

LAW OF THE REPUBLIC OF INDONESIA
NUMBER 38 YEAR 2014

ON
NURSING ACT

IN THE NAME OF ALMIGHTY GOD

PRESIDENT OF THE REPUBLIC OF INDONESIA,

- Considering :
- a. that for achieving prosperous society as one of national objective as stipulate in the Introduction of 1945 Constitution of the Republic of Indonesia, it is necessary to implement health development;
 - b. that the implementation of health development is achieved through the provision of health care, including nursing service;
 - c. that the implementation of nursing service should be carried out with full responsibility, accountability, quality, safety, and accessiblity by nurses who has the competences, authority, ethics, and high morality;
 - d. that concerning nursing should be regulated comprehensively in regulations and laws for the protection and law enforcement for nurses and public;
 - e. that in consideration of what item a, item b, item c, and item d intend, it is necessary to make Law concerning Nursing;

In viewing of: Article 20, Article 21, and Article 28C of the 1945 Constitution of the Republic of Indonesia;

With the Joint Consent of
THE HOUSE OF REPRESENTATIVES OF THE REPUBLIC OF INDONESIA
and
THE PRESIDENT OF THE REPUBLIC OF INDONESIA

DECIDE:

To Stipulate: ACT CONCERNING NURSING.

CHAPTER I
GENERAL PROVISIONS

Article 1

In this Act the following definitions are:

1. Nursing is the activities of nursing care provided to individual, family, group or community, in health and illness.
2. Nurse is someone who is graduated from nursing higher education, either in Indonesia or a broad recognized by the Government of Indonesia according to the existing regulations and laws.
3. Nursing service is a professional service as an integral part of health services which is based on nursing science and art provided to individual, family, group, or community, either in the state of health or illness.
4. Nursing Practice is a service provided by nurses in the performance of nursing care.
5. Nursing care is the course of interactions between nurses and clients and their environment to achieve the objective by meeting the clients' needs and providing self-care independently.
6. Competence Examination is the process of administrating the test to measure the knowledge, skill, and behavior of the students in higher education conducting nursing study program.
7. Certificate of competency is a letter of recognition to certify the competence of diploma nurses to practice nursing throughout Indonesia after passing the Competency Examination.
8. Certificate of profession is a letter of recognition to perform Nursing Practice obtained by the graduate of professional education.
9. Registration is the formal registration for Nurses who have the Certificate of Competency or Certificate of Profession and have passed the required qualification and recognized by law to practice Nursing
10. The Letter of Registration and further abbreviated as STR is a written evidence provided by the Nursing Council to Nurses who have registered.
11. License for Practice of Nurses and further abbreviated as SIPP is a written evidence provided by local government of district/municipal to Nurses as giving an authority to perform Nursing Practice.
12. Health Care Facilities are the equipment/or places which are used to implement the promotive, preventive, curative, and rehabilitative efforts of health services delivered by the Government, Local

Government, and/or society.

13. Foreign nurses are the nurses who are not the Indonesian citizen.
14. Client is the individual, family, group, or community using nursing services.
15. Professional Association for Nurses is the organization to unite nurses nationally and legally according to the existing regulations and laws.
16. Nursing Collegium is the board established by Professional Association of Nurses for each scientific field of nursing discipline to enhance and improve the education quality of those scientific field of nursing discipline.
17. Nursing Council is the Board of Nursing to carry out it's tasks independently.
18. Educational Institution is a higher education to manage nursing education.
19. Nursing Education Field of Practice is further called as the Practice Setting of Education is the facilities besides higher education institution also used as the place for the operationalization of nursing education.
20. Government and further called as the Government is the President of the Republic of Indonesia who has the authority to govern the Republic of Indonesia as stated in 1945 Constitution of The Republic of Indonesia.
21. Local Government is the Governor, Head of District, and Mayor with the local government attributes as the element of government administration.
22. Minister is the minister who has the authority to govern the health affairs.

