

Republic of the Philippines
HOUSE OF REPRESENTATIVE
Quezon City, Metro Manila

SIXTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. _____

151



Introduced by ANG NARS Party - List Representative Leah Primitiva G. Samaco - Paquiz

EXPLANATORY NOTE

A strong nation begins with healthy people. In a democratic government such as ours, quality health care is a human right. However, our past and present health situations declare otherwise, thus: (1) maternal mortality rate has increased to 221 per 100,000 live births in 2011 from 162 per 100,000 live births in 2009; while the millennium development goals indicate that the global ideal for maternal mortality rate is set at 52 per 100,000 live births; (2) infant mortality rate is at 23.20 per 1000 live births in 2010; while the millennium development goals for infant mortality is set at the rate of 19 per 1000 live births. "Alarming", as the DOH described these latest statistics and emphasized that *"maternal health is an important indicator of the government's performance in improving the health of its citizens."*

Sad to say, all the foregoing situations remain pervasive despite the constitutional declaration that, *"The state shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all people at affordable cost. There shall be priority for the needs of the underprivileged sick, elderly, disabled, women, and children. The state shall endeavor to provide free medical care to paupers."*

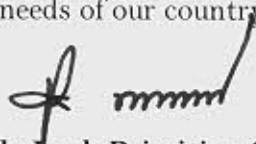
It is a point of fact, that both maternal and infant mortality is preventable through a sustainable and effective nursing care, such as essential health care, health teachings, execution of health care techniques and procedures, execution of nursing procedures, comfort measures, public health nursing, and restoration of health in collaboration with other health members, as well as traditional and innovative approaches to individuals, families and communities from conception to death.

However, the projects and programs for health services cannot be made accessible to people because of the blatant refusal to open plantilla positions for nurses and/or the non-filling of plantilla positions once became vacant. Suffice to say, no law has ever been passed to curb the need for adequate healthcare human resource to provide for permanent positions for nurses to be employed in communities, hospitals and other health institutions that will follow the ideal nursing to patient ratio as prescribed by the Department of Health through an exhaustive research.

The existing oxy-moron situation where there are thousands of unemployed nurses yet there is inadequate nurses in health facilities as shown by high nurse to patient ratio, is a living testimony to the deficient, if not absent, health care services to the Filipinos. From 1998 to 2012, the number of unemployed nurses have ballooned to 300,000 hence, made nurses vulnerable to exploitation and unfair labor practices such as job orders, contractualization, "false volunteerism" or doing "volunteer" work in hospitals without pay and "false trainings" or paying for "training fees" just to be able to work; practices which are not only abusive and unjust but also illegal. A number of Filipinos died and are dying without being seen by a nurse to make the hope - giving presence of the government felt.

Due to the major challenges that the nursing profession is facing today, the sector is being prevented, if not prohibited, to perform its vital role as stable health human resource and partner of the government in providing quality health care services. So it is a choice between unemployment, underemployment, and poor working conditions against the nursing profession *vis-à-vis* utilization of nurses as efficient vanguard in the healthcare system and valuable leader of high impact in the health institution. To this end, the nursing sector can be an effective and competent partner of the government's program, public and universal health care, towards a strong and healthy nation.

Hence, repeal of Republic Act No. 9173 is earnestly sought to make the law more germane to the present and future health situation and needs of our country.



Honorable Leah Primitiva G. Samaco-Paquiz
ANG NARS Representative

Republic of the Philippines
HOUSE OF THE REPRESENTATIVES
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Introduced by ANG NARS Party List Representative Leah Primitiva G. Samaco -Paquiz

AN ACT PROVIDING FOR A COMPREHENSIVE NURSING LAW
TOWARDS QUALITY HEALTH CARE SYSTEM, REPEALING
FOR THIS PURPOSE RA 9173 OTHERWISE KNOWN AS
THE PHILIPPINE NURSING ACT OF 2002

*Be it enacted by the Senate and the House of Representative of the Republic of the Philippines in Congress
assembled:*

ARTICLE I
General Provision

Section 1. **Title** – This Act shall be known as the “Comprehensive Nursing Law of 2013.”

Section 2. **Declaration of Policy** - It is hereby declared the policy of the state to uphold the dignity of the nurses and assume responsibility for the protection, respect, and improvement of the nursing profession by instituting measures towards relevant nursing practice, just and humane conditions of work, and promotion of professional growth.

The state guarantees the delivery of accessible, affordable, and available quality health care to all the people through implementation of adequate and competent Nursing Personnel System (NPS) throughout the country.

