 3. Section 28, Article VI of the same Act is hereby amended and renumbered as
4 Section 3 under Article III and succeeding Sections are hereby renumbered accordingly, to read
5 as follows:

6 “ARTICLE [VI] III

7 SCOPE OF Nursing Practice

8 SEC. [28] 3. *Scope of Nursing PRACTICE.* – A person shall be deemed to be
9 practicing nursing within the meaning of this Act when he/she singly or in collaboration
10 with another, initiates and performs nursing [services] CARE to individuals, families,
11 POPULATION GROUPS and communities in any health care setting. It includes, but
12 not limited to, nursing care during conception, labor, delivery, infancy, childhood,
13 toddler, preschool, school age, adolescence, adulthood and old age. [As independent
14 practitioners,] Nurses are primarily responsible for the promotion of health and
15 prevention of illness. As members of the health team, nurses shall collaborate with other
16 health care providers for the PROMOTIVE, PREVENTIVE, curative, [preventive] and
17 rehabilitative aspects of care, restoration of health, alleviation of suffering, and when
18 recovery is not possible, towards a peaceful death. IN PERFORMING INDEPENDENT
19 AND COLLABORATIVE FUNCTIONS SINGLY OR JOINTLY, it shall be the duty of
20 the nurse to:

21 a) Provide nursing care through the utilization of the nursing process.

22 BASIC nursing care includes, but not limited to, traditional and innovative
23 approaches, therapeutic use of self, executing health care techniques and
24 procedures, essential primary health care, comfort measures, health teachings, and
25 administration of written prescription for treatment, therapies, oral, topical and
26 parenteral medications, internal examination during labor in the absence of
27 antenatal bleeding and delivery[. In case of] AND suturing of perineal laceration
28 [special training shall be provided according to protocol established].

1 B) PROVIDE ADVANCED NURSING CARE THROUGH
2 EXPANDED AND SPECIALIZED ROLES WITHIN THE PROTOCOL OF
3 ADVANCED NURSING PRACTICE. CERTIFICATION BY AN
4 ACCREDITED CERTIFICATION BODY IS REQUIRED.

5 [b] C) [Establish linkages] COLLABORATE with community resources
6 and [coordination] COORDINATE with THE MEMBERS OF the health
7 team IN ANY HEALTH CARE SETTING;

8 [c] D) Provide health education to AND COLLABORATE WITH
9 individuals, families, POPULATION GROUPS and communities TO
10 MAINTAIN, ATTAIN, RESTORE AND SUSTAIN OPTIMAL
11 HEALTH AND QUALITY OF LIFE;

12 [d] E) "XXX; and

13 [e] F) Undertake nursing and health human resource development
14 training and research, which shall include, but not limited to, the
15 development of advanced nursing practice:

16 *Provided,* That this section shall not apply to nursing students who
17 perform nursing functions under the direct supervision of a qualified faculty:

18 *Provided, further,* That in the practice of nursing in all settings, the nurse is [duty-
19 bound] MANDATED to observe the Code of Ethics for Nurses and uphold the
20 standards of safe AND QUALITY nursing practice. The nurse is required to
21 maintain competence by continual [learning through continuing] professional
22 education to be provided] DEVELOPMENT AS PRESCRIBED by the
23 [accredited professional organization or any recognized professional] BOARD OF
24 Nursing [organization]: *Provided, finally,* That the program and activity for the
25 [continuing] CONTINUAL PROFESSIONAL [education] DEVELOPMENT
26 shall be submitted to and approved by the Board."

27 **SEC. 4.** Article III of the same Act is hereby amended to read as follows:

28 "ARTICLE [III] IV

29 Organization of the Board of Nursing

1 “SEC. [3] 4. *Creation and Composition of the Board.* – There shall be
2 created a Professional Regulatory Board of Nursing, hereinafter referred to as the
3 Board, to be composed of a chairperson and six (6) members. They shall be
4 appointed by the President of the Republic of the Philippines from among two (2)
5 recommendees, per vacancy, of the Professional Regulation Commission,
6 hereinafter referred to as the Commission, chosen and ranked from a list of three
7 (3) nominees, per vacancy, of the accredited professional organization of nurses
8 in the Philippines who possess the qualifications prescribed in SEC. [4] 5 of this
9 Act.

10 “SEC. [4] 5. *Qualifications of the Chairperson and Members of the Board.*
11 – The Chairperson and Members of the Board shall, at the time of their
12 appointment, possess the following qualifications:

13 (a) Be a natural born citizen and resident of the Philippines FOR THE
14 LAST THREE YEARS;

15 (b) XXX;

16 (c) Be a registered nurse IN THE PHILIPPINES, and holder of a
17 CURRENT VALID PRC ID; [and holder of a master’s degree in
18 nursing, education or other allied medical profession conferred by a
19 college or university duly recognized by the government:

20 *Provided,* That the majority of the members of the Board shall be
21 holders of a master's degree in nursing: *Provided, further,* That the
22 Chairperson shall be a holder of a master's degree in nursing;]

23 (D) BE A HOLDER OF A MASTER’S DEGREE IN NURSING AND
24 OTHER RELATED HEALTH SCIENCE PROGRAMS CONFERRED
25 BY AN ACCREDITED UNIVERSITY;

26 [d] (E) Have at least ten (10) years of continuous practice of the NURSING
27 profession prior to appointment.

1 [e] (F) [Not have been convicted of any offense involving moral turpitude]

2 MUST BE OF PROVEN HONESTY AND INTEGRITY:

3 *Provided*, That the membership to the Board shall represent the three (3)
4 areas of nursing, namely: nursing education, nursing service and community
5 health nursing.