Article 2

Nursing Practice is based on:

- a. humanity;
- b. scientific value;
- c. ehics and professionalism;
- d. usefulness;
- e. justice;
- d. protection; and
- e. health and client safety

Article 3

The objectives of Nursing Act are:

- a. to improve the quality of nurse;
- b. to improve the quality of nursing service;
- c. to provide protection and law reinforcement for nurses and clients;
and
- d. to promote the health status of society.

CHAPTER II CATEGORY OF NURSES

Article 4

- (1) Category of Nurses consists of:
 - a. Professional nurse; and
 - b. Vocational nurse.
- (2) Professional nurse as referred to clause (1) point a consists of:
 - a. ners; and
 - b. ners spesialis.
- (3) Further stipulation on Category of Nurses as stated in clause (1) and clause (2) is regulated by the Ministerial Law.

CHAPTER III NURSING HIGHER EDUCATION

Article 5

Nursing Higher Education is categorized as follow:

- a. vocational education;
- b. academic education; and
- c. professional education.

Article 6

- (1) Vocational education as stated in Article 5 is a nursing diploma program.
- (2) Vocational education as stated in Article 5 point a as minimal as Nursing Diploma Three.

Article 7

Academic education as stated in Article 5 point b consists of:

- a. nursing degree program;

- b. nursing masters program; and
- c. nursing doctoral program.

Article 8

Professional education as stated in Article 5 point c consists of:

- a. nursing professional program; and
- b. nursing specialist program.

Article 9

- (1) Nursing Higher Education as stated in Article 5 is operationalized by higher education which has an approval for management of education according to the existing regulations and laws.
- (2) Higher education as stated in clause (1) may be in the form of university, institute, school for higher education, polytechnic or academy.
- (3) Higher education in the management of nursing higher education as stated in clause (1) should provide Health Care Facilities as the Practice Setting of Education and in coordination with the Professional Organization of Nurses.
- (4) The provision of Health Care Facilities as stated in clause (3) can be afforded through:
 - a. ownership; or
 - b. collaboration.
- (5) Health Care Facilities as stated in clause (3) is the hospital and a first level of Health Care Facilities meeting the requirements, including networking, and community within their area of development.
- (6) The further regulations concerning the requirements of Health Care Facilities as Practice Setting of Education is regulated by the regulation of the Ministry related to educational affairs after having coordination with the Minister.

Article 10

- (1) Nursing Higher Education managed by the Government or public in accordance to the regulations and laws.
- (2) Nursing Higher Education as stated in clause (1) to perform trilogy of higher education.

Article 11

- (1) Management of Nursing Higher Education should meet the National Standard of Nursing Education.
- (2) National Standard of Nursing Education as stated in clause (1) is

referred to National Standard of Higher Education.

- (3) National Standard of Nursing Education as stated in clause (1) is developed in collaboration with the ministries those governing the health affairs, and educational affairs, and Association of Educational Institutions, Nursing Council, and Professional Organization of Nurses.
- (4) National Standard of Nursing Education as stated in clause (1) determined by the minister who governs the educational affairs.

Article 12

- (1) In order to ensure the quality of graduates, the higher nursing education may only take the number of students based on the national quota.
- (2) Stipulation of the national quota on the intake of students is regulated by the Ministerial Regulation which governs the educational affairs after coordinating with the Minister.

Article 13

- (1) Nursing Higher Education should have the faculty members and educational staffs.
- (2) The faculty members as stated in clause (1) can be from:
 - a. Higher education; and
 - b. Practice setting of Education.
- (3) The faculty members as stated in clause (1) appointed and discharged by the authority in accordance with regulations and laws.
- (4) The faculty members as stated in clause (1) has the right and obligation in accordance with regulations and laws.

