



Republic of the Philippines  
Professional Regulation Commission  
Manila



PROFESSIONAL REGULATORY BOARD OF NURSING  
RESOLUTION No. 22  
Series 2017

**Promulgation of the Philippine Professional  
Nursing Practice Standards (PPNPS)**

*Chinnes*  
**WHEREAS**, Article III, Sec. 4 (h) of Republic Act (RA) No. 7164 or the Philippine Nursing Act of 1991 provides for the powers, duties and functions of the Professional Regulatory Board of Nursing (PRBON), which include the power to promulgate decisions or adopt measures as may be necessary for the improvement of the nursing practice and for the advancement of the profession;

*Jamam*  
**WHEREAS**, in September 1994, the PRBON called for a consultative meeting on Safe Nursing Practice with nursing leaders from the Philippine Nurses Association (PNA), Association of Nursing Service Administrators of the Philippines (ANSAP) and other national nursing organizations and groups. The output of this two (2) – day workshop was the draft document on Standards of Safe Nursing Practice. After several meetings and discussions, PRBON Resolution No. 82 was issued which adopted and promulgated the Standards on September 30, 1998;

*epened*  
**WHEREAS**, these initiatives were further strengthened with the passing of R. A. No. 9173 or the Philippine Nursing Act of 2002. Article III, Sec. 9 (c) of this law states that the PRBON shall 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;

*Jamam*  
**WHEREAS**, with such new legal mandate, the PRBON assumed the responsibility of formulating the 2005 Nursing Core Competency Standards which represent the minimum knowledge, skills and attitudes necessary to provide competent, efficient and safe nursing care;

*Jamam*  
**WHEREAS**, in 2009, the PRBON undertook an extensive and comprehensive review of the 2005 Nursing Core Competency Standards, in collaboration with nursing partners from the service and the academe who are members of various nursing specialty organizations and interest groups, such as the Commission on Higher Education-Technical Committee on Nursing Education (CHED-TCNE), ANSAP, and the UP Manila College of Nursing (UPCN) as the World Health Organization (WHO) Collaborating Center for Nursing Leadership and Development;

*Jamam*  
**WHEREAS**, the results of this study led to the formulation of the 2012 National Nursing Core Competency Standards (NNCCS) which defined the three (3) major beginning roles and corresponding responsibilities of the nurse in: (1) Client Care; (2) Leadership and Management; and (3) Research;

**WHEREAS**, the completion of the NNCCS in June 2012 and its promulgation by the PRBON on July 27, 2012 was very timely as this complemented the implementation of the Philippine Qualifications Framework (PQF) that describes the levels of educational qualifications and sets the standards for qualifications outcomes in knowledge, skills and values. It also complemented the ASEAN Mutual Recognition Arrangement (MRA) on Nursing Services.

**WHEREAS**, the PRBON and its Technical Working Group (TWG) continually worked on the competency standards by refining the set of competencies and the indicators of performance under the four (4) domains: value-based nursing practice; knowledge-driven nursing practice; outcome-oriented professional relationships; and leadership and governance. These domains were identified by the TWG in its process of benchmarking the Philippine nursing standards with those of other countries. The revised document was presented to nursing leaders and other stakeholders in a public consultation on July 16, 2015 at St Luke's Medical Center at Taguig City whereby further inputs and comments were given by the participants;

**WHEREAS**, at the start of year 2017, the core members of the TWG met to revisit the original 2012 NNCCS document. Subcommittees were created corresponding to the four (4) domains of the nursing practice standards to review and discuss the specific outputs of the specialty nursing organizations vis-à-vis the original document. The product of the discussions on the harmonized nursing standards was presented in a public orientation on March 23, 2017 at the PNA Headquarters;

**WHEREAS**, the primary purpose of the standards is to promote, guide, and direct professional nursing practice. Specifically, the Standards will be useful to the following:

The **Professional Nurses**: (1) to have a better understanding of their professional obligations; (2) use the same as basis for their own continuing competence and professional development; (3) advocate for enhancing changes in policies and practice; and (4) define and resolve professional practice issues and concerns.

The **Employers**: to be able to develop systems that support nurses to meet prescribed standards of practice focusing on: (a) developing job descriptions; (b) developing orientation and in-service programs; and (c) creating performance appraisal tool.

The **Nursing Education Leaders**: to serve as guide in the development of standards that shall serve as the bases for curriculum development.

The **Public** can be assured of competent, safe, quality nursing care and ethical practice.

The **PRBON**: (1) to be able to use the same as basis in regulating the nursing practice by: (a) using it as framework for the Nurse Licensure Examination (b) recognizing the entry level education program; (c) providing guidance to nurses of their professional obligations; (d) providing a foundation for the assessment of their professional performance; (e) clarifying to the public and other health care professionals what the profession expects of its members; and (f) serving as a basis in addressing incompetent and unethical nursing practice.

**WHEREFORE**, the PRBON, in light of the foregoing initiatives and advances in the nursing profession, has **RESOLVED** as it so **RESOLVES**, to issue and promulgate the **Philippine Professional Nursing Practice Standards (PPNPS)**, which is hereto appended as Annex A.

This Resolution and its Annex A shall take effect after fifteen (15) days from publication in the Official Gazette or in any newspaper of general circulation in the county.

Let copies hereof be further furnished the U. P. Law Center, Department of Health (DOH), Philippine Nurses Association (PNA), Association of Nursing Service Administrators of the Philippines (ANSAP), Association of Deans and Philippine Colleges of Nursing (ADPCN), the Commission on Higher Education (CHED), and other specialty and nursing interest groups and organizations for information.

Done this 18th day of October 2017 in the City of Manila.

  
**GLEND A. S. ARQUIZA**  
Chairperson

  
**CORA A. AÑONUEVO**  
Member

  
**GLORIA B. ARCOS**  
Member

  
**FLORENCE C. CAWAON**  
Member

  
**CARMELITA C. DIVINAGRACIA**  
Member

  
**CARFREDDA P. DUMLAO**  
Member

Attested:

  
**ATTY. LOVELIKA T. BAUTISTA**  
Officer-in-Charge  
Secretary's Office of the Professional Regulatory Boards

Approved:

  
**TEOFILO S. PILANDO, JR.**  
Chairman

**(VACANT)**  
Commissioner

  
**YOLANDA D. REYES**  
Commissioner

**Professional Regulation Commission  
BOARD OF NURSING**

**THE PHILIPPINE PROFESSIONAL NURSING PRACTICE  
STANDARDS (PPNPS)**

INTRODUCTION

The **Standards of Professional Nursing Practice** are authoritative statements of the duties that all registered nurses, regardless of role, population or specialty are expected to perform competently (ANA, 2010, p. 2). The ANA further states that the standards can change as the dynamics of professional nursing evolve and that specific clinical circumstances or conditions might affect the application of the standards at any given time.

