Proposed Revisions for Philippine Nursing Act of 2002 (RA 9173)

RA 9173	PROPOSED LEGISLATIVE REVISIONS	Rationale/ Explanations
AN ACT PROVIDING FOR A MORE RESPONSIVE NURSING PROFESSION, REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 7164, OTHERWISE KNOWN AS "THE PHILIPPINE NURSING ACT OF 1991" AND FOR OTHER PURPOSES	AN ACT INSTITUTING REFORMS TO **FURTHER PROTECT AND DEVELOP** THE NURSING PROFESSION, AMENDING FOR THE PURPOSE REPUBLIC ACT NUMBERED NINETY-ONE HUNDRED AND SEVENTY-THREE, OTHERWISE KNOWN AS THE "PHILIPPINE NURSING ACT OF 2002	• Since there are new developments in the paradigm of nursing, "FURTHER DEVELOP" can be retained. • Less word, less mistakes. Precise words are much better. • Since the scope of nursing practice is being expanded, the protection should also be expanded. Hence, "FURHTER PROTECT" is placed in the definition of this act. *Approved September 7, 2011*
ARTICLE I - Title **Section 1.** *Title*. - This Act shall be known as the "**Philippine Nursing Act of 2002**."	**ARTICLE I - Title** **Section 1. *SHORT* *Title***. - This Act shall be known as the "Philippine Nursing **PRACTICE REFORM** Act of 2011".	• "Reform" – need to address problems in Nursing Practice in the country *Approved October 14, 2011*
ARTICLE II - Declaration of Policy **Section 2.** *Declaration of Policy.* – It is hereby declared the policy of the State to assume responsibility for the protection and improvement of the nursing profession by instituting measures that will result in relevant nursing education, humane working conditions, better career prospects and a dignified existence for our nurses. The State hereby guarantees the delivery of quality basic health services through an adequate nursing personnel system throughout the country.	**ARTICLE II – Declaration of Policy** Section 2. *Declaration of Policy*. – **PUBLIC HEALTH SAFETY DEMANDS A HIGH LEVEL OF COMPETENCY AMONG FILIPINO NURSES**. It is hereby declared the policy of the State to **GUARANTEE UNIVERSAL ACCESS TO THE DELIVERY OF BASIC QUALITY HEALTH SERVICES THROUGH AN ADEQUATE NURSING PERSONNEL SYSTEM THROUGHOUT THE COUNTRY**. **THE STATE RECOGNIZES NURSES AS PRIME MOVERS OF NATIONAL DEVELOPMENT AND CONTRIBUTORS TO INTERNATIONAL COOPERATION AND UNDERSTANDING. AS SUCH, THE STATE** assumes responsibility for the protection, improvement **AND DEVELOPMENT** of the nursing profession by instituting measures that will result in relevant **AND QUALITY** nursing **PRACTICE**, humane working conditions, better career prospects, and a dignified existence for nurses **TO ENSURE HIGH LEVEL OF WELLNESS AND WELL-BEING.**	• The profession should also contribute to national development through health outcomes and safety. • Core values were not stated verbatim in Declaration of Policy as they were embodied already in this law. These values will be emphasized in the Code of Ethics. • The Declaration is meant not only for the protection of nurses, but also that of the clients. It is the responsibility of nurses to ensure the safety and welfare of their clients. *Approved September 7, 2011*
ARTICLE VI Nursing Practice	**ARTICLE III SCOPE OF Nursing Practice** **THE PRACTICE OF THE PROFESSION OF NURSING**	• Article III is supposed to define WHO IS A NURSE. There were debates before whether suturing makes a

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	INCLUDES THE PERFORMANCE OF FUNCTIONS IN NURSING SERVICE, EDUCATION, RESEARCH, LEADERSHIP AND GOVERNANCE.	midwife a nurse. This article is intended to clarify the distinction of nurses from other professions in terms of their scope of practice.
Section 28. *Scope of Nursing*. - A person shall be deemed to be practicing nursing within the meaning of this Act when he/she singly or in collaboration with another, initiates and performs nursing services to individuals, families and communities in any health care setting. It includes, but not limited to, nursing care during conception, labor, delivery, infancy, childhood, toddler, preschool, school age, adolescence, adulthood, and old age. As independent practitioners, nurses are primarily responsible for the promotion of health and prevention of illness. As members of the health team, nurses shall collaborate with other health care providers for the curative, preventive, and rehabilitative aspects of care, restoration of health, alleviation of suffering, and when recovery is not possible, towards a peaceful death. It shall be the duty of the nurse to:	**SEC. 3**. *Scope of Nursing **SERVICE***. – A person shall be deemed to be practicing nursing within the meaning of this Act when he/she singly or in collaboration with another, initiates and performs nursing **CARE** to individuals, families, **POPULATION GROUPS** and communities in any health care setting. It includes, but not limited to, nursing care during conception, labor, delivery, infancy, childhood, toddler, preschool, school age, adolescence, adulthood and old age. Nurses are primarily responsible for the promotion of health and prevention of illness. As members of the health team, nurses shall collaborate with other health care providers for the **PROMOTIVE**, preventive, curative, and rehabilitative aspects of care, restoration of health, alleviation of suffering, and when recovery is not possible, towards a peaceful death. **IN PERFORMING INDEPENDENT AND COLLABORATIVE FUNCTIONS SINGLY OR JOINTLY**, it shall be the duty of the nurse to:	*Approved October 6, 2011*
(a) Provide nursing care through the utilization of the nursing process. Nursing care includes, but not limited to, traditional and innovative approaches, therapeutic use of self, executing health care techniques and procedures, essential primary health care, comfort measures, health teachings, and administration of written prescription for treatment, therapies, oral topical and parenteral medications, internal examination during labor in the absence of antenatal bleeding and delivery. In case of suturing of perineal laceration, special training shall be provided according to protocol established;	a) Provide nursing care through the utilization of the nursing process. **BASIC** nursing care includes, but not limited to, traditional and innovative approaches, therapeutic use of self, executing health care techniques and procedures, essential primary health care, comfort measures, health teachings, and administration of written prescription for treatment, therapies, oral, topical and parenteral medications, internal examination during labor in the absence of antenatal bleeding and delivery, **AND** suturing of perineal laceration. **PROVIDE ADVANCED NURSING CARE THROUGH SPECIALIZED AND EXPANDED ROLES WITHIN THE PROTOCOL OF ADVANCED NURSING PRACTICE. CERTIFICATION BY AN ACCREDITED CERTIFICATION BODY IS REQUIRED.**	• Advanced Nursing Practice (ANP) refers to the practice itself and it includes expansion and specialization. • Advanced Practice Nursing (APN) refers to the whole framework including ANP, education and legislation. In fact, in other countries, it is another institution. APN can also be included in the IRR. • Basic practice in terms of assessment includes history, PE, diagnostic exam, and assessment documentation. Advanced practice includes risk appraisal. • In nursing diagnosis, advanced practice includes the use of clinical diagnostic inference. • For interventions, advanced practice includes planning, execution, ordering and in other states, prescription. Evaluation also revolves in one's own plan. In a nutshell, advanced practice is really an expansion.

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(b) establish linkages with community resources and coordination with the health team;	b) **COLLABORATE** with community resources and **COORDINATE** with **THE MEMBERS OF** the health team **IN ANY HEALTH CARE SETTING**;	• Replaced with more active words: "collaborate" and "coordinate". *Approved October 6, 2011*
(c) Provide health education to individuals, families and communities;	c) Provide health education to **EMPOWER** individuals, families, **POPULATION GROUPS** and communities **TO MAINTAIN, ATTAIN, RESTORE AND SUSTAIN OPTIMAL HEALTH AND QUALITY OF LIFE;**	• To include the goals and objectives of health education. *Approved October 6, 2011*
(d) Teach, guide and supervise students in nursing education programs including the administration of nursing services in varied settings such as hospitals and clinics; undertake consultation services; engage in such activities that require the utilization of knowledge and decision-making skills of a registered nurse; and	**Retained.**	*Approved October 6, 2011*
(e) Undertake nursing and health human resource development training and research, which shall include, but not limited to, the development of advance nursing practice;	e) Undertake nursing and health human resource development training and research, which shall include, but not limited to, the development of **ADVANCED PRACTICE NURSING**;	• The framework is the one being referred to in this provision. Hence, advanced practice nursing is used in place of advanced nursing practice. • "Advanced Practice Nursing" as the performance of advanced nursing practice roles and it also encompasses the environments in which the roles exist and interact, environmental factors that influence the purpose and nature of APN roles, and the resources and structures that permit advanced nursing practice to occur. APN is the whole field of the profession, including its members, institutions, values, and all that defines and enable the practice (Bryant- Lukosius et al, 2004, and Styles and Lewis, 2000,). • "Advanced Nursing Practice" describes the role which extends beyond the traditional scope of nursing and instead involves a highly autonomous practice (EXPANDED ROLE), maximizes the use of nursing knowledge, and contributes to the development of the profession. Advanced nursing practice involves roles