Article 14

- (1) The faculty members and the Practice Setting of Education provide education, and conduct research and social services to public and health services.
- (2) The faculty members in Practice Setting of Education have an equal recognition, and compulsory credit number which are considering the health service activities.
- (3) Further stipulation on equality, recognition, and compulsory credit number of faculty members in Practice Setting of Education as stated in clause (2) are regulated in Government Regulation.

Article 15

- (1) The educational staffs as stated in Article 13 clause (1) can be recruited from government employee and/or non government

employee.

- (2) The educational staffs as stated in clause (1) is appointed and discharged in accordance with the regulations and laws.

Article 16

- (1) Nursing students at the end of their study period at vocational and professional education should take Competency Examination nationally.
- (2) Competency Examination as stated in clause (1) is managed by higher education in collaboration with Professional Organization of Nurses, Training Institution, or accredited Certification Institution.
- (3) Competency Examination as stated in clause (2) is aiming to achieve the graduate standard of competences that meeting the standard of working competences.
- (4) Standard of working competence as stated in clause (3) is developed by Professional Organization of Nurses and Nursing Council and regulated by the Minister.
- (5) Nursing students of vocational education who pass the Competency Examination will be provided with the Certificate of Competency issued by the higher education institution.
- (6) Nursing students of professional education who pass the Competency Examination will be provided with the Certificate of Profession issued by the higher education institution.
- (7) Further stipulation on the administration of Competency Examination is regulated by the Minister who governs the educational affairs.

CHAPTER IV

REGISTRATION, PRACTICE LICENSURE, AND REREGISTRATION

Part One General

Article 17

For the protection of the public who are the receiver of health services and to improve the quality of health service provided by the nurses, Minister and Nursing Council have the tasks to supervise, monitor and evaluate the quality of nurses based on their authority.

Part Two Registration Article 18

- (1) Nurse who practices nursing should have a STR (Certificate of Registration).

- (2) STR (Certificate of Registration) as stated in clause (1) issued by Nursing Council after meeting the requirements.
- (3) Requirements as stated in clause (2) include:
 - a. has a diploma from nursing higher education;
 - b. has a Certificate of Competency or Certificate of Profession;
 - c. has a letter of statement on physically and mentally healthy;
 - d. has a letter of statement that one has done professional sworn;
and
 - e. make a statement of intention to obey and implement the ethical principles as a professional.
- (4) STR (Certificate of Registration) for a period of 5 (five) years and should be reregistered after fulfilling the requirements.
- (5) The requirements for reregistration as stated in clause (4) as follows:
 - a. has a previous STR (Certificate of Registration);
 - b. has a Certificate of Competency or Certificate of Profession;
 - c. has a letter of statement on physically and mentally healthy;
 - d. make a statement of intention to obey and implement the ethical principles as a professional;
 - e. has been working as a professional or vocational in their field;
and
 - f. fulfill the expected service, education and training activities,
and/or other scientific activities.
- (6) Further stipulation about requirement as stated in clause (5) point e and f is regulated in Nursing Council Regulation.
- (7) Further stipulation about Registration and Reregistration administration are regulated in Nursing Council Regulation.

Part Three
License to Practice

Article 19

- (1) The nurses who conduct Nursing Practice are obliged to have license.
- (2) License as stated in clause (1) is provided in term of SIPP (License for Practice of Nurses).
- (3) SIPP (License for Practice of Nurses) as stated in clause (2) is issued by the District/Municipal government based on the recommendation of health officer who has the authority in District/Municipal where the Nurses conduct their practice.
- (4) In order to have SIPP (License for Practice of Nurses) as stated in clause (1) and (2), Nurses should have:
 - a. the copy of STR (Certificate of Registration) which is still valid;

- b. recommendation from the Professional Organization of Nurses; and
 - c. letter stated that the nurse has a place to practice and the letter from the Manager of Health Care Facilities
- (5) SIPP (License for Practice of Nurses) is still valid, if:
- a. STR (Certificate of Registration) is valid; and
 - b. Nurse practices in a place as stated in SIPP (License for Practice of Nurses)

Article 20

- (1) SIPP (License for Practice of Nurses) is only valid for 1 (one) place of practice.
- (2) SIPP (License for Practice of Nurses) as stated in clause (1) is provided to Nurses as many as for 2 (two) places of practice.