The Registered Nurses Association of British Columbia (2003) and the College of Nurses of Ontario (2002) defined nursing standards as guide to the knowledge, skills, judgment and attitudes that are needed to practice safely. They reflect a desired and achievable level of performance against which actual performance can be compared.

**Development of Nursing Standards in the Philippines**

Legal Bases

The impetus in the development of nursing standards emanated from Article III, Sec. 4 (h) of Republic Act No. 7164 (Philippine Nursing Act of 1991) which enumerated the powers, duties and functions of the Professional Regulatory Board of Nursing (PRBON). Among others, the PRBON shall *"Promulgate decisions or adopt measures as may be necessary for the improvement of the nursing practice, for the advancement of the profession...."*

Thus, in September 1994, the PRBON, then chaired by Aurora S. Yapchiongco, called for a consultative meeting of presidents/representatives of national nursing associations and concerned groups and individuals on "Safe Nursing Practice." Thereafter, it organized a two-day workshop, the output of which was incorporated in the document on **Standards of Safe Nursing Practice**. After several meetings and discussions, BON Resolution No. 82 issued on September 30, 1998, adopted and promulgated the Standards. In 2001, the Association of Nursing Service Administrators of the Philippines (ANSAP), together with the PRBON and the Philippines Nurses Association (PNA), developed the **Standards of Nursing Services**. This document progressed with its 2008 edition.

*On January 19, 2008*  1 929.

These initiatives were further strengthened with the passing of the R.A. 9173 (Philippine Nursing Act of 2002). Article III, Sec. 9 (c) of the law states that: *“the PRBON is empowered to 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.”*

#### Core Competency Standards of Nursing Practice

With the legal mandate, the PRBON assumed the responsibility in the improvement and effective implementation of the core competency standards of nursing practice in the Philippines which represent the minimum knowledge, skills and attitudes necessary to provide competent, efficient and safe nursing care, and maintain the integrity of the nursing profession.

The 2005 Standards identified four major competencies of a beginning nurse: (1) Patient Care Competencies; (2) Empowering Competencies; (3) Enhancing Competencies; and (4) Enabling Competencies. Under each competency were key areas of responsibility.

Then in 2009, the PRBON undertook an extensive and comprehensive review of the 2005 nursing core competency standards. The Nursing Core Competency Revisiting Project (NCCRP) was a collaborative activity of the PRBON with nursing partners from the service and the academe who are members of various nursing specialty organizations and interest groups, together with the Commission on Higher Education-Technical Committee on Nursing Education (CHED-TCNE), and the UP Manila College of Nursing as the World Health Organization (WHO) Collaborating Center for Nursing Leadership and Development.

The revisiting process included work setting scenario analysis, benchmarking core competency standards with other countries, field validation studies on the nurses' roles and responsibilities in the hospitals and community settings, integrative review of output from the validation strategies, presentation of validation analysis, core competency validation, and public consultation.

#### 2012 National Nursing Core Competency Standards (NNCCS)

From the results of this extensive study spanning a period of three (3) years, the PRBON came up with 2012 National Nursing Core Competency Standards (NNCCS) which can be applied to the practice of professional nurses and can serve as a guide for nursing specialty practice. Three (3) major **roles** of nurses have been defined: (1) Beginning Nurses' Role in Client Care; (2) Beginning Nurses' Role in Leadership and

*on January 2012*  2 *gpa.*

Management; and (3) Beginning Nurses' Role in Research. Under each role are nurses' **responsibilities** as presented below.

## 2012 NATIONAL NURSING CORE COMPETENCY STANDARDS

ROLES	14 RESPONSIBILITIES
<b>Beginning Nurse's Role in Client Care</b>	<ol style="list-style-type: none"> <li>1. Practices in accordance with legal principles and code of ethics in making personal and professional judgment.</li> <li>2. Utilizes the nursing process in the interdisciplinary care of clients that empowers the clients and promotes safe quality care.</li> <li>3. Maintains complete, accurate and up-to-date recording and reporting system.</li> <li>4. Establishes a collaborative relationship with colleagues and other members of the team to enhance nursing and other health care services.</li> <li>5. Promotes professional and personal growth and development.</li> </ol>
<b>Beginning Nurse's Role in Leadership &amp; Management</b>	<ol style="list-style-type: none"> <li>1. Demonstrates management and leadership skills to provide safe and quality care.</li> <li>2. Demonstrates accountability for safe nursing practice.</li> <li>3. Demonstrates management and leadership skills to deliver health programs and services effectively to specific client groups in the community setting.</li> <li>4. Manages a community/village based health facility component of a health program or a nursing service.</li> <li>5. Demonstrates ability to lead and supervise nursing support staff.</li> <li>6. Utilizes appropriate mechanisms of networking, linkage building and referrals.</li> </ol>
<b>Beginning Nurse's Role in Research</b>	<ol style="list-style-type: none"> <li>1. Engages in nursing or health related research with or under the supervision of an experienced researcher.</li> <li>2. Evaluates a research study/report using guidelines in the conduct of a written research critique.</li> <li>3. Applies the research process in improving patient care in partnership with a quality improvement/ quality assurance/ nursing audit team.</li> </ol>

### Significance of the 2012 NNCCS

The NNCCS serve as a guide for the development of the following:

1. Basic Nursing Education Program in the Philippines through the Commission on Higher Education (CHED);
2. Competency-based test framework as the basis for the development of course syllabi and test questions for "entry level" nursing practice in the Philippine Nursing Licensure Examination;
3. Standards of the Professional Nursing Practice in various settings in the Philippines;
4. National Career Progression Program for nursing practice in the Philippines; and
5. Related evaluation tools in various practice settings in the Philippines.