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		related to research, education, professional development, organizational leadership and not just of clinical proficiency (Bryant- Lukosius et al, 2004). *Approved October 6, 2011*
Provided, That this section shall not apply to nursing students who perform nursing functions under the direct supervision of a qualified faculty: Provided, further, That in the practice of nursing in all settings, the nurse is duty-bound to observe the Code of Ethics for nurses and uphold the standards of safe nursing practice. The nurse is required to maintain competence by continual learning through continuing professional education to be provided by the accredited professional organization or any recognized professional nursing organization: Provided, finally, That the program and activity for the continuing professional education shall be submitted to and approved by the Board.	*Provided*, That this section shall not apply to nursing students who perform nursing functions under the direct supervision of a qualified faculty; *Provided, further*, That in the practice of nursing in all settings, the nurse is **MANDATED** to observe the Code of Ethics for Nurses and uphold the standards of safe **AND QUALITY** nursing practice. The nurse is required to maintain competence by continual **PROFESSIONAL DEVELOPMENT AS PRESCRIBED BY THE BOARD OF NURSING**; *Provided, finally*, That the program and activity for the **CONTINUAL** professional **DEVELOPMENT** shall be submitted to and approved by the Board.	• Lack of mandate regarding Continuing professional Education for nurses: need for continuing education in management and related practice with number of CPE credited units *Approved October 6, 2011*
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	QUALITY CARE TO AN INDIVIDUAL, FAMILY OR GROUP THAT IS INDEPENDENT OR PROVIDED AS PART OF A TEAM BY A NURSE OR A GROUP OF NURSES WHO WILL BE ABLE TO ASSESS, PLAN, IMPLEMENT AND EVALUATE CARE PROVIDED TO CLIENTS BASED ON EVIDENCE DERIVED FROM RESEARCH. **A BEGINNING REGISTERED NURSE MUST HAVE THE FOLLOWING MINIMUM QUALIFICATIONS:** 1) **BACHELOR OF SCIENCE IN NURSING GRADUATE** 2) **REGISTERED NURSE WITH CURRENT PRC ID** 3) **MUST BE PHYSICALLY, MENTALLY AND PSYCHOLOGICALLY FIT TO PRACTICE NURSING** 4) **MUST NOT BE CONVICTED OF ANY MORAL TURPITUDE** 5) **MUST BE A MEMBER OF THE ACCREDITED PROFESSIONAL ORGANIZATION (APO)**	diagnosis is already included in the assessment part. This process is also included in the scope of the advanced practice nurse but will refer to higher levels of competencies. • N1, N2 and N3 are included under Beginning Registered Nurse. • Requisites are placed to be in parallel with Nursing Education. • For now, being a registered nurse automatically entails Filipino citizenship. • The requirements of the *beginning registered nurse* should not include continuing professional education. • The different roles of nurses as described in the core competencies (clinical practitioner, leader, manager and researcher) are considered in this provision. • There are two categories under the beginning registered nurse: 1) Nurses practicing general nursing and 2) Nurses practicing specialty nursing. • A Master's degree and certification is required for a nurse to advance from the beginning registered nurse level to the advanced practice nurse. For those nurses, aged 50 years and above, practicing specialty nursing, there will be two options in order to advance them to the advanced practice nurse level. The first is to grandfather them and consider their years of experiences. The second alternative is to grant them a diploma after they've completed a prescribed training, instead of taking a master's degree program. *Approved October 14, 2011*
---	**(B) ADVANCED PRACTICE NURSE. – ADVANCED PRACTICE NURSE IS A REGISTERED NURSE WHO HAS**	• In the law, it is just important to introduce that nurses go beyond the basic. • Advanced practice nurses are not just those in the clinical areas but also include educators, managers, etc. Anyone who is required to have a Masters degree and above will be considered advanced practice nurses. • Those who are not certified and who do not have Masters degree are clearly not included under Advanced

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	ACQUIRED EXPERT KNOWLEDGE BASE, COMPLEX DECISION-MAKING SKILLS AND CLINICAL COMPETENCIES FOR EXPANDED PRACTICE[1] BASED ON EVIDENCE DERIVED FROM RESEARCH. ADVANCED PRACTICE OF NURSING REQUIRES SUBSTANTIAL THEORETICAL KNOWLEDGE IN THE SPECIALTY AREA OF NURSING PRACTICE AND PROFICIENT CLINICAL UTILIZATION OF THIS KNOWLEDGE IN IMPLEMENTING INDEPENDENT AND INTERDEPENDENT NURSING INTERVENTIONS. SPECIALTIES CAN BE DIFFERENTIATED IN DIFFERENT CATEGORIES: ACCORDING TO FUNCTIONS, DISEASE/PATHOLOGY, SYSTEMS, AGE, SEX, ACUITY, SETTINGS, TECHNOLOGY/THERAPIES[2]. THIS PRACTICE INCLUDES THE ACQUISITION OF NEW KNOWLEDGE AND SKILLS THAT LEGITIMIZE ROLE AUTONOMY WITHIN SPECIFIC AREAS OF PRACTICE[3]. A MASTERS DEGREE IS REQUIRED FOR ENTRY LEVEL. THIS INCLUDES BUT IS NOT LIMITED TO THOSE WHO ARE IN EDUCATION, MANAGEMENT AND CLINICAL PRACTICE. **AN ADVANCED PRACTICE NURSE MUST HAVE THE FOLLOWING MINIMUM QUALIFICATIONS IN ADDITION TO THE REQUIREMENTS OF A BEGINNING REGISTERED NURSE:** **1) RELEVANT MASTERS DEGREE GRADUATE FROM A RECOGNIZED UNIVERSITY-BASED PROGRAM** **2) MUST BE CERTIFIED BASED ON THE BOARD OF NURSING PROTOCOL** **3) MUST BE A MEMBER OF THE ACCREDITED PROFESSIONAL ORGRANIZATION (APO) AND THE**	Practice Nurse. *Approved October 14, 2011*

1 International Council of Nurses, 2002

2 International Council of Nurses, 1992

3 Hamric, 2002

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	CORRESPONDING SPECIALTY ORGANIZATION	
Sec. 29. ***Qualification of Nursing Service Administrators*****.** - A person occupying supervisory or managerial positions requiring knowledge of nursing must: (a) Be a registered nurse in the Philippines; (b) Have at least two (2) years experience in general nursing service administration; (c) Possess a degree of Bachelors of Science in Nursing, with at least nine (9) units in management and administration courses at the graduate level; and (d) Be a member of good standing of the accredited professional organization of nurses; Provided, That a person occupying the position of chief nurse or director of nursing service shall, in addition to the foregoing qualifications, possess: (1) At least five (5) years of experience in a supervisory or managerial position in nursing; and	**(C) NURSING SERVICE MANAGER. – NURSING SERVICE MANAGER IS A REGISTERED NURSE** occupying supervisory or managerial positions requiring **LEADERSHIP AND** knowledge of nursing **MANAGEMENT.** **1) THE FIRST LEVEL MANAGER IS RESPONSIBLE DIRECTLY WITH THE PHYSICAL SET-UP OF THE UNIT, STRUCTURE AND OTHER HUMAN RESOURCES FOR HEALTH.** **2) THE MIDDLE LEVEL MANAGER IS RESPONSIBLE FOR THE DEPARTMENT OR SECTION HANDLING MORE THAN ONE (1) OR TWO (2) UNITS, TAKES CARE OF THE FINANCIAL, LOGISTIC, OPERATIONAL FUNCTIONS AND OTHERS.** **3) THE TOP LEVEL MANAGER OVERSEES THAT ALL NURSING UNITS IN TERMS OF THE FINANCIAL, HUMAN RESOURCES FOR HEALT (NOT JUST OF THE NURSES BUT INCLUDING THE NURSING ASSISTANTS/ADJUNCTS) AND OTHERS.** **A NURSING SERVICE MANAGER MUST HAVE THE FOLLOWING MINIMUM QUALIFICATIONS IN ADDITION TO THE REQUIREMENTS OF A BEGINNING REGISTERED NURSE:** **a) FOR FIRST LEVEL MANAGERIAL POSITION IN NURSING, EIGHTEEN (18) UNITS OF NURSING MANAGEMENT AND CLINICAL SUBJECTS IN MASTER OF ARTS IN NURSING/MASTER OF SCIENCE IN NURSING AND AT LEAST THREE (3) YEARS OF CLINICAL WORK EXPERIENCE.** **b) FOR MIDDLE LEVEL MANAGERIAL POSITION IN NURSING, COMPLETED ALL ACADEMIC**	• It was decided that Nursing Service Managers should be a different category under Sec. 3 Scope of Nursing Service. *Approved October 14, 2011*

