









First Edition: June 2022

Copyright 2022. All rights reserved.

No part of this handbook maybe reproduced, photocopied, or distributed without permission from Philippine Nurses Association of America.



Ethics Committee team

Teresa Ignacio-Gonzalvo-Chairperson
Katherine Abriam-Yago-Co-Chairperson
Members
Victoria Berbano
Leila Zubiri-Busch
Jenilee Candari-Macavinta
Erlinda Mendoza-Miller
Catherine Mangune-Paler

Advisors and ad hoc members

Justine Reyes-Ford

Ampy de la Paz-Advisor Leticia Calimlim Hermosa-PNAA Parliamentarian and Legal Advisor

Carmina Bautista-PNAA Executive Director Mary Joy Garcia-Dia, PNAA President 2020-2022

Art Credit: Jenilee Candari Macavinta





TABLE OF CONTENTS

I. Overview and Purpose of the PNAA Ethic Committee	cs 1
II. History and Background	2
III. PNAA Code of Ethics Preamble	2
IV. Ethics Policy and Procedure 12.2	18
V. Ethics Committee Charter	29
VI. Onboarding and Education A. Strategic Plan B. Recruitment of Members C. Roles and Responsibilities D. Agenda Meeting Template E. Meeting Minutes Template F. Effective Use of Technology G. Sponsorships H. Recognition and Appreciation I. Succession Planning J. Annual Ethics Summit	32
VII. Legal Implications	39
VIII. Reference Lists A. Websites B. Bibliography	39
IX. Acknowledgements	40





I. OVERVIEW AND PURPOSE

The PNAA Ethics Committee Handbook was developed by the Ethics Committee (2020-2022) for the purpose of standardizing the structure and processes of the committee. This handbook includes the orientation and ongoing education of PNAA and Chapter Ethics Committees. It is a compilation of existing Ethics related documents in our PNAA documents. Tools and resources are provided for references. Clear and consistent communication. maintaining objectivity while addressing conflict and difficult situations are critical elements for successful outcomes in the performance of your roles and responsibilities. Professional and human interactions while managing expectations within the PNAA Ethics Committee are key factors for addressing accountability.

II. History of the PNAA Ethics Committee

Ethics Committee Chairs	Terms of Office	PNAA President	Milestones
Leila Zubiri-Busch	2015-2016	Leticia Hermosa	First Ethics Committee Established; Policies and Procedures created
Leticia Calimlim-Hermosa	2016-2020	Dino Dolente III Madelyn Yu	PNAA Code of Ethics developed; Policies and Procedures revised
Teresa Ignacio- Gonzalvo	2020-2022	Mary Joy Garcia-Dia	Ethics Policies and Procedures condensed to 1 policy 12.2; First Ethics Summit held; Ethics Guidelines and Resources Handbook developed

III. PNAA Code of Ethics Preamble

The Philippine Nurses Association of America (PNAA) was established as a professional organization of Filipino-American Nurses in the United States, with the mission "to uphold the positive image and welfare of its constituent members, promote professional excellence, provide innovative leadership and contribute to significant outcomes to healthcare and society" (Philippine Nurses Association of America, 2017).

In order to uphold PNAA's mission, PNAA members must carry out their functions and responsibilities professionally, competently and ethically. As a nurse, a leader, a professional, and a responsible citizen, each member must be guided by knowledge, ethical and moral principles, professional values, and social justice.

"Individuals who become nurses, as well as professional organizations who represent them, are expected not only to adhere to the values, moral

norms and ideals of the profession, but also to embrace them as a part of what it means to be a nurse" (American Nurses Association, 2015).

The PNAA Code of Ethics shall serve as moral and ethical standards by which PNAA leaders, members and stakeholders make decisions about what is right or wrong, moral or immoral, good or evil. The PNAA Code of Ethics promotes the ethical standards and rules of conduct of professional nursing organizations including, the American Nurses Association (ANA), the International Council of Nurses (ICN), and PNAA. Additional ethical guidance and rules of conduct may be found in position statements, policies and procedures, professional articles and ethical decisions relevant to the practice of nursing.

Developed by the PNAA Ethics Committee Approved by PNAA Executive Board 7/24/2019

PNAA Code of Ethics

- Provision 1. The PNAA Nurse shall promote the PNAA Mission and Goals by adhering to the PNAA Standards and Rules of Conduct. The PNAA Standards and Rules of Conduct are fundamental to the values of PNAA and are essential in achieving its mission to promote the highest standards of ethics, education, and professional excellence for the ultimate benefit of society (Appendix A, PNAA Mission and PNAA Standards and Rules of Conduct).
- **Provision 2.** The PNAA Nurse shall promote the ANA Code of Ethics for Nurses The ANA Code of Ethics With Interpretive Statements serves the following purposes:
 - It is a succinct statement of the ethical values, obligations, duties and professional ideals of nurses individually and collectively;
 - 2. It is the profession's non-negotiable ethical standard; and
 - 3. It is an expression of nursing's own understanding of its commitment to society (Appendix B, ANA Code of Ethics for Nurses, 2015).

Provision 3. The PNAA Nurse shall promote the International Council of Nurses (ICN) Code of Ethics for Nurses.

"Inherent in nursing is a respect for human rights, including cultural rights, the right to life and choice, dignity and to be treated with respect. Nursing care is respectful of and unrestricted by considerations of age, color, creed, culture, disability or illness, gender, sexual orientation, nationality, politics, race or social status" (ICN, 2012).

The ICN Code of Ethics for Nurses has four principal elements that outline the standards of ethical conduct:

- (1) Nurses and people,
- (2) Nurses and practice,
- (3) Nurses and the profession and
- (4) Nurses and Co-workers, (Appendix C, ICN Code of Ethics for Nurses).

Provision 4. The PNAA Nurse shall support the ethical codes and standards of other organizations that are consistent or in alliance with PNAA's mission and goals.

Organizations such as the National Coalition of Ethnic Minority Nurse Association (NCEMNA), Alliance for Ethical Recruitment of International Healthcare Professionals, and many others, have mission statements and core values that are consistent with PNAA's mission and goals (Appendix D, Missions and Core Values of Other Organizations).