Article 21

The Nurses who perform independent practice should have a Nursing Practice plank.

Article 22

SIPP (License for Practice of Nurses) is not valid if:

- a. revoked based on the regulation and laws;
- b. has lapsed
- c. as requested by the Nurse; or
- d. the Nurse is passed away.

Article 23

Further stipulation concerning licensure as stated in Article 19 up to Article 22 is regulated in Minister Regulation.

Article 24

- (1) Foreign nurses who will perform Nursing Practice in Indonesia should follow the evaluation process of their competences.
- (2) Evaluation of competences as stated in clause (1) is done by:
 - a. appraisal on the administrative completeness; and
 - b. appraisal on the ability to Practice.
- (3) Administrative completeness as stated in clause (2) point a should have at least the following:
 - a. appraisal on the validity of diploma by the minister that governing education affairs;
 - b. has a letter of statement on physically and mentally healthy; and

- c. make a statement of intention to obey and implement the ethical principles.
- (4) The appraisal of Performance ability to conduct Nursing Practice as stated in clause (2) point b is proved by a letter that the nurse has follow competency evaluation program and Certificate of Competency.
- (5) Aside from that stated on the clause (1) Foreign Nurses should fulfill the other requirements in accordance with the regulations and laws.

Article 25

- (1) Foreign nurse who has followed the process of competency evaluation and who will conduct Nursing Practice in Indonesia jurisdiction should has a temporary STR (Certificate of Registration) and SIPP (License for Practice of Nurses).
- (2) A temporarty STR (Certificate of Registration) for foreign Nurse as stated in (1) is active for 1 (one) year and can be extended only for another 1 (one) year.
- (3) Foreign Nurse as stated in clause (1) performs Nursing Practice in Indonesia jurisdiction based on the request of the user of that foreign Nurse.
- (4) The practice of a foreign Nurse as stated in clause (3) is aiming to improve the Indonesian Nurses capacity.
- (5) SIPP (License for Practice of Nurses) for Nurses is valid for 1 (one) year and can be extended only for another 1 (one) year.

Article 26

Further stipulation concerning the utilization and practice of foreign Nurses is regulated by the Government Law.

Article 27

- (1) Indonesian Nurse graduated from foreign country intends to Practice Nursing in Indonesia jurisdiction should follow evaluation process of competency.
- (2) Evaluation process of competency as stated in clause (1) is administered by:
 - a. appraisal on the administrative completeness; and
 - b. appraisal on the ability to Practice.
- (3) Administrative completeness as stated in clause (2) point a should have at least the following:
 - a. appraisal on the validity of diploma by the minister that governing education affairs;
 - b. has a letter of statement on physically and mentally healthy; and

- c. make a statement of intention to obey and implement the ethical principles
- (4) The appraisal of Performance ability to conduct Nursing Practice as stated in clause (2) point b is proved by a letter that the nurse has followed competency evaluation program in accordance with the regulations and laws.
- (5) Indonesian Nurse graduated from foreign country who has passed the Competency Examination and will Practice Nursing in Indonesia jurisdiction is provided STR (Certificate of Registration).
- (6) STR (Certificate of Registration) as stated in clause (5) issued by Nursing Council in accordance with the regulations and laws.
- (7) Indonesian Nurse graduated from foreign country intends to Practice Nursing as stated in clause (5) obliges to have SIPP (License for Practice of Nurses in accordance to this Nursing Act.
- (8) Further stipulation concerning the evaluation process of competency for Indonesian nurse graduated from foreign country as stated in clause (1) is regulated by Minister Regulation.

