

RECORD OF THE SENATE

TUESDAY, AUGUST 20, 2002

OPENING OF THE SESSION

At 3:59 p.m., the Senate President, Hon. Franklin M. Drilon, called the session to order.

The President. The 11th session of the Second Regular Session of the Twelfth Congress is hereby called to order.

Let us all stand for the opening prayer to be led by Sen. Juan M. Flavier.

Everybody rose for the prayer.

PRAYER

Senator Flavier. This prayer is based on the prayer for peace written by Inayat Khan in 1921.

Our Lord and our God:

Send Your peace, O Lord, which is perfect and everlasting, that our souls may radiate peace.

Send Your peace, O Lord, that we may think, act and speak harmoniously.

Send Your peace, O Lord, that we may be contented and thankful for Your bountiful gifts.

Send Your peace, O Lord, that amidst our worldly strife, we may enjoy Your bliss.

• Send Your peace, O Lord, that we may endure all, tolerate all, and in the thought of Your grace and mercy.

Send Your peace, O Lord, that our lives may become a Divine vision and in Your light, all darkness may vanish.

Send Your peace, O Lord, our Father and Mother, that we, Your children of this nation, may all unite in one family.

Amen.

ROLL CALL

The President. The Secretary will please call the roll.

The Secretary, reading:

Senator Edgardo J. Angara Present
Senator Teresa Aquino-Oreta **
Senator Joker P. Arroyo Present

Senator Robert Z. Barbers Present
Senator Rodolfo G. Biazon Present*
Senator Renato L. *Compañero* Cayetano ... Present
Senator Noli "Kabayan" De Castro Present
Senator Luisa "Loi" P. Ejercito Estrada Present
Senator Juan M. Flavier Present
Senator Gregorio B. Honasan Present
Senator Robert S. "JAWO" Jaworski Present
Senator Panfilo M. Lacson Present
Senator Loren B. Legarda Leviste Present
Senator Ramon B. Magsaysay Jr. Present
Senator John Henry R. Osmeña Present
Senator Sergio R. Osmeña III Present
Senator Francis N. Pangilinan Present
Senator Aquilino Q. Pimentel Jr. Present
Senator Ralph G. Recto Present
Senator Ramon B. Revilla Present
Senator Vicente C. Sotto III Present
Senator Manuel B. Villar Jr. Absent
The President Present

The President. With 20 senators present, there is a quorum.

The Majority Leader is recognized.

THE JOURNAL

Senator Legarda Leviste. Mr. President, I move that we dispense with the reading of the *Journal* of the 10th session, August 19, 2002, and consider it approved.

The President. Is there any objection? [*Silence*] There being none, the motion is approved.

ACKNOWLEDGMENT OF THE OFFICIAL VISIT OF NURSING STUDENTS FROM EMILIO AGUINALDO COLLEGE, MEMBERS OF THE VARIOUS NURSING ASSOCIATIONS IN THE PHILIPPINES AND DELEGATES TO THE 29TH SHIP SOUTHEAST ASIAN YOUTH PROGRAM

Senator Legarda Leviste. Mr. President, we would like to acknowledge the nursing students from the Emilio Aguinaldo College, the Philippine Nursing Association members, the members of the Board of Nursing, the National League of Government Nurses, the Mother and Child Nurses' Association of the Philippines, the Military Nurses Association and the Operating Room Nurses Association who are present in the hall today.

Also, we would like to acknowledge the presence of the delegates to the 29th Ship for Southeast Asian Youth Program or

* Arrived after the roll call

** On official mission

Very truly yours,

(Sgd.) GLORIA MACAPAGAL ARROYO

cc. HON. JOSE C. DE VENECIA JR.

Speaker
House of Representatives
Quezon City

BILL ON THIRD READING

S. No. 2101 — Instituting a *Balikbayan* Program

Senator Legarda Leviste. Mr. President, in view of the certification, I move that we vote on Third Reading on Senate Bill No. 2101.

The President. Is there any objection? [*Silence*] There being none, voting on Third Reading on Senate Bill 2101 is now in order.

The Secretary will please read only the title of the bill.

The Secretary. Senate Bill No. 2101, entitled

AN ACT AMENDING REPUBLIC ACT NO. 6768,
ENTITLED "AN ACT INSTITUTING A
BALIKBAYAN PROGRAM," BY PROVIDING
ADDITIONAL BENEFITS AND PRIVILEGES TO
BALIKBAYAN AND FOR OTHER PURPOSES

The President. We will now vote on the bill and the Secretary will call the roll.

The Secretary. Senators

Angara	Yes
Aquino-Oreta	
Arroyo	Yes
Barbers	Yes
Biazon	Yes
Cayetano	Yes
De Castro	Yes
Ejercito Estrada	Yes
Flavier	Yes
Honasan	Yes
Jaworski	Yes
Lacson	Yes
Legarda Leviste	Yes
Magsaysay Jr.	Yes
Osmeña (J.)	Yes
Osmeña III	Yes
Pangilinan	Yes
Pimentel Jr.	Yes

Recto	Yes
Revilla	Yes
Sotto III	Yes
Villar Jr.	
The President	Yes

The President. With 21 affirmative votes, no negative vote, and no abstention, Senate Bill No. 2101 is hereby approved on Third Reading.

The Majority Leader is recognized.

BILL ON SECOND READING

S. No. 2292 — The Philippine Nursing Act of 2002
(Continuation)

Senator Legarda Leviste. Mr. President, I move that we resume consideration of Senate Bill No. 2292 as reported out under Committee Report No. 68.

The President. Is there any objection? [*Silence*] There being none, resumption of consideration of Senate Bill No. 2292 is now in order.

Senator Legarda Leviste. We are now in the period of interpellations. I ask that Sen. Juan M. Flavie, the sponsor, be recognized.

The President. Sen. Juan M. Flavie is recognized.

Senator Legarda Leviste. And to interpellate, I ask that Sen. Edgardo J. Angara be recognized.

The President. Sen. Edgardo J. Angara is recognized.

Senator Angara. Thank you, Mr. President.

Mr. President, will the dynamic former secretary of Health and our leading doctor in the House answer some questions for clarification?

Senator Flavie. With pleasure, Mr. President, to the author of landmark medical health bills in the Senate and the senior author of the Philippine Nursing Act of 2002.

Senator Angara. With that, Mr. President, I would like to sit down and terminate my interpellation. [*Laughter*]

Mr. President, we must really commend the distinguished author and sponsor for this modernization and updating of the Philippine Nursing Law. We had the opportunity to author the original one, but I am very happy that the version that we are now discussing will replace that old one and in a way incorporate some basic provisions that would modernize the whole profession.

Mr. President, I am very partial and biased in favor of nurses. Both my parents were nurses, my sister is a nurse, some of my nieces are nurses, so I am quite interested in the progress of our nursing profession.

Mr. President, the statistics indicate—and I want the statistics confirmed as a background to our discussion of the Nursing Law—that at present, according to the professional regulatory body, we have some... *[Pause]* I want to check the figures.

Senator Flavier. Is the gentleman referring to the number of registered nurses?

Senator Angara. To the number of registered nurses.

Senator Flavier. Yes, there are 344,656.

Senator Angara. That is correct, Mr. President.

On a per capita basis, it is said that the Philippines has one of the more favorable nurse-to-population ratio. Is that not correct, Mr. President?

Senator Flavier. That is correct, Mr. President.

Senator Angara. And out of the supply of over 300,000 nurses, our annual demand, I understand, is 178,000.

Senator Flavier. Yes, Mr. President. And today, the records of the World Health Organization say that there are now 250,000 Filipino nurses worldwide.

Senator Angara. Making us the number one exporter of nurses to the rest of the world.

Senator Flavier. That is correct, Mr. President.

Senator Angara. And so, when we have a supply of over 300,000 and a demand of 178,000, naturally we have a surplus of some 128,000 nurses.

Senator Flavier. That is correct, Mr. President, although I am afraid that will be transitory because eventually, with the annual exodus, a point will be reached—it is predicted to be about four or five years from now—when there will be a direct shortage.

Senator Angara. In fact, I want to indicate, for the record, Mr. President, that for school year 1999-2000, we graduated some 6,000 nurses.

Senator Flavier. That is correct, Mr. President. Our high point is 7,000 but I will accept the 6,000.

Senator Angara. But ten years ago, Mr. President, in 1993-1994, we graduated 32,375 nurses.

Senator Flavier. That is correct, Mr. President, especially at the height of the demand and the laxity in the traveling of these nurses. However, there was a point when the strictness put to bear and many of the nursing schools began to limit and thus resulted in 6,000 to 7,000 per year, which is the data today.