Provision 5. As a member of a licensed healthcare profession, the PNAA Nurse shall protect the public by complying with applicable federal, state and international healthcare laws. The professional nurse is responsible for knowing the scope of nursing practice based on his/her education and experience. Nurses who participate in surgical or medical missions in foreign countries must be aware of the governing healthcare

policies and laws of the receiving country (Appendix E: Guidelines for Foreign Surgical and Medical Missions, Philippines).

Appendix A

The Philippine Nurses Association of America Inc. PNAA Mission Statement and Goals

Mission Statement: As the official professional organization of Filipino-American Nurses in the United States of America (USA), PNAA will uphold the positive image and welfare of its constituent members, promote professional excellence, provide innovative leadership and contribute to significant outcomes to healthcare and society.

The Goals of the Association shall include, but not be limited to:

- A. Unify Filipino-American Nurses in the USA and its territories.
- B. Develop, implement and evaluate programs in nursing leadership, practice, education and research relevant to professional growth of its members and healthcare needs of the community.
- C. Facilitate professional and cultural adjustment of Filipino-American Nurses in the USA through collaboration with agencies and organizations in the USA and the Philippines.
- D. Participate actively in professional and cultural activities with professional organizations and agencies in the community and globally.
- E. Review and act on legislation and public policies that directly and indirectly affect healthcare and nursing practice.
- F. Advocate for Filipino-American Nurses nationally and globally.

PNAA Standards and Rules of Conduct

POLICY

Every member must adhere to the PNAA Standards and Rules of Conduct. They are entitled to due process to address violations or digressions from the Standards and Rules of Conduct. The PNAA will respect each member's cultural, psychosocial, spiritual values, dignity and privacy.

RESPONSIBILITIES

- Each member is responsible for upholding the association's commitment to the professional codes of conduct and for acting in an ethical manner. PNAA is committed to treating its constituents with utmost respect consistent with its mission and goals as stated in its bylaws.
- 2. Ethics Committee Responsibilities as enumerated in the PNAA By Laws Article IX Section 8, include the following:
 - a. Establishes Ethical Standards and Rules of Conduct for PNAA.
 - b. Provides mechanism and recommends actions to resolve ethical conflicts and issues presented to PNAA.
 - c. Strengthens ethical leadership behaviors by transparency in decision-making.
 - d. Addresses ethical concerns reported (to PNAA) involving chapters/members.

GUIDING PRINCIPLES

PNAA will adhere to these principles and as needed, develop policy statements:

- 1. PNAA will strive to meet the needs of its members and shall provide services and programs consistent with its mission, vision and objectives.
- 2. The following documents will provide additional guidance:
 - PNAA Mission and Goals statement
 - PNAA By-laws
 - · Compendium of Policies and Procedures
 - · Applicable federal and state laws
 - ANA Code of Ethics for Nurses
- 3. PNAA will respect its member's cultural, religious beliefs and gender identity.
- 4. Officers and members will observe and maintain confidentiality of sensitive information. PNAA information will be shared only upon approval by the Board.
- 5. PNAA will communicate information to members about issues affecting them as appropriate through best available technology.
- PNAA will follow well-established Standards and Rules of Conduct as espoused by other professional nursing organizations such as the International Council of Nurses and the American Nurses Association.

PROCEDURES

Resolution of Conflicts-PNAA will resolve conflicts fairly and objectively.

- 1. The PNAA Ethics Committee and the Executive Board shall oversee the adherence to PNAA Rules of Conduct by its members.
- 2. Follow the procedure for submission of complaint or grievance as outlined in Ethics Policy and Procedure 12.2, "Complaint and Grievance Policy".
- 3. In cases where conflict is unresolved, PNAA will involve its Legal Counsel or seek advice from an impartial third party if necessary.
- 4. In cases of financial conflict of interest, the Legal Counsel may provide legal briefing and options to take, if appropriate.

Sources

- 1. Philippine Nurses Association of America Inc., "Standards and Rules of Conduct", PNAA Policy and Procedure 12.1, 2019.
- 2. Philippine Nurses Association of America ByLaws, 2019.

Appendix B

Copyright statement from American Nurses Association (ANA) Code of Ethics for Nurses

- **Provision 1.** The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- **Provision 2.** The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
- **Provision 3.** The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
- **Provision 4.** The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care.

- **Provision 5.** The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
- **Provision 6.** The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
- **Provision 7.** The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
- **Provision 8.** The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
- **Provision 9.** The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Source

American Nurses Association. (2015). Code of ethics with interpretive statements. Silver Spring, MD: Author. Retrieved from https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/

Appendix C

The ICN Code of Ethics for Nurses ELEMENTS OF THE CODE

1. Nurses and people

The nurse's primary professional responsibility is to people requiring nursing care. In providing care, the nurse promotes an environment in which the human rights, values, customs and spiritual beliefs of the individual, family and community are respected. The nurse ensures that the individual receives accurate, sufficient and timely information in a culturally appropriate manner on which to base consent for care and related treatment. The nurse holds in confidence personal information and uses judgment in sharing this information. The nurse shares with society the responsibility for initiating and supporting action to meet the health and social needs of the public, in particular those of vulnerable populations. The nurse advocates for equity and social justice in resource allocation, access to health care and other social and economic services. The nurse demonstrates professional values such as respectfulness, responsiveness, compassion, trustworthiness and integrity.

2. Nurses and practice

The nurse carries personal responsibility and accountability for nursing practice, and for maintaining competence by continual learning. The nurse maintains a standard of personal health such that the ability to provide care is not compromised. The nurse uses judgment regarding individual competence when accepting and delegating responsibility. The nurse at all times maintains standards of personal conduct which reflects well on the profession and enhances its image and public confidence. The nurse, in providing care, ensures that use of technology and scientific advances are compatible with the safety, dignity and rights of people. The nurse strives to foster and maintain a practice culture promoting ethical behaviour and open dialogue.

3. Nurses and the profession

The nurse assumes the major role in determining and implementing acceptable standards of clinical nursing practice, management, research and education. The nurse is active in a core of research-based professional knowledge that supports evidence-based practice. The nurse is active in developing and sustaining a core of professional values. The nurse, acting through the professional organisation, participates in creating a positive practice environment and maintaining safe, equitable social and economic working conditions in nursing. The nurse practices to sustain and protect the natural environment and is aware of its consequences on health. The nurse contributes to an ethical organisational environment and challenges unethical practices and settings.