CHAPTER V NURSING PRACTICE

Part One General

Article 28

- (1) Nursing Practice is performed in Health Care Facilities and other places following the target of clients.
- (2) Nursing Practice as stated in clause (1) consists of:
 - a. Independent Nursing Practice; and
 - b. Nursing Practice in Health Care Facilities.
- (3) Nursing Practice as stated in clause (1) should be based on code of ethics, standard of service, standard of profession, and standar of operating procedure.
- (4) Nursing Practice as stated in clause (2) is based on the principles of health care needs and/or community health nursing in its jurisdiction.
- (5) Further stipulation concerning the health care needs and/or community health nursing in its jurisdiction as stated in clause (4) is regulated by the Minister Regulation.

Part Two
Task and Authority

Article 29

- (1) In the management of Nursing Practice, Nurse has the following tasks:
 - a. nursing care provider;
 - b. educator and counselor for the clients;
 - c. nursing service manager;
 - d. nursing researcher;
 - e. task implementer based on the expanded authority; and/or
 - f. task implementer in the certain limited situation.
- (2) Task as stated in clause (1) can be performed collaboratively or independently.
- (3) Task implementation by a Nurse as stated in clause (1) should be carried out with full of responsibility and accountability.

Article 30

- (1) In carrying out the tasks as the nursing care provider in the field of individual health efforts, a Nurse has the authority:
 - a. to conduct holistic nursing assessment;
 - b. to determine nursing diagnosis;
 - c. to plan nursing intervention;
 - d. to implement nursing intervention;
 - e. to evaluate the outcomes of nursing intervention;
 - f. to do referral;
 - g. to provide intervention in critical and emergency situation based on the competences;
 - h. to provide nursing consultation and in collaboration with physician;
 - i. to conduct health education and counseling; and
 - j. to administer the medication to clients appropriate with medical professional's prescription or the drugs with green and blue labels.
- (2) In carrying out the tasks as the nursing care provider in the field of community health efforts, a Nurse has the authority:
 - a. to assess community health nursing at the levels of family, group, and community;
 - b. to determine the community health nursing problems;
 - c. to assist in case findings;
 - d. to plan community health nursing intervention;

- e. to implement community health nursing intervention;
- f. to do case referral;
- g. to evaluate the outcomes of community health nursing intervention;
- h. to empower community;
- i. to provide advocacy in community health nursing;
- j. to establish partnership in community health nursing;
- k. to provide health education and counseling;
- l. to manage case; and
- m. to conduct complementary nursing treatment.

Article 31

- (1) In carrying out the tasks as a health educator and counselor for the clients, a Nurse has the authority:
 - a. to conduct a holistic nursing assessment at the levels of individual, family, group and community;
 - b. to empower the community;
 - c. to provide advocacy in community health nursing;
 - d. to establish partnership in community health nursing; and
 - e. to conduct health education and counseling.
- (2) In carrying out the tasks as the nursing service manager, a Nurse has the authority:
 - a. to conduct assessment and determine the problems;
 - b. to plan, implement, and evaluate Nursing Service; and
 - c. to manage case.
- (3) In carrying out the tasks as the nursing researcher, a Nurse has the authority:
 - a. to conduct research which is appropriate to standard and ethics;
 - b. to utilize the resources of Health Care Facilities;
 - c. to use the patient as the research subject in accordance with the ethics of profession and regulations and laws.

Article 32

- (1) The implementation of tasks based on the authorized delegation as stated in Article 29 clause (1) point e by written instruction of medical professional to Nurses to perform a medical interventions and to evaluate their implementation.
- (2) Handed over of authority as stated in clause (1) can be done in the forms of delegation or mandatory.