6 “SEC. [5] 6. *Requirements Upon Qualification as Member of the Board of*
7 *Nursing.* – XXX.

8 “SEC. [6] 7. *Term of Office.* – XXX.

9 “SEC. [7] 8. *Compensation of the Board Members.* – XXX.

10 “SEC. [8] 9. *Administrative Supervision of the Board, Custodian of its*
11 *Records, Secretariat and Support Services.* – XXX.

12 “SEC. [9] 10. *Powers and Duties of the Board.* – XXX:

13 a) ENSURE THE PROPER conduct OF the PHILIPPINE NURSE
14 Licensure Examination [for nurses] (PNLE) CONSIDERING THE
15 PROCESS AND SYSTEMS OF THE COMMISSION, WHICH
16 INCLUDE BUT NOT LIMITED TO APPLICATION, TEST
17 DEVELOPMENT, EXAMINATION, CORRECTION AND
18 RELEASE OF RESULTS. THE USE OF APPROPRIATE
19 TECHNOLOGY/MODALITIES DURING THE CONDUCT OF THE
20 PNLE IS ENCOURAGED TO ENHANCE EFFICIENCY WHILE
21 UPHOLDING INTEGRITY;

22 b) Issue, suspend, [or] revoke OR REISSUE certificates of registration for
23 the practice of nursing AND ENSURE WIDEST PUBLICATION
24 THRU ELECTRONIC AND WRITTEN MEDIA;

25 c) [Monitor] ENFORCE and MONITOR SAFE AND quality standards of
26 nursing practice in the Philippines and exercise the powers necessary to
27 ensure the maintenance of efficient, [ethical] ETHICO-MORAL, [and]
28 technical, [moral] AND professional standards in the practice of

1 nursing [taking into account the] TOWARDS OPTIMAL health
2 [needs] AND THE COMMON GOOD of the nation;

3 d) Ensure quality nursing education by examining [the prescribed facilities
4 of universities or colleges of nursing or departments of] AND
5 MONITORING HIGHER EDUCATION INSTITUTIONS (HEI)
6 OFFERING nursing [education] PROGRAM and those seeking
7 permission to open nursing courses to ensure that standards of nursing
8 education are properly complied with and maintained at all times. The
9 authority to open and close [colleges of nursing and/or] nursing
10 education programs OFFERED BY HEI, shall be vested on the
11 Commission on Higher Education, ONLY upon the written AND
12 FAVORABLE recommendation of the Board;

13 e) XXX;

14 f) Promulgate a Code of Ethics THAT IS RESPONSIVE TO THE
15 NEEDS OF THE NURSING PROFESSION, in coordination and
16 consultation with the accredited professional organization of nurses
17 within one (1) year from the effectivity of this Act;

18 g) [Recognize nursing specialty organizations in coordination with the
19 accredited professional organization] INSTITUTE A NATIONAL
20 NURSING CAREER PROGRESSION PROGRAM (NNCPP) FOR
21 THE CONTINUING PROFESSIONAL DEVELOPMENT OF
22 FILIPINO NURSES;

23 H) CREATE A COUNCIL FOR NURSING RECOGNITION,
24 ACCREDITATION AND CERTIFICATION THAT WILL ASSIST
25 THE BOARD OF NURSING IN:

- 26 1) RECOGNIZING ORGANIZED NURSING GROUPS;
- 27 2) SETTING STANDARDS FOR ADVANCED NURSING
- 28 PRACTICE, EDUCATION, RESEARCH AND MANAGEMENT;

1 3) ACCREDITING SPECIALTY PROGRAMS AND ADVANCED
2 NURSING PROGRAMS BASED ON ESTABLISHED
3 MECHANISMS;

4 4) CREDENTIALING INDIVIDUAL REGISTERED NURSES
5 BASED ON ACCEPTED CRITERIA;

6 5) MONITORING AND EVALUATION OF ADVANCED
7 NURSING PRACTICE, EDUCATION, RESEARCH AND
8 MANAGEMENT TO ENSURE SAFETY AND QUALITY OF
9 NURSING PRACTICE IN THE PHILIPPINES;

10 I) MAKE DECISIONS TO INFLUENCE AUTHORITIES/AGENCIES
11 ON MATTERS THAT DIRECTLY AFFECT NURSES' WELFARE;

12 J) ENSURE PERFORMANCE OF MANDATED DUTIES AND
13 FUNCTIONS WITH THE PROVISION OF OPERATIONAL
14 RESOURCES INCLUDING HUMAN RESOURCE, PHYSICAL
15 SPACE AND BUDGET TO ENSURE THE CONFIDENTIALITY
16 AND SANCTITY OF THEIR FUNCTIONS AS PROVIDED
17 THROUGH THE ANNUAL BUDGET OF THE PROFESSIONAL
18 REGULATION COMMISSION AS PROMULGATED IN THE
19 GENERAL APPROPRIATIONS ACT; and

20 [h] K) XXX.

21 "SEC. [10] 11. *Annual Report.* - XXX.

22 "SEC. [11] 12. *Removal or Suspension of Board Members.* - XXX."