*cr jason yane* *Dr. J. J. J. J.* 3 *gr.*

The completion of the National Nursing Core Competency Standards in June 2012 and its promulgation by the PRBON on July 27, 2012 through Resolution No. 24, was very timely as this complemented the implementation of the Philippine Qualifications Framework (PQF) that describes the levels of educational qualifications and sets the standards for qualifications outcomes in knowledge, skills and values. It also complemented the ASEAN Mutual Recognition Arrangement (MRA) on Nursing Services.

#### Standards of Professional Nursing Practice

**Standards of care** describe the **competencies** of the nurse and the **indicators** of performance. Below is the structure and sequence of formulating the nursing standards.



The **primary purpose** of nursing standards is to promote, guide, and direct professional nursing practice. The nursing standards will be used by the individual nurses, the public, the employers, the regulatory boards, the academe and other stakeholders. (College of Nurses of Ontario, 2002; Registered Nurses Association of B.C., 2003). Specifically,

The **professional nurses** can:

- 1) have a better understanding of their professional obligation;
- 2) use nursing standards as basis for enhancing their competence and professional development;
- 3) advocate for changes in policies and practice; and
- 4) define and resolve professional practice issues and concerns.

The **employers** can develop systems that support nurses to meet prescribed standards of practice focusing on:

- 1) developing job descriptions;
- 2) developing orientation and in-service programs; and

*Dr. Jamar Espinoza Rodriguez Pa 4 gra.*

- 3) creating performance appraisal tool.

For **Nursing Education Leaders** to serve as guide in the setting of nursing curriculum standards.

The **Public** can be assured of competent, safe, quality nursing care and ethical practice.

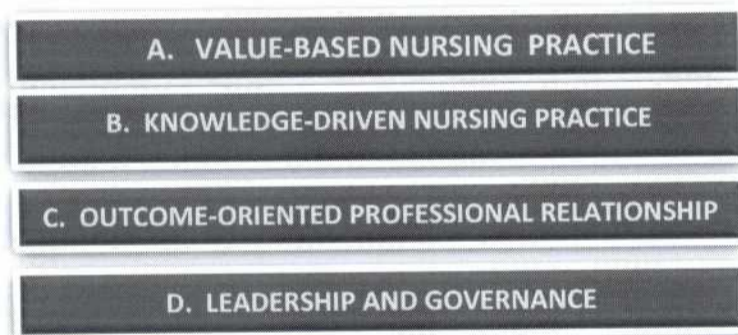
The **PRBON** can use these as bases for legal responsibility to protect the public by regulating nursing practice by:

- 1) recognizing the entry level education program;
- 2) providing guidance to nurses of their professional obligations;
- 3) providing a foundation for the assessment of their professional performance;
- 4) clarifying to the public and other health care professionals what the profession expects of its members; and
- 5) serving as a basis in addressing incompetent and unethical nursing practice.

### **Philippine Professional Nursing Practice Standards (PPNPS)**

#### Nursing Practice Standard Domains

The PRBON and its Technical Working Group (TWG) continually worked on the competency standards by refining the set of competencies and the indicators of performance using the following four (4) domains:



These domains were identified and aptly classified by the TWG in its process of benchmarking the Philippine nursing standards with those of other countries such as the USA, Canada, Australia, UK, Hongkong and Singapore.

*CR* *Juan Carlos* *Domina* <sup>5</sup> *ga.* *pa.*



The revised document was presented to nursing leaders and other stakeholders in a public consultation on July 16, 2015 at St Luke's Medical Center, Makati City whereby further inputs and comments were given by the participants. Meanwhile, specialty organizations have begun working on/reviewing their standards specific to their field of nursing practice using the template of the draft "mother" (original) document, the initial outputs of which had been presented to the PRBON for comments and suggestions.

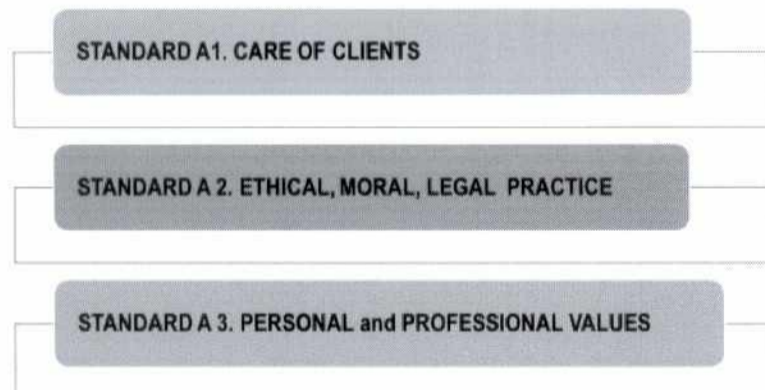
At the start of year 2017, the core members of the TWG met to revisit the original 2012 NNCCS document. Subcommittees were created corresponding to the four (4) domains of the nursing practice standards. Each Subcommittee reviewed and discussed the specific outputs of the specialty nursing organizations vis-à-vis the original document. The product of the discussions on the harmonized nursing standards was presented in a public orientation on March 23, 2017 at the Philippine Nurses Association Headquarters.

## A. VALUE-BASED NURSING PRACTICE STANDARDS

### Definition

Value-Based Nursing Practice is a clinical decision-making process guided by empirical body of knowledge, ethico-moral values and practices, rules and regulations, combined with appropriate competencies in client care reflecting personal and professional values when engaging with others of diverse cultures.

### A. Value-Based Nursing Practice



STANDARD A1. CARE OF CLIENTS

### Definition

*Dr. Janice Garcia Summaga<sup>6</sup> gsa.*

Care of Clients is the provision of professional nursing services to varied clients: individuals across the lifespan with varying health-illness status and gender; to healthy or at-risk families, population groups and communities.