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(2) A master's degree major in nursing; Provided, further, That for primary hospitals, the maximum academic qualifications and experiences for a chief nurse shall be as specified in subsections (a), (b), and (c) of this section: Provided, furthermore, That for chief nurses in the public health nursing shall be given priority. Provided, even further, That for chief nurses in military hospitals, priority shall be given to those who have finished a master's degree in nursing and the completion of the General Staff Course (GSC): Provided, finally, That those occupying such positions before the effectivity of this Act shall be given a period of five (5) years within which to qualify.	**REQUIREMENTS IN MASTER OF ARTS IN NURSING/MASTER OF SCIENCE IN NURSING AND AT LEAST THREE (3) YEARS OF CLINICAL AND TWO (2) YEARS OF MANAGEMENT EXPERIENCE.** **c) FOR TOP LEVEL MANAGERIAL POSITION IN NURSING, MASTERS DEGREE IN NURSING OR HEALTH MANAGEMENT-RELATED SCIENCES AND AT LEAST THREE (3) YEARS OF CLINICAL AND THREE (3) YEARS OF MANAGEMENT EXPERIENCE.** **d) MUST be** a member of good standing of the accredited professional organization **AND RELEVANT NURSING ORGANIZATIONS.** **PROVIDED THAT THE ABOVE QUALIFICATIONS SHALL APPLY TO ALL NURSES OCCUPYING SUPERVISORY OR MANAGERIAL POSITIONS ACROSS ALL HEALTH FACILITIES SUCH AS, BUT NOT LIMITED TO PRIMARY OR MILITARY HEALTH FACILITIES, FOR TOP LEVEL MANAGERIAL POSITION OF FIRST AND SECOND LEVELS, AS WELL AS MEDICAL CENTERS NATIONWIDE.**	• Clinical experience was clearly stated. • Six (6) years is deemed enough to make a nurse robust in occupying a top level managerial position in nursing. *Approved October 14, 2011*
Sec. 34*. Incentives and Benefits*. - The Board of Nursing, in coordination with the Department of Health and 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 set by the Department of Health.**	**(D) NURSE-PATIENT RATIO. –**The government and private hospitals are hereby mandated to maintain the standard nurse-patient ratio set by the department of health: • **IN HOSPITALS BASED ON ACUITY AND AUTHORIZED BED CAPACITY (ABC)** • **IN COMMUNITY BASED ON NEED, POPULATION AND GEOGRAPHY** • **IN OCCUPATIONAL OR SCHOOL SETTINGS BASED ON RELEVANT LEGAL INSTRUMENTS (AO, EO, RA)**	• The last sentence of Sec. 34 Incentives and Benefits in R.A. 9173 was transformed into a different section under Article VI Nursing Practice. • Nurse-patient ratio should be more detailed for different settings. *Approved October 14, 2011*
	SEC. 4. *SCOPE OF* *Nursing Education* **NURSING EDUCATION IS THE FORMAL LEARNING AND TRAINING IN THE SCIENCE AND ART OF NURSING PROVIDED BY HIGHER EDUCATION INSTITUTIONS DULY**	*Approved October 6, 2011*

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Section 25. *Nursing Education Program*. - The nursing education program shall provide sound general and professional foundation for the practice of nursing. The learning experiences shall adhere strictly to specific requirements embodied in the prescribed curriculum as promulgated by the Commission on Higher Education's policies and standards of nursing education.	**ACCREDITED BY CHED.** **(A) BASIC** Nursing Education Program**. –** The **BASIC** nursing education program **IS A COMPETENCY-BASED CURRICULUM WHICH WILL** provide sound **LIBERAL** and professional **EDUCATION** to **IMPLEMENT THE NECESSARY SAFE QUALITY NURSING PRACTICE.** **ADMISSION TO THE BACCALAUREATE NURSING PROGRAM SHALL REQUIRE PASSING A NATIONAL NURSING ADMISSION TEST (NNAT).** The **CURRICULUM AND THE RELATED** learning experiences shall adhere strictly to specific requirements embodied in the prescribed curriculum as promulgated by the Commission on Higher Education's policies and standards of nursing education. **(B) GRADUATE NURSING EDUCATION PROGRAM. – THE GRADUATE NURSING EDUCATION PROGRAM BUILDS ON THE KNOWLEDGE AND EXPERIENCES OF A REGISTERED NURSE. IT WILL PROVIDE EXPERT FOUNDATION TOWARDS ADVANCED PRACTICE, NURSING EDUCATION, OR NURSING ADMINISTRATION. IT INCLUDES A MASTER'S DEGREE AND DOCTORATE DEGREE IN NURSING FOUNDED ON THE PHILOSOPHICAL, SCIENTIFIC BODY OF KNOWLEDGE AND PRACTICE.** **GRADUATE AND POST-GRADUATE NURSING PROGRAMS SHALL BE OFFERED ONLY BY LEVEL THREE (3) ACCREDITED HIGHER EDUCATION INSTITUTIONS AS PROMULGATED BY THE CHED POLICIES AND STANDARDS ON GRADUATE EDUCATION.**	
Sec. 27. *Qualifications of the Faculty***.** - A member of the faculty in a college of nursing teaching professional courses must: (a) Be a registered nurse in the Philippines; (b) Have at least one (1) year of clinical practice in a field	**(C)** Qualifications of Faculty **MEMBERS.** **1. BASIC NURSING EDUCATION.** A member of the faculty in a college of nursing teaching professional courses must: a**.** Be a registered nurse in the Philippines **AND A HOLDER OF A CURRENT VALID PRC ID;** b**.** Have at least **THREE (3) YEARS** of clinical practice in a	*Approved October 6, 2011*

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of specialization; (c) Be a member of good standing in the accredited professional organization of nurses; and (d) 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. In addition to the aforementioned qualifications, the dean of a college must have a master's degree in nursing. He/she must have at least five (5) years of experience in	field of specialization; c. Be a member of good standing in the accredited professional organization of nurses; d. Be a holder of a master's degree in nursing, education, or other allied medical and health sciences conferred by a college of university duly recognized by the Government of the Republic of the Philippines. **E. MUST UNDERGO TEACHER TRAINING PROGRAM FOR NURSING EDUCATION PRIOR TO EMPLOYMENT** **F. MUST UNDERGO AN ACCREDITED CLINICAL SKILLS COMPETENCY ENHANCEMENT EVERY TWO (2) YEARS, AS PRESCRIBED AND ACCREDITED BY THE CONTINUING PROFESSIONAL EDUCATION/ DEVELOPMENT COUNCIL FOR NURSING.** **2. GRADUATE NURSING EDUCATION. A MEMBER OF THE FACULTY TEACHING GRADUATE PROFESSIONAL COURSES MUST:** **A. FOLLOW PRESCRIPTIONS 1 AND 2 OF BASIC NURSING EDUCATION; AND** **B. BE A HOLDER OF A DOCTORAL DEGREE IN NURSING, EDUCATION, OR OTHER ALLIED HEALTH SCIENCES CONFERRED BY A COLLEGE OF UNIVERSITY DULY RECOGNIZED BY THE GOVERNMENT OF THE REPUBLIC OF THE PHILIPPINES.** ***PROVIDED*, FURTHER, THAT HIGHER EDUCATION INSTITUTIONS OFFERING BOTH BASIC AND GRADUATE NURSING EDUCATION PROGRAMS SHALL BE GIVEN THREE (3) YEARS WITHIN WHICH TO COMPLY WITH QUALIFICATION REQUIREMENTS OF FACULTY MEMBERS FROM THE EFFECTIVITY OF THIS ACT.**	