Section 3. **Definition of Terms** - The following terms when used in this act shall mean:

- (a) “Nursing” is the science and art of caring.
- (b) “Nursing Personnel System” refers to a system of human resource management in an institution that classifies the structure, organization, and coordination within the workforce both in private and public health care facilities and nursing educational institutions to advance the welfare and protect the rights of the nurses and to ensure the employer-employee relationship, security of tenure, just compensation, humane conditions of work, career/professional growth.
- (c) “Board” refers to the Professional Regulatory Board of Nursing as defined by this act.
- (d) “Commission” refers to the Professional Regulation Commission.
- (e) “BSN” is the Bachelor of Science in Nursing, it refers to the undergraduate nursing education program.
- (f) “CHED” refers to the Commission on Higher Education which promulgates policies and standards and curriculum of BSN.
- (g) “NLE” refers to the Philippine Nurse Licensure Exams.
- (h) “Nurse” refers to a person who passed the Nurse Licensure Exams (NLE) and whose license has not been revoked by the law. Thus, it pertains to a registered nurse (RN).
- (i) “Nursing care” is a therapeutic use of self which includes, but is not limited to: the provision of physiological, psychological, spiritual, social and emotional care; essential health care, comfort measures, health teachings; executing health care techniques and procedures; and, traditional and innovative approaches to individuals, families and communities from conception to death.

- (j) "Health Facility " refers to an institution, establishment, clinic that offers health services and nursing care, such as hospitals, barangay health centers, clinics.
- (k) "Advanced Practice Nurse" refers to a nurse who acquired substantial theoretical knowledge and decision making skills in the specialty area of nursing practice and proficient clinical utilization of this knowledge in implementing independent and inter-dependent nursing interventions. Specialties can be differentiated in categories, according to function, disease/ pathology, systems, age, sex, acuity, setting and technology/therapies.
- (l) "Precarious Work" is the term used to described non-standard employment, such as under-payment, no payment, no security of tenure, no employer - employee relationship, no benefits, unpredictable working conditions; and, deviation from the standard employment relationships, such as contractual, false volunteerism, job orders thru agencies, part time, self-employment, fixed term work, temporary, on call, home workers, telecommuting, few benefits, lack of collective bargaining representation, and no job security.

ARTICLE II Board of Nursing

Section 4. Creation and Composition of the Board - There shall be created a Professional Regulatory Board of Nursing (Board) composed of a Chairperson and six (6) members. They shall be appointed by the President of the Republic of the Philippines from among those recommended by the PRC and ranked from a list of three (3) nominees, per vacancy, of the accredited professional organization of nurses in the Philippines and who possess the qualifications prescribed herein.

Section 5. Qualifications of the Chairperson and Members of the Board - The Chairperson and members of the Board shall possess the following qualifications:

- (a) Must be a natural born citizen and resident of the Philippines for the past five (5) consecutive years;
- (b) Must be a member of good standing of the accredited professional organization of nurses;
- (c) Must be a Nurse in the Philippines and a holder of a valid certificate of registration and a current professional identification card;
- (d) Must be a holder of a master's degree in nursing and preferably with a doctorate degree conferred by a college or university duly recognized by the government;
- (e) Must have at least ten (10) years of continuous practice of the nursing profession prior to appointment; and
- (f) Must be of good moral character and have not been convicted of any offense involving moral turpitude.

The membership of the Board shall comprise the scope of nursing practice: nursing education, nursing service, nursing research, and nursing leadership and governance.

Section 6. Prohibition as Member of the Board of Nursing - A member of the Board shall not hold a position or have pecuniary interest in any educational institution offering BSN, any review or training center for NLE, training hospitals and health facilities with nursing affiliates.

Section 7. Term of Office - The chairperson and members of the Board shall hold office for a term of three (3) years and until their successors shall have been appointed and qualified. No member of the Board shall serve for more than two (2) terms or a maximum of six (6) years.

Section 8. Vacancy - Any vacancy in the Board shall be filled in the manner prescribed herein and only for the unexpired portion of the term. Each member of the Board shall take the proper oath of office prior to the performance of duties.

Section 9. **Compensation** - The chairperson and members of the Board shall receive compensation and allowances comparable to the compensation and allowances received by the chairperson and members of other regulatory boards.

Section 10. **Administrative Supervision of the Board, Custodian of its Records, Secretariat and Support Services** - The Board shall be under the administrative supervision of the PRC. All records of the Board, including applications for examinations, administrative and other investigative cases conducted by the Board shall be under the custody of the PRC. The PRC shall designate the Secretary of the Board and shall provide the secretariat and other support services to implement the provisions of this Act.