COMPETENCIES	PERFORMANCE INDICATORS
1. Provides quality and safe nursing care utilizing the nursing process.	1.1 Performs comprehensive and systematic nursing assessment by collecting pertinent data using appropriate techniques and tools; 1.2 Formulates appropriate nursing diagnosis based on assessment data; 1.3 Identifies client outcomes that are realistic and attainable; 1.4 Develops a plan of care in collaboration with the client and other members of the health care team; 1.5 Implements the care plan safely and effectively using evidence-based nursing interventions; and 1.6 Evaluates effectiveness of interventions, makes revisions when necessary, and documents nursing care rendered.
2. Demonstrates appropriate knowledge and skills based on the health/illness status of individual, families, population groups and/or communities.	2.1 Explains health needs of clients; 2.2 Provides holistic care across lifespan; and 2.3 Uses appropriate skills in the care of clients.
3. Provides sound decision making in the care of individuals/ families/ population groups and communities considering their beliefs and values.	3.1 Gathers data related to the health condition taking into account the beliefs and values of the client; 3.2 Analyzes the data gathered; 3.3 Selects appropriate action to support/enhance responses to health and illness; and 3.4 Monitors periodically the response of the client

*Ch. J. ... 7 gsa.*

	to the nurse's action.
4. Promotes client safety.	<p>4.1 Performs age-specific safety measures in all aspects of client care;</p> <p>4.2 Complies with the International Patient Safety Goals issued in January 2017 by the Joint Commission*;</p> <p>4.3 Complies with other International Safety Standards;</p> <p>4.4 Conforms to the golden rules in medication (preparation, administration and drug reconciliation);</p> <p>4.5 Administers other health therapeutics safely;</p> <p>and</p> <p>4.6 Educates client and family on indications and effects of medications.</p> <p>*(<a href="https://www.jointcommission.org/assets/1/6/NPSG_C_hapter_HAP_Jan2017">https://www.jointcommission.org/assets/1/6/NPSG_C_hapter_HAP_Jan2017</a>. Pdf)</p>
5. Sets priorities in nursing care based on client's needs.	<p>5.1 Identifies the needs of clients;</p> <p>5.2 Analyzes the priority needs of clients; and</p> <p>5.3 Determines appropriate nursing care.</p>
6. Implements sound nursing care to achieve identified client outcomes.	<p>6.1 Explains interventions to client before carrying them out;</p> <p>6.2 Carries out safe, efficient and effective nursing intervention; and</p> <p>6.3 Uses the participatory approach to enhance client-partners empowering potential for healthy lifestyle and wellness.</p>
7. Ensures continuity of care.	<p>7.1 Establishes means of providing continuous client care;</p> <p>7.2 Collaborates with other members of healthcare team and appropriate agencies for continuity of care;</p>

Dr. Juman Yousif Hussein M.D. 8 gsa.

	<p>7.3 Refers client with identified problems to appropriate professionals/agencies; and</p> <p>7.4 Promotes client empowerment towards self-care.</p>
<p>8. Participates in quality improvement activities (e.g., feedback on client's satisfaction, accreditation, quality assurance and related activities).</p>	<p>8.1 Assesses client's experience upon discharge;</p> <p>8.2 Implements significant findings of nursing audit through quality circles, nursing rounds, policy development and clinical pathways; and</p> <p>8.3 Evaluates continually quality of care provided.</p>

STANDARD A2. ETHICAL, MORAL, AND LEGAL PRACTICE

**Definitions**

Adherence to ethical, moral, and legal standards in the provision of care.

**Ethical** refers to principles that encourage universal values such as trust, respect, fairness, and benevolence.

**Moral** refers to beliefs of what is right or wrong.

**Legal** refers to conformity to the provisions of relevant laws and jurisprudence.

COMPETENCIES	PERFORMANCE INDICATORS
<p>1. Adheres to ethico-moral and legal considerations when providing safe and quality care.</p>	<p>1.1 Makes professional decisions within ethical, bioethical principles, moral and legal parameters;</p> <p>1.2 Uses institutional, community and other relevant resources to address ethical, moral and legal concerns in nursing practice;</p> <p>1.3 Applies legal and ethical principles to advocate for human and societal well-being and preferences; and</p> <p>1.4 Clarifies unclear or questionable policies, orders, decisions or actions made by intra/inter-professional health team members.</p>
<p>2. Protects client's rights based on "Patient's Bill of Rights and Obligations."</p>	<p>2.1 Advocates client's rights;</p> <p>2.2 Educates the client on their shared roles and responsibilities in healthcare;</p> <p>2.3 Evaluates client's understanding of health care rights;</p> <p>2.4 Implements strategies/interventions to protect client's</p>

*Cn Jeanmarie Grace Buncay pa pa.*<sup>9</sup>

	<p>right guided by the "Patient's Bill of Rights and Obligations"; and</p> <p>2.5 Monitors compliance to "Patient's Bill of Rights and Obligations."</p>
3. Applies ethical reasoning and decision-making process to address situations of ethical and moral dilemma.	<p>3.1 Executes the ethical reasoning process used in decisions to address situations of ethical and moral dilemma; and</p> <p>3.2 Decides on cases based on ethical reasoning.</p>
4. Adheres to the established norms of conduct based on the Philippine Nursing Law and other legal, regulatory and institutional requirements relevant to safe nursing practice.	<p>4.1 Performs within the scope and standards of nursing practice;</p> <p>4.2 Shows evidence of compliance with legal requirements in the practice of nursing such as, but not be limited to, current professional identification card (PIC); and</p> <p>4.3 Acts in accordance with the terms of contract of employment and other rules and regulations.</p>
5. Accepts responsibility and accountability for own decisions and actions.	<p>5.1 Meets nursing accountability requirements as embodied in the job description;</p> <p>5.2 Justifies basis for nursing actions and judgment;</p> <p>5.3 Recognizes own limitations and seeks appropriate help when needed; and</p> <p>5.4 Projects a positive image of the profession.</p>

#### STANDARD A3. PERSONAL AND PROFESSIONAL VALUES

##### Definitions

Personal values are a set of individual's principles, standards, concepts, beliefs and ideas that are internalized from the society or culture in which one lives.

Professional values are beliefs and principles that guide nursing practice and which influence one's work behavior. These are acquired through experience, education, training and practice considering, but not limited by, regulatory standards, Code of Ethics, and the core values of the nursing profession.