23 **SEC. 5.** Article IV of the same Act is hereby amended to read as follows:

24 "ARTICLE [IV] V

25 *Examination and Registration*

26 "SEC. [12] 13. PHILIPPINE NURSE Licensure Examination. - All
27 applicants for license to practice nursing shall be required to pass a written
28 examination, which shall be given by the Board in such places and dates as may be
29 designated by the Commission: *Provided*, That it shall be in accordance with

1 Republic Act No. 8981, otherwise known as the "PRC Modernization Act of
2 2000."

3 "SEC. [13] 14. *Qualifications for Admission to the PHILIPPINE NURSE*
4 *Licensure Examination.* – In order to be admitted to the examination for nurses, an
5 applicant [must], [at] FROM the time of [filing] his/her GRADUATION MUST
6 FILE IMMEDIATELY HIS/HER APPLICATION[,] AND establish to the
7 satisfaction of the Board that:

8 "a) XXX;

9 "b) "XXX;

10 "c) He/she is a holder of a Bachelor['s Degree in] OF SCIENCE IN
11 NURSING DEGREE from a college or university that complies with
12 the standards of nursing education duly recognized by the proper
13 government agency."

14 "SEC. [14] 15. *Scope of Examination.* – The scope of the examination for
15 the practice of nursing in the Philippines shall be determined by the Board [. The
16 Board shall take] OF NURSING TAKING into consideration the CORE
17 COMPETENCIES REQUIRED OF BEGINNING NURSE PRACTITIONERS
18 CONSIDERING THE objectives of the nursing curriculum[, the broad areas of
19 nursing, and other related disciplines and competencies in determining the subjects
20 of examinations] IN RESPONSE TO THE NEEDS OF THE SOCIETY AND THE
21 DEMANDS OF INDUSTRY.

22 THE PHILIPPINE NURSE LICENSURE EXAMINATION SHALL BE
23 BASED ON A COMPETENCY-BASED TEST FRAMEWORK."

24 "SEC. [15] 16. *Ratings.* – In order to pass the examination, an examinee
25 must obtain a general average of at least seventy-five percent (75%) with a rating
26 of not below [sixty percent (60%)] SEVENTY PERCENT (70%) in any subject.
27 An examinee who obtains an average rating of seventy-five percent (75%) or
28 higher but gets a rating below [sixty percent (60%)] SEVENTY PERCENT (70%)
29 in any subject must take the examination again but only in the subject or subjects

1 where he/she is rated below [sixty percent (60%)] SEVENTY PERCENT (70%).
2 In order to pass the succeeding examination, an examinee must obtain a rating of
3 at least seventy-five percent (75%) in the subject or subjects repeated. AN
4 EXAMINEE SHALL BE GIVEN A CHANCE TO REPEAT THE PNLE WITH
5 A MAXIMUM OF THREE (3) EXAMINATIONS.”

6 “SEC. [16] 17. *Oath.* – “XXX.

7 “SEC. [17] 18. *Issuance of Certificate of Registration/Professional License*
8 *and Professional Identification Card.* A certificate of registration/professional
9 license as a nurse shall be issued to an applicant who passes the examination upon
10 payment of the prescribed fees. Every certificate of registration/professional
11 license shall show the full name of the registrant, the serial number, the signature
12 of the Chairperson of the Commission and of the Members of the Board[.]. THE
13 CERTIFICATE SHALL BEAR THE LOGO OF THE BOARD OF NURSING
14 and the official seal of the Commission.

15 “A professional identification card, duly signed by the Chairperson of the
16 Commission, bearing the date of registration, license number, and the date of
17 issuance and expiration thereof shall likewise be issued to every registrant upon
18 payment of the required fees.”

19 “SEC. [18] 19. *Fees for Examination and Registration.* - Applicants for
20 licensure and for registration shall pay the prescribed fees set by THE
21 Commission.”

22 “SEC. [19] 20. *Automatic Registration of Nurses.* -All nurses whose names
23 appear at the roster of nurses shall [be automatically or] *ipso facto* BE registered
24 as nurses AND AS MEMBERS OF THE PRC ACCREDITED PROFESSIONAL
25 ORGANIZATION (APO) [under this Act] UPON [its] THE effectivity OF THIS
26 ACT.”

27 “SEC. [20] 21. *Registration by Reciprocity.* – XXX.”

28 “SEC. [21] 22. *Practice Through Special/Temporary Permit.* -A
29 special/temporary permit may be issued [by the Board] to the following persons

1 [subject to the approval of] BASED ON QUALIFICATION STANDARDS AS
2 DETERMINED BY THE BOARD OF NURSING AND APPROVED BY the
3 Commission [and upon payment of the prescribed fees]:

4 “(a) XXX;

5 “(b) Licensed nurses from foreign countries/states on medical mission
6 whose services shall be free in a particular hospital, center or clinic;
7 [and]

8 “(c) Licensed nurses from foreign countries/states [employed] ENGAGED
9 by schools/colleges of nursing as exchange professors in a branch or
10 specialty of nursing; AND IN EMERGENCY SITUATIONS OF
11 GROSS DISASTERS AND CALAMITIES:

12 “*Provided, however,* That the special/temporary permit shall be effective
13 only for the duration of the project, medical mission or [employment]
14 ENGAGEMENT contract.”