Section 11. **Powers and Duties of the Board.** The Board shall supervise and regulate the practice of the nursing profession and shall have the following powers, duties and functions:

- (a) Ensure the proper conduct of the NLE, which includes the application, test development, examination, correction and release of results. The use of appropriate technology/modalities during the conduct of the NLE is encouraged to enhance efficiency while upholding integrity;
- (b) Issue, suspend, revoke or reissue certificates of registration for the practice of nursing and ensure the widest publication through electronic and written media;
- (c) Enforce and monitor safe and quality standards of nursing practice and exercise the powers necessary to ensure the maintenance of efficient, ethico-moral, technical and professional standards in the practice of nursing towards the optimal health and common good of the nation;
- (d) Ensure quality nursing education by examining and monitoring higher educational institutions offering and seeking permission to open nursing education programs and to ensure that standards of nursing education are properly complied with and maintained at all times. Provided, that the authority to open and close nursing education programs offered by higher educational institutions, shall be vested on CHED;
- (e) Conduct hearings and investigations to resolve complaints against actively practicing nurses for unethical and unprofessional conduct and violations of this Act, or its rules and regulations and in connection therewith, issue *subpoena duces tecum* and *subpoena ad testificandum* to require the appearance of respondents and witnesses and the production of documents and penalize with contempt persons obstructing, impeding and/or otherwise interfering with the conduct of such proceedings, upon application with the Board of Nursing or the Professional Regulation Professional Regulation Commission (PRC);
- (f) Promulgate a Code of Ethics that is responsive to the needs of the nursing profession in coordination with the Accredited Professional Organization (APO) of nurses;
- (g) Establish and operationalize, via necessary infrastructures, a National Nursing Career Progression Program to ensure continuing professional development of Filipino nurses, create the Council for Nursing Advancement, Recognition, and Specialization as well as the various Nursing Specialty Boards to assist the Board of Nursing for this purpose;
- (h) Make decisions to influence authorities/agencies on matters that directly affect nurses' welfare;
- (i) Ensure performance of mandated duties and functions with the provision of operational resources including human, financial and spatial resources to ensure the confidentiality and sanctity of their functions as provided through the annual budget of the PRC as promulgated in the General Appropriations Act;
- (j) Source and utilize funds earmarked for national nursing development; and

- (k) Prescribe, adopt, issue and promulgate guidelines, regulations, measures and decisions as may be necessary for the improvement of nursing practice, advancement of the profession, and for the proper and full enforcement of this Act, subject to review and approval by PRC.

Section 12. Annual Report - The Board shall, at the close of its calendar year, submit an annual report to the President of the Philippines through the PRC giving a detailed account of its proceedings and the accomplishments during the year and making recommendations for the adoption of measures that will upgrade and improve the conditions affecting the practice of the nursing profession.

Section 13. Removal or Suspension of Board Members - The President may remove or suspend any member of the Board, after due process, on the following grounds:

- (a) Continued neglect of duty or incompetence;
- (b) Commission or toleration of irregularities in the NLE; and,
- (c) Unprofessional, immoral or dishonorable conduct.

Article III

Examination and Registration

Section 14. Philippine Nurse Licensure Examination (NLE) – All nursing graduates must take and pass the NLE as one of the requirements to obtain certificate of registration/professional license. The NLE shall be administered by the Board in such place and date as designated by the Commission: *Provided*, That no nursing educational institution shall withhold any requirement and/or documents of any nursing graduate for the purpose of preventing them to apply for the NLE. All nursing educational institution must ensure that their nursing graduates will take the nearest scheduled NLE after graduation. Any delay in taking the NLE must be accordingly justified by the president, registrar or dean of the educational institution through a public instrument.

Section 15. Scope of Examination - The scope of the NLE shall be determined by the Board by taking into consideration the nursing curriculum, the broad scope and areas of nursing practice, core competencies, and other disciplines in determining the subjects of examination.

Section 16. Qualifications for Admission to the NLE - In order to be admitted to the NLE, an applicant must be:

- (a) A holder of a Bachelor of Science in Nursing degree from an accredited educational institution that complies with the standards of nursing education;
- (b) Of good moral character and have not been convicted, by final judgment, of any criminal offense involving moral turpitude or guilty of immoral or dishonorable conduct, or any person declared by the court to be of unsound mind; and,
- (c) A citizen of the Philippines, or a citizen or subject of a country which permits Filipino nurses to practice within its territorial limits on the same basis as the subject or citizen of such country; *Provided*, That the requirements for the registration or licensing of nurses in said countries are substantially the same as those prescribed in this Act.

Section 17. Fees for Examination and Registration - Applicants for licensure and for registration shall pay the prescribed fees set by the Commission.

Section 18. Ratings - In order to pass the NLE, an examinee must obtain at least seventy-five percent (75%) of tested areas of all competencies. An examinee who has failed the NLE three (3) times shall be barred from taking any further NLE. The NLE results shall be released not later than forty-five (45) days from the date of NLE.

Section 19. Issuance of Certificate of Registration/Professional License and Professional Identification Card - A certificate of registration/professional license shall be issued to all successful examinees, subject to Section 4 of this Article. A certificate of

registration/professional license shall show the full name of the registrant, the signature of the Chairperson of Commission, and the members of the Board. The certificate shall bear the logo of the Board and the official seal of the Commission.

The Commission shall likewise issue the professional identification card. The card must bear the following: full name of the registrant nurse, the serial number, the date of issuance and expiration, the signature of the Chairperson of the Commission; date of registration.