- (3) Handed over of authority in the form of delegation to perform a medical intervention delegated by medical professional to Nurses is accompanied by responsibility.
- (4) Handed over of authority as stated in clause (3) should only be given to trained professional or vocational nurse who has the required competences.
- (5) Handed over of mandatory authority from the medical professional to nurse to perform medical intervention under supervision.
- (6) Responsibility for medical intervention of mandatory authority as stated in clause (5) is held by the person who hand over the authority of medical intervention.
- (7) In the implementation of tasks based on the handed over authority as stated in the clause (1), Nurses is authorized:
 - a. to perform medical intervention appropriate with the competences based on the delegative handed over of authority by medical professional;
 - b. to perform medical intervention under the supervision of the person who has handed over the mandatory authority; and
 - c. to provide health service in accordance with the Government Program.

Article 33

- (1) The implementation of tasks in the certain limited situation as stated in the Article 29 clause (1) point f is the compulsory tasks from the Government in the absence of medical doctor and/or pharmacist in jurisdiction where the nurses work.
- (2) The situation wherein the medical doctor and/or the pharmacist are not available in a jurisdiction where the nurses work as stated in clause (1) is regulated by the head of local government for health affairs.
- (3) Implementation of tasks in a certain limited situation as stated in clause (1) are performed by considering the competences of Nurses.
- (4) In the implementation tasks in a certain limited situation as stated in clause (1), a Nurse has the authority:
 - a. to administer the medication for common diseases in the absence of medical professional;
 - b. to refer the patient in accordance with the referral system; and
 - c. to carry out the limited pharmaceutical service in the absence of pharmacist.

Article 34

Further stipulation concerning the tasks and authority of nurses is regulated by the Minister Regulation.

Article 35

- (1) In case of emergency for the first aid, a Nurse may conduct medical intervention and administration of medication in accordance with her/his competences.
- (2) The purpose of the first aid as stated in clause (1) is to save clients' life and to prevent the further disability.
- (3) The emergency situation as stated in clause (1) is the situation that threaten clients' life or disability.
- (4) The emergency situation as stated in clause (1) is determined by Nurses in accordance with the outcome of evaluation on their scientific knowledge.
- (5) Further stipulation on emergency situation as stated in clause (1) is regulated by the Minister Regulation.

CHAPTER VI

THE RIGHT AND OBLIGATION

Part One

The Right and Obligation of Nurses

Article 36

A Nurse in the implementation of Nursing Practice has the rights:

- a. to be legally protected during the implementation of tasks in accordance with the standard of service, standard of profession, standard of operating procedure, and regulation and law;
- b. to receive a true, clear, and honest information from the clients and/or their families;
- c. to receive compensation for the provided services;
- d. to refuse the Clients or others' wills which are against with a code of ethics, standard of service, standard of profession, standard of operating procedure, or regulation and law; and
- e. to have adequate facilities based on standard.

Article 37

A Nurse in the implementation of Nursing Practice has obligations:

- a. to complete the Nursing Service resources and facilities in accordance with the Nursing Service standard and the regulations and laws;
- b. to provide Nursing Service based on the code of ethics, Nursing Service standard, standard of profession, standard of operating procedure, and regulations and laws;
- c. to refer the Clients who are beyond the capacity to help to more

- competent and appropriate of other nurses or health professionals based on their scope of practice and level of competency;
- d. to document a Nursing Care based on the standard;
 - e. to provide the comprehensive, honest, true, clear and concise information which is easily understood concerning Nursing intervention to the Clients and/or their family within the limit of nurses' authority;
 - f. to carry out the delegated authorized intervention from other health professionals based on the competences of Nurses; and
 - g. to carry out the specific tasks as determined by the Government.

Part Two
The Right and Obligation of Client

Article 38

In Nursing Practice, the Client has the rights:

- a. to receive a true, clear, and honest information concerning nursing intervention to be implemented;
- b. to ask opinions from other nurses and/or health professionals;
- c. to receive Nursing Service based on code of ethics, standard of Nursing Service, standard of profession, standard of operating procedure, and the regulation and law;
- d. to approve or refuse the received Nursing intervention; and
- e. to ensure the confidential protection of health condition information.