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nursing.	**(D) QUALIFICATIONS OF THE DEAN. – THE DEAN OF A COLLEGE OF NURSING MUST:** **1) BE A REGISTERED NURSE IN THE PHILIPPINES AND A HOLDER OF A CURRENT VALID PRC ID;** **2) HAVE AT LEAST THREE (3) YEARS OF CLINICAL PRACTICE IN A FIELD OF SPECIALIZATION;** **3) HAVE AT LEAST THREE (3) YEARS OF NURSING EDUCATION PROGRAM MANAGEMENT EXPERIENCE OR THREE (3) YEARS OF MANAGEMENT IN ANY HEALTH-RELATED INSTITUTION;** **4) BE A HOLDER OF A MASTER'S DEGREE IN NURSING FOR BACCALAUREATE PROGRAM AND PREFERABLY A DOCTORAL DEGREE IN NURSING FOR DOCTORAL PROGRAM CONFERRED BY AN ACCREDITED COLLEGE OR UNIVERSITY IN THE PHILIPPINES OR ITS EQUIVALENT;** **5) MUST UNDERGO PROGRESSIVE TRAINING FOR DEANS ACCORDING TO PROGRAM PRESCRIBED BY THE BOARD.**	*Approved October 6, 2011*
---	**(E) *Faculty-student Ratio.* – THE RATIO OF FACULTY TO STUDENT IS BASED ON THE CHED MEMORANDUM ORDER (CMO) NO. 14 SERIES OF 2009, POLICIES AND STANDARDS FOR BACHELOR OF SCIENCE IN NURSING (BSN) PROGRAM.**	*Approved October 14, 2011*
Sec. 26. *Requirement for Inactive Nurses Returning to Practice.* - Nurses who have not actively practiced the profession for five (5) consecutive years are required to undergo one (1) month of didactic training and three (3) months of practicum. The Board shall accredit hospitals to conduct the said training program.	**SEC. 5**. *Requirement for Inactive Nurses Returning to Practice*. – **NURSES ARE DEEMED TO BE INACTIVE WHEN**: **1) THEY ARE NOT UTILIZING NURSING COMPETENCIES AS DEFINED IN THE SCOPE OF NURSING PRACTICE FOR FIVE (5) CONSECUTIVE YEARS.** **2) THERE IS NON-RENEWAL OF PRC ID FOR FIVE (5)**	• PRC defines active nurses as those renewing their licenses. This is not enough since others can just renew their licenses regularly without really practicing nursing. *Approved October 14, 2011*

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	YEARS. **3) THEY DO NOT HAVE PROOF OF FIVE (5) YEARS OF CONTINUOUS NURSING PRACTICE.** **INACTIVE NURSES** are required to undergo one (1) month of didactic training and three (3) months of practicum. **ONLY** the Board shall accredit hospitals **AND HEALTH CARE AGENCIES** to conduct the said training program.	
ARTICLE III - Organization of the Board of Nursing **Section 3.** *Creation and Composition of the Board.* - There shall be created a Professional Regulatory Board of Nursing, hereinafter referred to as the Board, to be composed of a Chairperson and six (6) members. They shall be appointed by the president of the Republic of the Philippines from among two (2) recommendees, per vacancy, of the Professional Regulation Commission, hereinafter referred to as the Commission, chosen and ranked from a list of three (3) nominees, per vacancy, of the accredited professional organization of nurses in the Philippines who possess the qualifications prescribed in Section 4 of this Act.	**ARTICLE IV - Organization of the Board of Nursing** **SEC. 6**. *Creation and Composition of the Board*. – There shall be created a Professional Regulatory Board of Nursing, hereinafter referred to as the Board, to be composed of a chairperson and six (6) members. They shall be appointed by the President of the Republic of the Philippines from among two (2) recommendees, per vacancy, of the Professional Regulation Commission, hereinafter referred to as the Commission, chosen and ranked from a list of three (3) nominees, per vacancy, of the accredited professional organization of nurses in the Philippines who possess the qualifications prescribed in **SEC. 7** of this Act.	*Approved September 7, 2011*
Section 4. *Qualifications of the Chairperson and Members of the Board.* - The Chairperson and Members of the Board shall, at the time of their appointment, possess the following qualifications:	**SEC. 7**. *Qualifications of the Chairperson and Members of the Board*. – The Chairperson and Members of the Board shall, at the time of their appointment, possess the following qualifications:	*Approved September 7, 2011*
(a) Be a natural born citizen and resident of the Philippines;	(a) Be natural born citizen and resident of the Philippines **FOR THE LAST FIVE (5) YEARS;**	• A member of the Board must know and be aware of the issues about the profession here in the Philippines. *Approved September 7, 2011*
(b) Be a member of good standing of the accredited professional organization of nurses;	**Retained.**	*Approved September 7, 2011*
(c) Be a registered nurse and holder of a master's degree in nursing, education or other allied medical profession conferred by a college or university duly recognized by	(c) Be a registered nurse **IN THE PHILIPPINES, AND A HOLDER OF A CURRENT VALID PRC ID**;	*Approved September 7, 2011*

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the Government: *Provided*, That the majority of the members of the Board shall be holders of a master's degree in nursing: *Provided, further*, That the Chairperson shall be a holder of a master's degree in nursing;	**(D) BE A HOLDER OF A MASTER'S DEGREE IN NURSING AND PREFERABLY WITH A DOCTORATE DEGREE CONFERRED BY AN ACCREDITED UNIVERSITY;**	• The Board of Nursing (BON) members hold positions of honor and prestige, and should therefore have higher qualifications than most Nursing leaders. • Master's degree **in Nursing** must be a requirement since the BON members are leaders in the **nursing profession.** • Simply being government-recognized does not assure quality of the program. Hence, "conferred by an accredited university" was placed. *Approved September 7, 2011*
d) Have at least ten (10) years of continuous practice of the profession prior to appointment: Provided, however, That the last five (5) years of which shall be in the Philippines; and	**(E)** Have at least ten (10) years of continuous practice of the **NURSING** profession prior to appointment; *Provided*, however, That the last five (5) years of which shall be in the Philippines; and	Five (5) years will make someone be acculturated and adjusted to the country setting. Also, a member of the BON must know and be aware of the issues of the nursing profession here in the Philippines. *Approved September 7, 2011*
(e) Not have been convicted of any offense involving moral turpitude; Provided, That the membership to the Board shall represent the three (3) areas of nursing, namely: nursing education, nursing service and community health nursing.	**(F) MUST BE OF PROVEN HONESTY AND INTEGRITY;** Provided, That the membership to the Board shall represent the three (3) areas of nursing, namely: nursing education, nursing service and community health nursing.	No conviction or pending case. *Approved September 7, 2011*
Sec. 5. *Requirements Upon Qualification as Member of the Board of Nursing*. - Any person appointed as Chairperson or Member of the Board shall immediately resign from any teaching position in any school, college, university or institution offering Bachelor of Science in Nursing and/or review program for the local nursing board examinations or in any office or employment in the government or any subdivision, agency or instrumentality thereof, including government-owned or controlled corporations or their subsidiaries as well as these employed in the private sector. He/she shall not have any pecuniary interest in or administrative supervision over any institution offering Bachelor of Science in Nursing including review classes.	**SEC. 8.** *Requirements Upon Qualification as Member of the Board of Nursing*. -Any person appointed as Chairperson or Member of the Board shall immediately resign from any teaching position in any school, college, university or institution offering Bachelor of Science in Nursing and/or review program for the local nursing board examinations or in any office or employment in the government or any subdivision, agency or instrumentality thereof, including government-owned or controlled corporations or their subsidiaries as well as these employed in the private sector. He/she shall not have any pecuniary interest in or administrative supervision over any institution offering Bachelor of Science in Nursing including review classes.	*Approved September 7, 2011*