Section 20. Oath of Profession - All successful examinees shall be required to take an oath of profession before the Board. The Board shall schedule oath-taking ceremonies in each major region not later than forty-five (45) days from the date of the release of the NLE results. During the oath taking the professional identification cards shall be released, together with the certificate of registration/professional license, to all the registrant nurses.

Section 21. Roster of Nurses - The Commission shall maintain a roster of nurses pursuant to the PRC Automated System. It shall serve as the centralized database for nursing professionals for purposes of documentation, statistics, research, and development.

Section 22. Registration by Reciprocity - A certificate of registration/professional license may be issued without examination to a nurse registered under the laws of a foreign state or country: *Provided*, That the requirements for registration or licensing of nurse in said country is substantially the same as those prescribed under this Act: *Provide further*, That the laws of such country grants the same privileges to Professional Registered Nurse of the Philippines on the same basis as the subjects or citizens of such foreign state or country.

Section 23. Practice Through Special/Temporary Permit - A special/temporary permit may be issued to the following persons based on qualification, and professional and moral standards as determined by the Board and approved by the Commission, to wit:

- (a) Licensed nurses from foreign countries/states whose services are either for a fee or free if they are internationally well-known specialists or outstanding experts in any branch or specialty of nursing;
- (b) Licensed nurses from foreign countries/states on medical mission whose services shall be free in a particular hospital, center or clinic;
- (c) Licensed nurses from foreign countries/states who are engaged by colleges/universities offering the nursing program as exchange professors in a branch or specialty of nursing; and,
- (d) Licensed nurses from foreign countries/state who come to aid during declared disasters and calamities.

The special/temporary permit shall be effective only for the duration of the project, medical mission or engagement contract.

Section 24. Revocation and Suspension of Certificate of Registration/Professional License and Cancellation of Special/Temporary Permit - The Board shall have the power to revoke or suspend the certificate of registration/professional license or cancel the special/temporary permit of a nurse upon any of the following grounds:

- (a) Conviction, by final judgment, of any criminal offense involving moral turpitude or guilty of immoral or dishonorable conduct or any person declared by the court to be of unsound mind;
- (b) Violation of this Act, its policies, rules and regulations, and of the Philippine Code of Ethics for Nurses;
- (c) Gross negligence, grave misconduct, ignorance, and incompetence in the nursing practice;
- (d) Fraud, concealment, misrepresentation, or false statements in obtaining a certificate of registration/professional license or a temporary/special permit;
- (e) Practice of the nursing profession pending suspension of license.

Section 25. **Reinstatement and Re-Issuance of Revoked Certificates of Registration/ Professional License** - The Board may, after the expiration of a maximum of four (4) years from the date of revocation of a certificate of registration/ professional license, for reasons of equity and justice, and when the cause for revocation has disappeared or has been cured and corrected, upon proper application thereof and the payment of the required fees, reinstate and re-issue the certificate of registration/professional license.

ARTICLE IV Nursing Practice

Section 26. **Nursing practice** - The administration of nursing care through the utilization of the nursing process: assessment, nursing diagnosis, planning, implementation, and evaluation. Nursing practice encompasses various stages of development towards the promotion of health, prevention of illness, health care techniques and procedures, restoration of health, and alleviation of suffering, may it be performed independently or collaboratively.

Section 27. **Scope of Nursing Practice** – The following are the scope of nursing practice: (1) nursing education; (2) nursing service; (3) nursing research; and, (4) nursing leadership and governance. A nurse shall be deemed to be practicing nursing when he or she, for a fee, salary or compensation, singly or collaboratively, performs nursing care to individuals, families and communities.

Section 28. **Core Competencies** – In order to preserve and uphold the standards of nursing practice, a nurse shall possess and exercise the following core competencies at all time: safe and quality nursing care, management of resources and environment, health education, legal responsibility, ethico-moral responsibility, personal and professional development, quality improvement, research, records management, communication, collaboration and teamwork.

Section 29. **Duties and Responsibilities of a Nurse** - The duties and responsibilities of a nurse are, but not limited to: promotion of health, prevention of illness, restoration of health, rehabilitative aspects of care, alleviation of suffering, and when recovery is not possible, towards a peaceful death. Curative health may be facilitated by a nurse provided that he or she is working in collaboration with other health care provider.

ARTICLE V Nursing Education

Section 30. **Nursing Education** - The formal learning, training, and advancement in the science and art of nursing.

Section 31. **Undergraduate Nursing Education Program** – The Bachelor of Science in Nursing (BSN) that falls within the power and authority of the CHED. The National Nursing Admission Test (NNAT) is a pre-qualifying condition in the admission to the BSN program and shall require a passing percentage of seventy-five percent (75%).

BSN is a four (4) year course that includes theoretical and related learning experiences both in classroom and clinical set-up that teaches, guides and supervises students in nursing education programs. It includes nursing services administration in diverse settings, such as hospitals, clinics, and other health facilities, undertakes consultation services, engages in such activities that require the utilization of knowledge and decision-making skills of a registered nurse.