4. Nurses and co-workers

The nurse sustains a collaborative and respectful relationship with coworkers in nursing and other fields. The nurse takes appropriate action to safeguard individuals, families and communities when their health is endangered by a co-worker or any other person. The nurse takes appropriate action to support and guide co-workers to advance ethical conduct.

Source: All rights, including translation into other languages, are reserved. This work may be reprinted and redistributed, in whole or in part, without alteration and without prior written permission, provided the source is indicated:

Copyright © 2012 by ICN – International Council of Nurses, 3, place Jean-Marteau,1201 Geneva, Switzerland ISBN: 978-92-95094-95-6.

Appendix D

Missions and Core Values of Other Organizations

NCEMNA

The National Coalition of Ethnic Minority Nurse Associations (NCEMNA) is a unified force advocating for equity and justice in nursing and health care for ethnic minority populations. Incorporated in 1998.

NCEMNA is a tax exempt (IRS 501 © (3)) non-profit professional organization. NCEMNA, Inc. is made of five national ethnic nurse associations:

- Asian American/Pacific Islander Nurses Association, Inc. (AAPINA)
- National Alaska Native American Indian Nurses Association, Inc. (NANAINA)
- National Association of Hispanic Nurses, Inc. (NAHN)
- National Black Nurses Association, Inc. (NBNA)
- Philippine Nurses Association of America, Inc. (PNAA)

Mission: Be the unified body advocating for equity and justice in healthcare **Vision**: To be a leading voice and driving force for ethnic minority populations

Core Values: Equity, Advocacy, Relevance, Diversity

Leadership Structure: NCEMNA represents a network of leaders from Member Organizations which include AAPINA, NAHN, NANAINA, NBNA and PNAA) united by a shared mission, vision, professional core values, and common goals.

Retrieved from: www.https//:ncemna.org., 7/2/2019.

ALLIANCE for ETHICAL INTERNATIONAL RECRUITMENT PRACTICES (Alliance)

The Alliance for Ethical Recruitment Practices (Alliance) is a non-profit organization who works to ensure that all foreign-educated professionals are recruited in a fair, ethical, and transparent manner for employment in the U.S. The Alliance has developed voluntary Codes of Conduct to govern recruitment through a multi-stakeholder, collaborative process representing groups from across the relevant sector.

Professionals

The Voluntary Code of Conduct for the Ethical Recruitment of Foreign-Educated Health Professionals to the United States (Code) provides a voluntary framework for corporate self-governance and sets forth practical standards and guidelines for promoting fairness, honesty, and corporate social responsibility in all recruitment practices. The Code is published, disseminated, monitored, and managed by the Alliance. Implementation of

the Code provides an opportunity to increase public accountability of recruiting agencies and health care organizations. Original participants in drafting the original text of this code in 2008 included representatives from many organizations and stakeholders including the Philippine Nurses Association of America represented by Rosario-May Mayor, Virginia Alinsao, representing John Hopkins Health System and Lolita Compas, representing the New York State Nurses Association.

Press to download the Code

Retrieved from: www.cgfnsalliance.org/about-us, 7/2/2019.

Appendix E

Philippine Foreign Surgical and Medical Mission Program (FSMM) Republic of the Philippines Department of Health

OFFICE OF THE SECRETARY
Administrative Order No. 2012 - 0030
Date of Issuance: DECEMBER 20, 2012
Guidelines on Foreign Surgical and Medical Mission Program in Support of Universal Health Care/Kalusugan Pangkalahatan

I. RATIONALE

Foreign Surgical and Medical Missions (FSMMs) in the Philippines are activities where medical interventions and/or surgical services are provided to selected underserved areas and communities by a foreign individuals or an organization in partnership with a local partner, usually a local government unit, non-government organization, hospital or medical society. These missions also serve as a means of professional advancement and venue by which foreign medical practitioners can share their talents and expertise for the purpose of continuing medical education.

FSMMs play an important role in the delivery of health care services, especially in attaining the Universal Health Care (UHC) or Kalusugan Pangkalahatan (KP). UHCIKP is the Aquino administration's health agenda to ensure that all Filipinos, beginning with the poor, are: 1) able to access a reasonable level of health services at minimal cost, by being enrolled in the National Health Insurance Program; 2) cared for in modern health care

facilities; and 3) prevented from falling ill by using public health services to improve health outcomes and attain health-related Millennium Development Goals (MDGs).

It is being vigorously pursued through three strategic trusts:

- financial risk protection by expanding the National health Insurance Program,
- 2. improving access to quality health services, and
- 3. scaling up MDGs.

Record shows that for years there have been numbers of FSMMs conducted nationwide. These FSMMs are facilitated by the Department of Health through the Bureau of International Health Cooperation (BIHC) and the Commission on Filipinos Overseas (CFO), in collaboration with the Professional Regulation Commission and the Department of Interior and Local Government. FSMMs are undertaken in the form of medical, surgical and dental missions or a combination of both medical and surgical or medical and dental missions. There are also some specialized missions conducted like cataract/eye care and cleft palate missions. Most of these are implemented in a one-time mode of short duration.

II. OBJECTIVE

The guidelines (Guidelines on Foreign Surgical and Medical Mission Program in Support of Universal Health Care) shall stipulate the key principles, policies, and processes to rationalize FSMMs in the country and ensure that all FSMMs shall contribute to betterment of health services among Filipinos. Particularly, this set of guidelines shall: 1. Institutionalize a sustainable system for an effective facilitation and coordination of all the FSMMs. 2. Provide guidance to all partners and stakeholders to converge and complement efforts towards a more enhanced and more comprehensive local health system development.

III. GUIDING PRINCIPLES

1. FSMMs shall be aligned with the existing health strategies/programs under the UHCI Kalusugan Pangkalahatan (Universal Health Care).

- 2. Underserved communities shall be prioritized and a system for identifying the target beneficiaries shall be put in place.
- 3. Linkages and networks with all the stakeholders involved in FSMM shall be established.
- 4. All medical and surgical services shall be provided at no cost to the beneficiaries, however reimbursements shall be maximized under the National Health Insurance Program for all other related medicines and medical supplies and services provided through the local facilities and health service providers.
- 5. Only qualified and competent medical and other allied health workers shall perform the appropriate medical and surgical procedures.