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Sec. 6. *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: Provided, That the Chairperson and members of the Board may be re-appointed for another term. Any vacancy in the Board occurring within the term of a Member shall be filled for the unexpired portion of the term only. Each Member of the Board shall take the proper oath of office prior to the performance of his/her duties. The incumbent Chairperson and Members of the Board shall continue to serve for the remainder of their term under Republic Act No. **7164** until their replacements have been appointed by the President and shall have been duly qualified.	**SEC. 9**. *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; Provided, That the Chairperson and members of the Board may be re-appointed for another term. Any vacancy in the Board occurring within the term of a Member shall be filled for the unexpired portion of the term only. Each Member of the Board shall take the proper oath of office prior to the performance of his/her duties. The incumbent Chairperson and Members of the Board shall continue to serve for the remainder of their term under Republic Act No. **9173** until their replacements have been appointed by the President and shall have been duly qualified.	*Approved September 7, 2011*
Sec. 7. *Compensation of the Board Members*. - 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 professional regulatory boards.	**SEC. 10**. *Compensation of the Board Members*. -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 professional regulatory boards.	*Approved September 7, 2011*
Sec. 8. *Administrative Supervision of the Board, Custodian of its Records, Secretariat and Support Services*. - The Board shall be under the administrative supervision of the Commission. 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 Commission. The Commission shall designate the Secretary of the Board and shall provide the secretariat and other support services to implement the provisions of this Act.	**SEC. 11**. *Administrative Supervision of the Board, Custodian of its Records, Secretariat and Support Services*. -The Board shall be under the administrative supervision of the Commission. 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 Commission. The Commission shall designate the Secretary of the Board and shall provide the secretariat and other support services to implement the provisions of this Act.	*Approved September 7, 2011*
Sec. 9. *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) Conduct the licensure examination for nurses;	**SEC. 12.** *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 PHILIPPINE NURSE LICENSURE EXAMINATION (PNLE) CONSIDERING**	Need to expand powers and duties of the board to ensure fiscal autonomy and provide greater control of professional development There were some additional statements for (a) since a brief statement may seem as leaving to the PRC everything

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	THE PROCESS AND SYSTEMS OF THE COMMISSION, WHICH INCLUDE BUT NOT LIMITED TO APPLICATION, TEST DEVELOPMENT, EXAMINATION, CORRECTION AND RELEASE OF RESULTS. THE USE OF APPROPRIATE TECHNOLOGY/MODALITIES DURING THE CONDUCT OF THE PNLE IS ENCOURAGED TO ENHANCE EFFICIENCY WHILE UPHOLDING INTEGRITY;	about the exam. • Suggestions of the Board: ○ Add statements regarding the following: ▪ APPLICATION (consider on-line application) ▪ TEST DEVELOPMENT (consider an outsource agency) ▪ EXAMINATION (walk-in examinees) *Approved September 7, 2011*
(b) Issue, suspend or revoke certificates of registration for the practice of nursing;	b) Issue, suspend, revoke **OR REISSUE** certificates of registration for the practice of nursing **AND ENSURE WIDEST PUBLICATION THROUGH ELECTRONIC AND WRITTEN MEDIA**;	For the public to know and for public safety. *Approved September 7, 2011*
(c) Monitor and enforce quality standards of nursing practice in the Philippines and exercise the powers necessary to ensure the maintenance of efficient, ethical and technical, moral and professional standards in the practice of nursing taking into account the health needs of the nation;	c) **ENFORCE AND MONITOR SAFE AND** quality standards of nursing practice in the Philippines and exercise the powers necessary to ensure the maintenance of efficient, **ETHICO-MORAL**, technical and professional standards in the practice of nursing **TOWARDS OPTIMAL HEALTH AND THE COMMON GOOD OF THE NATION**;	*Approved September 7, 2011*
(d) Ensure quality nursing education by examining the prescribed facilities of universities or colleges of nursing or departments of nursing education and those seeking permission to open nursing courses to ensure that standards of nursing education are properly complied with and maintained at all times. The authority to open and close colleges of nursing and/or nursing education programs shall be vested on the Commission on Higher Education upon the written recommendation of the Board;	d) Ensure quality nursing education by examining **AND MONITORING HIGHER EDUCATION INSTITUTIONS (HEI) OFFERING NURSING PROGRAMS** and those seeking permission to open nursing courses to ensure that standards of nursing education are properly complied with and maintained at all times. The authority to open and close nursing education programs **OFFERED BY HEI**, shall be vested on the Commission on Higher Education, **ONLY** upon the written recommendation of the Board;	The power of the Board was emphasized. The position paper submitted by Dean Remy Fernandez will be able to support/explain this provision. *Approved September 7, 2011*
(e) Conduct hearings and investigations to resolve complaints against **nurse practitioners** for unethical and unprofessional conduct and violations of this Act, or its rules and regulations and in connection therewith, issue *subpoena ad testificandum* and *subpoena duces tecum* to secure the appearance of respondents and witnesses and the production of documents and punish with contempt persons obstructing, impeding and/or otherwise	e) Conduct hearings and investigations to resolve complaints against **ACTIVE PRACTICING NURSES** for unethical and unprofessional conduct and violations of this Act, or its rules and regulations and in connection therewith, issue subpoena ad testificandum and subpoena duces tecum to secure the appearance of respondents and witnesses and the production of documents and punish with contempt persons obstructing, impeding and/or otherwise interfering with the conduct of such	To address all levels of practicing nurses. Across global practice, nurse practitioners are under advanced practice. Hence, “nurse practitioners” was changed to “active practicing nurses”. In this provision, nurses in general are being addressed. *Approved September 7, 2011*

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interfeming with the conduct of such proceedings, upon application with the court;	proceedings, upon application with the court;	
(f) Promulgate a Code of Ethics in coordination and consultation with the accredited professional organization of nurses within one (1) year from the effectivity of this Act;	f) Promulgate a Code of Ethics **THAT IS RESPONSIVE TO THE NEEDS OF THE NURSING PROFESSION**, in coordination and consultation with the accredited professional organization of nurses within one (1) year from the effectivity of this Act;	To promote a set of values in the profession that will foster caring and compassion for patients. *Approved September 7, 2011*
---	**G) INSTITUTE A MECHANISM FOR CAREER PROGRESSION IN NURSING FOR THE CONTINUING PROFESSIONAL DEVELOPMENT OF FILIPINO NURSES;**	Promote career paths for nursing professional development to achieve retention and increase satisfaction of practicing nurses. *Approved September 7, 2011*
(g) Recognize nursing specialty organizations in coordination with the accredited professional organization; and	**H) CREATE A COUNCIL FOR NURSING RECOGNITION, ACCREDITATION AND CERTIFICATION THAT WILL ASSIST THE BOARD OF NURSING IN:** **1) RECOGNIZING ORGANIZED NURSING GROUPS.** **2) SETTING STANDARDS FOR ADVANCED NURSING PRACTICE, EDUCATION, RESEARCH AND MANAGEMENT.** **3) ACCREDITING SPECIALTY AND ADVANCED NURSING PROGRAMS BASED ON ESTABLISHED MECHANISMS.** **4) CREDENTIALING INDIVIDUAL REGISTERED NURSES BASED ON ACCEPTED CRITERIA.** **5) MONITORING AND EVALUATING SPECIALTY AND ADVANCED NURSING PRACTICE, EDUCATION, RESEARCH AND MANAGEMENT.**	• "Recognition" addresses interest groups in the nursing community. • Given the different tracks in nursing, the function of the Board of Nursing in addressing the career pathways other than the advanced nursing practice must be stated. Hence, "…EDUCATION, RESEARCH AND MANAGEMENT" was added. • Who will regulate those recognized, accredited and certified individuals or groups? The BON will create a council to perform the recognition, accreditation and certification but this council will still report to the BON. The BON then, remains the main regulatory group. • To be able to complete the regulatory process, (5) was added. Also, monitoring and evaluation is placed to ensure safety and quality of nursing practice in the Philippines. *Approved October 14, 2011*

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---	**I) MAKE DECISIONS TO INFLUENCE AUTHORITIES/AGENCIES ON MATTERS THAT DIRECTLY AFFECT NURSES' WELFARE;**	As a regulatory body, the BON must be consulted and must be able to influence decisions. *Approved September 7, 2011*
---	**J) ENSURE PERFORMANCE OF MANDATED DUTIES AND FUNCTIONS WITH THE PROVISION OF OPERATIONAL RESOURCES INCLUDING HUMAN RESOURCE, PHYSICAL SPACE AND BUDGET TO ENSURE THE CONFIDENTIALITY AND SANCTITY OF THEIR FUNCTIONS AS PROVIDED THROUGH THE ANNUAL BUDGET OF THE PROFESSIONAL REGULATION COMMISSION AS PROMULGATED IN THE GENERAL APPROPRIATIONS ACT;**	• Office of Strategic Management (OSM) can resolve this issue. • This is part of the solution to address the issue in the generation of funds by the nursing profession. *Approved September 7, 2011*
---	**K) UTILIZE FUNDS DESIGNATED FOR NURSING DEVELOPMENT; AND** **For legal check-up.**	• This is part of the solution to address the issue in the generation of funds by the nursing profession. *Approved September 7, 2011*
(h) Prescribe, adopt issue and promulgate guidelines, regulations, measures and decisions as may be necessary for the improvements of the nursing practice, advancement of the profession and for the proper and full enforcement of this Act subject to the review and approval by the Commission.	**L)** Prescribe, adopt, issue and promulgate guidelines, regulations, measures and decisions as may be necessary for the improvement of the nursing practice, advancement of the profession and for the proper and full enforcement of this Act subject to the review and approval by the Commission.	*Approved September 7, 2011*
Sec. 10. *Annual Report*. - The Board shall at the close of its calendar year submit an annual report to the President of the Philippines through the Commission 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.	**SEC. 13**. *Annual Report*. -The Board shall at the close of its calendar year submit an annual report to the President of the Philippines through the Commission 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.	*Approved September 7, 2011*
Sec. 11. *Removal or Suspension of Board Members*. - The president may remove or suspend any member of the Board after having been given the opportunity to defend himself/herself in a proper administrative	**SEC. 14**. *Removal or Suspension of Board Members*. -The president may remove or suspend any member of the Board after having been given the opportunity to defend	*Approved September 7, 2011*