Senator Angara. So, Mr. President, from a high of 32,000 ten years ago, we are now down to 6,000 to 7,000. On the other hand, the demand for Filipino nurses is rising. Is it not correct?

Senator Flavier. That is correct, Mr. President.

Senator Angara. Therefore, the theoretical surplus of 128,000 nurses at home can easily vanish at the rate the developed countries are recruiting Filipino nurses. Would it not be the case, Mr. President?

Senator Flavier. That is correct, Mr. President.

Senator Angara. And, therefore, we ought not to be content with having surplus nurses, expert health workers because this can soon vanish without our realizing it.

Senator Flavier. Very, very legitimate and realistic concern, Mr. President.

Senator Angara. And one obvious reason for it is that a Philippine nurse makes US\$170 a month on the average.

Senator Flavier. That is right, Mr. President.

Senator Angara. While if one is working abroad, Mr. President, he may make as high as P200,000 to P300,000 a month.

Senator Flavier. That is correct, Mr. President, and projected at about sometimes as high as US\$45 per hour.

Senator Angara. And that should translate, on a monthly basis, to as high as P200,000.

Senator Flavier. That is correct, Mr. President.

Senator Angara. So, the gross disparity between local pay and foreign pay is a very powerful pull for our nurses to go abroad. Is that not correct, Mr. President?

Senator Flavier. That is a very realistic statement, Mr. President. The economic pull is just too overwhelming.

Senator Angara. Now, I am trying to establish this basis, Mr. President, because this bill, by itself, is already excellent. It has provision for upgrading training. It has provision for upgrading facilities. It has provision for upgrading the profession in general. But I would like to see specific provision that will now upgrade

and improve the living conditions of an individual nurse, so that if we cannot hold him or her back, at least we keep him or her for a certain period to attend to the critical needs of our country.

Senator Flavier. Yes, Mr. President. I recall very distinctly during the hearing where the distinguished senator from Baler and Quezon dutifully attended, he raised this very point. And this was taken up by the technical working group in an effort to review possible ways of answering or replying to the legitimate concern of the good senator. And in this particular bill, may I be allowed to enumerate specifically Section 9 (f). This will require nurses who graduate from state universities and colleges to render at least two years of nursing service in the country. At present, the SUCs produce 2,000 to 3,000 graduates per year. Those who passed the licensure examination will be required to render two years of service in the country, thus assuring the supply of nurses in the country. That is number one.

I am answering the gentleman's questions broadly, Mr. President.

Senator Angara. Yes, Mr. President.

Senator Flavier. Number two, Section 28 provides for the development—and this was the point the gentleman underscored very heavily during the hearing, Mr. President—of a comprehensive program to encourage the retention of nurse specialists in the Philippines. And I am happy to report to the good senator and to the Chamber that the Philippine General Hospital has already begun evolving a comprehensive program precisely to meet the point of the good senator. And this, I understand, will be used by the other hospitals and other nursing schools as the model for implementation in the whole country.

Number three, Section 29 provides for a standard minimum pay for all nurses which shall be periodically increased to cope with the rising cost of living. Apparently, our hospitals cannot compete with the salaries that are given to nurses who are working abroad. However, we can provide our nurses who remain in the country with better working conditions.

Under Section 9, the Board of Nursing is empowered to make decisions or adopt measures for the improvement of the nursing practice and for the advancement of the profession, Mr. President.

There are also provisions regarding the requirement to become members of the Board of Nursing which will require the last five years of their experience to be in the Philippines.

These are some of the points.

Regarding the salary, we found it a little bit difficult to be more specific but it is mandated by the provisions that the

NEDA will come into the picture and help out in structuring some attempt to take care of the entry payments in the public nursing field and in the private nursing profession.

Senator Angara. Yes, I appreciate that, Mr. President, the sponsor pointing out specific provisions that would enhance and improve the living standards of individual nurses.

Mr. President, is the entry level salary of a nurse in the country not Grade 10, which is about P9,939?

Senator Flavier. Yes, that is for the public. But for the private, it is even worse, Mr. President.

Senator Angara. Yes, P5,000 to P6,000.

Senator Flavier. That is right, Mr. President.

Senator Angara. How much RATA does a public nurse receive, nothing?

Senator Flavier. Not that I... Except when they reach a certain supervisory level, which is rare and far between.

Senator Angara. So that is all in, P9,900. That is the monthly pay if one is an entry level?

Senator Flavier. Yes, Mr. President.

Senator Angara. As the gentleman will clearly recall, Mr. President, we have just increased the pay of policemen or police and soldiers to the extent that a private on entry will get a total of P14,000 a month. Does the gentleman recall that?

Senator Flavier. I recall that, Mr. President.

Senator Angara. Does he also recall that the police entry level will also receive the same amount which is about P14,000?

Senator Flavier. That is correct, Mr. President.

Senator Angara. Is it not amazing, Mr. President, and probably reflects our sense of value that our health... We have to call for a suspension of session so that there will only be one session.

SUSPENSION OF SESSION

The President. The session is suspended, if there is no objection. *[There was none.]*

It was 4:25 p.m.

RESUMPTION OF SESSION

At 4:26 p.m., the session was resumed.

The President. The session is resumed.

Senator Angara. So that our audience nurses who are in the gallery will see that we are all interested in this bill, Mr. President, I am glad that the Chair adjourned the other session. *[Laughter]*

The President. Is the gentleman referring to the Minority Leader? *[Laughter]*

Senator Angara. Now, comparing entry level salary, Mr. President, it is now ironic that a critical health worker like a nurse gets only, let us round it off, P10,000.

Senator Flavier. Yes, Mr. President.

Senator Angara. And a private soldier will get P14,000 at entry level. A policeman will also get P14,000 at entry level. A soldier under our law, under our regulation, need not even be a college graduate.

Senator Flavier. That is correct, Mr. President.

Senator Angara. But a nurse is trained for at least four years' bachelors degree, is it not?

Senator Flavier. That is correct, Mr. President.

Senator Angara. So, there are some inherent inequities in the setup, Mr. President. Are we going to upgrade through this law the salary grades of our nurses?

Senator Flavier. Yes, Mr. President.

Senator Angara. We will.

Senator Flavier. Yes, except that the mechanics that we chose was through the NEDA so that it becomes one that will consider the totality of the problem and will not be a single shot that may not even be appropriate. So the NEDA together with the Civil Service Commission for the public nurses, and the NEDA together with the Department of Labor and Employment will take care of those in the private sector. But yes, that is the intent.

Senator Angara. That is the intent. If that is the case, Mr. President, we can wait forever for NEDA to adjust the basic salary. I was thinking that maybe through the instrument of this law we will already upgrade or raise the salary grade of our nurses.

Senator Flavier. If the good gentleman will provide an amendment that would restructure that section to make it even more specific but consistent with the situation in the military and the police, I would be very happy to accept it, Mr. President.

Senator Angara. Because my own personal experience, Mr. President, in the Senate is that unless a law specifically orders and

mandates the Department of Budget and Management it will not move to raise any salary. As the gentleman said, it is going to look at the whole universe and forget the agency. But if we have a specific law mandating it, the DBM will follow it. Of course, we should be considerate of the plight of the other public servants so that we do not create gross disparity.

Senator Flavier. The gentleman is correct. The experience today is such that unless we are very specific, it gets lost in the whole maze of the bureaucracy. However, I hope that in this model, we will be able to keep in mind the other health workers—

Senator Angara. Yes, Mr. President.

Senator Flavier. —whom the gentleman is also concerned about. But, yes, I would be very happy to accept an amendment.

Senator Angara. In fact, if I may claim the credit, Mr. President, I wrote and put together the Magna Carta for Public Health Workers that upgraded the salary for the first time of all health workers.

Senator Flavier. Yes, that is one of the landmark laws that the gentleman authored, Mr. President.

Senator Angara. Now, going back to the impending shortage.

Right now—I think our colleagues in the nursing profession and even the distinguished author can correct me—there is, I believe, a rising shortage of what we call specialty nurses?

Senator Flavier. Yes, Mr. President, specialty nurses like operating room nurses.

Senator Angara. Operating room nurses, Mr. President. I am glad that the sponsor said that. Several hospital directors told me explicitly that there is now a shortage of operating room nurse in our country. I guess if we project that, from operating room nurse to cardiovascular nurse, to emergency nurse and the other specialty nurses, we may find ourselves empty of all these specialty nurses because all these skilled and highly trained people would have already gone abroad. Is that not a possibility?

