

POLICY PAPER

A Call for Hazard Pay Implementation of Nurse Academicians in the Philippines: A Policy Brief

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Abstract

This policy paper entitled "A Call for Hazard Pay Implementation of Nurse Academicians in the Philippines" advocated for the provision of hazard pay to nurse educators who faced numerous risks in both clinical and classroom settings. Nurse academicians played a vital role in shaping the future healthcare workforce, but they lack adequate compensation for the hazards they encounter such as exposure to infectious diseases and occupational risks. This lack of compensation negatively impacts job satisfaction, retention, and the overall quality of nursing education.

The paper highlighted the importance of fair compensation for nurse academicians through hazard pay that is similar to public health workers under RA 7305. It presented a detailed policy recommendation, including criteria for eligibility, evaluation of risk exposure, and proposed hazard pay rates. The ultimate goal was to ensure that nurse educators are financially secure, properly recognized for their work, and motivated to continue in their roles, thereby strengthening the country's healthcare education system.

The paper concluded that hazard pay for nurse academicians is a crucial investment in the future of healthcare, as it ensured better support for those who train the nation's healthcare professionals.

Introduction

The Philippines' healthcare workforce is significantly shaped by nursing education. Teaching, mentoring, and advising nursing students are vital roles that nurse academicians play in preparing the next generation of healthcare workers. In providing direct supervision and classroom instruction, they are exposed to various health and safety hazards. Nurse academicians also lack hazard pay despite the crucial nature of their employment. This concern may affect their work satisfaction, performance, and retention in academic settings impacting the nation's nursing education and healthcare delivery systems.

Hazard Duty Pay is an incentive or allowance typically given to officials and workers who are exposed to dangers due to the nature of their work. Employees who work in environments that expose them to risks or injuries are entitled to a form of compensation known as "hazard pay." Hazard pay is rated

according to risk and actual exposure, with higher rates applied to high-risk dangers and longer exposure times (Department of Education, 2014). However, under the terms and conditions of the Department of Budget and Management (DBM) Circular No. 451, exposure to dangers that have an impact on the entire population in a locality, such as noise and air, land, and waterborne hazards, is not compensable (Supreme Court E-Library, 2019).

Under House Bill No. 6720, workers in the private sector who work during ongoing or upcoming catastrophes brought on by disease outbreaks, natural or man-made disasters, or war would be required to receive hazard compensation. Their entitlement is justified according to their vulnerable situation that is above and beyond the regular course of their activities (Amazon Web Services, 2020).

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Public health employees covered by RA 7305 (Magna Carta for Public Health Workers) are entitled to hazard pay, which covers at least 50% of working hours in high- or low-risk settings. The following are examples of hazardous environments: states of calamity; infectious diseases; radiation; volcanic activity; isolated stations; prison camps; mental health facilities; radiation-exposure clinics; laboratories; disease-infested areas; states of conflict; and life-threatening situations (Supreme Court E-Library, 2019). However, it is unclear what constitutes a public health professional and who qualifies under the Magna Carta for Public Health Workers. Such lack of clarity, therefore, continues to raise the concern as to whether nurse academicians are entitled to hazard pay benefits.

In light of the difficulties and dangers that nurse academicians in the Philippines encounter in their line of work, this policy paper seeks to advocate for their hazard pay. This said advocacy, thru this policy paper, also aims to improve the financial security, professional recognition, and general well-being of nurse educators by providing hazard pay. This will help to ensure fair compensation that supports the retention and motivation of this important workforce in the healthcare and educational sectors.

Academicians as Health Workers

The study conducted by Lasco et al. (2023) validates the function of academicians as health workers, completing duties like anthropometric measuring of students, managing government programs, administering first aid, attending to mental and psychological health issues, and collaborating with students' families. Academicians are able to assess their students' well-being at home since they have unprecedented access to their personal information, health information, and family dynamics. At the intersection of education, family, and committed medical professionals, they bear the financial burden of less fortunate students' hospital bills. Meeting academicians' needs and adapting with the educational system should be the main priorities of any reforms to their working conditions. This research highlights the significance of having skilled and qualified labor for health-related jobs, together with fair pay and consideration for workdays and hours worked. The long-term discussion should give priority to the health and work-life balance of academicians.

Nurse academicians are responsible for the ongoing assessment and instruction of nursing students. They assist in developing patient care systems, establishing policies, assessing the needs of the healthcare system, facilitating staff assessments, training, and remediation, and contributing to the creation of protocols, manuals, and training materials. Depending on their role and the facility, they instruct both student nurses and registered nurses through teleconferences or in-person lectures. A degree ranging from a BSN to an MSN or MAN, an issued registered nurse license, and several years of real-world experience as an RN in a clinic or hospital are

prerequisites for becoming an academic nurse or nurse educator (Meurer, 2018).