15 “SEC. [22] 23. *Non-registration and Non-issuance of Certificates of*
16 *Registration/Professional License or Special/Temporary Permit. – XXX.”*

17 “SEC. [23] 24. *Revocation and suspension of Certificate of*
18 *Registration/Professional License and Cancellation of Special/Temporary Permit.*
19 *– XXX. “*

20 “SEC. [24] 25. *Re-issuance of Revoked Certificates and Replacement of*
21 *Lost Certificates. – XXX.”*

22 **SEC. 6.** Articles V and VI of the same Act are hereby amended to read as
23 follows:

24 “ARTICLE [V] VI

25 Nursing Education

26 “SEC. [25] 26. *Nursing Education [Program]. – NURSING EDUCATION IS*
27 *THE FORMAL LEARNING AND TRAINING IN THE SCIENCE AND ART OF*
28 *NURSING PROVIDED BY HIGHER EDUCATION INSTITUTIONS DULY*
29 *ACCREDITED BY THE CHED.*

1 (A) *BASIC NURSING EDUCATION PROGRAM.* – The BASIC nursing education
2 program [shall] IS A COMPETENCY-BASED CURRICULUM WHICH
3 WILL provide sound general and professional foundation for [the practice of]
4 nursing SERVICE TO BE ABLE TO IMPLEMENT THE NECESSARY
5 SAFE QUALITY NURSING PRACTICE. ADMISSION TO THE
6 BACCALAUREATE NURSING PROGRAM SHALL REQUIRE PASSING
7 A NATIONAL NURSING ADMISSION TEST (NNAT).

8 The learning experiences shall adhere strictly to specific requirements
9 embodied in the prescribed curriculum as promulgated by the Commission on
10 Higher Education's policies and standards of nursing education.

11 (B) *GRADUATE NURSING EDUCATION PROGRAM.* – THE GRADUATE
12 NURSING EDUCATION PROGRAM BUILDS ON THE EXPERIENCES
13 AND SKILLS OF A REGISTERED NURSE TOWARDS MASTERY,
14 EXPERTISE AND LEADERSHIP IN PRACTICE, RESEARCH AND
15 EDUCATION. IT INCLUDES A MASTER'S DEGREE AND
16 DOCTORATE DEGREE IN NURSING FOUNDED ON SCIENTIFIC
17 BODY OF KNOWLEDGE AND PRACTICE.

18 GRADUATE AND POST-GRADUATE NURSING PROGRAMS
19 SHALL BE OFFERED ONLY BY LEVEL THREE (3) ACCREDITED
20 HIGHER EDUCATION INSTITUTIONS BASED ON RELEVANT CHED
21 POLICIES AND GUIDELINES.

22 [SEC. 27] (C) *Qualifications of [the] Faculty MEMBERS.* –

23 1. *BASIC NURSING EDUCATION.* A member of the faculty in a college of
24 nursing teaching professional courses must:

- 25 a. Be a registered nurse in the Philippines AND A HOLDER
26 OF A CURRENT VALID PRC ID;
27 b. Have at least [one (1)] THREE (3) yearS of clinical practice
28 in a field of specialization;

1 [(c). Be a member of good standing in the accredited professional
2 organization of nurses; and]

3 [(d)] c. Be a holder of a master's degree in nursing, education, or
4 other allied health sciences conferred by a college of university
5 duly recognized by the Government of the Republic of the
6 Philippines;

7 D. UNDERGO TEACHER TRAINING FOR NURSING
8 EDUCATION PRIOR TO TEACHING EMPLOYMENT; AND

9 E. UNDERGO CLINICAL SKILLS COMPETENCY
10 ENHANCEMENT EVERY TWO (2) YEARS, AS
11 PRESCRIBED AND ACCREDITED BY THE BOARD.

12 [In addition to the aforementioned qualifications, the dean of a college
13 must have a master's degree in nursing. He/She must have at least five (5)
14 years of experience in nursing.]

15 2. *GRADUATE NURSING EDUCATION.* A MEMBER OF THE
16 FACULTY TEACHING GRADUATE PROFESSIONAL COURSES
17 MUST:

18 a. FOLLOW PRESCRIPTIONS 1 AND 2 OF BASIC
19 NURSING EDUCATION; AND

20 b. BE A HOLDER OF A DOCTORAL DEGREE IN
21 NURSING, EDUCATION, OR OTHER ALLIED HEALTH
22 SCIENCES CONFERRED BY A COLLEGE OF
23 UNIVERSITY DULY RECOGNIZED BY THE
24 GOVERNMENT OF THE REPUBLIC OF THE
25 PHILIPPINES:

26 *PROVIDED, FURTHER,* THAT HIGHER EDUCATION
27 INSTITUTIONS OFFERING BOTH BASIC AND GRADUATE
28 NURSING EDUCATION PROGRAMS SHALL BE GIVEN THREE
29 (3) YEARS WITHIN WHICH TO COMPLY WITH

1 QUALIFICATION REQUIREMENTS OF FACULTY MEMBERS
2 FROM THE EFFECTIVITY OF THIS ACT.

3 (D) *QUALIFICATIONS OF THE DEAN.* -- THE DEAN OF A COLLEGE OF
4 NURSING MUST:

5 1) BE A REGISTERED NURSE IN THE PHILIPPINES AND A
6 HOLDER OF A CURRENT VALID PRC ID;

7 2) HAVE AT LEAST THREE (3) YEARS OF CLINICAL PRACTICE
8 IN A FIELD OF SPECIALIZATION;

9 3) HAVE AT LEAST THREE (3) YEARS OF NURSING EDUCATION
10 PROGRAM MANAGEMENT EXPERIENCE OR THREE (3) YEARS
11 OF MANAGEMENT IN ANY HEALTH-RELATED INSTITUTION;

12 4) BE A HOLDER OF A MASTER'S DEGREE IN NURSING FOR
13 BACCALAUREATE PROGRAM AND PREFERABLY A DOCTORAL
14 DEGREE IN NURSING FOR DOCTORAL PROGRAM CONFERRED
15 BY AN ACCREDITED COLLEGE OR UNIVERSITY IN THE
16 PHILIPPINES OR ITS EQUIVALENT;

17 5) MUST UNDERGO PROGRESSIVE TRAINING FOR DEANS
18 ACCORDING TO PROGRAM PRESCRIBED BY THE BOARD."