Senator Flavier. No, Mr. President. In fact, it is now happening starting with some of the more popular. For example, the intensive care unit nurses are now getting depleted very quickly. The physical therapy field of those nurses is also getting quickly depleted and therefore, it is our hope that through the comprehensive program, a special effort will be made to help retain some of those specialty nurses.

Senator Angara. Well, I appreciate the provision of the law. For instance, if one is a graduate of a state college or university,

he must return service for at least two years. I can also understand and appreciate the need for training and development. But I think we must go beyond the exhortation that they should stay or that we must develop a program by offering an incentive because people are moved by incentives, especially financial incentives in the case of nurses.

On the one hand, we will be asking them to stay in the country for, say, three to five years, but in exchange we must attract them and appeal to their sense of service by, first, assuring that their professional growth will continue. Second, I think it is just human that the financial return to them, while not as great and as high as abroad will at least approximate—not approximate, but maybe 70% to 80% of what they would have earned abroad in exchange for their being here at home with their loved ones.

So I thought, Mr. President, that the comprehensive training and development program must be strongly complemented by a system of incentives personal to the nurse because he is our object of attraction, and to the hospital or institution where he or she is working. So we encourage the PGH of this country, the Davao General Hospital and even private hospitals to institute and run that kind of incentive program. Otherwise, it would be too hard, in fact, almost cruel, to tell these young, highly trained people that they must be patriotic and stay home when the attractions from abroad are so powerful.

Senator Flavier. That is very well-taken, Mr. President. Fortunately, the same concern has been expressed by the Human Resource Development of the Department of Health and the PGH. As I alluded to earlier, the comprehensive program will take this into consideration and I am happy to note that part of the gentleman's concern in terms of the incentives will take into consideration the Makati Medical Center model where the relatives of the nurse are given free hospitalization as part of the incentive. I think that is the kind of thing that the gentleman has in mind, if I read it correctly.

Senator Angara. Yes, Mr. President, both professional and financial. If we can ask our colleagues from the nursing profession and organization to put together such a provision, I hope that we can put it in black and white in this law.

Senator Flavier. So what I hear the gentleman saying is that he would like to see the nursing profession, including the board, to craft a section to be incorporated as an amendment already. That would be the idea.

Senator Angara. Yes, as an essential feature of this new nursing law, Mr. President.

Senator Flavier. Yes. Otherwise, we concluded during the technical working group that since they were not ready, we

included the comprehensive program approach to be developed by the Board of Nursing and the accredited professional organizations. But without reservation, I support the gentleman's view if our friends from the nursing profession can be ready with the amendment in time.

Senator Angara. I am sure they are quite ready, Mr. President.

Senator Flavier. All right, we will return to them. Most of them are here, Mr. President, as part of their support.

Senator Angara. Yes, I can see them. They look so lovely and intelligent.

Senator Flavier. Yes, Mr. President. Most of them were my girlfriends before. *[Laughter]* They concur.

Senator Angara. Now, just a question of definition, Mr. President.

Nurses are now recognized as independent health practitioners. What does that really mean?

Senator Flavier. Traditionally, Mr. President, a nurse has been considered as an appendage of a doctor to the extent that they are limited to the orders being made by the doctors. This time, we are going to declare them as independent, meaning, they are able to function even alone because the trend in the world now is "clinics that are manned solely by nurses." So we want to make it clear that they can act independently. Of course, if they need to get the advice and consultation of the doctor consultant, they are at liberty. But, at least, it clarifies that vague portion of our provisions. But they have to follow, more or less, the standard nursing practice, which is defined by the board and the professional organization—that they uphold the Code of Ethics for Nurses.

Senator Angara. Are they authorized to give prescription, Mr. President?

Senator Flavier. No, Mr. President. That is, in fact, the problem now with another bill that we are considering, wherein the prescription was extended to the doctors. And the pharmacists are really up in arms.

Senator Angara. The pharmacists will lose their jobs.

Senator Flavier. Yes, Mr. President. That is why that will be no. And in parallel vein, the nurses will also not be. But the administration of written prescription for treatment, therapies, and oral topical will be the scope of work of the nursing practice. The nurses will administer the written prescription for treatment.

Senator Angara. A chief nurse, according to the bill, must have a master's degree. What does a chief nurse do?

Senator Flavier. He is in charge of the whole administrative and operational functions of the nurses, Mr. President.

Senator Angara. Is he the chief nurse of the whole hospital, of one ward or just...

Senator Flavier. It can differ. He can be a chief nurse for the whole hospital or for a certain section of the hospital. For example, the nursing service of the operating rooms or of the Out-Patient Department. That would be part of the delineation, Mr. President.

Senator Angara. Mr. President, this is a little tricky. Because under the law, the gentleman would wish that a standard basic pay be set even for nurses in the private sector. I am all for that. But my only problem there is, if we set now a minimum wage in the private sector, is there not danger that there will be less nurses that will be employed in the private sector if we set it high enough, just as what we are experiencing under the minimum wage? If we had a more flexible wage policy, I think more people will be able to work and the employer can almost tailor the pay structure according to the needs of the place and the industry. In this case, if we lay down a national standard basic pay, first: What would be the criteria for the wage setting? And No. 2: Is there not a standard existing right now?

Senator Flavier. Let me answer it first by confirming the gentleman's point about the imbalance that may occur. Because when we adjusted the salaries of teachers if we recall—because the gentleman was also in the forefront of this effort, Mr. President,—the net effect was good for the public schoolteachers but the private schoolteachers began to transfer. Therefore, we have to get into a balancing act to make sure that in doing good to the public sector, we do not jeopardize the private sector.

Having said that, Mr. President, this was precisely the point that bothered us about a definite amount because we were in doubt as to our ability to implement, and therefore the NEDA route was explored although, as I also said earlier, I would have no problem with the gentleman's specific. I am sure the gentleman considers other factors.

Also, there is the idea that came out of the technical working group to peg this at a percentage above the minimum wage law. We considered that too but we did not put it in the bill because we were afraid to clutter it, plus of course, a very heavy approval in the nonfinancial perks that we might be able to do, like the hospitalization of the relatives and also...

Senator Angara. Noncash medical...

Senator Flavier. Noncash basis, and also a clearer provision, as championed by the Department of Health, on their professional growth if they remain in the hospital.

Senator Angara. So do I understand the gentleman then that we can be flexible in the wage fixing that we need not come up with a standard basic salary applicable throughout the country?

Senator Flavier. We were a little afraid of that precisely because of the implementation. Earlier, the gentleman alluded to the fact that the ones in the public hospitals are already getting somewhere over P9,000 but those in the private hospitals are getting about P3,000 to P4,000. So that alone will be a problem immediately and we took the route of the NEDA which has, of course, the problem that it might be glossed over.

Senator Angara. Yes, yes. I think it would be easy for us to say that the P5,000 to P6,000 standard pay of nurses in the private sector ought to be raised to P7,000 or P8,000 or P9,000. But my fear there, Mr. President, by legislating the salary, we may be limiting the number of nurses that may henceforth be employed. Because payroll will become more expensive, a hospital owner may start recruiting or hiring less nurses and perhaps, hire more paramedics.

Senator Flavier. That is the inherent danger that we have, Mr. President.

Senator Angara. Yes, yes. That is my point.

Senator Flavier. So in an effort to help the nurses we might unwittingly also—

Senator Angara. Contract the employment pool.

Senator Flavier. —contract the employment pool or possibilities for these nurses. So we have to make a balancing act, Mr. President.

Senator Angara. Yes. For instance, Mr. President, I think the sponsor and I know very well that perhaps 40% of employers in this country do not really comply with the Minimum Wage Law.

Senator Flavier. Yes, I heard that in a hearing with the Department of Labor and Employment, and I heard something like 30% and over.

Senator Angara. So that is my difficulty with that proposal, Mr. President.

Now, the Board of—is it the Board of Nursing?—Nursing is now authorized to effect the closing of colleges and schools of nursing.

Senator Flavier. Yes, Mr. President, but it is worded as recommendatory to the—

Senator Angara. CHED?

Senator Flavier. —Nursing Division of the Professional Regulation Commission because today, under the bill of the distinguished gentleman, they are given the right to recommend the opening of schools of nursing. In this particular bill, Mr. President, we completed the cycle by allowing them also to recommend the closure if they do not meet certain standards or requirements of the nursing profession.

Senator Angara. Yes. The law does not cite or mention those standards or criteria, Mr. President.

Senator Flavier. It is supposed to be existent already as practiced through the Commission on Higher Education. The CHED—again, without unduly flattering the distinguished senator, a product of his educational commission which separated the college level to the CHED—is holding on to that, and together with the Nursing Division of the Professional Regulation Commission will then act on the recommendation of the board.

