

# ANNUAL REPORT 2014



Singapore Nursing Board

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# ANNUAL REPORT 2014

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In the opinion of the Board, the annual report of the SINGAPORE NURSING BOARD are drawn up so as to present fairly the state of affairs of the SINGAPORE NURSING BOARD as at 31 March 2015.

On behalf of the Board,

Ms Low Beng Hoi  
Chairman

1 August 2015

Ms Tan Soh Chin  
Registrar

1 August 2015

## ORGANISATION DETAILS

<b>Board Secretary</b>	<b>Mdm Kwek Puay Ee</b>
<b>Official Address</b>	<b>16 College Road, #01-01 College of Medicine Building, Singapore 169854</b>
<b>Operating Office</b>	<b>81 Kim Keat Road #08-00 Singapore 328836</b>
<b>Telephone</b>	<b>6478 5416</b>
<b>Fax</b>	<b>6353 3460</b>



## SINGAPORE NURSING BOARD

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### VISION

*World-Class Nursing for a Healthy Nation*

### MISSION

*To uphold professional nursing standards and honour the public trust*

## FOREWORD



Welcome to Singapore Nursing Board's (SNB) Report for 2014

SNB launched its new Professional Registration System (PRS) on 3 February 2014. The PRS is a common system used by all healthcare professions regulatory board/council including Singapore Medical Council, Singapore Dental Council, Singapore Pharmacy Council, Optometrists and Opticians Board, Allied Health Professions Council and Traditional Chinese Medicine Practitioners Board.

The new PRS system provides SNB the opportunity to issue unique nurse registration numbers to each nurse and midwife registered with SNB for the first time. This replaces the use of nurses/midwives' NRIC numbers or workpass numbers as their registration numbers.

The system offers new functionalities and more online services to healthcare professionals and their employing institutions such as online applications for registration/ enrolment, transfer of registration/enrolment, practising certificate renewals, verifications of registration and replacement of registration certificates/ practising certificates.

Managing the change from a paper-based application to an online system registration process was only made possible with the support of all parties involved: nurses/midwives, employers and SNB staff.

SNB will endeavour to improve its services through continuous review and communications to users.

***Ms Low Beng Hoi***

***Chairman***

## BOARD MEMBERS

Appointed till 30 April 2015

Position	Name	Designation
Chairman	Ms Low Beng Hoi	Chief Nurse Khoo Teck Puat Hospital (Alexandra Health)
Registrar	Dr Pauline Tan Cheng Jee (till 31 Dec 2014)	Chief Nursing Officer Ministry of Health
	Ms Tan Soh Chin (from 1 Jan 2015)	Chief Nursing Officer Ministry of Health
Ex-officio Members	Dr Jeffery Lawrence Cutter	Director Communicable Diseases Division Ministry of Health
	Mrs Tan Cheng Neo Marion	Principal St Margaret's Secondary School
Members	Mr Ang David Chee Chim	Advisor Human Capital Singapore
	Ms Chen Yee Chui	Chief Nurse National Healthcare Group Polyclinics
	Dr Janet Choo Kim Lan	Director Case Management Changi General Hospital
	Dr Choo Li Nah	Group Director, Communications & Corporate Relations Department Agri-Food & Veterinary Authority of Singapore
	A/P Terry S H Kaan (Appointed till 22 June 2014)	Lecturer Faculty of Law National University of Singapore
	Ms Karen Koh Wei Lin	Advanced Practice Nurse Assistant Director Nursing National University Hospital
	Ms Koh Sioh Eng	Deputy Director Nursing Institute of Mental Health
	Ms Koh Paulin	Chief Nurse Changi General Hospital
	Dr Ma Lina Yee Sheung	Deputy Executive Director Lions Home for the Elders
	Dr Pauline Tan Cheng Jee (Appointed from 1 Jan 2015)	Chief Executive Officer Yishun Community Hospital
	Mdm Tan Lay Geok	Director, Inpatient Operations Raffles Hospital
	Mr Tay Wei Sern	Deputy Director (Health Sciences) School of Applied & Health Sciences ITE College East
	Ms Wong Luan Wah	Director School of Health Sciences (Nursing) Nanyang Polytechnic
	Mr Yong Keng Kwang	Chief Nurse Tan Tock Seng Hospital