19 [ARTICLE VI

20 [Nursing Practice]

21 SEC. 27. *NURSING SERVICE.* - NURSING SERVICES INCLUDE, BUT ARE
22 NOT LIMITED TO, NURSING CARE PROVIDED TO INDIVIDUAL,
23 FAMILY OR GROUP IN ANY HEALTH CARE SETTING SUCH AS
24 HOSPITALS, PUBLIC HEALTH INSTITUTIONS OR COMMUNITIES,
25 CLINICS AND OTHERS BY A REGISTERED NURSE. THE NURSE SHALL
26 POSSESS THE CORE COMPETENCIES PRESCRIBED BY THE BOARD OF
27 NURSING. NURSING SERVICE INCLUDES THE PROVISION OF
28 SPECIALIZED, EXPANDED AND ADVANCED PRACTICE SERVICES AS
29 WELL AS NURSING MANAGEMENT.

1 (A) *BEGINNING NURSE PRACTITIONER.* – BEGINNING NURSE
2 PRACTITIONER PROVIDES FOR SAFE AND QUALITY CARE TO AN
3 INDIVIDUAL, FAMILY OR GROUP THAT IS INDEPENDENT OR
4 PROVIDED AS PART OF A TEAM BY A NURSE OR A GROUP OF
5 NURSES WHO WILL BE ABLE TO ASSESS, PLAN, IMPLEMENT AND
6 EVALUATE CARE PROVIDED TO CLIENTS BASED ON EVIDENCE
7 DERIVED FROM RESEARCH.

8 A BEGINNING NURSE PRACTITIONER MUST HAVE THE
9 FOLLOWING MINIMUM QUALIFICATIONS:

- 10 1) BACHELOR OF SCIENCE IN NURSING GRADUATE
- 11 2) REGISTERED NURSE WITH CURRENT PRC ID
- 12 3) MUST BE A MEMBER OF THE ACCREDITED PROFESSIONAL
13 ORGANIZATION (APO)
- 14 4) MUST NOT BE CONVICTED OF ANY MORAL TURPITUDE

15 (B) *ADVANCED NURSE PRACTITIONER.* – ADVANCED NURSE
16 PRACTITIONER IS A REGISTERED NURSE WHO HAS ACQUIRED
17 EXPERT KNOWLEDGE BASE, COMPLEX DECISION-MAKING SKILLS
18 AND CLINICAL COMPETENCIES FOR EXPANDED PRACTICE (ICN, 2002)
19 BASED ON EVIDENCE DERIVED FROM RESEARCH. ADVANCED
20 PRACTICE OF NURSING REQUIRES SUBSTANTIAL THEORETICAL
21 KNOWLEDGE IN THE SPECIALTY AREA OF NURSING PRACTICE AND
22 PROFICIENT CLINICAL UTILIZATION OF THIS KNOWLEDGE IN
23 IMPLEMENTING INDEPENDENT AND INTERDEPENDENT NURSING
24 INTERVENTIONS. SPECIALTIES CAN BE DIFFERENTIATED IN
25 DIFFERENT CATEGORIES: ACCORDING TO FUNCTIONS,
26 DISEASE/PATHOLOGY, SYSTEMS, AGE, SEX, ACUITY, SETTINGS,
27 TECHNOLOGY/THERAPIES. THIS PRACTICE INCLUDES THE
28 ACQUISITION OF NEW KNOWLEDGE AND SKILLS THAT LEGITIMIZE
29 ROLE AUTONOMY WITHIN SPECIFIC AREAS OF PRACTICE (ICN, 1992

1 AND HAMRIC, 2002). A MASTERS DEGREE IS REQUIRED FOR ENTRY
2 LEVEL. THIS INCLUDES BUT IS NOT LIMITED TO THOSE WHO ARE IN
3 EDUCATION, MANAGEMENT AND CLINICAL PRACTICE.

4 AN ADVANCED NURSE PRACTITIONER MUST HAVE THE
5 FOLLOWING MINIMUM QUALIFICATIONS IN ADDITION TO THE
6 REQUIREMENTS OF A BEGINNING NURSE PRACTITIONER:

- 7 1) RELEVANT MASTERS DEGREE GRADUATE FROM A
8 RECOGNIZED UNIVERSITY-BASED PROGRAM;
- 9 2) MUST BE CERTIFIED BASED ON THE BOARD OF NURSING
10 PROTOCOL; AND
- 11 3) MUST BE A MEMBER OF THE ACCREDITED PROFESSIONAL
12 ORGANIZATION (APO) AND THE CORRESPONDING
13 SPECIALTY ORGANIZATION.

14 [SEC. 29] (C) *[Qualification of a] NURSING SERVICE*
15 *[Administrators]MANAGER.* – A [person] NURSING SERVICE MANAGER IS
16 A PRACTITIONER occupying supervisory or managerial positions requiring
17 LEADERSHIP AND knowledge of nursing [must:] MANAGEMENT.