Senator Angara. For instance, Mr. President, a school of nursing that has not succeeded in getting any of its graduates to pass the licensure test or examination for three consecutive years, would that not be a good ground for closing the school?

Senator Flavier. Yes. In fact, that is one of the specific criteria that they are now using to operate. They have a certain percentage that the school must achieve, and below which for three successive years or thereabouts, it will then be recommended for closure.

Senator Angara. Yes. Well, I wish that criterion is also applicable to law schools, Mr. President.

Senator Flavier. Yes, Mr. President.

Senator Angara. One final query, Mr. President. I know that a Code of Ethics is always necessary in any profession, and I think that is what distinguishes a profession from a trade.

Now, my own experience, Mr. President, as former president of the Bar is, it is so difficult to put together a code of professional responsibility in the case of the Bar. We had to do tremendous amount of consultations, workshops, seminars, and invite even foreigners to tell the different chapters of the Bar throughout the country that this is necessary for us.

How does the nursing profession or the board intend to formulate this Code of Ethics? Would it be a code that is already

formulated or is it a code that will originate out of the consultations with the branches of the Philippine Nurses Association?

Senator Flavier. That is a very good point, Mr. President. First of all, we are putting it in the law as part of their specific mandate or duty. Second, there is already a present Code of Ethics. However, there is a feeling that this Code of Ethics is, by the nature of our global relationship, copied from other countries, and there is a feeling that we should localize it. Therefore, the point of the distinguished senator about consultation and workshop will be employed.

Now, maybe implicit in the point of the senator is that we put a certain time frame so that it does not take them forever, and I will be happy to consider the amendment of the senator in that, Mr. President.

Senator Angara. Otherwise, this can take a very long protracted process, Mr. President.

Senator Flavier. That is right, Mr. President.

Senator Angara. Now, the continuing professional education. This is not a mandatory requirement, is it, or is it not anymore?

Senator Flavier. Not anymore because of the Professional Regulation Commission law that we passed two years ago. It specifically prohibited the mandatory nature of the continuing education because the reports received was a widespread commercialization of the process that people frowned upon and therefore was not mandated as a course. However, it is encouraged to be done by the professional organizations, Mr. President.

Senator Angara. But is it not better, Mr. President, to make it a competitive undertaking rather than put it solely as an in-house in the sense that it is the professional group that will be solely authorized to conduct a continuing professional education?

Senator Flavier. If I get the gentleman's drift right, what he is saying is not to be a monopoly of the professional group...

Senator Angara. Yes, Mr. President.

Senator Flavier. I would have no problem, especially because of the gentleman's comment, it dawns on me that maybe a combination of the academe or the nursing schools, plus the regulatory board, plus the professional organizations must team up to produce this. I do not know, somewhere there we can put a provision on the competitiveness by encouraging everybody to produce certain...

Senator Angara. That will probably encourage and lead to a more innovative, probably more progressive curriculum.

And even trainors and teachers will be attracted if there is a diversity of training programs offered by different groups.

Senator Flavier. That is correct, Mr. President. It will enrich it.

Senator Angara. It will enrich the profession.

Now, I know I said it is a final question, Mr. President, but what is the gentleman's prognosis on the future demand for Filipino nurses in the next five to ten years? Will it be greater? If it is greater, will we be able to cope with it and at the same time maintain certain skills critical to the maintenance of health in this country?

Senator Flavier. It is a very good point and a little difficult to reply but I will make an attempt, Mr. President.

From the drift of the ongoing growing demand and growing relaxation of the entry, the United States, Great Britain and Saudi Arabia are each competing. For example, in Great Britain, the incentives it gives that we are only talking about are already in place. They are given a lot of scholarships and a lot of perks that not only include salaries but also housing, insurance and the like. Therefore, the pull from there, I think, will be in the rise.

About three months ago, Mr. President, I was pleasantly surprised to find that the leading hospital in America, the Johns Hopkins University Hospital—where, by the way, I took my public health course—sent its whole administrative staff to recruit doctors from the Philippines, which attests to the quality of our nursing personnel. But most of all, it validates what happened when I talked with one of my friends who said to me that everytime this American friend goes to a hospital, he makes it a point to require that the nurse who will attend to him be a Filipino. It was partly because of the kind of nature we have.

Senator Angara. Tender loving care.

Senator Flavier. We are very lovable people, Mr. President. Not only that. The facility of language is a major consideration.

Therefore, my own prediction, prognosis is an increasing demand. The other good news is that I am confident that with the relaxation and the demand, the production of nurses in the Philippines will go higher. Because today, it is at a low of 6,000 nurses.

Senator Angara. Yes, very low.

Senator Flavier. But we were able to reach a high of 32,000 nurses and my friends who run nursing schools told me that their closure was a function of the strictness that the

countries imposed. But if they will liberalize this, as they are now doing, I am sure that the schools will again go back to the old production level of 32,000 nurses.

Senator Angara. Is it true that the appeal of nurses is such that even some of the Filipino male doctors have taken up nursing just to be able to...

Senator Flavier. That is correct, Mr. President. In fact, the reason is that the doctors are having more and more difficulty getting slots in foreign countries. But the nurses are getting the better part of the deal because the relaxation is there and then the requirements are less. To the extent that I personally was given certain brochures of certain nursing schools where they specify that if one is a doctor and he enrolls for nursing, he only has to attend something like one and one-half to two years because those are just the subjects he has not covered under medicine course.

Yes, Mr. President, and growing everyday.

Senator Angara. Is there a course for lawyers, Mr. President?
[Laughter]

Senator Flavier. Fortunately, none yet, Mr. President.

Senator Angara. Mr. President, I must thank the distinguished sponsor for his answers, and I think this is a good piece of legislation that we all hope will pass very quickly. Thank you.

Senator Flavier. Thank you, Mr. President.

The President. The Chair would like some clarification particularly on the continuing professional education.

Senator Flavier. Yes, Mr. President.

The President. I heard the sponsor say that the continuing professional education is no longer compulsory because of the previous experience of commercialization of these seminars for CPEs. Is that correct?

Senator Flavier. That is correct, Mr. President. It used to be compulsory, but the experience was so negative in terms of commercialization and was monopolized by certain groups that made a lot of money out of this.

The President. In that case, may I suggest that the wording in lines 8, 9, 10 and 11 on page 11 be rephrased or amended at the appropriate time so that there will be no mistake as to the interpretation that the CPEs are not compulsory. The way this is crafted right now, it can be

interpreted as compulsory because the nurse is duty-bound to maintain competence by continual learning through the continuing professional education. In other words, the continual learning can only be done through CPEs.

Senator Flavier. We will take that into consideration, Mr. President.

The President. Maybe the gentleman can recast that portion at the appropriate time.

Senator Flavier. Thank you for the suggestion, Mr. President.

The President. The Chair thanks Senator Flavier.

Meanwhile, there was a reservation by Sen. Tessie Aquino-Oreta, but the same has since then been withdrawn. The Majority Leader is recognized.

Senator Legarda Legarda. I move now that we recognize Sen. Luisa Ejercito Estrada for interpellation.

The President. Senator Ejercito Estrada is recognized.

Senator Ejercito Estrada. Will the distinguished sponsor, my colleague, a very lovable person, yield for a few clarificatory questions?

Senator Flavier. With pleasure, Mr. President, to the woman who if she becomes President, I shall be very happy to be her "First Lady." [Laughter]

Senator Ejercito Estrada. Mr. President, Section 3 of the bill states that the chairman and members of the board shall be appointed by the President from two recommendees of the Professional Regulation Commission chosen from a list of at least three nominees of the accredited professional organizations. My question is: How many professional nursing organizations are currently existing, and how many are accredited?

Senator Flavier. Yes, Mr. President. There is only one accredited, but there are 19 professional subgroups.

Senator Ejercito Estrada. Who will accredit the professional nursing organization?

Senator Flavier. The Professional Regulation Commission is the one that accredits. And at the right time, we may want to recast this so that it is clearer because it is rather ambiguous in terms of who will recommend—if I get the drift of the question of the lady senator, Mr. President.

Senator Ejercito Estrada. Is my impression correct, Mr. President, that any accredited nursing organization may nominate members of the board?

Senator Flavier. In principle, yes. Except that today, there is only one that has been accredited, but there are 19 professional organizations in existence.

Senator Ejercito Estrada. Mr. President, the board is given the power to monitor and enforce quality standards of nursing practice as well as examine the prescribed facilities of universities or colleges of nursing. May we know if the board has enough support staff or manpower to undertake this kind of activity?