*CR Jansen*  10 *pa gac.*

COMPETENCIES	PERFORMANCE INDICATORS
1. Assumes responsibility and accountability for personal and professional development and for lifelong learning.	1.1 Identifies learning needs based on current and projected/future practice requisites; 1.2 Updates one's learning plan to enhance competence as a registered nurse; 1.3 Validates new knowledge from peers and other sources that enhances one's competency; and 1.4 Works towards personal and professional career path as part of one's lifelong learning.
2. Demonstrates continual competence and professional growth.	2.1 Undergoes training for personal and professional growth; 2.2 Participates actively in professional activities; and 2.3 Complies with regulatory requirements for practice (e.g. Continuing Professional Development or CPD).
3. Engages in advocacy activities to influence health and social care services.	3.1 Negotiates relevant services on behalf of clients. 3.2 Develops alliances with groups working to advocate for the upliftment of health and welfare of clients. 3.3 Participates in legislative and executive lobbying and policy making processes. 3.4 Utilizes conflict-resolution strategies to address issues and concerns.
4. Models personal and professional behavior and values.	4.1 Demonstrates consistently professional behavior in words, actions, and in relating with clients, colleagues and the general public; and 4.2 Utilizes communications and social media judiciously and responsibly.

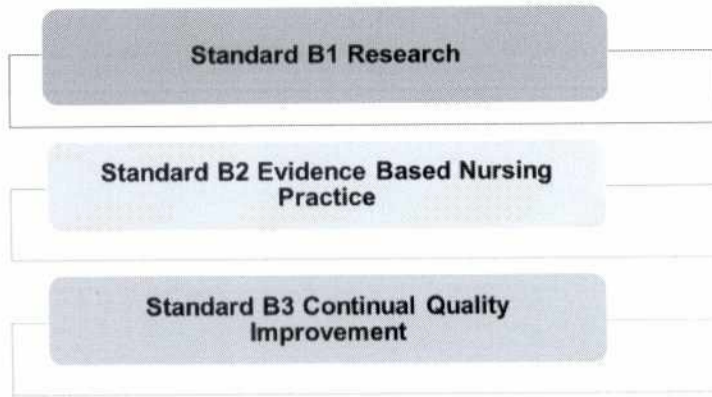
## B. KNOWLEDGE-DRIVEN NURSING PRACTICE STANDARDS

### Definition

Knowledge-driven nursing practice refers to the consistent application of a scientific body of knowledge and skills through the integration of the different patterns of knowing (Carper, 1978) such as esthetics, ethics, and personal relationships as bases for safe and sound judgment to appropriate care of clients.

*Ch. James Grant BSc, MSc, PhD<sup>11</sup> FRSA.*

**B. Knowledge-Driven Nursing Practice Standards**



**STANDARD B1. RESEARCH**

**Definition**

Research is a scientific process that validates existing theories/models and generates new knowledge to improve nursing practice, client outcomes, and health care delivery system.

COMPETENCIES	PERFORMANCE INDICATORS
1. Plans research activities individually or in groups to generate relevant areas of study.	1.1 Explains the relevance of the research for the improvement of care; 1.2 Identifies research gaps through comprehensive review of literature and use of clinical data; 1.3 Formulates research problems based on identified gaps; 1.4 Determines appropriate research methodology; and 1.5 Applies research ethics guidelines.
2. Conducts relevant research studies.	2.1 Participates in the collection and/or analysis of data; and 2.2 Applies ethical principles and guidelines in all the phases of the research.
3. Uses research results/findings to improve nursing practice.	3.1 Incorporates research data in clinical care rounds and conferences; and 3.2 Presents research results/findings in proper forum.

*CR James [Signature]* *ga* *ga.* 12

STANDARDS B2. EVIDENCE BASED NURSING

**Definition**

Evidence-based practice is a problem-solving approach that integrates current best evidences, clinical expertise, and client's preference and values in making decisions towards promoting safe and quality nursing practice.

COMPETENCIES	PERFORMANCE INDICATORS
1. Uses the current best evidence in providing safe and quality care.	1.1 Appraises data from current evidence; 1.2 Incorporates best practices in the total care of clients; and 1.3 Identifies opportunities for improvement of existing practice guidelines based on new evidence.
2. Collaborates with the health care team and other stakeholders in the application of best research evidence in client care.	2.1 Shares the best applicable research results/findings with health care team and stakeholders; and 2.2 Coordinates with the health care team and other stakeholders to improve client outcome.
3. Integrates client's values, preferences, best evidences and clinical expertise in decision making for client care.	3.1 Informs clients appropriately on the risks and benefits of interventions and therapeutics; and 3.2 Supports client's decision-making process in the choice of health care.

STANDARD B3. CONTINUAL QUALITY IMPROVEMENT

**Definition**

Continual Quality Improvement is the analysis of performance, monitoring of the outcome of processes, and application of strategies for the improvement of safe and quality nursing practice.

COMPETENCIES	PERFORMANCE INDICATORS
1. Participates in quality improvement programs and activities.	1.1 Identifies opportunities for improvement; 1.2 Participates in data collection/analysis/monitoring with quality improvement/quality assurance/ audit team; and 1.3 Suggests solutions to identified areas of improvement and quality checks.
2. Contributes to continuing growth and development of the	2.1 Participates in post-graduate conferences/workshops and continuing professional development programs;

*Dr. Jannah Yusoff BScN, PA 13 gsa.*



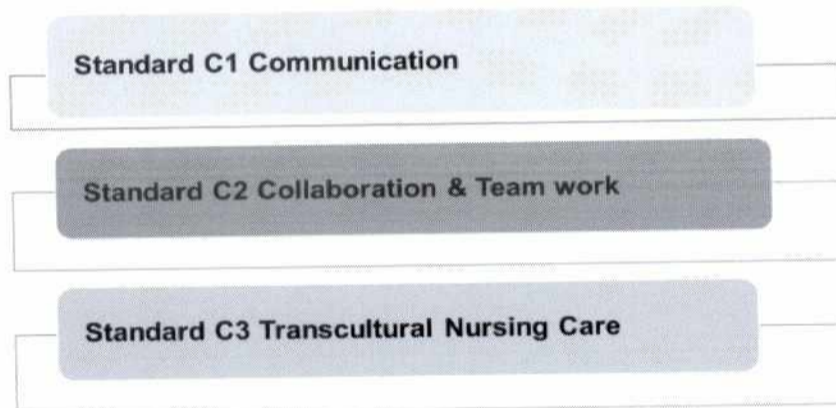
profession and the nurse.	and 2.2 Provides professional inputs towards improvement of nursing practice.
3. Keeps abreast with trends and developments of health care system and nursing profession.	3.1 Establishes linkages with colleagues and professional bodies on updates that affect nursing practice; and 3.2 Utilizes basic information technology system in the delivery of health care.