Section 32. **Graduate Nursing Education Program** – Is the post baccalaureate nursing program, which builds on the experiences and skills of a nurse towards mastery, expertise, and leadership in practice, research, and education. It includes a master's degree and doctorate degree in nursing founded on the philosophies, and the scientific body of knowledge and practice.

Graduate Nursing Education Programs and post-graduate courses shall be offered only in colleges with Level III Accredited Baccalaureate Nursing Programs according to Commission on Higher Education (CHED) Policies, Standards and Guidelines (PSG) on Graduate Education.

Section 33. Continuing Professional Education (CPE) – A nurse has a professional responsibility upon himself/herself to maintain competence, exude leadership, and promote excellence by continual learning through CPE conducted by an accredited organization approved by the appropriate agency of the government.

In order to undertake nursing and healthcare human resource development, training and research to the advancement of the nurses' professional growth, such as updating skills enhancement, developing of advanced nursing practice shall be ensured.

ARTICLE VI

Nursing Service

Section 34. Nursing Service - Is the promotion of health and prevention of illness which includes, but not limited to, nursing care provided by a nurse, either independently or collaboratively, to any individual, family or group in any health care setting such as hospitals, public health institutions or communities, and clinics.

Section 35. Public Health Nursing – The public health nursing shall include the following functions: (1) Provide health education to individuals, families and communities; (2) Ensure that messages on healthy lifestyle are incorporated in his or her health teachings; (3) Seek opportunities to promote a healthy lifestyle within his or her influence; (4) Accept that he or she is a role model for a healthy lifestyle; (5) Enable people to increase control over their health and to improve health; (6) Build healthy public policy; (7) Create supportive environment; (8) Strengthen community action for health; and, (9) Establish linkages with community resources and coordination of services with the health team.

Section 36. Nursing Procedures – Nursing procedures shall include, but not limited to, the following: (1) Internal examination during labor in the absence of antenatal bleeding, attending to normal delivery and suturing of perineal laceration, and newborn care; (2) Administration of legal and written prescriptions for treatment, therapies, medications; (3) Hypodermic, intramuscular, or intravenous injections; and, (4) Wound care, ostomy care, suturing of lacerated wounds and removal of suture,

Section 37. Restoration of Health in Collaboration with Other Members of the Health Care Team – The restoration of health in collaboration with other members of the health care team shall include the following:

- (a) Cardiac care;
- (b) Airway management;
- (c) Blood product administration ;
- (d) Cast care;
- (e) Chemotherapy management;
- (f) Chest physiotherapy;
- (g) Emergency care and triage;
- (h) Enteral tube feeding;
- (i) Hemodialysis;
- (j) Peritoneal dialysis therapy;
- (k) Hyperglycemia and hypoglycemia management;
- (l) Intracranial pressure monitoring;
- (m) Intravenous insertion and therapy;
- (n) Invasive hemodynamic monitoring;
- (o) Mechanical ventilation management;
- (p) Medication administration;
- (q) Neurologic monitoring;

- (r) Oxygen therapy, post-mortem care;
- (s) Total parenteral nutrition;
- (t) Venous access device maintenance.

Section 38. **Advanced Practice Nursing** - Is a specialized and expanded nursing care. This practice includes the acquisition of new knowledge and skills that legitimize role autonomy within specific areas of practice.

ARTICLE VII

Nursing Research, Policy Development, and Planning

Section 39. **Nursing Research and Policy Development** - shall involve study and pursuit of nurse related issues encompassing the following areas:

- a. Professional nursing practice (e.g., advancing nursing knowledge to ensure quality nursing care for all and advocacy for sound health policies globally).
- b. Nursing regulation (e.g., credentialing, code of ethics, standards and competencies).
- c. Socio-economic welfare for nurses (e.g., occupational health and safety, human resources planning and policy, remuneration, career development).

Section 40. **Studies for Nursing Manpower Needs, Production, Utilization and Development** - The Board, in coordination with the accredited professional organization and appropriate government or private agencies shall initiate, undertake and conduct studies on healthcare human resources production, utilization and development.

Section 41. **Comprehensive Nursing Specialty Program** - Within ninety (90) days from the effectivity of this Act, the Board in coordination with the accredited professional organization, recognized specialty organizations, and the Department of Health is hereby mandated to formulate and develop a comprehensive nursing specialty program that would upgrade the level of skill and competence of specialty nurse clinicians in the country, such as, but not limited to, the areas of critical care, oncology, renal and such other areas as may be determined by the Board: Provided, that the beneficiaries of this program are obliged to serve in any Philippine hospital for a period of at least two (2) years continuous service.