## BOARD MEMBERS








Appointed from 1 May 2015 to 30 April 2018

Position	Name	Designation
Chairman	 <p>Ms Low Beng Hoi</p>	Chief Nurse Khoo Teck Puat Hospital (Alexandra Health)
Registrar	 <p>Ms Tan Soh Chin</p>	Chief Nursing Officer Ministry of Health
Ex-officio Members	 <p>Adjunct A/Prof Jeffery Lawrence Cutter</p>	Director Communicable Diseases Division Ministry of Health
	 <p>Mr Ling Khoon Chow</p>	Principal Bendemeer Secondary School
Members	 <p>Mr Ang David Chee Chim</p>	Advisor Human Capital Singapore
Members	 <p>Dr Ayre Tracy Carol</p>	Chief Nurse Singapore General Hospital Group Chief Nursing Singapore Health Services







## BOARD MEMBERS

Appointed from 1 May 2015 to 30 April 2018

Position	Name	Designation
Members	 Dr Choo Li Nah	Group Director, Communications & Corporate Relations Department Agri-Food & Veterinary Authority of Singapore
	 Dr Janet Choo Kim Lan	Director Case Management Changi General Hospital
	 Ms Karen Koh Wei Ling	Advanced Practice Nurse Assistant Director Nursing National University Hospital
	 Ms Koh Paulin	Chief Nurse Changi General Hospital
	 Ms Koh Sioh Eng	Deputy Director Nursing Institute of Mental Health
	 Ms Kok Kum Yoke	Director of Nursing Thomson Medical Centre
	 Dr Ma Lina Yee Sheung	Deputy Executive Director Lions Home for the Elders

## BOARD MEMBERS

Appointed from 1 May 2015 to 30 April 2018

Position	Name	Designation
	 <p>Ms Nirmala Bte Karmaroon</p>	Deputy Director (Nursing) Tan Tock Seng Hospital
	 <p>Dr Pauline Tan (Appointed till 30 April 2016)</p>	Chief Executive Officer Yishun Community Hospital
	 <p>Ms Tan Hwee Ngan</p>	Director School of Health Sciences (Nursing) Nanyang Polytechnic
	 <p>Mr Tay Wei Sern</p>	Deputy Director (Health Sciences) School of Applied & Health Sciences ITE College East

## KEY MANAGEMENT PERSONNEL

Designation	Name
Registrar	Ms Tan Soh Chin (from 1 January 2015)
Executive Secretary	Mdm Kwek Puay Ee
Assistant Executive Secretary	Ms Ow Jee Hia

## KEY HIGHLIGHTS

### Scope of Professional Nursing Practice Project

SNB convened a nursing workgroup in August 2012, with representatives from both public and private acute care, long term care and primary care institutions. The workgroup completed its project following consultations with clinical nurses and nurse leaders. The Board approved the Scope of Professional Nursing statements for Registered Nurse, Enrolled Nurse and Midwife in December 2014. SNB will launch and communicate the statements in 2015.

### Overseas Visitors

In August 2014, SNB hosted a visit, comprising the Director of Nursing and her nursing team from the Ministry of Health, Malaysia. It was an enriching encounter where both parties exchanged information on the role of nursing regulation.



SNB staff with delegates from Ministry of Health, Malaysia

In October 2014, SNB hosted a 3 day study visit by representatives of the Brunei Nursing Board. The study visit's objectives were to study the structure and processes of nursing practice and education regulation of SNB.