### C. OUTCOME-ORIENTED PROFESSIONAL RELATIONSHIPS

#### Definition

Outcome-oriented professional relationships refer to intra- and inter-professional relationships that lead to an enhancement of one's role through communication, collaboration and understanding of cultural context to achieve mutually-agreed upon outcomes for client care.

#### C. OUTCOME-ORIENTED PROFESSIONAL RELATIONSHIPS STANDARDS



#### STANDARD C1. COMMUNICATION

#### Definition

Communication is a relational process whereby messages are transmitted and understood by both the sender and the recipient using varied modes, skills and approaches including media and information technology with the goal to facilitate effective health care delivery.

COMPETENCIES	PERFORMANCE INDICATORS
1. Establishes working relationship with clients,	1.1 Sets an agreement with the client, family, health team

*CR* *Janaw yadaw* *Sumnu ga* <sup>14</sup> *ga.*

family/relatives, health team members, and other stakeholders.	members and other stakeholders to facilitate interaction; 1.2 Listens actively to the concerns of client, family, health team members and other stakeholders; and 1.3 Provides feedback in an appropriate and timely manner.
2. Communicates effectively with clients, health team members and other stakeholders to facilitate delivery of care.	2.1 Identifies barriers in communication; 2.2 Uses effective strategies in communication; and 2.3 Uses varied channels of communication to include available and appropriate information and communication technology.
3. Responds to needs of individuals, families, population groups and communities.	3.1 Provides reassurance through therapeutic touch, warmth and comforting words of encouragement; 3.2 Uses therapeutic communication techniques and bio-behavioral interventions to meet client's needs; and 3.3 Provides timely, available, affordable, and appropriate services and resources based on expressed needs of clients.
4. Uses safe, appropriate and secure technology to facilitate communication.	4.1 Demonstrates competence in the use of informatics (e.g., information and communication technology, basic computer systems), database management and data security; and 4.2 Utilizes available, accessible, appropriate and functional modes of communication to support the delivery of health care.

## STANDARD C2. COLLABORATION AND TEAMWORK

### Definitions

Collaboration refers to the process where there is partnership among the health care professionals which is reciprocal and founded on respect and trust, considering each other's expertise in achieving mutual goals.

Teamwork is to "function effectively within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care." (American Association of Colleges of Nursing, 2013).

*Dr. Jannah Y. de Guzman, PA* 15 *gza.*

COMPETENCIES	PERFORMANCE INDICATORS
1. Establishes collaborative relationships with colleagues and other health team members.	1.1 Recognizes the role of members of the health team with mutual respect and trust; and 1.2 Participates actively in client care management.
2. Coordinates plan of care with inter-professional health team members.	2.1 Prepares accurate documentation for efficient communication of services; 2.2 Acts as liaison /advocate of the client; and 2.3 Refers clients to allied health team partners.
3. Applies principles of partnership and collaboration to improve delivery of health services.	3.1 Uses the right principles in carrying out strategies and activities in partnership and collaboration intended to improve health service delivery; and 3.2 Addresses issues and concerns in safe and quality client care.
4. Determines resources available for networking, linkage building, and referral necessary for improving delivery of health services	4.1 Selects appropriate strategies for networking, linkage building and referral necessary to improve delivery of health services; and 4.2 Uses appropriate mechanisms and strategies for networking, linkage building and referrals.
5. Collaborates with government organizations (GOs), nongovernment organizations (NGOs) and other socio-civic organizations on matters related to environmental and community health.	5.1 Carries out effective partnership strategies with GOs, NGOs and socio-civic organizations to improve health of the communities; and 5.2 Supports environment protection policies, safety and security efforts in the community.
6. Engages in advocacy activities that foster the growth and development of the nursing profession.	6.1 Identifies priority advocacies to address nursing and health-related concerns; and 6.2 Participates in advocacy strategies to address nursing and health related concerns.

#### STANDARD C3. TRANSCULTURAL NURSING CARE

##### Definition

Transcultural nursing care is the provision of safe, efficacious, responsible and meaningful nursing services to people according to their cultural values and health-illness context.

*CR. JUANITA YAN... gsa.* <sup>16</sup>

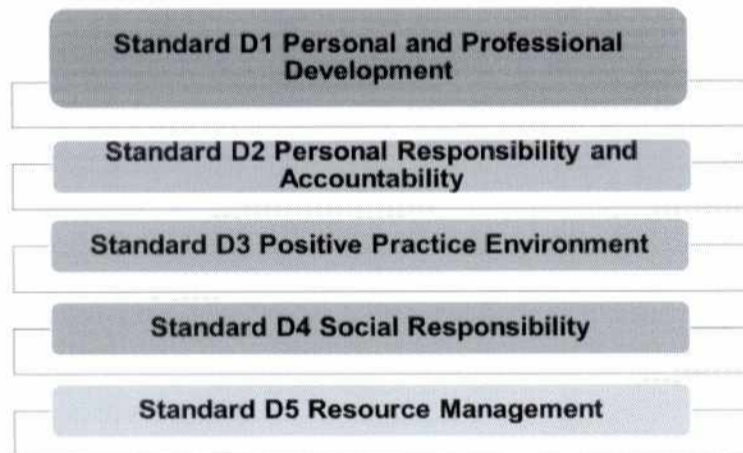
COMPETENCE	PERFORMANCE INDICATORS
Demonstrates better understanding of the role of culture in the delivery of nursing care.	1. Provides culturally sensitive client-centered care; 2. Refrains from using derogatory, judgmental and stereotype remarks; and 3. Recognizes common barriers to cultural understanding among health team members and clients.

**D. LEADERSHIP AND GOVERNANCE STANDARDS**

**Definition**

Leadership and Governance is influencing other people through the exercise of authority, direction, control and regulation in the practice of the nursing profession to achieve desired goals.

**D. LEADERSHIP AND GOVERNANCE STANDARDS**



**STANDARD D1. PERSONAL AND PROFESSIONAL DEVELOPMENT**

**Definition**

This refers to the acquisition of knowledge and skills for ensuring that one's performance in the chosen area of expertise is always at the highest possible level, in both career and life roles.