Section 42. **Funding for the Comprehensive Nursing Specialty Program** - The annual financial requirement needed to train at least ten percent (10%) of the nursing staff of the participating government hospital shall be chargeable against the income of the Philippine Charity Sweepstakes Office (PCSO) and the Philippine Amusement and Gaming Corporation (PAGCOR), which shall equally share in the costs and shall be released to the Department of Health subject to accounting and auditing procedures. *Provided*, That the Department of Health shall set the criteria for the availment of this program.

ARTICLE VIII

Nursing Leadership and Governance

Section 43. **Nursing Leadership** – Nursing is a dynamic field that requires leaders who will go through the changing aspects of the health sector as they are part of the workforce that will toil and labor for the improvement of the health of the citizenry. Nurses adapt specific roles in organizational structure, from being the policy makers in health facilities and giving guidance to senior management on best practices in nursing and patient care. They work with healthcare leaders to establish compensation and benefit programs and are involved in nurse recruitment, training and retention. Thus, nurses in the management positions shall develop patient-care programs, manage nursing budgets, plan new patient services, establish nursing policies and procedures, participate in cross-departmental decision making, conduct performance improvement activities and represents the scope of nursing practices at board of director meetings and other stakeholder.

Section 44. **Nursing Governance** - Governance in nursing practice is shifting from the traditional view that nurses are subordinate and passive employees towards having more proactive involvement of taking charge of the organization to be the antecedent in decision making and implementation of plans and policies for the patients and communities. Governance in the practice of nursing shall be encouraged to empower each nurse in decision-making over their professional practice while extending their power and control over the administrative aspect of their practice.

ARTICLE IX

Nursing Personnel System

Section 45. **Nursing Personnel System** - The nursing personnel system covers the following fields: nursing service administration in the hospital setting, public health practice, and the academe.

Section 46. **Salary** - In order to enhance the general welfare, commitment to service, and professionalism of nurses, the minimum base pay of nurses working in the public health institutions shall not be lower than salary grade (SG) "15" as prescribed under Republic Act No. 6758, otherwise known as the "Compensation and Classification Act of 1989." In private health institutions, the minimum base pay for the nurses, upon entry, shall be equivalent to that of SG "15" in the public hospital.

Section 47. **Incentives and Benefits** - The Board of Nursing, in coordination with the Department of Health, other concerned government agencies, association of hospitals and the accredited professional organization, shall establish an incentive and benefit system in the form of free hospital care for nurses and their dependents, scholarship grants and other non-cash benefits. The government and private hospitals are hereby mandated to maintain the standard nurse-patient ratio.

Section 48. **Ratio** - To effectuate the quality nursing care for the patients, the staff nurse to patient ratio in a hospital setting (general nursing service or general ward) shall be set at a ratio of one is to twelve (1:12). In the barangay set-up, the nurse to patient ratio shall be set at one is to ten thousand (1:10,000): Provided, that the nurse shall be the supervisors of the midwives and barangay health workers. There shall be a nurse for every school, may it be private or public, primary, secondary or tertiary, subject to the applicable ratio prescribed by the appropriate government agency..

Section 49. **Nursing Service Administration in the Hospital Setting** - The Nursing Personnel in the hospital is headed by a Nursing Administrator with the title, Chief Nursing Officer (CNO). The CNO shall be the executive head of the nursing service of a healthcare facility.

Section 50. **Qualifications of a CNO** - The CNO must have a minimum of eight (8) years related clinical experience, with at least five (5) years experience in a supervisory or managerial position in nursing, at least two (2) years experience as staff nurse in a general nursing service, at least one (1) year in specialty nursing area, and must be a member of good standing in the accredited professional organization.

Section 51. **Duties and Responsibilities of Chief Nursing Officer (CNO)**- The CNO shall be responsible for the full administrative aspects and shall have the authority for the planning, organizing, directing and controlling of the nursing service. The Chief Nursing Officer shall have governance responsibility, accountability and shall serve as an advocate of the rights and welfare of the nursing staff in the hospital.

The duties of the CNO includes, but not limited to, the formulation of policies, strategic and operational planning, financial plan and resource allocation, development of procedures, and professional and organizational involvement.

Section 52. **Responsibilities and Duties of a Clinical Nurse Supervisor (CNS)** – The CNS refers to the middle level manager-in-charge of a particular nursing department. The CNS shall be responsible in the planning, organizing, directing, controlling, and implementing of policies within the area.

The CNS is in charge of planning and implementation of staff development programs for different categories of nursing personnel including nursing students and other affiliates. The CNS shall provide insights on methods and practices for professional development in the healthcare, health services and work environment. The CNS shall also initiate evidence-based researches for the improvement of nursing patient care.

Section 53. **Qualifications of a CNS** – A CNS must have a minimum of five (5) years related clinical experience preferably in an area of specialization, must be a graduate of master's program in nursing, and must be a member of good standing in the accredited professional organization.