To advance high-quality nursing education in universities and community colleges, nurse academicians are essential. They employ a curriculum that they have created and engage students in creative ways that are based on research-proven methods and educational theory. They are devoted lifelong learners who adjust to changing medical procedures, educational methods, and technological advancements (Global Health, 2020).

A licensed professional nurse who teaches nursing theories and advanced practices to aspiring nurses is known as a nurse academician. They must be well versed about their profession and have strong leadership qualities. Nurse academicians provide continuing education and new nursing student courses in classrooms and clinical settings. They support students on their path to becoming successful nurses by serving as mentors and as role models. Their success is mostly dependent on their drive for professional greatness (Gutierrez, 2020).

Current Compensation Structure

Section 21 of the Magna Carta of Public Health Workers stipulates that employees working in health-related establishments in challenging locations like areas affected by conflict, remote stations, prison camps, mental health facilities, clinics exposed to radiation, laboratories, disease-ridden areas, or areas designated as states of emergency or calamity must be compensated with hazard allowances equal to at least 25% of the monthly basic salary for employees in salary grade 19 and below and 5% for employees in salary grade 20 and above to meet safety standards. The Secretary of Health or the head of the unit, with permission, decides this remuneration (Supreme Court E-Library, 2019).

Challenges and Health Risks faced by Nurse Academicians

Nurse academicians face challenges in order to train and to educate the next generation of nurses. Some of these challenges are the lack of academicians, curricular difficulties, representation in faculty and training, building relationships with students, salary disparity, and the chance to keep up with new information and abilities. More potential applicants are being turned away from undergraduate and graduate programs as a result of the faculty shortage, which strains already overworked faculty members. It is imperative to raise nurse academicians' pay in order to solve these problems, as well as, to give faculty members chances for learning and building up a fund adjunct to faculty programs through collaborations with academic institutions and practices. Another issue is representation in the faculty and training wherein a more diverse faculty can help students view the world from a wider angle and can serve as

mentors for minority nurses. The quality of education and nursing graduates is impacted by the shortage of preceptors, which also affects nursing students and educators (Morris, 2023).

Nurse academicians face a variety of challenges, such as a heavy workload, offering a sufficient clinical practice area, managing an excessive number of students, putting nursing care plans into practice, dealing with insufficient physical conditions in clinics, and receiving endorsements from other members of the healthcare team. These challenges have a negative effect on not only efficient learning and teaching but also on the instruction of specific nursing practices (Sucu et al., 2019).

In view of the nature of COVID-19, nurse academicians and nursing students have expressed several concerns. Prominent among these concerns is the fear of disease transmission to self and to others. Prioritizing student health issues allowed the nurse academicians to reduce the possibility of infecting themselves and their students with COVID-19 and passing on the illness to their families by avoiding contact with patients who had the virus, whether it was suspected or proven. As a result, they made an effort to avoid making unnecessary physical or verbal contact with the suspected patients, and as a consequence, they received distressful treatment (Kaveh, 2022).

Job Satisfaction and Retention

Nursing faculty members' job satisfaction is comparable across cultural boundaries in terms of work environment, hours worked, compensation, advancement, professional growth, oversight, and monitoring. Professional freedom, role ambiguity, role conflicts, leadership expectations, organizational culture, leadership behaviors, and organizational traits are some of the factors that influence job satisfaction. Six occupational characteristics have a beneficial impact on both intentions to stay and job satisfaction. Rather than accurately reporting the level of satisfaction, the analysis concentrated on the link between work satisfaction and its contributing elements. Six levels of criteria were identified as influencing the job satisfaction of nurse educators: personal, organizational, managerial, academic, professional, and economic. If administrators possess sufficient understanding of these aspects, they can significantly contribute to the promotion of job satisfaction among nurse educators (Arian et al., 2018).

In the Philippines and in other parts of the world, nurse academicians are clearly vital, but they also confront difficulties like inadequate compensation, burnout, and a shortage of workers. Salary levels for nurses in this sector need to be

appropriate for their high level of responsibility and ability (Manalaysay & Babate, 2023).

According to Dr. Benito Atienza, president of the Philippine Federation of Professional Associations (PFPA), the country is lacking in healthcare workers (HCWs) and nurse academicians. Due to the glaring scarcity, nursing schools are only able to accept a certain number of students. Another issue that needs to be addressed to reduce the lack of HCW in the nation is the absence of nurse academicians because some of them are already leaving the country for other countries. A large number of Filipino healthcare workers are choosing to go abroad after being denied high-paying jobs at local hospitals. There is a large compensation gap between government and private institutions because government hospitals only offer contractual agreements lasting six months to a year. According to the Alliance of Filipino Workers, government must provide adequate funding for health care workers in order to maintain a healthy populace and a skilled workforce (Jaymalin, 2022).