18 [(a) Be a registered nurse in the Philippines;

19 (b) Have at least two (2) years experience in general nursing service
20 administration;

21 (c) Possess a degree of Bachelor of Science in Nursing, with at least nine
22 (9) units in management and administration courses at the graduate level; and]

- 23 1) THE FIRST LEVEL MANAGER IS RESPONSIBLE DIRECTLY WITH
24 THE PHYSICAL SET-UP OF THE UNIT, STRUCTURE AND OTHER
25 HUMAN RESOURCES FOR HEALTH.
- 26 2) THE MIDDLE LEVEL MANAGER IS RESPONSIBLE FOR THE
27 DEPARTMENT OR SECTION HANDLING MORE THAN ONE (1) OR
28 TWO (2) UNITS, TAKES CARE OF THE FINANCIAL, LOGISTIC,
29 OPERATIONAL FUNCTIONS AND OTHERS.

1 3) THE TOP LEVEL MANAGER OVERSEES THAT ALL NURSING
2 UNITS IN TERMS OF THE FINANCIAL, HUMAN RESOURCES FOR
3 HEALTH (NOT JUST OF THE NURSES BUT INCLUDING THE
4 NURSING ASSISTANTS/ADJUNCTS) AND OTHERS.

5 A NURSING SERVICE MANAGER MUST HAVE THE FOLLOWING
6 MINIMUM QUALIFICATIONS IN ADDITION TO THE REQUIREMENTS
7 OF A BEGINNING NURSE PRACTITIONER:

8 a) FOR FIRST LEVEL MANAGERIAL POSITION IN NURSING,
9 EIGHTEEN (18) UNITS OF NURSING MANAGEMENT AND
10 CLINICAL SUBJECTS IN MASTER OF ARTS IN NURSING/MASTER
11 OF SCIENCE IN NURSING AND AT LEAST THREE (3) YEARS OF
12 CLINICAL WORK EXPERIENCE.

13 b) FOR MIDDLE LEVEL MANAGERIAL POSITION IN NURSING,
14 COMPLETED ALL ACADEMIC REQUIREMENTS IN MASTER OF
15 ARTS IN NURSING/MASTER OF SCIENCE IN NURSING AND AT
16 LEAST THREE (3) YEARS OF CLINICAL AND TWO (2) YEARS OF
17 MANAGEMENT EXPERIENCE.

18 c) FOR TOP LEVEL MANAGERIAL POSITION IN NURSING,
19 MASTERS DEGREE IN NURSING OR HEALTH MANAGEMENT-
20 RELATED SCIENCES AND AT LEAST THREE (3) YEARS OF
21 CLINICAL AND THREE (3) YEARS OF MANAGEMENT
22 EXPERIENCE.

23 d) MUST be a member of good standing of the accredited professional
24 organization [of nurses] AND RELEVANT NURSING
25 ORGANIZATIONS:

26 *[Provided, That a person occupying the position of chief nurse or director of*
27 *nursing service shall, in addition to the foregoing qualifications, possess:*

28 1. At least five (5) years of experience in a supervisory or managerial
29 position in nursing; and

1 2. A master's degree major in nursing;

2 *Provided further,* That for primary hospitals, the maximum academic
3 qualifications and experiences for a chief nurse shall be as specified in
4 subsections (a), (b) and (c) of this section: *Provided furthermore,* That for chief
5 nurses in the public health nursing shall be given priority. *Provided, even further,*
6 That for chief nurses in military hospitals, priority to those who have finished a
7 master's degree in nursing and the completion of the General Staff Course (GSC):
8 *Provided finally,* That those occupying such positions before the effectivity of this
9 Act shall be given a period of five (5) years within which to qualify.]

10 *PROVIDED, THAT THE ABOVE QUALIFICATIONS SHALL APPLY TO*
11 ALL NURSES OCCUPYING SUPERVISORY OR MANAGERIAL
12 POSITIONS ACROSS ALL HEALTH FACILITIES SUCH AS, BUT NOT
13 LIMITED TO PRIMARY OR MILITARY HEALTH FACILITIES, FOR TOP
14 LEVEL MANAGERIAL POSITION OF FIRST AND SECOND LEVELS, AS
15 WELL AS MEDICAL CENTERS NATIONWIDE.

16 SEC. 28. *NURSE-PATIENT RATIO.* –THE GOVERNMENT AND PRIVATE
17 HOSPITALS ARE HEREBY MANDATED TO MAINTAIN THE STANDARD
18 NURSE-PATIENT RATIO SET BY THE DEPARTMENT OF HEALTH:

- 19 • IN HOSPITALS BASED ON ACUITY AND AUTHORIZED BED
20 CAPACITY (ABC);
- 21 • IN COMMUNITY BASED ON NEED, POPULATION AND
22 GEOGRAPHY;
- 23 • IN OCCUPATIONAL OR SCHOOL SETTINGS BASED ON
24 RELEVANT LEGAL INSTRUMENTS (AO, EO, RA).

25 SEC. [26] 29. *Requirement for Inactive Nurses Returning to Practice.* – Nurses
26 [who have not actively practiced the profession] ARE DEEMED TO BE
27 INACTIVE WHEN:

1 1) THEY ARE NOT UTILIZING NURSING COMPETENCIES AS
2 DEFINED IN THE SCOPE OF NURSING PRACTICE for five (5)
3 consecutive years.

4 2) THERE IS NON-RENEWAL OF PRC ID FOR FIVE (5) YEARS.

5 3) THEY DO NOT HAVE PROOF OF FIVE (5) YEARS OF
6 CONTINUOUS NURSING PRACTICE.

7 INACTIVE NURSES are required to undergo one (1) month of didactic
8 training and three (3) months of practicum. ONLY the Board shall accredit
9 hospitals AND HEALTH CARE AGENCIES to conduct the said training
10 program.