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investigation, on the following grounds; (a) Continued neglect of duty or incompetence; (b) Commission or toleration of irregularities in the licensure examination; and (c) Unprofessional immoral or dishonorable conduct.	himself/herself in a proper administrative investigation, on the following grounds: (a) Continued neglect of duty or incompetence; (b) Commission or toleration of irregularities in the licensure examination; and (c) Unprofessional immoral or dishonorable conduct.	
ARTICLE IV - Examination and Registration **Sec. 12. *Licensure Examination*.** - All applicants for license to practice nursing shall be required to pass a written examination, which shall be given by the Board in such places and dates as may be designated by the Commission: Provided, That it shall be in accordance with Republic Act No. 8981, otherwise known as the "PRC Modernization Act of 2000"	**ARTICLE V - Examination and Registration** **SEC. 15. *PHILIPPINE NURSE LICENSURE EXAMINATION*.** -All applicants for license to practice nursing shall be required to pass a written examination, which shall be given by the Board in such places and dates as may be designated by the Commission; Provided, That it shall be in accordance with **EXISTING PRC LAW.**	In case R.A. 8981 will be repealed in the future, it is just safe to place "existing PRC Law" so that this provision will still be relevant. *Approved September 7, 2011*
Sec. 13. *Qualifications for Admission to the Licensure Examination*. - In order to be admitted to the examination for nurses, an applicant must, at the time of filing his/her application, establish to the satisfaction of the Board that: (a) He/she is 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 country are substantially the same as those prescribed in this Act; (b) He/she is of good moral character; and (c) He/she is a holder of a Bachelor's Degree in Nursing from a college or university that complies with the standards of nursing education duly recognized by the	**SEC. 16.** *Qualifications for Admission to the* ***PHILIPPINE NURSE LICENSURE EXAMINATION*. –** In order to be admitted to the examination for nurses, an applicant**, FROM** the time of **HIS/HER GRADUATION MUST FILE IMMEDIATELY** his/her application **AND** establish to the satisfaction of the Board that: **Retained.** **Retained.** c) He/she is a holder of a **BACHELOR OF SCIENCE IN NURSING DEGREE** from a college or university that complies with the standards of nursing education duly recognized by the	"File immediately" was placed to address nefarious practices of nursing schools that do not allow nursing students to take the Board exam. *Approved September 7, 2011* *Approved September 7, 2011*

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proper government agency.	proper government agency.	*Approved September 7, 2011* *Approved September 7, 2011*
Sec. 14. *Scope of Examination*. - The scope of the examination for the practice of nursing in the Philippines shall be determined by the Board. The Board shall take into consideration the objectives of the nursing curriculum, the broad areas of nursing, and other related disciplines and competencies in determining the subjects of examinations.	**SEC. 17**. *Scope of Examination*. – The scope of the examination for the practice of nursing shall be determined by the Board **OF NURSING TAKING INTO CONSIDERATION THE CORE COMPETENCIES REQUIRED OF BEGINNING REGISTERED NURSES CONSIDERING** the objectives of the nursing curriculum **IN RESPONSE TO THE NEEDS OF THE SOCIETY AND THE DEMANDS OF INDUSTRY.** **THE PHILIPPINE NURSE LICENSURE EXAMINATION SHALL BE BASED ON A COMPETENCY-BASED TEST FRAMEWORK.**	*Approved September 7, 2011*
Sec. 15. *Ratings*. - In order to pass the examination, an examinee must obtain a general average of at least seventy-five percent (75%) with a rating of not below sixty percent (60%) in any subject. An examinee who obtains an average rating of seventy-five percent (75%) or higher but gets a rating below sixty percent (60%) in any subject must take the examination again but only in the subject or subjects where he/she is rated below sixty percent (60%). In order to pass the succeeding examination, an examinee must obtain a rating of at least seventy-five percent (75%) in the subject or subjects repeated.	**SEC. 18.** *Ratings*. **–** In order to pass the examination, an examinee must obtain at least seventy-five percent (75%) **OF TESTED AREAS OF COMPETENCIES. AN EXAMINEE SHALL BE GIVEN A CHANCE TO REPEAT THE PNLE WITH A MAXIMUM OF THREE (3) EXAMINATIONS**.	The curriculum is a competency-based curriculum. *Approved September 7, 2011*
Sec. 16. *Oath*. - All successful candidates in the examination shall be required to take an oath of profession before the Board or any government official authorized to administer oaths prior to entering upon the nursing practice.	**SEC. 19**. *Oath*. -All successful candidates in the examination shall be required to take an oath of profession before the Board or any government official authorized to administer oaths prior to entering upon the nursing practice.	*Approved September 7, 2011*
Sec. 17. *Issuance of Certificate of Registration/Professional License and Professional Identification Card*. - A certificate of registration/professional license as a nurse shall be issued to an applicant who passes the examination upon	**SEC. 20**. *Issuance of Certificate of Registration/Professional License and Professional Identification Card*. A certificate of registration/professional license as a nurse shall be issued to an applicant who passes the examination upon payment of the prescribed fees. Every certificate of registration/professional	For the recognition of the Board. *Approved September 7, 2011*

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payment of the prescribed fees. Every certificate of registration/professional license shall show the full name of the registrant, the serial number, the signature of the Chairperson of the Commission and of the Members of the Board, and the official seal of the Commission. A professional identification card, duly signed by the Chairperson of the Commission, bearing the date of registration, license number, and the date of issuance and expiration thereof shall likewise be issued to every registrant upon payment of the required fees.	license shall show the full name of the registrant, the serial number, the signature of the Chairperson of the Commission and of the Members of the Board. **THE CERTIFICATE SHALL BEAR THE LOGO OF THE BOARD OF NURSING** and the official seal of the Commission. A professional identification card, duly signed by the Chairperson of the Commission, bearing the date of registration, license number, and the date of issuance and expiration thereof shall likewise be issued to every registrant upon payment of the required fees.	
Sec. 18. *Fees for Examination and Registration*. - Applicants for licensure and for registration shall pay the prescribed fees set by Commission.	**SEC. 21.** *Fees for Examination and Registration*. -Applicants for licensure and for registration shall pay the prescribed fees set by Commission.	*Approved September 7, 2011*
Sec. 19. *Automatic Registration of Nurses*. - All nurses whose names appear at the roster of nurses shall be automatically or ipso facto registered as nurses under this Act upon its effectivity.	**SEC. 22.** *Automatic Registration of Nurses*. -All nurses whose names appear at the roster of nurses shall *ipso facto* **BE** registered as nurses **AND AS MEMBERS OF THE PRC ACCREDITED PROFESSIONAL ORGANIZATION (APO) UPON THE EFFECTIVITY OF THIS ACT.**	The intent of this provision is the mechanism of automation in PRC. *Approved October 14, 2011*
Sec. 20. *Registration by Reciprocity*. - A certificate of registration/professional license may be issued without examination to nurses registered under the laws of a foreign state or country: Provided, That the requirements for registration or licensing of nurses in said country are substantially the same as those prescribed under this Act: Provided, further, That the laws of such state or country grant the same privileges to registered nurses of the Philippines on the same basis as the subjects or citizens of such foreign state or country.	**SEC. 23**. *Registration by Reciprocity*. -A certificate of registration/professional license may be issued without examination to nurses registered under the laws of a foreign state or country; Provided, That the requirements for registration or licensing of nurses in said country are substantially the same as those prescribed under this Act; Provided, further, That the laws of such state or country grant the same privileges to registered nurses of the Philippines on the same basis as the subjects or citizens of such foreign state or country.	*Approved September 7, 2011*
Sec. 21. *Practice Through Special/Temporary Permit*. - A special/temporary permit may be issued by the Board to the following persons subject to the approval of the Commission and upon payment of the prescribed fees: (a) Licensed nurses from foreign countries/states whose service are either for a fee or free if they are	**SEC. 24**. *Practice Through Special/Temporary Permit*. -A special/temporary permit may be issued to the following persons **BASED ON QUALIFICATION STANDARDS AS DETERMINED BY THE BOARD OF NURSING AND APPROVED BY** the Commission:	• Special/Temporary permit refers to those people on medical missions, consultancy work, lecturers, etc. Organizations importing these people must be transparent and in turn, the BON must be vigilant for those who might take advantage.