*Ch. J. ...* *Green ...* *Edwards ...* *90A* 17 *90A.*

COMPETENCIES	PERFORMANCE INDICATORS
1. Develops self-awareness towards personal and professional development.	1.1 Identifies strengths and weaknesses; 1.2 Enhances strengths identified; and 1.3 Takes corrective actions on weaknesses.
2. Determines one's career path, considering the current and relevant frameworks for development.	2.1 Formulates personal vision in relation to career development; and 2.2 Takes steps to achieve personal vision.
3. Pursues continuing professional development (CPD).	3.1 Participates in formal, informal, non-formal learning and other types of CPD activities; and 3.2 Applies learned competencies in the work setting.
4. Adapts to changes in nursing and health.	4.1 Updates oneself to trends and issues affecting nursing and health; and 4.2 Incorporates healthy and effective strategies towards self-growth and development.
5. Gets involved in professional organizations and socio-civic activities.	5.1 Participates actively in professional and socio-civic activities; 5.2 Maintains membership in professional organizations; and 5.3 Initiates/supports activities to address nursing and health related issues.
6. Performs functions according to professional standards.	6.1 Sets attainable performance objectives; 6.2 Evaluates own performance against standards of nursing practice; and 6.3 Sets corrective actions to improve performance.
7. Demonstrates positive attitude towards change and criticism.	7.1 Listens to suggestions and recommendations; and 7.2 Modifies behavior in response to accepted suggestions and recommendations.

#### STANDARD D2. RESPONSIBILITY AND ACCOUNTABILITY

##### Definitions

Responsibility refers to the nurse's obligations, accountability and liability in carrying out the authority accorded by the state through the Nursing Law and other regulatory laws, policies and rules.

Accountability is the nurse's willingness to be judged against performance expectations and live with the consequences of one's actions.

*Ch. Jeanne ...* 18 *gsa.*

COMPETENCIES	PERFORMANCE INDICATORS
1. Supervises the nursing care given by others, while retaining accountability for the quality of care given to clients.	1.1 Organizes workload to ensure efficiency in meeting responsibilities and achieving outcome; and 1.2 Monitors accomplishment of assigned workload of unlicensed assistive personnel within a given time frame.
2. Seeks ways to promote nursing autonomy and accountability.	2.1 Initiates independent nursing actions; and 2.2 Performs dependent and interdependent nursing actions in an enabling environment.
3. Participates in the development of policies and standards regarding safe nursing practice.	3.1 Identifies the need to develop policies and standards of nursing practice based on gaps; 3.2 Participates actively in policy and standards formulation; 3.3 Disseminates developed policies and standards; 3.4 Implements policies and standards; and 3.5 Monitors compliance to the policies and standards.

#### STANDARD D3. POSITIVE PRACTICE ENVIRONMENT

##### Definition

Positive practice environment is one where the nurse performs in a supportive, safe, caring, encouraging, and positively charged workplace where the individual's potentials are maximally developed. It includes the physical, psychological, socio-political, cultural, and spiritual dimensions of the work setting.

COMPETENCIES	PERFORMANCE INDICATORS
1. Promotes a healthy, safe and quality environment of care.	1.1 Applies principles of evidence-based practice in decision making to ensure safe, quality environment of care; 1.2 Utilizes critical thinking and decision making in solving problems; 1.3 Collaborates with inter- and/or intra- disciplinary team, the client and other support staff in employing strategies and actions to ensure safe and quality environment; and

*Dr. James Y. Sumangala* 19 *gda.*

	1.4 Advocates for/Promotes patient's rights.
2. Maintains professionalism in the workplace.	2.1. Demonstrates professional presence with dignity, respectability and confidence, and uses appropriate language in verbal and non-verbal forms; 2.2 Asserts appropriately one's democratic and economic rights; 2.3 Treats colleagues with respect, trust and dignity; 2.4 Demonstrates effective conflict resolution skills; 2.5 Applies specific resolution strategies/ approaches to resolve/transform conflict situations; and 2.6 Adheres to the highest moral and ethical standards of nursing practice.

#### STANDARD D4. SOCIAL RESPONSIBILITY

##### Definition

Social responsibility is an obligation to act in fulfilling one's civic duty for the benefit of society. The nurse is sensitive and responsive to the social, cultural, economic, political, spiritual and environmental issues.

COMPETENCIES	PERFORMANCE INDICATORS
1. Participates in activities that contribute to the attainment of social goals and development.	1.1 Applies strategies to foster growth and development of the family, community, and society; and 1.2 Influences others to maintain a clean and safe environment through health education activities.
2. Empowers self, clients and society towards social responsibility.	2.1 Works to uplift one's health and well-being; 2.2 Encourages participation of clients and society at large to improve their health and welfare; 2.3 Participates in critical discussion on nursing and health issues and developments; and 2.4 Works towards attainment of the health dimensions of Sustainable Development Goals (SDG).

*Dr. Jannaw Yenn / Sherry Goh* 20 *gaa.*

## STANDARD D5. RESOURCE MANAGEMENT

### Definition

Resource management refers to the efficient and effective allocation of resources, where and when they are needed, and which include human, organizational, information, financial, technical, equipment, materials and physical resources.

COMPETENCIES	PERFORMANCE INDICATORS
1. Utilizes resources necessary to deliver client care.	1.1 Identifies resources needed to accomplish tasks; 1.2 Reports misuse of resources; and 1.3 Recommends action for the efficient and effective management of resources.
2. Advocates for safe staffing pattern.	2.1 Reports for duty on time; 2.2 Comes to work adequately rested and prepared to fulfill duties; and 2.3 Speaks up when inappropriate staffing ratios, assignment or delegation would cause patients to be put at risk or harm.
3. Utilizes financial, technical, physical and material resources to support client care.	3.1 Practices cost-effectiveness of resource utilization.
4. Follows established mechanism to ensure proper functioning of equipment.	4.1 Coordinates preventive maintenance program of equipment; and 4.2 Ensures proper functioning of equipment, considering the intended use, cost-benefit, infection control and safety.
5. Maintains a safe work environment.	5.1 Complies with standards and safety codes prescribed by law; 5.2 Adheres to policies, procedures, and protocols on prevention and control of infection; 5.3 Observes protocols on pollution control (water, air, and noise); 5.4 Observes segregation and proper disposal of waste; 5.5 Participates in drills for fire, earthquake, and other emergency situations; and 5.6 Observes protocols on emerging and re-emerging diseases and biomedical hazards including terrorism.