11 **SEC. 7.** Article VII of the same Act is hereby amended to read as follows:

12 "ARTICLE VII

13 [Health] HUMAN RESOURCES FOR HEALTH (HRH) Production,

14 Utilization and Development

15 **SEC. 30.** *Studies for Nursing Manpower Needs, Production,*
16 *Utilization and Development.* – The Board in coordination with [the accredited
17 professional organization] RELEVANT NURSING AND OTHER
18 GOVERNMENT AND NON-GOVERNMENT AGENCIES shall initiate,
19 undertake and conduct studies on health human resources production, utilization
20 and development. THE BOARD SHALL LIKEWISE ENSURE THE
21 EFFECTIVE IMPLEMENTATION OF HRH DEVELOPMENT STRATEGIES
22 FOR NURSES AND OTHER RELATED PERSONNEL TO ATTAIN A
23 HIGHLY MOTIVATED AND PRODUCTIVE NURSING PERSONNEL
24 SYSTEM AND WORKFORCE.”

25 “SEC. 31. *[Comprehensive] NATIONAL Nursing [Specialty]*
26 *CAREER PROGRESSION Program (NNCPP).* – THERE SHALL BE AN
27 INSTITUTIONALIZED NATIONAL NURSING CAREER PROGRESSION
28 PROGRAM (NNCPP) AS PRESCRIBED IN ARTICLE IV, SEC. 10, LETTER
29 G & H. IN THE IMPLEMENTATION OF THE NNCPP, THE BOARD SHALL

1 COORDINATE WITH THE DEPARTMENT OF HEALTH AND OTHER
2 RELEVANT GOVERNMENT AND PRIVATE AGENCIES.

3 Within ninety (90) days from the effectivity of this Act, the Board, in
4 coordination with the accredited professional organization, recognized specialty
5 organizations and the Department of Health is hereby mandated to formulate and
6 develop a comprehensive nursing specialty program that would upgrade the level
7 of skill and competence of specialty nurse clinicians in the country, such as but
8 not limited to the areas of critical care, oncology, renal and such other areas as
9 may be determined by the Board[.]:

10 *PROVIDED*, THAT ANY REGISTERED NURSE, BEFORE BEING
11 ALLOWED TO WORK IN SPECIALTY AREAS TO PERFORM BEYOND
12 GENERALIST FUNCTION OR HAVE SPECIFIC SPECIALTIES, MUST
13 FINISH THE FORMAL EDUCATION AND TRAINING TOWARDS
14 SPECIALIZATION, POSSESS RECOGNIZED ADVANCED PRACTICE
15 COMPETENCIES AND MUST BE CERTIFIED BY THE BOARD TO BE AN
16 ADVANCED PRACTICE NURSE AND MUST BE A MEMBER OF A
17 RELEVANT AND ACCREDITED NURSING SPECIALTY ORGANIZATION;
18 *PROVIDED*, FURTHER, THAT NURSING SPECIALTY ORGANIZATIONS
19 WITH ADVANCED PRACTICE SHALL BE RECOGNIZED AND CERTIFIED
20 BY THE BOARD, IN COORDINATION WITH THE ACCREDITED
21 PROFESSIONAL ORGANIZATION.

22 The beneficiaries of this program are obliged to serve in any Philippine
23 hospital for a period of at least two (2) years of continuous service.

24 “SEC. 32. [*Salary*] *COMPENSATION*. – In order to enhance the general
25 welfare, commitment to service and professionalism of nurses, the minimum base
26 pay of nurses working in the public AND PRIVATE health and HEALTH-
27 RELATED institutions shall BE IN ACCORDANCE WITH PREVAILING
28 SALARY STANDARDS SET BY LAW FOR PROFESSIONALS AND SHALL
29 not be lower than salary grade 15 [prescribed under Republic Act No. 6758,

1 otherwise known as the "Compensation and Classification Act of 1989":]
2 FOLLOWING THE PROVISIONS OF THE SALARY STANDARDIZATION
3 LAW: [Provided, That for nurses working in local government units, adjustment
4 to their salaries shall be in accordance with Sec. 10 of the said law.] *PROVIDED,*
5 *FURTHER,* THAT ADVANCED PRACTICE NURSES IN PUBLIC AND
6 PRIVATE HEALTH AND HEALTH-RELATED INSTITUTIONS SHALL BE
7 ENTITLED TO ADDITIONAL REMUNERATION. GOVERNMENT AND
8 NON-GOVERNMENT FINANCIAL INSTITUTIONS SHALL PROVIDE
9 MECHANISM FOR REIMBURSEMENTS FOR SPECIALTY AND
10 ADVANCED PRACTICE NURSING SERVICES BASED ON
11 QUALIFICATIONS PRESCRIBED BY THE BOARD ADHERING TO THE
12 NATIONAL NURSING CAREER PROGRESSION PROGRAM (NNCPP). IN
13 ADDITION, NURSING PROFESSIONAL FEES MAY BE EXACTED
14 DIRECTLY FROM THE CLIENTELE AND PATIENTS WITHIN THE
15 PROVISIONS OF ADVANCED PRACTICE NURSING OR
16 COLLABORATIVELY WITH EXPERT NURSES."