Policy Statement

1. Clearly state who is eligible for hazard pay. Nurses who work directly with patients, such as clinical instructors supervising nursing students in their Related Learning Experiences or researchers in high-risk settings like infectious disease units, may fall under this category.
2. Create a systematic plan to evaluate the degree of risk that nurses encounter in educational environments. This could entail assessing elements like psychological stress, occupational safety precautions, and exposure to infectious pathogens.
3. In light of the risk involved and the available funds, determine how much hazard pay is appropriate for nurse academicians. The tables below show the ratio of faculty and student for Related Learning Experience (RLE), number of hours of RLE per week and the proposed hazard pay rate.

Table 1. Ratio of Faculty to student for RLE.
(Clinicals and Community Settings)

Year Level	1st Semester	2nd Semester
I	N/A	1:8
II	1:10	1:10
III	1:10	1:10
IV	1:10	1:0

Source: CMO-15-s. 2017

Table 2. Number of RLE hours per week
(Clinical and Community Settings).

Year Level	1st Semester	2nd Semester
I	N/A	N/A
II	12 hrs/wk	15 hrs/wk
III	21 hrs/wk	18 hrs/wk
IV	21 hrs/wk	24 hrs/wk

Source: CMO-15-s. 2017

Table 3. Proposed Hazard Pay for Nurse Academicians

Hours of Exposure	Percentage (%) per Monthly Basic Salary
73 hours or more	25% of monthly basic salary
49 hours – 72 hours	20% of monthly basic salary
25 hours – 48 hours	15% of monthly basic salary
Less than 24 hours	10% of monthly basic salary

4. Create a system that will monitor and document the application of hazard pay regulations. This entails maintaining records of qualified nurses and making timely payment distributions.
5. Prevent misappropriation or abuse by keeping the distribution and allocation of hazard pay funds transparent. This entails setting precise qualifying requirements, keeping an eye on how funds is being used, and holding accountable those who make mistakes.
6. Evaluate the outcomes of hazard pay policies on a regular basis, and adapt as necessary in response to stakeholder input and evolving conditions. This guarantees that the policies will always be applicable and functional.

Conclusion

The hazard pay for nurse academicians is not only an issue of just compensation, it is an investment in the future of healthcare. By recognizing and addressing the risks these professionals face, nurse educators can be confident in having the support they need which will consequently improve patient care and nursing education outcomes. This step is necessary to help those who devote their lives to training our healthcare heroes.

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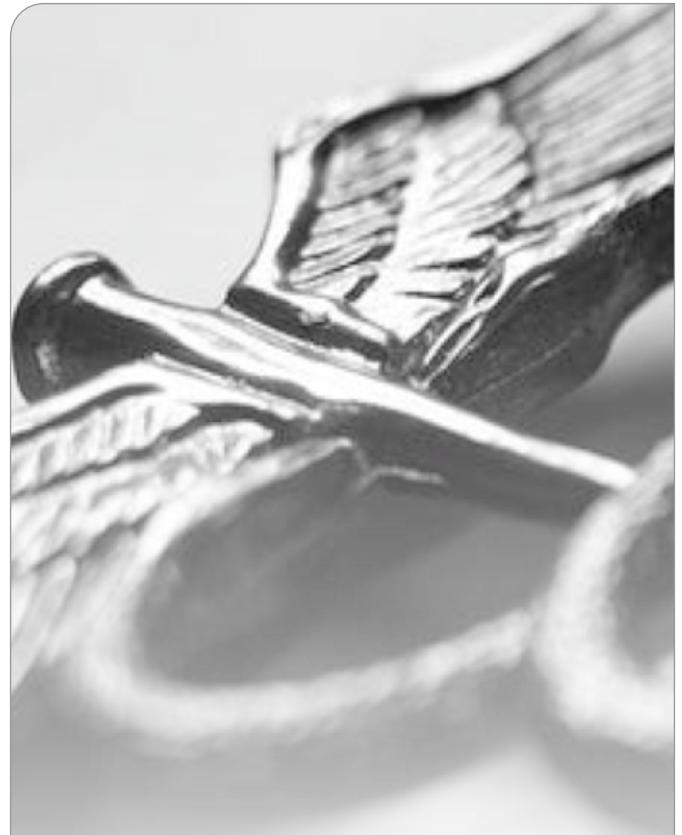
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*“The nurse
turns research
findings into
meaningful
actions that
change lives.”*

– LoBiondo-Wood, G.,
& Haber, J. (2021)