SNB staff with delegates from Brunei Nursing Board

## REGISTRATION

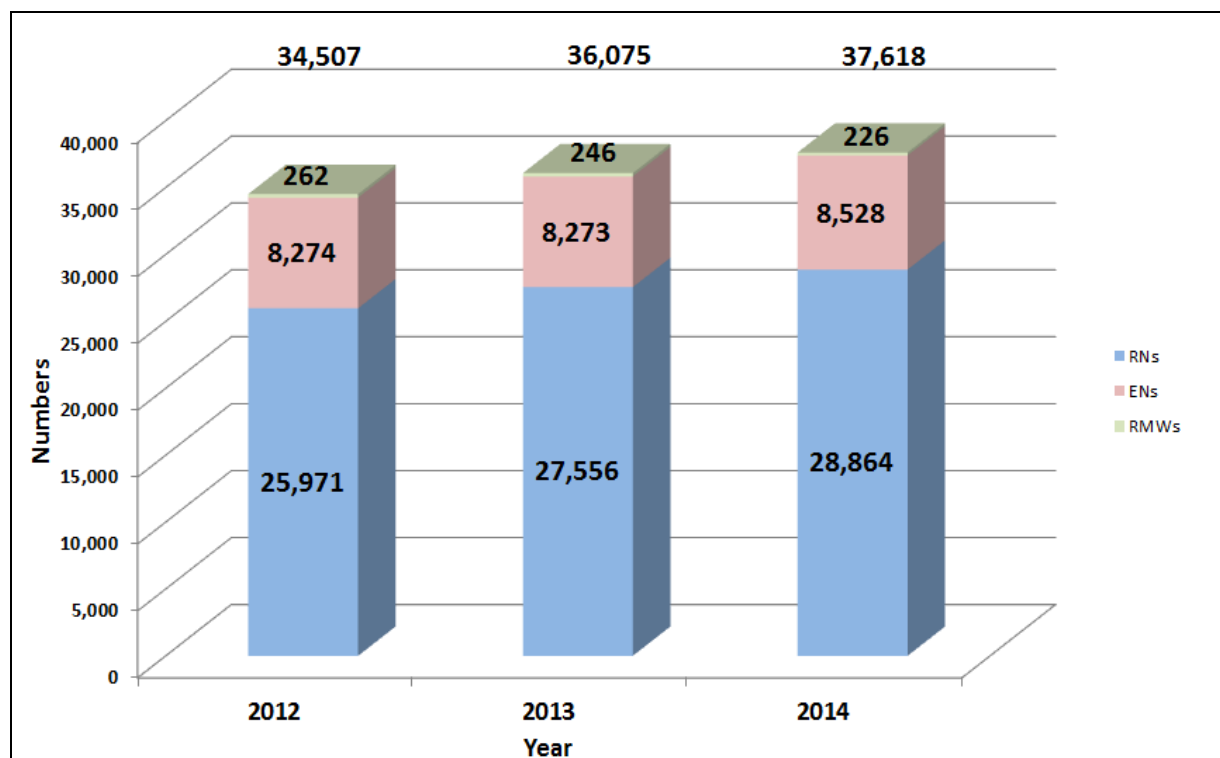
### I) Total Number of Nurses and Registered Midwives

By the end of 2014, there were a total of 37,618 Nurses and Registered Midwives on the Register and Roll. These numbers increased by 4.3% over the preceding year.

Of the 37,618 Nurses and Registered Midwives, 28,864 were Registered Nurses (RNs), 8,528 were Enrolled Nurses (ENs) and 226\* were Registered Midwives (RMWs) as illustrated in the chart below.

Selected characteristics of RNs, ENs and RMWs are available at Figures (A), (B) and (C) on pages 38 to 40.

Chart 1: Total Number of Nurses and Registered Midwives\*



(\*Please note that the number of RMWs in this Chart refers to those who are not concurrently registered in another Register/ Roll of Nurses (Single Register).

## II) New Registrations/Enrolments

In 2014, a total of 2,677 new nurses/midwives were registered/enrolled

Table 1: Number of New Registrations/Enrolments for 2014

	Local*	Foreign	Total
Registered Nurse	699	1268	1967
Enrolled Nurse	214	494	708
Registered Midwife	0	2	2
Total	913	1764	2677

\* Singaporeans and PRs

## III) Number of Registered Midwives

In 2014, there were a total of 1,337 midwives on the register of midwives (RMWs). A total of 226 RMWs were registered as RMWs only (Single Register), with the remaining 1,111 RMWs concurrently registered on at least one other register. To streamline the reporting of statistics, the 1,111 RMWs were counted as nurses instead (as reported in section (I)).