IV. THE FSMM PROGRAM

FSMM shall be implemented as a means of attaining and ensuring a more accessible, quality and appropriate health services for the poor. It shall complement rather than duplicate the existing health programs of the government.

The FSMM program may involve the following:

A. ONE-TIME CONDUCT OF MEDICAL MISSION

FSMM is usually a one-time activity whereby foreign missioners in partnership with a local partner, usually a local government unit/non-government organization/a hospital/medical society, choose a specific area in the country to conduct their missions. The mission is usually composed of medical team of overseas based Filipinos and foreign nationals who shall practice their profession in the country for humanitarian reasons. They usually provide medical services and/or surgical procedures with specialized services like dental, cataract/eye care or cleft palate surgeries. There are also instances wherein a foreign medical expert is invited to perform actual surgical procedures to indigent patients or conduct lectures, forums, symposia, seminars during their missions for the purpose of transferring technology or for continuing medical education.

B. "ADOPT A HOSPITAL" PROGRAM

While one-time/short duration FSMMs are currently undertaken, a more structured program of FSMM implementation through the "Adopt a Hospital" program is now being encouraged. The "Adopt a Hospital" program is envisioned to provide a more sustainable and longer-term approach of delivering health services to underserved communities as another form of implementing FSMM. It is undertaken through a collaborative partnership strategy between a local public hospital with a foreign-based organization/non-profit medical mission group or foreign-based hospital. Under this strategy, a foreign-based organization, a non-profit medical mission group, or a foreign-based hospital, known as the Partner, shall identify and collaborate with a local public hospital, to be referred to as the Recipient Hospital. The selected Recipient Hospital shall be drawn from the list provided by the DOH. The collaboration shall be covered by a Memorandum of Agreement, which shall include commitments, as well as the roles and responsibilities of the stakeholders in the conduct of particular activities

Full text of Administrative Order No. 2012-0030: DOH's Administrative Order No. 2012-0030 on the Guidelines on Foreign Surgical and Medical Mission Program in Support of Universal Health Care may be downloaded through the following link: Guidelines on Foreign Surgical and Medical Mission Program in Support of Universal Health Care.

Source: Embassy of the Philippines. Bataan Street, Corner 1600 Massachusetts Ave., NW Washington, D.C. 20036 USA. Retrieved from https://www.philippineembassy-usa.org, 7/2/2019.

References

- 1. Alliance for Ethical International Recruitment Practices (Alliance). "Voluntary Code of Conduct for the Ethical Recruitment of Foreign-Educated Health Professionals". Retrieved from: www.cgfnsalliance.org/about-us, 7/2/2019.
- 2. American Nurses Association. (2015). Code of Ethics With Interpretive Statements. 8515 Georgia Avenue, Silver Spring, MD 20910-3402. Retrieved from www.Nursingworld.org.

- 3. International Council of Nurses. ICN Copyright © 2012 by ICN International Council of Nurses, 3, place Jean-Marteau, 1201 Geneva, Switzerland ISBN: 978-92-95094-95-6, Retrieved from https://www.icn.ch.
- 4. National Coalition of Ethnic Minority Nurse Associations (NCEMNA) Mission, Vision, Core Values, Leadership Structure. Retrieved from: https://www.ncemna.org., 7/2/2019.
- 5. Philippine Department Of Health (DOH) Administrative Order No. 2012-0030. "Guidelines on Foreign Surgical and Medical Mission Program in Support of Universal Health Care. Embassy of the Philippines Bataan street, corner 1600 Massachusetts Ave., NW Washington, D.C. 20036 USA", Retrieved from https://www.philippineembassy-usa.org, 7/2/2019.
- 6. Philippine Nurses Association of America Inc. By Laws, 2017.
- 7. Philippine Nurses Association of America Inc. Policy and Procedure 12.1, 2019.

Other Resources

The PNAA Code of Ethics was drafted by the PNAA Ethics Committee 2018-2020 and approved by the PNAA Executive Board on July 24, 2019.

For questions and further information, contact the member of PNAA Ethics Committee representing your region, or the Chairperson of the PNAA.

Ethics Committee

Leticia C. Hermosa, Chairperson (Ichermosa@msn.com)
Susan Castor – Eastern Region (suecastor@yahoo.com)
Sonia Sabado – Western Region (srsabado427@gmail.com)
Vilma Ortiz – South Central Region (ortizvilma@yahoo.com)
Leila Busch – North Central Region (lexilzb@aol.com)
Nancy Hoff – PNAA Human Rights Committee (anhoff@comcast.net)
Ampy Dela Paz – Committee Adviser, Advisory Council
(delapazampy17@yahoo.com)

PNAA Code of Ethics, Approved by PNAA Executive Board, July 24, 2019.

IV. Ethics Policy and Procedure 12.2

Complaint and Grievance Policy and Procedure

Policy #	12.2	
Reviewed	2/2019,	10/2021
Revised	6/2019,	10/2021
EB Reviewed & Approved 6/2019, 12/2021	1	
Original Date	.7/2015	

PURPOSE

- 1. Establish specific guidelines that will guide members to comply with the PNAA Ethical Standards and Rules of Conduct.
- 2. Provide a mechanism for identifying, analyzing, and resolving ethical conflicts and issues presented to PNAA and the Ethics Committee.
- 3. Identify policies and procedures for reporting, reviewing, fact-finding, and recommending a course of action needed to resolve ethical issues.
- 4. Foster ethical leadership behavior by transparent and ethical decision-making.

POLICY

I. Misrepresentation

- A. PNAA members shall not make any statement or make public reference in the name of the organization that conflicts with or constitutes a misinterpretation of a policy or position established by the PNAA Executive Board.
- B. PNAA members shall not give the impression of representing PNAA when speaking in public or adapting another organization's position without official authorization from PNAA.
- C. PNAA Executive Board members shall not permit to use their membership or position in any manner, such as the unauthorized use of the PNAA logo, letterhead, or any other official publication or document.