Article 39

- (1) The disclosure of Client's health confidentiality as stated in the Article 38 point e is done based on:
 - a. the importance of Client health;
 - b. meeting the request of law officer for the purpose of law enforcement;
 - c. the Client's approval;
 - d. the importance of education and research; and
 - e. regulations and laws.
- (2) Further stipulation concerning the Client's confidentiality is regulated by the Minister Regulation.

Article 40

In Nursing Practice, the Client has obligations:

- a. to provide the true, clear, and honest information about the Client's health problems;

- b. to obey Nurses' advises and directions;
- c. to obey the existing laws of Health Care Facilities, and
- d. to pay for the compenstaion of received services.

CHAPTER VII
PROFESSIONAL ORGANIZATION OF NURSES

Article 41

- (1) Professional Organization of Nurses is established as an organization unite nurses nationally and has a legal entity.
- (2) Professional Organization of Nurses has the objectives:
 - a. to improve and/or to develop the knowledge and skill, dignity, professional ethics of nurses; and
 - b. to unite and to empower Nurses to enable them to support health development.

Article 42

Professional Organization of Nurses has the functions to unite, to supervise, to develop, and to monitor nursing in Indonesia.

Article 43

Professional Organization of Nurses is located in the capital city of the Republic of Indonesia and can have the representative offices in decentralized areas.

CHAPTER VIII
NURSING COLLEGIUM

Article 44

- (1) Nursing Collegium is the autonomous board in Professional Organization of Nurses.
- (2) Nursing Collegium is responsible to Professional Organization of Nurses.

Article 45

Nursing Collegium has a function to develop the nursing scientific fields and standard of Nursing higher education.

Article 46

Further stipulation concerning Nursing Collegium Keperawatan is regulated by the Professional Organization of Nurses.

CHAPTER IX
NURSING COUNCIL

Article 47

- (1) To improve the quality of Nursing Practice and for the protection and legitimation for nurses and public, the Nursing Council is established.
- (2) Nursing Council as stated in clause (1) is a Part of Indonesian Health Professional Council.

Article 48

Nursing Council as stated in Article 47 is located in the capital city of the Republic of Indonesia.

Article 49

- (1) Nursing Council has the functions to regulate, to determine, and to supervise nurses in performing Nursing Practice.
- (2) In functioning as stated in clause (1), Nursing Council has the following tasks:
 - a. to administer the registration of Nurses;
 - b. to supervise nurses in performing Nursing Practice;
 - c. to develop the standard of Nursing higher education;
 - d. to develop the standard of practice and standard of nurses' competences; and
 - e. to uphold the disciplinary of Nursing Practice.
- (3) Further stipulation concerning the implementation of functions and tasks as stated in clause (1) and clause (2) is regulated by the Nursing Council Regulation.

Article 50

In carrying out the tasks as stated in the Article 49, Nursing Council has the authority:

- a. to approve and refuse the request for Nurse Registration, including foreign Nurses;
- b. to issue and revoke STR (Certificate of Registration);
- c. to investigate and to solve the problems related to violation of disciplinary of Nurse profession;
- d. to determine and to endorse the disciplinary sanction of Nurse profession; and
- e. to provide recommendation for the establishment or closing of Nursing Education Institution.

Article 51

The budget for the management of Nursing Council activities is provided by the Government budget and expenses, and other unconditional resources in accordance with the regulations and laws.

Article 52

- (1) The membership of Nursing Council consists of the representative from Government, Nursing Professional Organization, Nursing Collegium, Association of Nursing Education Institutions, Association of Health Service Facilities, and Public Figure.
- (2) The Nursing Council has as many as 9 members.
- (3) Further stipulation about organization structure, assignment, resignation, and the Nursing Council membership is regulated by the Presidential Regulation.