Senator Flavier. The distinguished lady senator is correct that that is now mandated. But I am afraid that if the point is manpower, there is not enough yet, but we hope that... That is the reason, Mr. President, part of this bill also increases the number of members of the Board of Nursing. But in order to monitor, it has to work closely with the Commission on Higher Education. But implicit in the question of the lady senator is whether they would be given more people.

Senator Ejercito Estrada. Yes, Mr. President.

Senator Flavier. Maybe in this bill, we should specify that they should have sufficient or adequate personnel to implement that particular mandate, Mr. President.

Senator Ejercito Estrada. Thank you, Mr. President.

In Section 19, with regard to the issuance of special and temporary permit of the bill, for how long will the permit be effective?

Senator Flavier. The distinguished lady senator is referring to the special permits to nurses who are specialists and who come in in relation to medical missions that the lady senator is very famous for?

Senator Ejercito Estrada. Yes, Mr. President.

Senator Flavier. The general rule, Mr. President, is rather flexible, but if I may reduce that to one sentence, it is equivalent to the period of their project. For example, if their medical mission is for one month, the permit is for one month.

Senator Ejercito Estrada. I see.

Senator Flavier. It is very limited.

Senator Ejercito Estrada. Thank you, Mr. President.

I understand, Mr. President, that it is the Commission on Higher Education (CHED) which promulgates the prescribed nursing curriculum. Does the Commission on Higher Education

get recommendation and inputs from the Board of Nursing before it prescribes such curriculum?

Senator Flavier. Yes, Mr. President. The last say is with the Commission on Higher Education but the inputs come from several sources: from the Nursing Division of the Professional Regulatory Commission; also from the Nursing Board; and also from the nursing schools. That is where the deans and the Association of Deans of nursing schools come into the picture.

Senator Ejercito Estrada. The continuing professional education in Section 26 is indeed one effective avenue to maintain professional competence. I understand though the mandatory nature of this continuing professional education has been abolished under the PRC Modernization Law and is no longer a requirement for renewal of license. We discussed that.

Senator Flavier. That is correct.

Senator Ejercito Estrada. My question, Mr. President, is: What is the legal effect if a nurse does not pursue this continuing professional education?

Senator Flavier. It will be up to the professional organizations to make the decision because it is something that we should encourage for the retention of the quality of nursing. And it is my understanding that they will have to make certain agreements because in the earlier interpellation of Senator Angara, he was in favor of a more multi-disciplinary approach to include also the academe, the CHED and the professional organization. But they are supposed to need this for purposes of the registration of those nurses because they are supposed to be reregistered every three years. Therefore, if they do not do this, they can be penalized for malpractice.

So again it will be built into the system, Mr. President.

The problem is that the law that was passed for the Professional Regulation Commission specifically banned the mandatory requirement because of the fact that it became commercialized and people took advantage to monopolize the whole business for monetary purposes. So, this is an in between where they will also have the training but will be handled differently, Mr. President.

The President. Just on that point. But there is nothing to prevent the committee, if it so desires, to recommend to the plenary that the CPE be made compulsory for the nurses if there are enough policy considerations?

In other words, the mere fact that we have provided in the charter of the PRC that CPEs are no longer compulsory would not prevent this Senate and this law from making an exception in the case of nurses, if that is a policy decision of the committee recommended to the Senate as a whole?

Senator Flavier. That is correct, Mr. President. However, in the technical working group, the group decided to stay consistent with the law because it will create a lot of confusion if in a commission with say, 19 professions, there will be one that will be exempted, I can almost predict that the others will seek the same.

Therefore, I would like to propose through the intercession of... The various professional groups can take this as a matter of their own decision, Mr. President.

The President. No, but if the law, the Nursing Act that we will pass will provide that CPEs will only be voluntary, the professional organization cannot make it compulsory.

Senator Flavier. Yes, I understand that, Mr. President. However, they can require this as a matter of the professional organization's decision to have this review for purposes of standard-setting.

But I see what the Chair is saying. The Chair is saying that if it is against the law because of the mandate, then the professional organizations may not be able to enforce that same requirement.

Is that the point of the Chair?

The President. That is my point. In other words, first, what the Chair is saying is we should not be totally bound by the PRC Charter if the nurses as a professional organization believe that they should have a compulsory CPE and that the Senate agrees with that principle.

In other words, what I am saying is that the Senate or the committee may wish to examine the validity of having a compulsory CPE for nurses. If it is the decision of the committee to recommend to the Senate that the CPE be also voluntary on the part of the nursing profession, then we take that as a policy judgment not because the PRC law says so, but because that is a policy that the committee believes is appropriate for the nursing profession. That is all that the Chair is saying.

Senator Flavier. We shall certainly be happy to revisit this particular section and say that... Because the matter of the skills improvement is a global phenomenon and therefore we can easily build that into the bill so that as a matter of policy at least for nurses, we would like to see them go into continuing professional education.

The President. I guess what we have to resolve is: Do we make it compulsory for the nurses in the continued exercise of their profession to go through a compulsory professional education or do we make it purely voluntary? I think that is a policy issue that we have to address.

Senator Flavier. Yes, it is, Mr. President, especially in light of the fact that it is no longer a requirement for renewal of license.

But the point that the Chair is making, let us not lose sight, is a decision of a policymaker to make a specific provision for the need for continuing professional education. We will revisit it, Mr. President.

The President. Thank you, Senator Ejercito Estrada.

Senator Flavier. Thank you, Mr. President.

Senator Ejercito Estrada. Mr. President, in Section 29, the bill proposes to provide for a standard minimum pay for all nurses, both in public and private sector, to somehow ensure that our nurses will stay in the Philippines. But given the huge disparity between the salaries of our local nurses and those nurses working abroad, it is really difficult to put a stop to the continued migration of our nurses.

My question, Mr. President, is: May I know from the distinguished sponsor the other privileges, allowances and benefits available to our nurses here?

Senator Flavier. There is practically none, Mr. President, except on a case-to-case basis.

As I mentioned earlier, for example, in the Makati Medical Center, they provide for hospitalization privileges for their families and the Department of Health human resource group are strongly recommending a comprehensive factor that would allow them to go into better educational opportunities. And also the magna carta, if implemented, will, at least, help because it will provide for more nonfinancial privileges.

But earlier, we also discussed with Senator Angara the possibility of, at least, a minimum that we will calibrate within the context of reality. Because in this bill, we took the position that it is very difficult to set the amount but we would have the NEDA look into it, and looking at the whole horizon, work towards the DOLE and the DBM a certain break to be done together with the Civil Service Commission and the DOLE especially for the specialty nursing field.

Senator Ejercito Estrada. Mr. President, what is the view of the distinguished sponsor if we institutionalize the grant of these benefits so it will help augment the financial conditions of our nurses?

Senator Flavier. In principle, I am in favor, Mr. President, except I have certain doubts in terms of, one, the ability, for example, of the government or the private hospitals to implement or fulfill the mandate of our rates; and two, is a realistic problem

which may rebound to the effect that instead of having more openings in the nursing pool, it might be contracted by the hospital due to the high rates.

Those are some of the factors and the equation we have to bear in mind, Mr. President.

But Senator Angara will help us craft a provision that hopefully can consider all of those.

Senator Ejercito Estrada. I thank the Senate President and our distinguished sponsor. They have my support for the passage of this measure.

**MANIFESTATION OF SENATOR FLAVIER
(That All Senators Present Be Made
Additional Coauthors of S. No. 2292)**

Senator Flavier. Thank you, Mr. President.

May I also make a manifestation, Mr. President, of the interest of almost all of our colleagues to be made additional coauthors of the bill and therefore all of those who are present here and the Majority Leader will restate what I already said.

With the permission of the senators, we will make them additional coauthors, Mr. President.

The President. All right.

Senator Legarda Leviste. To interpellate, I ask that Sen. Joker P. Arroyo be recognized.

The President. Sen. Joker P. Arroyo is recognized.

Senator Arroyo. Thank you, Mr. President. Will the distinguished sponsor yield for some questions?

Senator Flavier. With pleasure, Mr. President, to my soul mate in the Senate.

Senator Arroyo. Thank you, Mr. President.

Senator Flavier. Because we both admire Senator Legarda Leviste when she passes through the senator's seat.

Senator Arroyo. Mr. President, my interest is only in Article VI, entitled Nursing Practice more particularly Section 26.

Senator Flavier. What page, Mr. President?

Senator Arroyo. It is on page 10.

Senator Flavier. Page 10, under "NURSING PRACTICE."