II. Conflict of Interest (COI)

- A. Every member, elected or appointed to a leadership position, has a commitment of loyalty to and must serve in the interests of PNAA. A COI is a situation when a member's loyalty may be divided between the two entities, hence resulting in a personal ethical dilemma.
- B. Members of the Executive Board and authorized decision-makers have an obligation and responsibility to:
 - 1. Promptly disclose any conflict or potential COI on any relevant issue.
 - 2. Abstain from making unauthorized public comments.
 - 3. Recuse self in final deliberations and decisions.
- C. A COI situation exists when the member, member's immediate family, or any interested party, group, or organization's interest or allegiance may be incongruent with the interests of PNAA.
- D. Members of the Executive Board are responsible for identifying those individuals who the members are considered to be immediate family members.

III. Unethical Behavior and Conduct

- A. Violation of the PNAA Standards and Rules of Conduct as described in the Ethics Policy and Procedure 12.2 shall constitute "unethical behavior and conduct."
 - 1. Failure to recuse self in the event of possible conflict of interest.
 - 2. Exhibits disruptive and inappropriate behaviors towards any member.
 - 3. Failure to abide by the PNAA Bylaws and Policies.
 - 4. Unauthorized disclosure or sharing of any PNAA proprietary data/document such as directory and personal information outside the purpose for which it is intended.
 - 5. Failure to follow time frame of prescribed response time to communication exchanges during an investigative process.
 - 6. Unauthorized disclosure of confidential information to other members of PNAA and others outside of the organization.
 - 7. Inappropriate and irresponsible disclosure or dissemination of hearsay information.
 - 8. Unauthorized or inappropriate posting on social media.

B. PNAA members who violate the PNAA Standards and Rules of Conduct shall be subjected to due process.

RESPONSIBILITIES of the ETHICS COMMITTEE

The Ethics Committee shall:

- Review policies and procedures, analyze issues presented by the involved parties to identify ethical issues, and provide the guidance needed to resolve the issue.
- Oversee and enforce compliance with the Ethical Standards & Rules of Conduct and Policy & Procedures, the ANA Code of Ethics, and the PNAA Code of Ethics.
- 3. Protect the dignity, rights, safety, and well-being of all involved parties.
- 4. Address unresolved ethical issues at the chapter, regional and national levels. The process shall be conducted objectively and fairly with opportunity to hear from all parties involved.
- 5. Include additional members as necessary to assist in fact-finding and resolution of ethical issues.

DISPUTE RESOLUTION: COMPLAINT and GRIEVANCE

A complaint is a formal allegation against a party. A grievance is an official written statement of a complaint over something believed to be wrong, unfair, or conduct, which undermines ethical principles.

Procedure: The following steps shall be observed when a member or group files a complaint or grievance.

Step 1: At the Chapter Level

The Chapter Ethics Committee or the Chapter Executive Board in the absence of the Chapter Ethics Committee will communicate directly with the concerned individual or group clarifying the perceived issue of concern, listening to the other point of view, and focusing on specific topics.

Step 2: At the Chapter Level

1. If the issue of concern is unresolved in Step one, the member or group will submit a completed Complaint Form (Attachment 2) to the Chapter

President and Chapter Ethics Committee or Chapter Executive Board in the absence of a Chapter Ethics Committee within 14 calendar days of the incident. This Form may be obtained from the PNAA Policy and Procedure website or from the Ethics Committee.

- The Chapter Ethics Committee or the Chapter Executive Board in the absence of Chapter Ethics Committee, will work with the Chapter President and will provide a written recommendation within 14 calendar days after receiving the Complaint Form.
- 3. If the member or group agrees with the final recommendation and the complaint is resolved, the member or group will respond in writing within 14 calendar days, and the case will be officially closed. The Chapter Ethics Committee or the Chapter Secretary will and file the completed Complaint Form for record keeping.

Step 3: At the Regional Vice President (RVP) Level

 If the complaint is unresolved in Step two, the member or group will submit to the RVP a completed Grievance Form within 14 calendar days after receiving the written response from the Chapter Level. (Form-Attachment 3). A Grievance Form may be obtained from the PNAA Policy and Procedure website or from the Ethics Committee.

The Grievance Form must be:

- a. Timely must be filed within **30 days** of incidence.
- b. Concise
- c. Factual
- d. Related to a policy, procedure, rule, or regulation involved.
- e. Acknowledged The Chapter President will notify the member or group upon the receipt of the Grievance Form including the timeline for tracking.
- The RVP or designee shall arrange a meeting with the parties involved, within 14 calendar days after the appeal is received, using the best available technology.
- 3. Within **30 calendar days** after the meeting, the RVP shall answer in writing to the involved parties. Due to the complexity of the issue, these timelines are recommended and may change upon the discretion of the RVP.

Step 4: PNAA PRESIDENT AND ETHICS COMMITTEE LEVEL

- 1. If the grievance is unresolved at in Step three, the RVP shall notify the PNAA President and Chairperson of the PNAA Ethics Committee within ten (10) calendar days.
- The PNAA Ethics Committee and PNAA President shall investigate the grievance, report findings, and recommend a decision within 60 calendar days to the PNAA Executive Board.
- 3. The PNAA Ethics Committee Fact Finding Team may add more members as needed by the PNAA Ethics Committee Chairperson. If a solution is not reached, additional unbiased members from the advisory council will serve as arbitrators in the investigation as agreed upon by the parties.

Step 5: NATIONAL EXECUTIVE BOARD LEVEL

If the issue is not resolved in Step four, the PNAA Ethics Committee will share findings and recommendations with the PNAA President and Executive Board who shall make the final decision and communicate their findings to the appropriate parties.

ETHICAL ISSUES WITHIN THE PNAA EXECUTIVE BOARD

- a. If the grievance is against a member of the PNAA Executive Board, the grievance shall be submitted directly to the Chairperson of PNAA Ethics Committee within 30 calendar days of occurrence.
- b. The PNAA Ethics Committee Chairperson and PNAA President shall notify the involved party within 10 calendar days, giving the involved party an opportunity to respond in writing within 14 calendar days from the date of notification.
- c. The PNAA Ethics Committee shall investigate, report findings, and submit recommendations to the PNAA Executive Board within 60 Calendar days.
- d. The PNAA President and PNAA Executive board shall make the final decision and communicate their findings to the involved parties within 30 calendar days.