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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; and	**Retained.**	*Approved September 7, 2011*
(c) Licensed nurses from foreign countries/states employed by schools/colleges of nursing as exchange professors in a branch or specialty of nursing;	**Retained.**	Replaced "employed" with "engaged" since the previous word has a wide coverage while the latter corresponds to a limited period of time. *Approved September 7, 2011*
---	(c) Licensed nurses from foreign countries/states **ENGAGED** by colleges/**UNIVERSITIES OFFERING** nursing as exchange professors in a branch or specialty of nursing; **AND**	• This was added to cover emergency situations such as earthquakes, tsunamis, etc. • Foreign nurses who come to aid during disasters and calamities will only stay for the duration of the need. *Approved September 7, 2011*
Provided, however, That the special/temporary permit shall be effective only for the duration of the project, medical mission or employment contract.	**(D) LICENSED NURSES FROM FOREIGN COUNTRIES/STATES WHO COME TO AID DURING DECLARED DISASTERS AND CALAMITIES.** *Provided*, however, that the special/temporary permit shall be effective only for the duration of the project, medical mission or **ENGAGEMENT** contract.	Replaced "employment" with "engagement" since the previous word has a wide coverage while the latter corresponds to a limited period of time. *Approved September 7, 2011*
Sec. 22. *Non-registration and Non-issuance of Certificates of Registration/Professional License or Special/Temporary Permit*. - No person convicted by final	**SEC. 25.** *Non-registration and Non-issuance of Certificates of Registration/Professional License or Special/Temporary Permit*. -No person convicted by final judgment of any criminal offense	*Approved September 7, 2011*

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judgment of any criminal offense involving moral turpitude or any person guilty of immoral or dishonorable conduct or any person declared by the court to be of unsound mind shall be registered and be issued a certificate of registration/professional license or a special/temporary permit. The Board shall furnish the applicant a written statement setting forth the reasons for its actions, which shall be incorporated in the records of the Board.	involving moral turpitude or any person guilty of immoral or dishonorable conduct or any person declared by the court to be of unsound mind shall be registered and be issued a certificate of registration/professional license or a special/temporary permit. The Board shall furnish the applicant a written statement setting forth the reasons for its actions, which shall be incorporated in the records of the Board.	
Sec. 23. *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) For any of the causes mentioned in the preceding section; (b) For unprofessional and unethical conduct; (c) For gross incompetence or serious ignorance; (d) For malpractice or negligence in the practice of nursing; (e) For the use of fraud, deceit, or false statements in obtaining a certificate of registration/professional license or a temporary/special permit; (f) For violation of this Act, the rules and regulations, Code of Ethics for nurses and technical standards for nursing practice, policies of the Board and the Commission, or the conditions and limitations for the issuance of the temporarily/special permit; or (g) For practicing his/her profession during his/her suspension from such practice; *Provided*, *however*, That the suspension of the certificate of registration/professional license shall be for a period	**SEC. 26.** *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) For any of the causes mentioned in the preceding section; (b) For unprofessional and unethical conduct; (c) For gross incompetence or serious ignorance; (d) For malpractice or negligence in the practice of nursing; (e) For the use of fraud, deceit, or false statements in obtaining a certificate of registration/professional license or a temporary/special permit; (f) For violation of this Act, the rules and regulations, Code of Ethics for nurses and technical standards for nursing practice, policies of the Board and the Commission, or the conditions	*Approved September 7, 2011*

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not to exceed four (4) years.	and limitations for the issuance of the temporarily/special permit; or (g) For practicing his/her profession during his/her suspension from such practice; *Provided, however*, That the suspension of the certificate of registration/professional license shall be for a period not to exceed four (4) years.	
Sec. 24. *Re-issuance of Revoked Certificates and Replacement of Lost Certificates*. - The Board may, after the expiration of a maximum of four (4) years from the date of revocation of a certificate, for reasons of equity and justice and when the cause for revocation has disappeared or has been cured and corrected, upon proper application therefor and the payment of the required fees, issue another copy of the certificate of registration/professional license. A new certificate of registration/professional license to replace the certificate that has been lost, destroyed or mutilated may be issued, subject to the rules of the Board.	**SEC. 27.** *Re-issuance of Revoked Certificates and Replacement of Lost Certificates.* -The Board may, after the expiration of a maximum of four (4) years from the date of revocation of a certificate, for reasons of equity and justice and when the cause for revocation has disappeared or has been cured and corrected, upon proper application therefore and the payment of the required fees, issue another copy of the certificate of registration/professional license. A new certificate of registration/professional license to replace the certificate that has been lost, destroyed or mutilated may be issued, subject to the rules of the Board.	*Approved September 7, 2011*
ARTICLE VII - Health Human Resources Production, Utilization and Development **Sec. 30.** *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 health human resources production, utilization and development.	**ARTICLE VI – HUMAN RESOURCES FOR HEALTH (HRH) Production, Utilization and Development** **SEC. 28.** *Studies **AND INTERVENTIONS** for Nursing **HUMAN RESOURCE** Needs, Production, Utilization and Development.* – The Board **SHALL** in coordination with **RELEVANT NURSING** and **OTHER** government and **NON-GOVERNMENT** agencies: a) conduct studies on health human resource production, utilization and development. b) **IMPLEMENT HRH DEVELOPMENT STRATEGIES FOR NURSES TO ATTAIN A HIGHLY MOTIVATED AND PRODUCTIVE NURSING WORKFORCE.**	The production should be based on the actual demand. Production should be computed based on the national nurse: patient ratio per community; plantilla positions in the institutions. To ensure compliance with standard nurse-patient ratio per population as prescribed by DOH *Approved September 23, 2011*

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Sec. 31. *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. The beneficiaries of this program are obliged to serve in any Philippine hospital for a period of at least two (2) years of continuous service.	**SEC. 29. *NATIONAL NURSING CAREER PROGRESSION PROGRAM.* – THERE SHALL BE AN INSTITUTIONALIZED NATIONAL NURSING CAREER PROGRESSION PROGRAM AS PRESCRIBED IN ARTICLE IV, SEC. 12, LETTER G & H. IN THE IMPLEMENTATION OF THE NATIONAL NURSING CAREER PROGRESSION PROGRAM, THE BOARD SHALL COORDINATE WITH THE DEPARTMENT OF HEALTH AND OTHER RELEVANT GOVERNMENT AND PRIVATE AGENCIES.** ***PROVIDED*, THAT ANY REGISTERED NURSE, BEFORE BEING ALLOWED TO WORK IN SPECIALTY AREAS TO PERFORM BEYOND GENERALIST FUNCTION OR HAVE SPECIFIC SPECIALTIES, MUST FINISH THE FORMAL EDUCATION AND TRAINING TOWARDS SPECIALIZATION, POSSESS RECOGNIZED ADVANCED PRACTICE COMPETENCIES AND MUST BE CERTIFIED BY THE BOARD TO BE AN ADVANCED PRACTICE NURSE AND MUST BE A MEMBER OF A RELEVANT AND ACCREDITED NURSING SPECIALTY ORGANIZATION; *PROVIDED FURTHER*, THAT NURSING SPECIALTY ORGANIZATIONS WITH ADVANCED PRACTICE SHALL BE RECOGNIZED AND CERTIFIED BY THE BOARD.**	**Key recommendation in the study of Manila (2010):** -create a framework for Advanced Practice Nursing the Philippines which will formalize education and training towards specialization, recognize advanced practice competencies, and facilitate appropriate remuneration according to earned knowledge and skill. *Approved September 23, 2011*
Sec. 32. *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 15 prescribes under Republic Act No. 6758, otherwise known as the "Compensation and Classification Act of 1989": Provided, That for nurses working in local government units, adjustments to their salaries shall be in accordance with Sec. 10 of the said law.	**SEC. 30. *COMPENSATION*.** – In order to enhance the general welfare, commitment to service and professionalism of nurses, the minimum base pay of nurses working in the public **AND PRIVATE** health **AND HEALTH-RELATED** institutions **SHALL BE IN ACCORDANCE WITH PREVAILING SALARY STANDARDS SET BY LAW FOR PROFESSIONALS AND** shall not be lower than salary grade 15 **FOLLOWING THE PROVISIONS OF THE SALARY STANDARDIZATION LAW**. ***PROVIDED, FURTHER,* THAT ADVANCED PRACTICE NURSES IN PUBLIC AND PRIVATE HEALTH AND HEALTH-RELATED INSTITUTIONS SHALL BE ENTITLED TO ADDITIONAL REMUNERATION. GOVERNMENT AND NON-GOVERNMENT FINANCIAL INSTITUTIONS SHALL PROVIDE MECHANISM FOR REIMBURSEMENTS FOR SPECIALTY AND ADVANCED PRACTICE NURSING SERVICES BASED ON QUALIFICATIONS PRESCRIBED BY THE BOARD ADHERING TO THE NATIONAL NURSING**	• Salary Grade 15 will be retained. • In order to address nurses practicing independently, “IN ADDITION, NURSING PROFESSIONAL FEES MAY BE EXACTED DIRECTLY FROM THE CLIENTELE AND PATIENTS IN THE CONTEXT OF THE BEGINNING REGISTERED NURSES AND/OR ADVANCED PRACTICE NURSES.” was added. *Approved September 23, 2011*