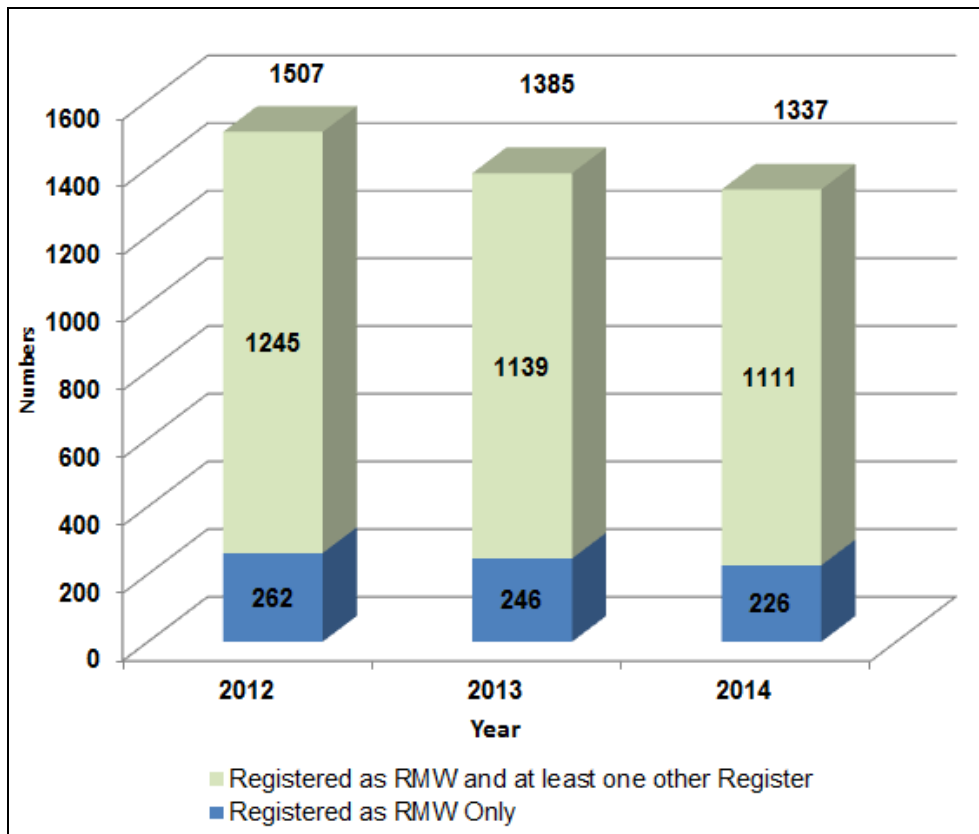
When RMWs were concurrently registered as RNs (for example), it means that they can practise in both the scope of RN and RMW.

Selected characteristics of all 1,337 RMWs are available at Figure (D) on page 41.

Table 2: Number of Registered Midwives

	2012	2013	2014
Registered as RMW only	262	246	226
Registered as RMW and at least one other Register	1245	1139	1111
Total Number of RMWs	1507	1385	1337

Chart 2: Total Number of Registered Midwives



#### IV) Number of Registered Nurse (Psychiatric)

In 2014, there were a total of 640 on the psychiatric part of the register of Registered Nurses (RNP). A total of 24 RNPs were registered as RNPs only with the remaining 616 RNPs concurrently registered on at least one other register.

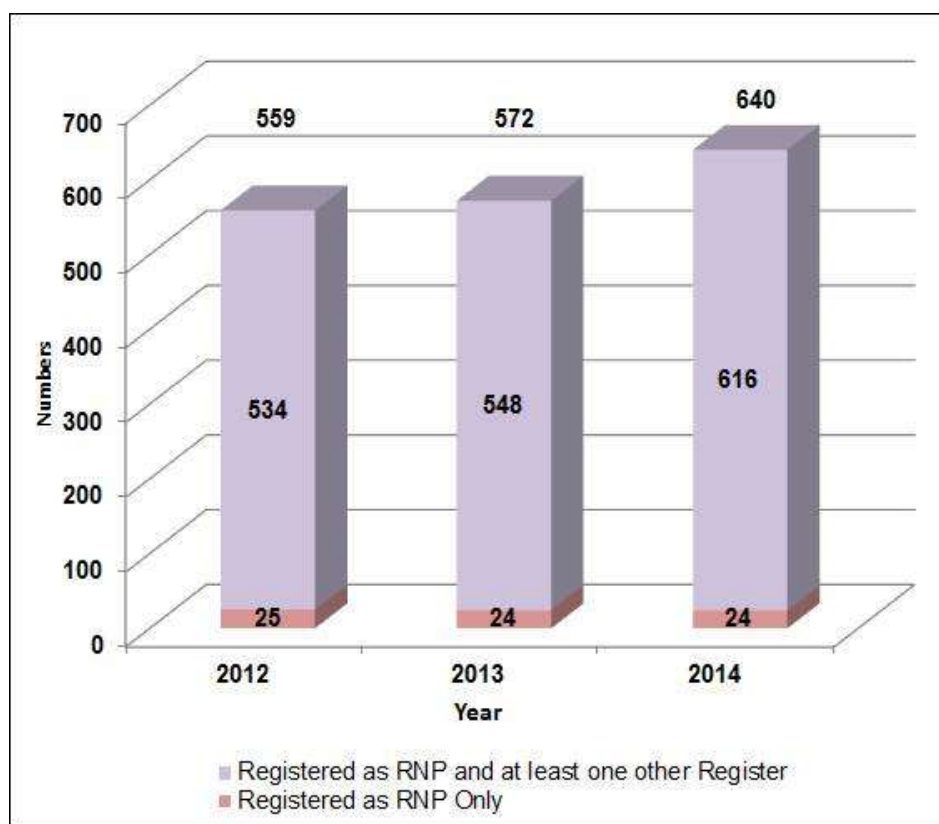
When a RNP is also concurrently registered as a RN (for example), it means that they can practise in both the scope of RN and RNP.