CHAPTER X

DEVELOPMENT, SUPERVISION, AND MONITORING

Article 53

- (1) Development of Nursing Practice is implemented through formal and nonformal education or continuing nursing education.
- (2) The purpose of Nursing Practice development is to maintain and improve Nurses' professionalism.
- (3) Nonformal Education or continuing education as stated in clause (1) ditempuh setelah menyelesaikan pendidikan Keperawatan.
- (4) In improving the professionalism of nurses as stated in clause (2) and in meeting the health needs, the owner or manager of Health Care Facilities should facilitate nurses to take the continuing education.
- (5) Nonformal education or continuing education held by the Government, Local Government, Professional Organization of Nurses, or other accredited organization in accordance with regulation and law.
- (6) Nonformal education or continuing education as stated in clause (1) is held to meet the Nursing Practice needs is based on Nursing Service standard, standard of profession, and standard of operating procedure.

Article 54

Nursing Education is under the supervision the Ministry that governs education affairs and in coordination with the ministry of health.

Article 55

Government, Local Government, Nursing Council, and Professional Organization of Nurses to develop and supervise Nursing Practice in accordance with their functions and tasks.

Article 56

Development and supervision of Nursing Practice as stated in the Article 55 are directed:

- a. to improve the quality of Nursing Service;
- b. to protect the public from inappropriate intervention of Nurses that is not meeting the standard;
- c. to ensure regulation protection for nurses and public.

Article 57

Futher stipulation on development and supervision of Nursing Practice managed by the Government, Local Government, Nursing Council, and Professional Organization of Nurses as stated in Article 55 is regulated by the Minister Regulation.

CHAPTER XI

ADMINISTRATIVE SANCTION

Article 58

Any person violates what is regulated in Article 16 clause (1), Article 21, Article 24 clause (1), and Article 27 clause (1) will be the subject of administrative sanction.

- (2) Administrative sanction as stated in clause (1) can be as:
 - a. oral warning;
 - b. written warning;
 - c. administrative penalty; and/or
 - d. licensure revoking.
- (3) Further stipulation on imposition of administrative sanction as stated in clause (2) is regulated by the Government Regulation.

CHAPTER XII

TRANSITION STIPULATION

Article 59

STR (Certificate of Registration) and SIPP (License for Practice of Nurses) owned by nurses before enactment of this Nursing Act is considered active until the time limit of STR (Certificate of Registration) and SIPP (License for Practice of Nurses).

Article 60

Before the Nursing Council is established, the request for STR (Certificate of Registration) may be issued using the on-going procedure prior to the issuing of this Nursing Act.

Article 61

Nurses graduated from the school of health nurse (SPK) who have been practicing nursing before the issuing of this Nursing Act, still given the authority to Practice Nursing for the period of 6 (six) years starting from date of issued of this Nursing Act.

CHAPTER XIII

CLOSING STIPULATION

Article 62

The Nursing Higher Education that established before the endorsement of this Act should fulfill the requirements as stated in Article 9 at the maximum of 3 (three) years since this Act is endorsed.

Article 63

Nursing Council should have been established at the maximum of 2 (two) years since this Nursing Act is issued.

Article 64

At the date of enactment of Nursing Act, all regulations and laws which regulate Nursing are considered still active as long as there is no conflict or has not been changed based on this Act.

Article 65

Implementing laws of this Nursing Act should have legally imposition at the maximum of 2 (two) years since this Act is issued.

In order to make other people know, instruction of the endorsement of this Act by registering it in the Country Sheet of the Republic of Indonesia.

Issued in Jakarta

On the date of October 17, 2014

PRESIDENT OF REPUBLIC OF INDONESIA,

Signed by

DR. H. SUSILO BAMBANG YUDHOYONO

Endorsed in Jakarta

Date Pada tanggal October 17, 2014

MINISTER OF LAW AND HUMAN RIGHT
THE REPUBLIC OF INDONESIA,

signed

AMIR SYAMSUDIN

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