Section 54. **Charge Nurse (CN)** – The CN shall be responsible for the administration and supervision of a particular Nursing Unit as well as the supervision of staff nurses in the unit. The Charge Nurse must have a minimum of two (2) years related clinical experience preferably in an area of specialization, must finish a minimum of 30 units of Masters in Nursing Program, and must be a member of good standing in the accredited professional organization.

Section 55. **Staff Nurse (SN)** – A SN is in direct contact with patients to perform independent, dependent, and interdependent nursing actions and follow the nursing process of assessment, diagnosis, planning, implementation, and evaluation. Working experience is not necessary for this position.

Section 56. **Public Health Practice** – Nursing service shall be organized and operationalized in every local health agencies in order to ensure the nursing component of public health programs. Thus, an ideal nurse in every barangay shall be the thrust of public health in order to provide accessible, available, and affordable quality health care to all. More so, a nurse in every school, may it be private or public, shall be prioritized in every primary, secondary and tertiary educational institutions in order to instill health awareness at an early stage and to improve the health status of the students.

Section 57. **The Public Health Chief Nursing Officer (PHCNO)** – The nursing service and delivery of healthcare in a public health practice or community set-up shall be headed by the PHCNO. The PHCNO shall carry full administrative responsibility and shall have the authority on planning, organizing, directing, and controlling of public health nurses. A PHCNO must have a minimum of three (3) years practice in a community setting as the Community Health Nurse or Public Health Nurse, must have at least five (5) years experience in general nursing service administration, and must be a member of good standing in the accredited professional organization. In addition, the PHCNO in public health agency must be a masteral degree holder in Public Health or Community Health Nursing.

The PHCNO is responsible for the formulation of policies, strategic and operational planning, financial plan and resource allocation, policies and procedure development, professional and organizational involvement to address epidemiologic problems and provide statistical data, and shall exercise good governance and accountability of the nursing personnel in a public health setting. The PHCNO shall also act as the advocate for the rights and welfare of public health nurses.

Section 58. **Public Health Nurse Supervisor (PHNS)**– The PHNS shall be in charge of planning, organizing, directing and controlling activities within a demographic unit. A PHNS must have a minimum of three (3) years practice in a community setting as the Community Health Nurse or Public Health Nurse, must be a masteral degree holder in Public Health or Community Health Nursing, and must be a member of good standing in the accredited professional organization.

Section 59. **The Public Health Nurse (PHN)**– The PHN shall perform the functions and activities of health promotion, such as the prevention and treatment of various diseases and illnesses in a particular public setting. The PHN shall exercise a supervisory role to the midwives and barangay health workers within her catchment area. The PHN shall initiate and participate in developing policies and guidelines to promote basic Nursing services. A PHN must be a member of good standing in the PRC.

Section 60. **Academe** - The Dean of the College of Nursing (Dean) shall formulate policies, plans and adhere to the prescribed curriculum for advancement of Nursing education. The Dean must be a holder of a master's degree in nursing, education, or other allied medical and health sciences conferred by a college or university duly recognized by the Government of the Republic of the Philippines, must have at least three (3) years of experience in teaching and supervision in Nursing Education, must have at least one (1) year clinical experience in a general nursing service, and must be a member of good standing in the accredited professional organization.

Section 61. **Faculty Coordinator** – A faculty coordinator must be a holder of a master's degree in nursing, education, or other allied medical and health sciences conferred by a college or university duly recognized by the Government of the Republic of the Philippines, must have at least one (1) year of clinical practice in a field of specialization, must have at least one year of experience in teaching in Nursing education, and must be a member of good standing in the accredited professional organization.

Section 62. **Qualifications of the Faculty** - A member of the faculty in a college of nursing teaching professional courses must be Master's degree holder, must have at least one (1) year of clinical practice in a field of specialization, must be a holder of a master's degree in nursing, education, or other allied medical and health sciences conferred by a college or university duly recognized by the Government of the Republic of the Philippines, and must be a member of good standing in the accredited professional organization.

ARTICLE X

Prohibited Acts and Penal

Section 63. **Prohibited Acts** - Any of the following shall constitute unlawful and illegal acts:

(a) Any person who are practicing the nursing profession in the Philippines:

1. Without a certificate of registration/ professional license and professional identification card or special temporary permit or without having been declared exempt from examination in accordance with the provision of this Act;
2. Who uses as his/her own certificate of registration/professional license and professional identification card or special temporary permit of another;
3. Who uses an invalid certificate of registration/professional license, a suspended or revoked certificate of registration/professional license, or an expired or cancelled special/temporary permits;
4. Who gives any false evidence to the Board in order to obtain a certificate of registration/professional license, a professional identification card or special permit; or
5. Who falsely poses or advertises as a registered and licensed nurse or uses any other means that tend to convey the impression that he/she is a registered and licensed nurse;
6. Who appends B.S.N./R.N. (Bachelor of Science in Nursing/Registered Nurse) after his or her name or Nurse/Nr. before his or her name without having been conferred said degree or registration;
7. Who, as a registered and licensed nurse, abets or assists to the illegal practice of a person who is not lawfully qualified to practice nursing; or
8. Who advertises any title or description tending to convey the impression that he or she is a nurse e.g. using the nurses' uniform and cap without holding a valid certificate of registration from the Board (RA 877).