Senator Arroyo. Yes, Mr. President.

Senator Flavier. Section 26.

Senator Arroyo. Yes, *Scope of Nursing*.

Senator Flavier. Yes, Mr. President. Please proceed.

Senator Arroyo. As I understand it, this bill is intended to uplift or raise the level of nursing to approximate other professions.

Do I understand this correctly that the purpose of the bill is to elevate the profession of nursing to a higher level?

Senator Flavier. That is correct, Mr. President.

Senator Arroyo. Now, when we give nurses a higher level of dignity that carries, of course, also the corresponding responsibilities.

Senator Flavier. That is correct, Mr. President.

Senator Arroyo. And it is on this subject that I would like to concentrate on.

In the interpellations of Senator Angara to the sponsor, Mr. President, the sponsor mentioned that nurses presently are simply assistants of doctors, of physicians. They cannot make independent judgments.

Now, would I get a confirmation from the sponsor, who is a very distinguished doctor, just what would be the degree now of independence of the nurses in relation to their dealings with physicians?

Senator Flavier. Yes, Mr. President. Specifically, the independent nursing practitioners will be allowed to do promotion of health and prevention of illness on their own without the supervision of the physician. And in collaboration with other members of the health team, they shall collaborate with other health care providers for the curative and rehabilitative aspects of care, restoration of health, alleviation of suffering and when recovery is not possible towards a peaceful death, and then other duties that we try to enumerate.

Senator Arroyo. Yes, Mr. President.

Senator Flavier. And they can also open wellness clinics.

Senator Arroyo. Yes, we have that.

Senator Flavier. Yes, Mr. President.

Senator Arroyo. Now, if I understand the sponsor, nurses now can act independently of the doctors if this bill is passed.

My question is: When they are given added responsibilities, the bill does not specify what are the constraints or the liabilities of nurses.

In the case of doctors, they are liable for medical malpractice. Will there be such a thing now as nursing malpractice? I am saying that, Mr. President, because unlike other professions, the profession of medicine and nursing attends to the health and life of people. We lawyers, if we lose a case, is bad for our clients but in that case what they lose are perhaps their liberty, their life or their property. If an engineer does something wrong, it is the building that collapses. But in the case of doctors and, now with this bill, the nurses, it is the health and safety of the patients. For the added recognition and powers that we give to the nurses, what would be their liabilities because of this?

Senator Flavier. That is a very legitimate and important point, Mr. President. On the same page that the gentleman alluded to, or Section 26, it is enumerated here the parameters of what they can do. But directly on the malpractice, we have Section 21, which mandates revocation and suspension of certificate of registration and cancellation of special and temporary permit due to a list of grounds which are found on page 8.

Senator Arroyo. Mr. President, almost all professions have this kind of penalty. Whether it be engineers, lawyers, doctors, their licenses can be cancelled. What I am thinking about is the remuneration, material or monetary responsibility of nurses, just like doctors.

In the Philippines, medical malpractice cases are not yet very common, although in the United States it is widely pressed. Now, we will add nurses. I am just thinking aloud whether we could incorporate in the bill certain accountability on the part of nurses because they will be telling patients, "You do this; you do that." Supposing they do something wrong, or supposing they are lazy or they do not exercise good judgment, they give the wrong advice. What does the good sponsor think we would do in a situation like that?

Senator Flavier. I get the gentleman's point, Mr. President. I am not sure we have a specific item, but on page 8, Section 21, as I mentioned, letter (d), it says: "For malpractice or negligence in the practice of nursing." My understanding is that this will refer to the standard of nursing practice which is now in existence and the Code of Ethics of the Nurses. Whether that is specific enough for the gentleman, I do not know.

Senator Arroyo. When we file a medical malpractice suit, usually it is not only the revocation of the license of a

doctor that is considered but that he has to pay for the pecuniary losses of the patient.

I am not prepared to apply that to the nurses,... I mean, we are treading on fresh grounds here. But what would be the constraints on nurses so that they do a good job? We are giving them more power. But commensurate to that, we should say, "We give you this kind of powers, then you must have added responsibilities. Because these are *de cajon*, what we call the violation of the act, the Code of Ethics. Every profession has this. But in the medical profession where one is dealing with lives, nurses, as I understand it, will now practically substitute for doctors in cases that are very serious.

So, would the distinguished sponsor put in something that would be a constraint on nurses so that they will do a good job whenever they are called upon?

Senator Flavier. I understand, Mr. President, and I will be open to such an amendment. But what comes to mind is a set of new bills; in fact, three of them, specifically on malpractice in medicine. And to the best of my knowledge, also dentistry, and maybe we can include nursing and other allied professions in the bill.

Senator Arroyo. Yes. With this, a nurse who is called upon may prescribe a medicine and supposing something goes wrong. Things like that. That is just a concern.

Senator Flavier. Yes, we have to have a specific provision on that. Maybe the malpractice law that we are now crafting might be a more suitable answer, Mr. President.

Senator Arroyo. Now, if that would be addressed by the distinguished sponsor, I cannot be more knowledgeable in the field of medicine or nursing because I have no basic knowledge on this. But if those will be incorporated, then I think what will come out will be a very good bill, an uplifting bill for the profession. But as I have said, my thesis is, if we have to give them now new powers, then they should also have added responsibilities.

Senator Flavier. Definitely, Mr. President.

Senator Arroyo. If that is the case, then this bill would be a very good bill, and I would leave it to the distinguish sponsor to put in the necessary amendments which I articulated this afternoon.

Thank you, Mr. President.

Senator Flavier. I would like to thank the good senator.

The President. The Majority Leader is recognized.

Senator Legarda Leviste. May I ask that Sen. Aquilino Q. Pimentel Jr. be recognized for interpellation.

The President. Sen. Aquilino Q. Pimentel Jr. is recognized.

Senator Pimentel. Thank you very much, Mr. President.

Will the gentleman kindly yield for a few questions, Mr. President?

Senator Flavier. With deep pleasure, Mr. President.

Senator Pimentel. In answer to some questions raised by Senator Angara, the sponsor said that we have a certain number of nurses in this country that cannot be accommodated abroad. Meaning to say, there is an oversupply of nurses relative to the demands for nursing abroad. Is that correct, Mr. President?

Senator Flavier. That is correct, Mr. President. Specifically it is pegged, for the moment, at 128,065 nurses.

Senator Pimentel. That 128,065 nurses are in this country?

Senator Flavier. Yes, Mr. President, surplus.

Senator Pimentel. Can the gentleman kindly tell us how many of these nurses are gainfully employed, either in government or in the private sector? Would these data be available, Mr. President?

Senator Flavier. Yes, Mr. President. The data we have are the local and also a figure for international. For the international, it is 150,800, more or less. The one for local is divided into three: for the government hospitals and other institutions, 17,500; for the private hospitals and other private institutions, 7,500; and for the educational field, 2,000 nurses are involved.

Senator Pimentel. Would the figure of local nurses' employment, as read by the gentleman, indicate that all nurses therefore in the country today are gainfully employed? Is that the tenor of the gentleman's answer?

Senator Flavier. I do not think so, Mr. President. What has happened is that some of them get employed but not as nurses, because the absorptive capacity, especially in the public hospitals, is already somewhat reached.

Senator Pimentel. Of the total number of nurses then in this country, for the present, how many are not employed as nurses? Would we have any data on that, Mr. President?

Senator Flavier. We do not have the exact figure but we can get a rough estimate, Mr. President. The best estimate we have, Mr. President, is that there is about 30% that are not employed—

Senator Pimentel. As nurses.

Senator Flavier. —as nurses, Mr. President.

Senator Pimentel. And in all likelihood, would be the candidates for easier recruitment abroad considering that they cannot be gainfully employed here as nurses.

Senator Flavier. That is correct, Mr. President, except that in practice the ones that are being recruited are those who have experience—

Senator Pimentel. That is correct.

Senator Flavier. —and are those in the hospitals now.

Senator Pimentel. So, these figures are important because as policymakers we have to anticipate the needs of the country, and probably we would try to do whatever we can to ensure that the supply of nurses for our people may not also be unduly depleted by the aggressive recruitment policies that are now being waged even by the gentleman's alma mater—the Johns Hopkins Hospital.

Senator Flavier. That is true, Mr. President.

Senator Pimentel. Under the circumstances then, Mr. President, assuming that the aggressive recruitment of nurses continues within the next several years, how many nurses would still be, in the gentleman's estimate, available in this country for local and domestic service?