*STANDARDS AND RULES OF CONDUCT

A. See PNAA Standards and Rules of Conduct (PNAA P & P 12.2)

References

- PNAA Ethics Committee Policy and Procedure, 7/2015
- PNAA Code of Ethics, 2015
- ANA Code of Ethics, 2015
- Policy 13.1 Social Media
- Policy 13.4 Use of PNAA Name, Logo, and Letterhead
- Ethics Committees, Programs and Consultation. (n.d.). Retrieved from. https://depts.washington.edu/biothx/topics/ethics.html Complaint. (n.d.)
- Retrieved from http://www.merriam-webster.com/dictionary/complaint Grievance. (n.d.). Retrieved from http://dictionary.reference.com/browse/ grievance Dispute Resolution: Complaints and Grievances. (n.d.).
- Retrieved from http://www.wmich.edu/hr/manual-grievances
- Policy and Procedure. (2008). Philippine Nurses Association of Southern California
- Fisher, R., & Ertel, D. (1995). *Getting rReady to Negotiate: The Getting to Yes Workbook.* New York, NY:Penguin.
- Fisher, R., & William, U. (1991). *Getting to Yes: Negotiating agreement without giving in.* New York, NY: Penguin.
- Ury, W. (1993). *Getting past No: Negotiating your way from confrontation to cooperation.* New York, NY: Bantam.

Attachment(s)

- · Attachment 1 PNAA Complaint and Grievance Process Flowchart
- Attachment 2 PNAA Complaint Form
- Attachment 3 PNAA Grievance Form
- Attachment 4 Conflict Resolution
- Attachment 5 Document History

Committee will share findings and recommendations with Executive

> Step 3: If issue is not resolved in Step 2 complete Grievance Form • Step 4: If issue is not resolved in President and Ethics Committee.

Step 3, RVP will notify PNAA

and submit to RVP

RVP Level

Board who will make the final

decision on the issue.

• Step 5: If issue is not resolved in

Step 4 the PNAA Ethics

PNAA Complaint and Grievance Process Flowchart Attachment 1 (Policy#12.2)

individual or group with the issue Step 1: Communicate with the

- of concern.
- Step 1 complete Complaint Form and submit to Chapter President, Step 2: If issue is not resolved in Chapter Ethics Committee or EB.

PNAA National Level

Attachment 2 (Policy#12.2) Insert PNAA Complaint Form

Complainant: File copy with your chapter's President and retain a copy for filing at the next step if needed. If you do not receive a response within the time frame or disagree with the action taken, you may file a copy of the complaint at the next step. Complaint filed with (Name and Position)



Attachment 3 PNAA Grievance Form



ame of Grievant:		Work Phone:	
osition:		Home/Mobile P	hone:
Nailing Address:		Email (work):	··-··
treet or P.O. Box:		Email (home):	
ity:	State:	Zip:	
ate of event leading to	grievance:	· .	e aware of the event, (if different):
etailed description of grie	vance including names of	of other persons involved.	
tate the policy, procedu	are, rule or regulation	involved (i.e. applicable sections of	of local chapter's or PNAA Bylaws).
roposed solution to grie	evance:		
iriquant: File a conv of	this form with your ch	uanter's president and retain a con-	ay for filing at the next sten or stens if
ecessary. If you do not	receive a response w		ry for filing at the next step or steps if rith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste	receive a response w ep.	ithin the time frame or disagree w	ith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste Step	receive a response w ep.		ith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste Step	receive a response w ep.	ithin the time frame or disagree w	ith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste Step 1 2	receive a response w ep.	ithin the time frame or disagree w	ith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste Step 1 2 3	receive a response w ep.	ithin the time frame or disagree w	ith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste Step 1 2	receive a response w ep.	ithin the time frame or disagree w	ith the action taken, you may file a copy of the
ecessary. If you do not rievance at the next ste Step 1 2 3	receive a response w ep.	ithin the time frame or disagree w	ith the action taken, you may file a copy of the

WHAT IS CONFLICT RESOLUTION?

Conflict, arguments, and change are natural parts of our lives, as well as the lives of every agency, organization, and nation. Conflict resolution is a way for two or more parties to find a peaceful solution to a disagreement among them. The disagreement may be personal, financial, political, or emotional. When a dispute arises, often the best course of action is negotiation to resolve the disagreement.

The goals of negotiation are:

- To produce a solution that all parties can agree;
- · To work as quickly as possible to find this solution;
- To improve, not hurt, the relationship between the groups in conflict Conflict resolution through negotiation can be good for all parties involved. Often, each side will get more by participating in negotiations than they would by walking away, and it can be a way for the group to get resources that might otherwise be out of reach.

Resources

- Altman, D. et al. (1994). *Public Health Advocacy: Creating Community Change to Improve health*. Palo Alto, CA: Stanford Center for Research in Disease Prevention.
- Bisno, H. (1988). Managing Conflict. Newbury Park, MA: Sage Publications.
- Evarts, W. et al. (1983). Winning through Accommodation: The Mediator's hHandbook.
- Fisher, R., & Ertel, D. (1995). *Getting Ready to Negotiate: The Getting to Yes Workbook.* New York, NY: Penguin.
- Fisher, R., & William U. (1991). *Getting to Yes: Negotiating Agreement Without Giving In.* New York, NY: Penguin.
- Sun, T. (1988). *The Art of war, Trans.* Thomas Cleary Boston: Shamhala (550 B.C.)
- Ury, W. (1993). Getting past No: Negotiating your Way From Confrontation to Cooperation. New York, NY: Bantam.

Revision History

Created: 07/2015 Ethics Chair: Leila Busch

Approved: 07/2015 PNAA P&P Chair: Dino Doliente III

Revised: 2/3/2019 PNAA Ethics Committee Chair: Leticia Hermosa

Approved: 2/9/2019 PNAA Ethics Committee
Approved: 6/2019 PNAA Policy and Procedure
Approved 6/26/2019 PNAA Executive Board
Revised: 10/2021 PNAA Ethics Committee

Chair: Teresa Ignacio-Gonzalvo

Approved: 12/2021 Policy and Procedure Committee

Chair: Gloria Beriones

Revised by the Ethics Committee Team

Teresa Ignacio-Gonzalvo - Chairperson Katherine Abriam-Yago-Co - Chairperson

Members

Victoria Berbano Leila Zubiri-Busch Jenilee Candari Macavinta Erlinda Mendoza-Miller Catherine Mangune-Paler Justine Reyes-Ford