17 "SEC. 33. *Funding for the [Comprehensive] DEVELOPMENT OF THE*
18 *NATIONAL Nursing [Specialty] CAREER PROGRESSION PROGRAM (NNCPP)*
19 *AND TRAINING.* – The annual financial requirement needed to [train at least ten
20 percent (10%) of the nursing staff of the participating government hospital]
21 IMPLEMENT THE NNCPP IN THE TRAINING OF GOVERNMENT AND
22 PRIVATE NURSES FOR CONTINUAL LIFE-LONG LEARNING shall be
23 [chargeable against] SOURCED FROM:

24 A. TEN PERCENT (10%) OF THE ANNUAL BUDGET OF THE
25 DEPARTMENT OF HEALTH AS SPECIFIED UNDER THE ANNUAL
26 GENERAL APPROPRIATIONS ACT; and

27 B. TEN PERCENT (10%) OF the income of the Philippine Charity
28 Sweepstakes Office and the Philippine Amusement and Games
29 Corporation which [shall equally share in the costs and] shall be released

1 to the Department of Health subject to accounting and auditing
2 procedures: *Provided*, That the Department of Health shall set the criteria
3 for the availment of this program; AND

4 C. TWENTY PERCENT (20%) OF THE PROFESSIONAL REGULATION
5 COMMISSION'S INCOME FROM THE REGULATION OF THE
6 NURSING PROFESSION."

7 SEC. 34. *Incentives and Benefits*. – [The Board of Nursing in coordination
8 with the Department of Health and other concerned government agencies,
9 associating of hospitals and the accredited professional organization] TO THE
10 EXTENT POSSIBLE AS PROVIDED BY LAW, A MECHANISM shall BE
11 established BY THE BOARD OF NURSING TO PROVIDE [an] incentiveS and
12 benefitS [system in the form of free hospital care for nurses and their dependents,
13 scholarship grants and other non-cash benefits. The government and private
14 hospitals are hereby mandated to maintain the standard nurse-patient ratio set by
15 the Department of Health.] FOR NURSES IN BOTH GOVERNMENT AND
16 PRIVATE SECTORS.

17 SEC. 8. Article VIII of the same Act is hereby amended to read as follows:

18 "ARTICLE VIII

19 Penal and Miscellaneous Provisions

20 SEC. 35. *Prohibitions in the Practice of Nursing*. – A fine of not less
21 than [Fifty thousand pesos (P50,000.00)] ONE HUNDRED THOUSAND PESOS
22 (P100,000.00) nor more than [One hundred thousand pesos (P100,000.00)]
23 THREE HUNDRED THOUSAND PESOS (P300,000.00) or imprisonment of not
24 less than one (1) year nor more than six (6) years, or both, upon the discretion of
25 the court, shall be imposed upon THE FOLLOWING CLASSIFICATION OF
26 OFFENSES:

- 27 1) VIOLATIONS AGAINST CODE OF ETHICS AND PUBLIC
28 MORALS;
29 2) VIOLATIONS AGAINST PROFESSIONAL STANDARDS;

1 3) VIOLATIONS AGAINST HUMAN/PATIENT'S RIGHTS; AND

2 4) OTHER OFFENSES

3 [(a) any person practicing nursing in the Philippines within the meaning of this Act:

4 (1) without a certificate of registration/professional license and professional
5 identification card or special temporary permit or without having been declared
6 exempt from examination in accordance with the provision of this Act; or

7 (2) who uses as his/her own certificate of registration/professional license and
8 professional identification card or special temporary permit of another; or

9 (3) who uses an invalid certificate of registration/professional license, a
10 suspended or revoked certificate of registration/professional license, or an expired or
11 cancelled special/temporary permits; or

12 (4) who gives any false evidence to the Board in order to obtain a certificate of
13 registration/professional license, a professional identification card or special permit;

14 or

15 (5) who falsely poses or advertises as a registered and licensed nurse or uses any
16 other means that tend to convey the impression that he/she is a registered and licensed
17 nurse; or

18 (6) who appends B.S.N./R.N. (Bachelor of Science in Nursing/Registered Nurse)
19 or any similar appendage to his/her name without having been conferred said degree
20 or registration; or

21 (7) who, as a registered and licensed nurse, abets or assists the illegal practice of a
22 person who is not lawfully qualified to practice nursing.

23 (b) any person or the chief executive officer of a judicial entity who undertakes in-
24 service educational programs or who conducts review classes for both local and foreign
25 examination without permit/clearance from the Board and the Commission; or

26 (c) any person or employer of nurses who violate the minimum base pay of nurses
27 and the incentives and benefits that should be accorded them as specified in Sections 32
28 and 34; or

1 (d) any person or the chief executive officer of a juridical entity violating any
2 provision of this Act and its rules and regulations.]

3 **SEC. 9. *Implementing Rules and Regulations.*** - Within ninety days (90) after the
4 effectivity of this Act, the Board and the Commission, in coordination with the accredited
5 professional organization, the Department of Health, the Department of Budget and Management
6 and other concerned government agencies, shall formulate rules and regulations necessary to
7 carry out the provisions of this Act. The implementing rules and regulations shall be published in
8 the Official Gazette or newspaper of general circulation.

9 **SEC. 9. *Separability Clause.*** - If, for any reason, any provision of this Act or any part
10 thereof shall be held unconstitutional and invalid, the other parts or provisions of this Act, which
11 are not affected thereby, shall remain in full force and effect.

12 **SEC. 10. *Repealing Clause.*** - All laws, decrees, orders, rules and regulations or parts
13 thereof inconsistent with any of the provisions of this Act are hereby repealed, amended or
14 modified accordingly.

15 **SEC. 11. *Effectivity Clause.*** - This Act shall take effect fifteen (15) days after its
16 complete publication in at least two (2) newspapers of general circulation.

Approved,