Senator Flavier. I do not have the exact figure, Mr. President, but I would say that we would need a period of, say, five years, at least, a buffer of 100,000 nurses. That is an educated guess.

Senator Pimentel. Which means that 20,000 nurses a year should be available under the gentleman's estimate.

Senator Flavier. Yes, Mr. President. And the good news is that at the height of our production—I used the word “production” for want of a better term—we were producing 32,000 nurses a year.

Senator Pimentel. Yes, that was at the height, probably, before the demand slumped over a certain period.

Senator Flavier. Yes, Mr. President, and the requirements were made stricter.

Senator Pimentel. I understand that now the nursing schools are teeming with applicants for nursing. At the rate nursing schools are going, it would take maybe four more years before we can turn out nursing graduates sufficient for our needs locally and for the needs of other counties. We have a four-year nursing course. Is that not correct, Mr. President?

Senator Flavier. Yes, Mr. President.

Senator Pimentel. Probably, four more years before we can really fill the gap of the need for nurses abroad and for nurses to stay domestically in service of our people. So we are looking at maybe 2006 using the current year as the reckoning period for our estimates to start, Mr. President.

Senator Flavier. I would be glad to accept that especially remembering that the current level of graduates is about 6,000 to 7,000 a year. But the trend is upward and is increasing at the rate of about 200% to 300% every year because of the demand worldwide, Mr. President.

Senator Pimentel. Yes. Mr. President, I understand that in some countries abroad, for example, in Ireland, our nurses need not take additional examinations to qualify. I wonder if the gentleman would be familiar with that information.

Senator Flavier. Yes, Mr. President. Also in Great Britain.

Senator Pimentel. United Kingdom, yes.

Senator Flavier. In the United Kingdom, I am familiar with a few friends who tell me that this is also true in the Netherlands in recognition of the quality of our graduates but very, very dominantly in their minds is our English proficiency, Mr. President.

Senator Pimentel. Now, the good quality of the nurses of the Philippines I think is a given. That is, more or less, a universal acclaim that our nurses get. But I suppose that the reason in the United Kingdom and in Ireland the nurses are not required to take additional examinations for employment in these two countries, including the Netherlands now, is the fact that nursing in these states only takes three years, while we have a four-year course which more than makes up for any additional information that their stringent qualification requirements would impose on nurses entering their country for service in the nursing field. Would that be a correct assumption also?

Senator Flavier. That is correct, Mr. President. But I would also add that in some places, they have even as low as two years for nursing. There is now an effort to make it higher that is why the three years would be much more realistic and therefore, ergo, those who come from the Philippines have an extra one to two years that they can benefit from.

Senator Pimentel. Mr. President, for people studying nursing in the United States, would the sponsor know how long the requirement for that course is?

Senator Flavier. Yes, Mr. President. Normally, it is also four years. But I am told that there is an effort to make it shorter.

Senator Pimentel. In the United States?

Senator Flavier. In the United States. However, most of the hospitals would rather not do that but hire those from the Philippines who completed four years, to begin with.

Senator Pimentel. Yes. This is exactly what I am trying to go into now as a policy issue.

Why is it that nurses being employed in the United States are made to undergo additional examinations? For example, the qualifications in nursing schools, the length of time one can earn a degree are practically the same. Why is it that nurses entering the United States as far as I could gather from information are being required to take additional examinations?

Senator Flavier. That is a correct observation, Mr. President. When I had a dialogue with a few administrators from the American universities, they told me loosely that they would be happy to accept Filipino nurses without the examination. Except that in order to make sure that the applicants from other countries are not prejudiced, they have these examinations. But the examinations are really a wide range of examination. There is the federal law that requires the Council for Foreign Nursing Graduates to undergo an examination and, more importantly, the so-called TOEFL which is really an English examination.

Senator Pimentel. Mr. President, our government should exert effort to remove this apparent unnecessary examination as far as our nurses are concerned. Probably, with the exception of TOEFL which is required of all professionals wishing to exercise that profession in the United States coming from foreign countries. But on matters of qualification, I think we should aggressively ask our—is it CHED which is in charge of this?

Senator Flavier. Yes, Mr. President. It is CHED.

Senator Pimentel. And the Department of Foreign Affairs.

Senator Flavier. Department of Foreign Affairs, yes.

Senator Pimentel. I am sure Ka Blas has all the strength to follow this through.

Senator Flavier. Definitely. I am sure the gentleman and I will support this initiative, Mr. President.

Senator Pimentel. Yes, Mr. President. I cannot understand really why the United States should lump us together with other countries as if there is no such special relationship between the United States and the Philippines. It is as if the

Philippines is not the most vocal ally of the United States in the fight against Al-Qaeda and Osama bin Laden.

In other words, there are so many things which the United States and the Philippines hold in common dearly like the principles of democracy, the fight against terrorism, and also the fact that we have a long relationship to boot between the United States and the Philippines. Still, sometimes we feel that we are really being discriminated against.

Just to cite a case in point, the most recent one was the canned tuna preference that was extended by the United States to Bolivia, Colombia, Ecuador and Peru to the exclusion of canned tuna from the Philippines.

Senator Flavier. That is correct, Mr. President.

Senator Pimentel. I am not saying that our nurses are like canned tunas. What I am saying is, on another plane, perhaps, our government should really take the initiative in trying to ease restrictions that should not be applied to us.

First, as far as our nurses are concerned, they are equally if not even better-trained and qualified than, perhaps, even the nurses trained in the United States. Of course, if England, for example, the United Kingdom, Ireland, and the Netherlands, as the gentleman pointed out, are willing to grant our nurses easy access to their domestic nursing service, I would honestly say that we should also qualify for that in the United States without too much restrictions or too much inhibitions, Mr. President.

Senator Flavier. I agree heartily with the gentleman's views, Mr. President.

Senator Pimentel. Finally, Mr. President, on the matter of supervision of the nursing education in this country. I was listening to the interjection of the Senate President and I agree with him that perhaps if the nursing profession believes that continuing professional advancement seminars or conferences should be a requirement for the maintenance of license of a nurse in this country, then maybe we should put it here in this bill also. Because it will be an exception to that regulation that we have passed, I think, two congresses ago, where we did away with the requirement of the Professional Regulation Commission on yearly or, maybe, twice a year seminars to upgrade skills in other professions.

Senator Flavier. Yes, we will certainly revisit that section and make the necessary adjustments or amendments accordingly, Mr. President.

Senator Pimentel. Just one final point, Mr. President. On the issue of inducing our nurses to stay here, I think the first thing that we should do as government is to find out how

many nurses do we really need for every given year. And then create a situation where nurses could be compensated properly, perhaps, at the same level. If that is not possible, probably just a little lower than what they would be compensated abroad.

I really do not know how to do it as of this time. I have no idea as to what kind of proposals we can make for inclusion in this bill. But I think we should already begin to plan on the basis of the number of actual nurses that we need here so that we can make proposals for enticing them. I mean proposals that will, at least, induce the nurses to stay here rather than go abroad. Because, obviously, the thing that induces them to go abroad is the huge amount of earnings that nurses earn abroad.

Senator Flavier. Definitely, Mr. President. Fortunately, the Department of Health has an ongoing study along that line to determine manpower needs now and in the near future. However, there is no consensus yet on how to fulfill the necessary perks to encourage them to stay because the economic returns in the United States is just staggeringly wide. In the United States, they can get as much as US\$40 per hour, compared to ours where they get something like, in the private hospitals, P3,000 to P4,000 a month.

Senator Pimentel. In the general region of Misamis Oriental and Lanao, particularly in Iligan City, I was informed that as of last month, there were 35 medical doctors who are now studying to be nurses, Mr. President.

I mean, it is a sad commentary of the kind of income that are available to doctors of medicine so that they are now thinking of getting a nursing degree to enable them to go abroad easier and land higher-paying jobs.

The point I am trying to put in the record, Mr. President, is, we know, it is very difficult for us as a developing country to compete with the developed world in terms of levels of compensation. I do not think we will ever be able to do that within the next several years although some people say, "you cannot eat patriotism." Well, probably, that is one of the reasons that we will have to emphasize to our nursing professionals that this is where they are needed most actually. And probably, that is the reason we must, by the very nature of things, just determine exactly what are our nursing needs for domestic service and the number of nurses that we can afford to let go. Because once they are graduates, I am not too sure that we have any right to keep them here by operation of law. Of course, the proposal in this bill is to make them serve for two years, I think?

Senator Flavier. Yes, Mr. President.

Senator Pimentel. That is the present.

Senator Flavier. For state universities and colleges.