Selected characteristics of all 640 RNPs are available at Figure (E) on page 42.

Table 3: Number of Registered Nurse (Psychiatric) 2012-2014

	2012	2013	2014
Registered as RNP only	25	24	24
Registered as RNP and at least one other Register	534	548	616
<b>Total Number of RNP</b>	<b>559</b>	<b>572</b>	<b>640</b>

Chart 3: Total Number of Registered Nurse (Psychiatric)

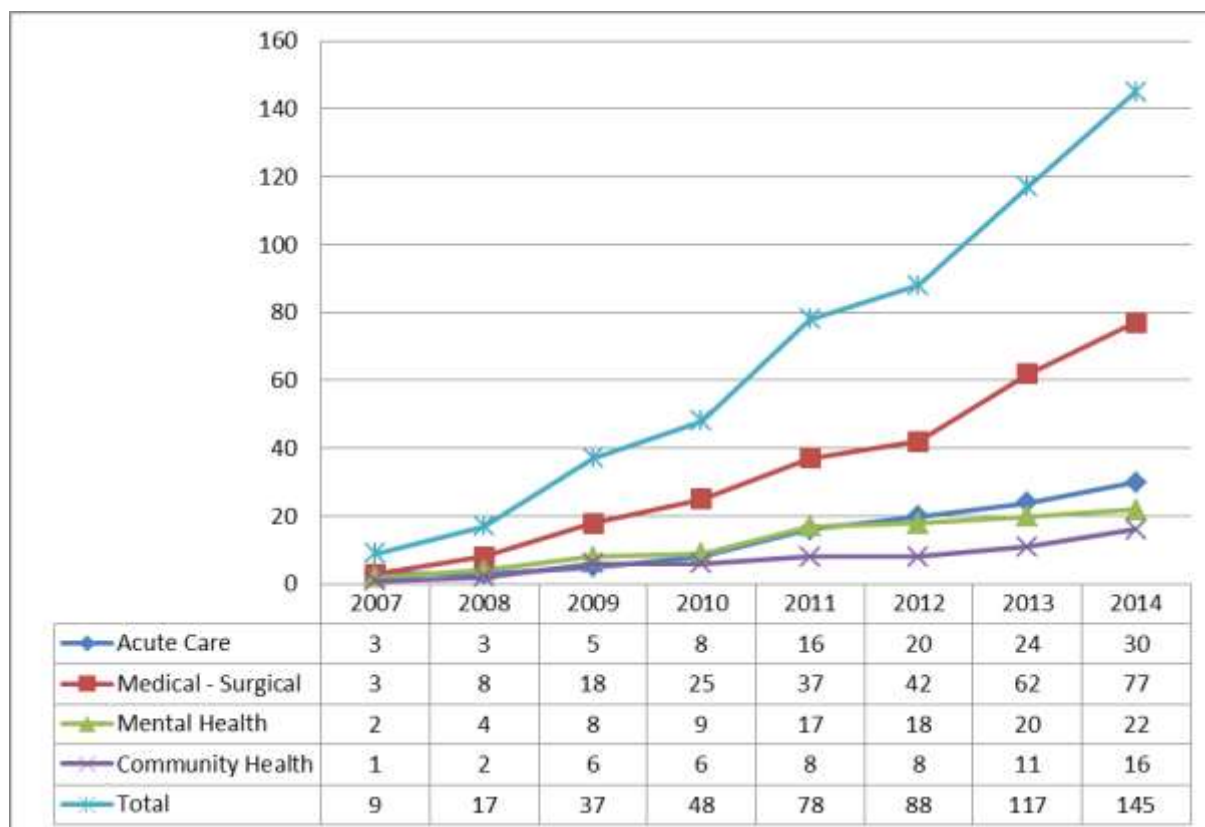


## ADVANCED PRACTICE NURSE (APN) CERTIFICATION

With 28 additional APNs certified in 2014, there were 145 fully certified APNs under the 4 Specialised Branches of Nursing namely Acute Care, Community, Medical/Surgical and Mental Health.

Selected characteristics of all 145 APNs are available at Figure (F) on page 43.

Chart 4: Total Number of APNs

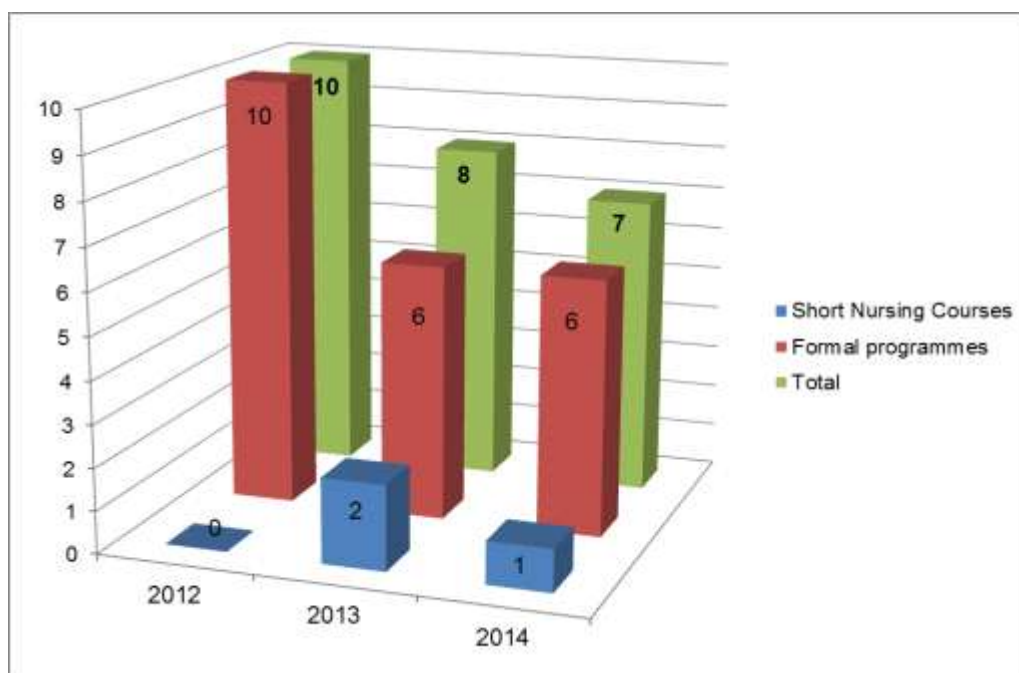




## EDUCATION

A total of 7 programmes were accredited in 2014. Two programmes' accreditation applications were denied.

**Accreditation & re-accreditation of nursing programmes**



	2012	2013	2014
Short Nursing Courses	0	2	1
Formal programmes	10	6	6
Total	10	8	7

The Education Committee continued its core work of accrediting and re-accrediting clinical areas as suitable clinical practice areas for pre-registration, pre-enrolment and post-registration programmes. In 2014, a total of 29 clinical areas were re-accredited.

As of December 2014, there are a total of 60 clinical facilities that are accredited for clinical nursing education; they include acute care public and private hospitals, community hospitals, long-term care nursing homes, hospice care and specialised centres.