Advisors and Ad Hoc Members

Ampy de la Paz
Leticia Hermosa
Carmina Bautista
Mary Joy Garcia-Dia, DNP, RN, FAAN, PNAA President 2020-2022

V. Ethics Committee Charter

PNAA ETHICS COMMITTEE CHARTER

Name of Committee	Ethics Committee	
Date charter last reviewed		
Date first charter created	Original document: PNAA Ethics Committee Original author: Leila Busch, Ethics Chair Original approval: Leticia Hermosa, PNAA President 2014-2016 Approval date: July, 2015	
	First charter created by: Teresa Ignacio- Gonzalvo, Chair and Committee Members, July 26,2021	
Purpose	The Ethics Committee is a standing committee of the PNAA that provides guidance and oversees compliance with the PNAA Standards, Rules of Conduct and Policies.	
Specific Objectives	The specific objectives of the Ethics Committee: 1. To provide a mechanism to identify, review and propose resolutions to valid ethical concerns referred to the Ethics Committee. 2. To protect the dignity, rights, safety and well-being of both parties who are involved with the ethical issues.	

Specific Responsibilities, Activities, Duties

- Addresses unresolved ethical issues at the chapter, regional and national level, after following the chain of command for conflict resolution.
- Seek additional, unbiased assistance from the PNAA's Advisory Council and Circle of Presidents, as their expertise is deemed necessary, to assist with resolution of issues. This will be done with the concurrence of the Committee Chair, Co-Chair and Advisor.

Committee Membership and Terms of Office

The Ethics Committee consists of a chairperson, a co-chair, advisor and at least eight members. The four RVPs will assign two members to represent their respective regions. The current PNAA Executive Director is an ex officio member of the Ethics Committee. An Ethicist consultant may serve as needed, depending on the complaint or grievance being reviewed and as approved by the Chairperson and Executive Board.

The terms of office of the Chairperson, Co-chair, Advisor and ex-officio members will follow the terms of their elected position. The additional members in the persons of the appointed representatives from each region will have a term of two years also with one regional representative to have a term of four years. The member with the four-year term, will be rotated through the four regions, as the term expires.

The committee will meet every other month and as deemed necessary.	
Meetings - conducted via digital platform Chairperson- responsible for creating agenda for meetings.	
Minutes of the meeting will be recorded following the format of the PNAA Executive Board meeting.	
Scribes -will be designated by the Chair on a quarterly rotation. Minutes of the meeting will be recorded following the format of the PNAA Executive Board meeting and will be sent to the members after review by the Chair.	
The Ethics Committee Chair and members review relevant and valid complaints/ grievances submitted by the PNAA Regional Vice Presidents or the Executive Board, after compliance with the chain of command policy.	
The chairperson presents the complaint/grievance to the Ethics Committee for consideration and review. Appropriate, unbiased and thorough fact finding will be conducted. Thereafter, recommendations will be made to the PNAA Executive Board for final decision and implementation. Communication will be done by the Executive Board to the complainant or grievant.	

Upon approval by the Executive Board, the final decision will be shared with the Ethics Committee for information, documentation and closure of complaint or grievant. All discussion on complaints and grievances are confidential.

The regional representatives will update their regions on a quarterly basis on matters relevant to operations, education, policies, procedures, serving as an active resource to their regions and chapters.

Original Author: Teresa Ignacio-Gonzalvo, Chair, Ethics Committee

7/27/2021

VI. Onboarding and Education

A. Strategic Plan - [include statement on ethical decision-making process dedication of time, funds, or resources for ethics activities (training, committee establishment, committee meetings, etc.), Agreement to serve as chair of the committee or as the final reviewer of committee decisions, Involvement in selection/appointment of committee members]

B. Recruitment of members

- 1. Chair or designated member will contact RVPs and get information on each region's ethics committee chapters
- Use information from RVPs and contact chapter ethics committee chairs to inquire if they are interested in joining PNAA ethics committee, send P&P and standards of conduct to committee chairs, discuss frequency of meetings

- 3. Gather availability of all interested chairs and have welcome Zoom meeting
- **C. Roles and Responsibilities** [Chair and Co-Chair; Committee members]

Please refer to Ethics Committee Charter Ethics Committee Chair, Co-Chair, and members review relevant, valid complaints that are submitted to Regional Vice-Presidents (RVP) and Executive Board (EB).

1. Ethics Committee Chair:

- a. Presents to the ethics committee submitted complaints and grievances for consideration and review. Findings and recommendations will be sent to EB for decision-making and implementation.
- Any correspondence between PNAA Ethics Committee and EB, RVPs, complainants, and grievance will be done through Committee Chair.
- Ethics Committee Chair (or Co-Chair in Chair's absence) will conduct and hold meetings via digital platform monthly or as deemed necessary.
- d. Drafts meeting agenda and sends to committee members via email at least 48 hours prior to meeting for members' review (Please refer to Figure 1 for template).
- e. Uses digital platforms, such as Zoom, and acquires meeting link from PNAA Communications and Marketing chair or uses personal account for digital platform. Chair will send link to members via email or along with meeting agenda.
- 2. Co-Chair will take the place of Committee Chair during any leaves of absence. If both Chair and Co-Chair are absent or are recused

during complaint or grievance review, then unbiased member(s) of EB will replace Chair/Co-Chair.

3. Committee members:

- a. Each member is responsible for upholding the association's commitment to the professional codes of conduct and for acting in an ethical manner. PNAA is committed to treating its constituents with utmost respect consistent with its mission and goals as stated in its bylaws (PNAA Code of Ethics).
- Members must attend monthly meetings via digital platform or join by phone line. If absence is foreseen, then should contact Chair/Co-Chair prior to meeting.
- c. Each member should review meeting agenda for assignments and for topics of discussion prior to meeting.
- d. Members will be delegated as scribes on a rotating basis. Scribe will record minutes and is responsible for maintaining recording from the Committee Chair or PNAA Communications and Marketing Chair. Minutes will be entered into the digital platform template and sent to the Chair for review (Please refer to Figure 2 for template).
- 4. Ethics Committee Responsibilities as enumerated in the PNAA By Laws Article IX Section 8, include the following:
 - a. Establishes Ethical Standards and Rules of Conduct for PNAA.
 - b. Provides mechanism and recommends actions to resolve ethical conflicts and issues presented to PNAA.
 - Strengthens ethical leadership behaviors by transparency in decision-making.
 - d. Addresses ethical concerns reported (to PNAA) involving chapters/members after undergoing chain of command up to RVPs and PNAA EB.