Senator Pimentel. Yes, after graduation they are to serve two years. And some probably would have reservations on that—"Why don't you let us go immediately after graduation?" But it is actually also for their good because in the meantime they will acquire the necessary expertise and perhaps, qualify easier to enter or to meet the requirements of the United States or other countries where they have set their eyes on for employment abroad, Mr. President.

Senator Flavier. I agree, Mr. President.

Senator Pimentel. So would the two years be done... Does the gentleman remember that provision about rural service? Would that be in the nature of that thing or...?

Senator Flavier. Analogous, Mr. President, except that the one for medicine was only for six months.

Senator Pimentel. Yes, but this one is for two years?

Senator Flavier. For two years.

Senator Pimentel. What do we expect them to do within the two-year period, Mr. President?

Senator Flavier. Well, first of all, to serve the hospitals that are being threatened with shortages because more and more will be recruited from this hospital, so at least, we have a backup. And second, as the gentleman correctly said, at least this will be a pool of experience for them that will enrich their curriculum vitae and make them even more qualified to serve elsewhere.

Senator Pimentel. Yes. And therefore probably that positive aspect should be emphasized so that they would not feel as if we are trying to curtail and prevent them from improving their lives by going abroad. Because as a matter of fact... Does the gentleman believe that the two-year period is sufficient?

Senator Flavier. Well, if I had my way, maybe it should be longer, but even that is already a big leap forward.

My experience with the doctor-to-the-barrios program for two years was very positive, Mr. President. And implicit in what the gentleman mentioned, the dimension of patriotism and love of country was a very important value that we instituted especially the appeal being we are going to serve the municipalities that had had no doctors for the past 20 years. Therefore, this became the attraction and the appeal to these idealistic medical graduates that are still in existence in our country.

Senator Pimentel. So probably, we can refine the concept of the two-year requirement to stay in this country after graduation for the nurses, and probably require that they be distributed to areas which need the services of nurses along the lines of the, *ano*? Barangay service, did we call it that?

Senator Flavier. Doctor-to-the-barrios, Mr. President.

Senator Pimentel. Doctor-to-the-barrios service.

Senator Flavier. Yes, definitely. That is a very good suggestion, Mr. President.

Senator Pimentel. Thank you very much, Mr. President.

Senator Flavier. Thank you, Mr. President.

Senator Legarda Leviste. Mr. President, may this representation seek some clarification from the good sponsor? This will be very, very brief.

Senator Flavier. With pleasure to the senior coauthor of this bill.

Senator Legarda Leviste. The most senior, the one who calendars it everyday.

Senator Flavier. Yes, without whom, we would be nowhere. *[Laughter]*

Senator Legarda Leviste. Mr. President, just very brief questions on the standard basic pay of the nurses. I am not sure if this has been asked by the previous senators who interpellated, but under Section 29, the standard basic pay for nurses shall be based on NEDA figures. Just for clarification. Which figures or what NEDA figures is this section referring to? How shall we base the standard minimum pay for nurses if we say it is based on NEDA figures?

Senator Flavier. Can the lady senator be more specific in her paging, Mr. President? She is talking...

Senator Legarda Leviste. I think that will be Section 29.

Senator Flavier. Section 29, yes, Mr. President, there is actually a listing based on the grades. And according to the present valuation, the public hospital nurses are getting at the rate of about P9,000, but those from the private are pegged at about P3,000 to P4,000 only. So, the trick or at least the effort will be to get the NEDA to get all these figures and in relation to other health services come up with a figure. Senator Angara is more in favor of a more specific figure, even if he admits that this is going to be difficult. But this will be based on the NEDA and the realities in the field, and of course, affordability.

Senator Legarda Leviste. How is that possible, Mr. President, that the figures he mentioned are too low and do not really provide adequate compensation for the nurses? They do not deserve such a low compensation if we are to...

Senator Flavier. If we pass the magna carta, then it will cover this, and hopefully also bridge the gap between those two. As of now, it is the market and affordability that govern the nursing pay, Mr. President.

Senator Legarda Leviste. In the same section, Mr. President, it is also mentioned here that the proper government office or agency shall fix a standard minimum pay for nurses. Does this refer to NEDA? Or would it be appropriate if we provide for a particular government agency which shall fix the minimum pay for nurses, let us say, the Department of Labor and Employment or the Department of Health?

Senator Flavier. That is a good point, Mr. President, because in actuality, for the public hospitals, the Civil Service Commission will come in; for the private hospitals and the nurses, the DOLE will be much more involved.

Senator Legarda Leviste. Yes, Mr. President.

Senator Flavier. So mentioning them would make it even clearer.

Senator Legarda Leviste. Yes, Mr. President, because I thought it was in purpose, the sponsor left the government agency provision purposely open. Or would it be possible at the proper time to define which government agency would fix the standard minimum pay for nurses for more clarity in the bill?

Senator Flavier. Clarity and definiteness I think are both desirable in the bill, Mr. President.

Senator Legarda Leviste. So at the proper time, this representation will clarify that.

Senator Flavier. Yes, Mr. President.

Senator Legarda Leviste. There is a question from the Minority Leader, but he is asking me to clarify, which I also... It is very common that we hear the term "registered nurse" but never really bothered to find out what is the difference between a "nurse" and a "registered nurse." Are there unregistered nurses or undocumented nurses? *[Laughter]*

Senator Flavier. Maybe that is now misnomer. In the old days when I was younger and shorter—

Senator Legarda Leviste. When I was not even born yet, I suppose.

Senator Flavier. The lady senator was not yet born, she was only a glimmer in the eyes of her mother.

There was a category called "registered nurse," and this actually had only two years, then there was the Bachelor of Nursing which was four years. But now this has been more or less standardized. So we only have the four years.

Senator Legarda Leviste. And the two-year nursing course was phased out.

Senator Flavier. Yes. But because of the fact that for purposes of licensure, they are still to be registered, the word here "registration" has remained, but no longer in the context of the old two and four years.

Senator Legarda Leviste. Are there nurses still practicing who are just graduates of a two-year course?

Senator Flavier. No more, Mr. President.

Senator Legarda Leviste. What year was that phased out, Mr. President?

Senator Flavier. In the 1970s, at about the year the Majority Leader was born, Mr. President.

Senator Legarda Leviste. Yes, Mr. President. Well, that just completes my interpellation. I am eager to pass this very important piece of legislation. As I mentioned in my cosponsorship speech, I believe that this bill would be very important, very relevant especially to professionalize and improve the nursing profession. I think, as I mentioned earlier, all our colleagues here have manifested to be coauthors of this measure.

I congratulate the good sponsor for more than adequately answering all the interpellation questions.

Senator Flavier. I would like to thank the Majority Leader for her full support. If we can terminate the period of interpellations, we can then go to the amendments and the Body may be interested to know that the certification as "urgent" of this bill is now on its way to the Senate.

Senator Legarda Leviste. Yes. Lest the gentleman sounds that he is dictating to the Majority Leader, Mr. President, I had actually intended to do that.

Senator Flavier. Because I saw it in the Majority Leader's note, Mr. President.

Senator Legarda Leviste. Yes. I therefore move that the period of interpellations be closed on Senate Bill No. 2292 under Committee Report No. 68.

The President. Is there any objection? *[Silence]* There being none, the motion is approved.

SUSPENSION OF CONSIDERATION OF S. NO. 2292

Senator Legarda Leviste. I move that we suspend consideration of Senate Bill No. 2292.

The President. Is there any objection? *[Silence]* There being none, the motion is approved.

MANIFESTATION OF SENATOR LEGARDA LEVISTE (Senator Recto to Replace Senator Cayetano as a Member in the Government Corporations and Public Enterprises Committee)

Senator Legarda Leviste. Just a few manifestations before we adjourn, Mr. President.

In the Committee on Government Corporations and Public Enterprises, Sen. Ralph G. Recto will replace Sen. Renato L. Cayetano as a member.

The President. Is there any objection? *[Silence]* There being none, Sen. Ralph G. Recto is elected in place of Sen. Renato L. Cayetano.

Senator Legarda Leviste. Mr. President, we need to constitute the Oversight Committee on the Official Development Assistance. The two members from the Minority are Sen. Aquilino Q. Pimentel Jr. and Sen. John H. Osmeña. We still have to receive the members from the administration, from the Majority, from the chairman of the Committee on Ways and Means.

ADJOURNMENT OF SESSION

I move that we adjourn the session today until three o'clock in the afternoon tomorrow, Wednesday, August 21, 2002.

The President. Is there any objection? *[Silence]* There being none, the session is adjourned until three o'clock in the afternoon tomorrow, August 21, 2002.

It was 5:58 p.m.