*Ch. Juman* *gpa* *gpa* *gpa* <sup>21</sup> *gpa.*



## REFERENCES:

American Nurses Association (ANA). Nursing: Scope and Standards of Practice, 2<sup>nd</sup> edition. Maryland: Silver Spring, 2010.

**Australia Nursing and Midwifery Council. National Competency Standards for the Registered Nurses. Available at**

[https://acnp.org.au/sites/default/files/33/competency\\_standards\\_rn.pdf](https://acnp.org.au/sites/default/files/33/competency_standards_rn.pdf)

Canadian Nurses Association. Canadian Nurse Practitioner Core Competency Framework. Available at [http://cno.org/globalassets/for/rnec/pdf/competencyframework\\_en.pdf](http://cno.org/globalassets/for/rnec/pdf/competencyframework_en.pdf)

College of Registered Nurses of British Columbia (2003). Nursing Standards. Available at <https://crnbc.ca/Standards/PracticeStandards/Pages/Default.aspx>.

College of Nurses of Ontario. Standards and Guidelines (2002). <http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/>.

National Nursing Core Competency Standards (NNCCS). Training Modules for the Philippines. Makati City: International Labour Organization, 2014.

Nursing Council of New Zealand. Competencies for the Nurse Practitioner Scope of Practice. Available at <file:///C:/Users/user/Downloads/NP%20competencies%20December%202012.pdf>

Republic of the Philippines, Professional Regulation Commission, Board of Nursing. The 2012 National Nursing Core Competency Standards.

Republic of the Philippines, Professional Regulation Commission, Board of Nursing. Embedding and Spreading of the 2012 National Nursing Core Competency Standards for the Bachelor of Science of Nursing (BSN) Program. Monograph 2. Available at [http://www.prc.gov.ph/uploaded/documents/BONMonograph2\\_p.pdf](http://www.prc.gov.ph/uploaded/documents/BONMonograph2_p.pdf)

Republic of the Philippines, Office of the President, Commission on Higher Education (CHED) Memorandum Order No. 14, Series 2009. Policies and Standards for the BSN Program.

Republic of the Philippines, Professional Regulatory Commission, Board of Nursing Resolution No. 220, Series of 2004. Code of Ethics for Nurses in the Philippines.

Royal College of Nursing. Competencies in Nursing: Nurse Practitioner. Available at <http://www.bradfordvts.co.uk/wp-content/onlineresources/1902alliedhealthprofessionals/nurse%20practitioners%20in%20detail.pdf>

Singapore Nursing Board. Core Competencies of Registered Nurse. Available at [http://www.healthprofessionals.gov.sg/content/dam/hprof/snb/docs/publications/Core%20Competencies%20and%20Generic%20Skills%20for%20RN\\_SNB\\_1%20Dec%202012.pdf](http://www.healthprofessionals.gov.sg/content/dam/hprof/snb/docs/publications/Core%20Competencies%20and%20Generic%20Skills%20for%20RN_SNB_1%20Dec%202012.pdf)

 22 gra.

## DEVELOPMENT OF THE PHILIPPINE PROFESSIONAL NURSING PRACTICE STANDARDS (PPNPS)

### A. 2015 CORE GROUP PLANNING COMMITTEE

#### Professional Regulatory Board of Nursing (PRBON)

- Carmencita M. Abaquin, PhD, RN
- Perla G. Po, MN, RN
- Gloria B. Arcos, PhD, RN
- Glenda S. Arquiza, PhD, RN
- Florence C. Cawaon, PhD, RN
- Carmelita C. Divinagracia, PhD, RN
- Carfredda P. Dumlao, PhD, RN

#### PLANNING COMMITTEE PARTNERS/TECHNICAL WORKING GROUP

- Araceli O. Balabagno, PhD, RN - University of the Philippines  
Manila College of Nursing
- Annabelle R. Borromeo PhD, CNS, RN - Association of Nursing Service  
Administrators of the Philippines  
(ANSAP)
- Balbina M. Borneo, MAN, RN, RM - Mother and Child Nurses  
Association of the Philippines  
(MCNAP)
- Maria Linda G. Buhat, PhD, RN - ANSAP
- Elsa V. Castro, PhD, RN - ANSAP
- Leonora N. Collantes, MAN, RN - St Luke's Medical Center, QC
- Mila Delia M. Llanes, PhD, RN - Philippines Nurses Association
- Betty F. Merritt, MN, RN - Philippine Professional Nursing  
Roadmap Coalition
- Marie Therese A. Pacabis, MN, RN - ANSAP
- Elizabeth R. Roxas, MSN, RN - Association of Deans of  
Philippine Colleges of Nursing  
(ADPCN)
- Nilda B. Silvera, MAN, RN - National League of Philippine  
Government Nurses (NLPGN)
- Glenda A. Vargas, MAN, RN - ADPCN

*Ch. J. ... gsa.*

**B. 2017 PPNPS COMMITTEES**

**PLANNING COMMITTEE: PRBON**

- Cora A. Añonuevo, PhD, RN
- Gloria B. Arcos, PhD, RN
- Glenda S. Arquiza, PhD, RN
- Florence C. Cawaon, PhD, RN
- Carmelita C. Divinagracia, PhD, RN
- Carfredda P. Dumlao, PhD, RN
- Marian Grace A. Gascon, PhD, RN

**TECHNICAL WORKING GROUP**

- Cora A. Añonuevo, PhD, RN – Project leader
- Carmelita C. Divinagracia, PhD, RN
- Carmencita M. Abaquin, PhD, RN
- Araceli O. Balabagno, PhD, RN
- Mila Delia M. Llanes, PhD, RN
- Cecilia G. Pena, MAN, RN

**SUBCOMMITTEE MEMBERS**

- Teresita I. Barcelo, PhD, RN
- Rodolfo C. Borromeo, PhD, RN
- Annabelle R. Borromeo, PhD, CNS, RN
- Ma Belinda Buenafe, PhD, RN
- Leonila F. Faire, MN, RN
- Remedios L. Fernandez, PhD, RN
- Gisela D. Luna, PhD, RN
- Betty F. Merritt, MN, RN
- Marie Therese A. Pacabis, MN, RN
- Perla G. Po, MN, RN
- Elizabeth R. Roxas, MSN, RN
- Raquel Z. Tejada, MM, RN
- Glenda A. Vargas, MAN, RN

*m. jarama yea Shunyer PHN 24 g.a.*