D. Agenda Meeting Template

Figure 1

PNAA Ethics Meeting Agenda

Date: Time: Zoom ID:

Scribe: [assigned scribe for meeting]

Invocation: (assigned)

Time (approximate time each topic should take to cover)	Agenda Item	Responsible Person
1min	Call to Order	[Chair's name]
1min	Roll Call	[Chair's name]
2min	Invocation	[designated member's name]
1min	Approval of meeting minutes & Consent Agenda	
	Old Business	[name of each person to discuss each topic]
	New Business	[name of each person to discuss each topic]
2min	Adjournment	[Chair's name]
_	Next Meeting	

E. Virtual Meeting Template for Meeting Minutes

Figure 2

Philippine Nurses Association of America—Ethics Committee Meeting Minutes Confidential

[Date] [Time EST]

Zoom Virtual Meeting

Attendees: [Chair], [Co-Chair], [members] Excused absence: [absent members]

	1		Ι	
Time	Item	Topic	Presented by	Discussion
	1	Call to order and Roll call	Presented by chair or co-chair	Meeting will be recorded
	2	Invocation	Appointed member will be notified via agenda	Short prayer
	3	Scribe	Appointed member will request minutes from chair/co- chair or Carol Robles for minutes link and password	
	4	Consent Agenda	Presented by chair or co-chair	Motion to commence: Moved by: Seconded by:
	5	Agenda for today's meeting		

6	Approval of previous minutes	
7	Old Business	Briefly review last meeting and any issues/items from previous meeting that we were not discussed
8	New business	
9	Meeting Adjournment	Motion to adjourn Move to adjourn by: Seconded by: Next meeting date and time will be agreed upon

Respectfully submitted by: [scribe name and credentials]

- **F. Effective use of technology** -Refer to the guidelines and forms established by the Marketing and Communications Committee. Commonly used software and platforms include Microsoft Office, Canva, Google Docs, Zoom and others.
- **G. Sponsorships**-As determined by the Ethics Committee team. Historically, the PNAA Convention, the ICN and Global summit and others as requested and agreed upon by the committee. Donations are voluntary.
- **H. Recognition and Appreciation** -The Ethics Committee chairperson and the rest of the committee members are highly encouraged to work collaboratively, supporting each other through the challenging times and opportunities that the committee may experience. The Ethics

committee budget may provide for expressions of appreciation, gift cards, letters and other forms of appreciation as requested by the Chairperson and approved by the PNAA EB.

I. Succession Planning-while membership and leadership of the Ethics Committee are on a voluntary basis, it is highly encouraged that succession planning be discussed to provide continuity of the strategic plan as well as guidance for the committee members. More experienced members are encouraged to consider leadership positions within the committee.

Succession Planning

Ethics Committee Members 2022-2024

- 1. Committee Members Review the following documents
 - A. Ethics Charter
 - B. Ethics Policy and Procedure
 - C. PNAA Code of Ethics
 - D. ANA Code of Ethics
 - E. Social Media Policy
- 2. Develop Ethics Committee Directory to include the following:
 - A. Name
 - B. Home Address
 - C. Cell phone
 - D. Fmail
 - E. PNAA Chapter
 - F. PNAA Positions
 - G. Workplace
 - H. Specialty area
- 3. Plan for PNAA Chapter Trainings
- 4. Plan for Ethics Webinars

J. Annual Ethics Summit- As an integral part of providing relevant information and current education to our leaders, chapters and members, an annual summit is a vital part of the Committee's strategic plan and responsibility. It is highly suggested that this summit be held in the Fall, preferably in October. Coordination with the PNAA calendar of events/Communications and Marketing Chair, as well as the Education and ANCC chairpersons is important for planning purposes.

VII. Legal Implications

The Parliamentarian and Legal Counsel are the resources for relevant matters pertaining to legal questions, issues, and applicable parliamentary rules if necessary.

VIII. Reference List

A. Websites:

- 1. PNAA
- 2. ANA
- 3. ICN
- 4. Center for Medical Ethics and Human Policy-Baylor College of Medicine
- 5. The Hastings Center
- 6. The Ethics Centre
- 7. Lown Institute

B. Bibliography:

- 1. Jazwiec, L. (2012) *Hey Cupcake, We Are All Leaders*. New Jersey: Wiley & Sons.
- 2. Patterson, G., & Maxfield, M., (2013). *Vital Smarts* (2nd ed.). NY: McGraw Hill.
- 3. Patterson, K., Granny, J., Mcmillan, R., & Switzler, A. Maxfield, D.(2004). *Crucial Accountability-Tools for*

- Resolving Violated Expectations, Broken Commitments and Bad Behavior. NY: McGraw Hill.
- 4. Kotter, J.(2015). *Leading Change*. Boston: Harvard Business School Press.
- 5. McChrystal, S. (2015). *New Rules of Engagement for a Complex World*. NY: Penguin Publishing.
- Ury, W. (1993). Getting Past No-Negotiating Your Way from Confrontation to Cooperation New York: Edition Bantam Books.
- 7. Lencioni, P. (2004). *Death By Meeting.* San Francisco: Jossey Bass.

IX. Acknowledgements

This is an evolving document - it is a work in progress!

We would like to sincerely thank the following leaders for their outstanding support:

- The PNAA Ethics Committee
- Mary Joy Garcia-Dia, PNAA President (2020-2022)
- Gloria Beriones, PNAA President-elect (2020-2022)
- PNAA Executive Board (2020-2022)
- Susan Repotente-PNAA Secretary
- Janet Cuaycong-PNAA Treasurer
- Carolina Manilay-Robles-PNAA Chair, Marketing and Communications
- Bob Gahol-Editor in Chief-Inside PNAA, Western Region RVP
- Ninotchka Brydges-PNAA Chair, ANCC and Education

Most of all: Our amazing families for their understanding and support.

Copyright 2022. All rights reserved.

No part of this handbook maybe reproduced, photocopied, or distributed without permission from Philippine Nurses Association of America.





PHILIPPINE NURSES ASSOCIATION OF AMERICA

This is copyrighted material. May not reproduce in any form nor distribute without permission from the original author/source.