- (b) Any natural or juridical person, educational institutions offering BSN without full compliance with the requirements prescribed by law, undertakes *in-service* educational programs, conducts review classes for both local and foreign examination without permit/clearance from the Board and the Commission, or conducts Continuing Professional Education for nurses without accreditation of the provider and accreditation of the program from the Board;
- (c) Any natural or juridical person or health facility who subscribes to sub-standard quality of nursing care and/or nursing practice, such as non-compliance with the nurse-patient ratio;
- (d) Any natural or juridical person, health facility who exercises and promotes precarious working conditions to nurses, such as, but not limited to, the following:
 1. Contracting or availing of the services of a nurse either without salary, for allowance, for salary below the applicable minimum wage (for nurses deployed in private health facilities) or below the prescribed salaries under this Act, whether or not under the pretext of a training, development program, certification course and /or any seminar; or
 2. Depriving or denying a nurse of the incentives and benefits as provided for by the existing laws;
 3. Collecting any fees from a nurse or from any person or entity in his or her behalf in exchange for a nurse's voluntary services in a health facility; or
 4. Requiring or obliging a volunteer nurse to perform the regular work functions and/or regular work load expected from a regular staff nurse employed by the health facility without proper compensation, to render full-time service as a condition for the continued availment of his/her volunteer services, and to be the sole nurse on duty, except during disasters, calamities, and war;
 5. Contracting or availing of the services of a volunteer nurse or nurse trainee: in order to fill-up a vacant position that requires the hiring of a full-time regular employed nurse, or for free in exchange for any type of certification to be issued by the health facility for purposes nurse's employment application;
 6. Contracting or availing of the services of a nurse, under the pretext of training or certification course, but requires her/him to render the tasks and responsibilities expected of a regular staff or public health nurse, with the so-called allowance with or without benefits, which is below the applicable minimum wage for both private and public institutions;
 7. Availing the services of a nurse under contractualization and job order-type of employment;
- (e) Any violation of the provisions of this Act.

Section 64. **Sanctions** – A fine of not less than one hundred thousand pesos (P100,000.00) nor more than three hundred thousand pesos (P300,000.00) or imprisonment of not less than one (1) year nor more than six (6) years, or both, upon the discretion of the court, shall be imposed upon violation of any prohibited acts enumerated in Section 63 (a) hereof.

A fine of not less than three hundred thousand pesos (P300,000.00) nor more than five hundred thousand pesos (P500,000.00) and/or imprisonment of not less than one (1) year nor more than six (6) years shall be imposed upon violation of any prohibited acts enumerated in Section 63 (b), (c), (d), and (e) hereof. In addition, suspension or revocation of license to operate may be granted upon the discretion of the court.

Section 65. **Refund and Compensation** - Any nurse found to have been a victim of Section 60(d) hereof shall be entitled to a full refund of all fees illegally collected and payment of unpaid salary, which should not be less than the applicable wage for services rendered.

ARTICLE XI

Miscellaneous

Section 66. **Implementing Agencies** - The Department of Health is hereby designated as the agency tasked with monitoring the compliance with and implantations of the provisions of this Act by public health facilities. The Department of Labor and Employment is designated as the agency tasked with monitoring the compliance with and implementations of the provisions of this Act by private health facilities. The Commission and the Board is designated as the agency tasked with monitoring the compliance with and implementations of the provisions of this Act by educational institutions, CPE providers and health facilities. The CHED is similarly designated as the agency tasked with monitoring the compliance with and implementations of the provisions of this Act by educational institutions with regard to nursing education programs and its curriculum.

Section 67. **Appropriations** – The amount necessary to carry out the provisions of this Act shall be charged to the General Appropriations Act immediately upon effectivity hereof.

Section 68. **Rules and Regulations** – Within ninety days (90) after the effectivity of this Act, the Board, Civil Service Commission, Department of Budget and Management, the Department of Health and other concerned government agencies, shall formulate the implementing rules and regulations necessary to carry-out the provisions of this Act. The implementing rules and regulations shall be published in the Official Gazette or in the newspaper of general circulation.

Section 69. **Separability Clause** – Should any provision of this Act be declared unconstitutional, the remaining parts not affected thereby shall remain valid and operational.

Section 70. **Repealing Clause** – Republic Act No. 9173, otherwise known as the "Philippine Nursing Act of 2002" is hereby repealed. All other laws, decrees, orders, circulars, issuances, rules and regulations and parts thereof which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

Section 71. **Effectivity** – This act shall take effect fifteen (15) days after its publication in the Official Gazette or in any two (2) newspapers of general circulation in the Philippines.

Approved.