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	CAREER PROGRESSION PROGRAM. IN ADDITION, NURSING PROFESSIONAL FEES MAY BE EXACTED DIRECTLY FROM THE CLIENTELE AND PATIENTS IN THE CONTEXT OF THE BEGINNING REGISTERED NURSES AND/OR ADVANCED PRACTICE NURSES.	
Sec. 33. *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 and the Philippine Amusement and Gaming Corporation, 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.	**SEC. 31.** *Funding for the* ***DEVELOPMENT OF THE NATIONAL NURSING CAREER PROGRESSION PROGRAM AND TRAINING.*** **–** The annual financial requirement needed to **IMPLEMENT THE NURSING CAREER PROGRESSION PROGRAM IN THE TRAINING OF GOVERNMENT AND PRIVATE NURSES FOR CONTINUAL LIFE-LONG LEARNING SHALL BE SOURCED FROM:** **A. TEN PERCENT (10%) OF THE ANNUAL BUDGET OF THE DEPARTMENT OF HEALTH AS SPECIFIED UNDER THE ANNUAL GENERAL APPROPRIATIONS ACT; and** **B. TEN PERCENT (10%) OF** the income of the Philippine Charity Sweepstakes Office and the Philippine Amusement and Games Corporation which 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; **AND** **C. TWENTY PERCENT (20%) OF THE PROFESSIONAL REGULATION COMMISSION'S INCOME FROM THE REGULATION OF THE NURSING PROFESSION.**	• NNCPP is defined in Sec. 10 Powers and Duties of the Board. • The more sources, the better. • Specific amount from each source is important to ensure the funds that will be given to the profession. *Approved September 23, 2011*
Sec. 34*. Incentives and Benefits*. - The Board of Nursing, in coordination with the Department of Health and 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 set by the	**SEC. 32.** *Incentives and Benefits*. **– TO THE EXTENT POSSIBLE AS PROVIDED BY LAW, MECHANISM SHALL BE ESTABLISHED BY THE BOARD OF NURSING TO PROVIDE INCENTIVES AND BENEFITS FOR NURSES IN BOTH GOVERNMENT AND PRIVATE SECTORS.**	*Approved September 23, 2011*

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Department of Health.		
Article VIII - Penal and Miscellaneous Provisions **Sec. 35**. *Prohibitions in the Practice of Nursing*. - A fine of not less than Fifty thousand pesos (P50,000.00) nor more than One hundred thousand pesos (P100,000.00) 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: (a) any person practicing nursing in the Philippines within the meaning of this Act: (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; or (2) who uses as his/her own certificate of registration/professional license and professional identification card or special temporary permit of another; or (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; or (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; or (6) who appends B.S.N./R.N. (Bachelor of Science in Nursing/Registered Nurse) or any similar appendage	**Article VII -** Penal and Miscellaneous Provisions **SEC. 33.** *Prohibitions in the Practice of Nursing.* – 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 THE FOLLOWING CLASSIFICATION OF OFFENSES:** **1) VIOLATIONS AGAINST CODE OF ETHICS AND PUBLIC MORALS** **2) VIOLATIONS AGAINST PROFESSIONAL STANDARDS** **3) VIOLATIONS AGAINST HUMAN/PATIENT'S RIGHTS** **4) OTHER OFFENSES**	• The fines were made higher so as to control the violations against the nursing practice. • The licenses of nurse individuals are the ones subject in this provision, not the institution. • Nurses should be vigilant to stop the violations against the profession. *Approved October 14, 2011*

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to his/her name without having been coferred said degree or registration; or (7) who, as a registered and licensed nurse, abets or assists the illegal practice of a person who is not lawfully qualified to practice nursing. (b) any person or the chief executive officer of a judicial entity who undertakes in-service educational programs or who conducts review classes for both local and foreign examination without permit/clearance from the Board and the Commission; or (c) any person or employer of nurses who violate the minimum base pay of nurses and the incentives and benefits that should be accorded them as specified in Sections 32 and 34; or (d) any person or the chief executive officer of a juridical entity violating any provision of this Act and its rules and regulations.		
Article IX – Final Provisions **Sec. 36.** *Enforcement of this Act*. - It shall be the primary duty of the Commission and the Board to effectively implement this Act. Any duly law enforcement agencies and officers of national, provincial, city or municipal governments shall, upon the call or request of the Commission or the Board, render assistance in enforcing the provisions of this Act and to prosecute any persons violating the same.	**Article VIII – Final Provisions** **SEC. 34.** *Enforcement of this Act*. -It shall be the primary duty of the Commission and the Board to effectively implement this Act. Any duly law enforcement agencies and officers of national, provincial, city or municipal governments shall, upon the call or request of the Commission or the Board, render assistance in enforcing the provisions of this Act and to prosecute any persons violating the same.	*Approved September 23, 2011*
Sec. 37. *Appropriations.* - The Chairperson of the Professional Regulation Commission shall immediately include in its program and issue such rules and regulations to implement the provisions of this Act, the funding of which shall be included in the Annual General Appropriations Act.	**SEC. 35.** *Appropriations*. -The Chairperson of the Professional Regulation Commission shall immediately include in its program and issue such rules and regulations to implement the provisions of this Act, the funding of which shall be included in the Annual General Appropriations Act.	*Approved September 23, 2011*

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Sec. 38. *Rules and Regulations*. - Within ninety (90) days after the effectivity of this Act, the Board and the Commission, in coordination with the accredited professional organization, the Department of Health, the Department of Budget and Management and other concerned government agencies, shall formulate such 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 any newspaper of general circulation.	**SEC. 36.** *Rules and Regulations*. – Within ninety days (90) after the effectivity of this Act, the Board and the Commission, in coordination with the accredited professional organization **AND OTHER NURSING PROFESSIONAL ORGANIZATIONS,** the Department of Health, the Department of Budget and Management and other concerned government agencies, shall formulate 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 newspaper of general circulation.	*Approved September 23, 2011*
Sec. 39. *Reparability Clause*. - If any part of this Act is declared unconstitutional, the remaining parts not affected thereby shall continue to be valid and operational.	**SEC. 37.** *Reparability Clause*. -If any part of this Act is declared unconstitutional, the remaining parts not affected thereby shall continue to be valid and operational.	*Approved September 23, 2011*
Sec. 40. *Repealing Clause*. - Republic Act No. 7164, otherwise known as the "Philippine Nursing Act of 1991" 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.	**SEC. 38.** *Repealing Clause*. **REPUBLIC ACT NO. 9173, OTHERWISE KNOWN AS THE "PHILIPPINE NURSING ACT OF 2002"** is hereby **AMENDED.** All other laws, decrees, orders, circulars, issuances, rules and regulations and parts thereof which are inconsistent with **THE AMENDATORY PROVISIONS OF** this Act are hereby repealed, amended or modified accordingly.	*Approved September 23, 2011*
Sec. 41. *Effectivity.* - This act shall take effect fifteen (15) days upon its publication in the Official Gazette or in any two (2) newspapers of general circulation in the Philippines.	**SEC. 39**. *Effectivity.* This Act shall take effect fifteen (15) days **AFTER** its publication in the Official (2) national newspapers of general circulation.	*Approved September 23, 2011*