## Programmes Accredited or Re-accredited in 2014

Programme Title		Institution	Period
<b>Pre-enrolment Programme</b>			
1	Diploma in Nursing	Nanyang Polytechnic	5 Jan to 4 Jan 2020
2	Diploma in Nursing (Professional Conversion Programme)	Nanyang Polytechnic	5 Jan to 4 Jan 2020

Programme Title		Institution	Period
<b>Post-registration Programmes (Bachelor)</b>			
1	Bachelor of Nursing	University of Adelaide	20 Feb 2014 to 19 Feb 2018
2	Bachelor of Nursing	Griffith University	30 Sep 2014 to 29 Sep 2016
3	Bachelor of Nursing	University of Sydney	12 Jan 2015 to 11 Jan 2019
4	Bachelor of Nursing (Honours)	University of Sydney	12 Jan 2015 to 11 Jan 2019

Programme Title		Institution	Period
<b>Short Nursing Course</b>			
1	Certificate in Nursing Programme for newly graduated foreign nurses (ENs)	SingHealth Alice Lee Institute of Advanced Nursing	25 June 2014 to 24 Sep 2016

## COMPLAINTS

In 2014, Inquiry was conducted into seven cases.

### Case 1

An Enrolled Nurse posted photographs of her patients in “Twitter”, a social media platform. The nurse had failed to maintain the confidentiality of the information relating to the health of her patient obtained in the course of providing nursing care. The Board decided to suspend her enrolment for a period of two months; issued a written warning and the nurse was required to submit a written undertaking not to engage in such a conduct again.

### Case 2

A Registered Nurse failed to respect her patients’ right to confidentiality and/or respect and preserve her patients’ right to privacy and dignity by (a) taking photographs of two female patients and (b) posting the photographs of these patients on her social media account “Facebook”. The Board decided to suspend her registration for a period of two months. The nurse was also censured; issued with a written warning and required to submit a written undertaking not to engage in such conduct again.

### Case 3

A Registered Nurse was involved in a case of Unnatural Death due to misplacement of a nasogastric tube in an 81 years old elderly man. The nasogastric tube was found to be misplaced in the right bronchus on a chest x-ray. The Board decided to suspend her registration for a period of twelve months and to impose a censure on the nurse.

### Case 4

A Registered Nurse committed theft whilst at work. She was served with a notice of conditional warning by the Police. The Board decided to suspend her registration for a period of two months. The nurse was also required to submit a medical report from her doctor (at the Institute of Mental Health) setting out her most updated medical condition, treatment plan and a confirmation that there will be no issues with her ability to function as a practising registered nurse.

### Case 5

A Registered Nurse committed theft and was convicted in the State Courts of Singapore on 22 July 2014. The nurse was sentenced to a fine of \$800. The Board decided that the nurse be suspended for a period of twelve months.

### Case 6

An Enrolled Nurse was dismissed for inappropriate behaviour with patient. The Board decided that the nurse be suspended for a period of twelve months.

**Case 7**

An Enrolled Nurse was dismissed for theft of medicine (Dhasedyl). At the Complaint Committee's recommendation, the Board decided to suspend her enrolment for a period of twelve months.

## **FINANCIAL REPORT**

### **STATEMENT BY THE BOARD'S MANAGEMENT**

In our opinion,

- (a) the financial statements set out on pages 21 to 36 are properly drawn up so as to give a true and fair view of the state of affairs of Singapore Nursing Board as at 31 March 2015 and of the results, changes in accumulated surplus and cash flows of the Board for the year then ended in accordance with the provisions of the Nurses and Midwives Act (Chapter 209) (the "Act") and Singapore Statutory Board Financial Reporting Standards.
- (b) and at the date of this statement, there are reasonable grounds to believe that the board will be able to pay its debts as and when they fall due.

The Board's management has, on the date of this statement, authorised these financial statements for issue.

**On behalf of the Board,**

Ms Low Beng Hoi  
Chairman

Ms Tan Soh Chin  
Registrar

## **INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF SINGAPORE NURSING BOARD**

### **REPORT ON THE FINANCIAL STATEMENTS**

We have audited the accompanying financial statements of Singapore Nursing Board (the "Board") set out on pages 21 to 36, which comprise the statement of financial position as at 31 March 2015, and the statement of comprehensive income, statement of changes in accumulated surplus and statement of cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

#### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation of financial statements that give a true and fair view in accordance with the provision of Nurses and Midwives Act (Chapter 209) (the "Act") and Singapore Statutory Board Financial Reporting Standards prescribed by the Accountant-General, and for devising and maintaining a system of internal accounting controls sufficient to provide a reasonable assurance that assets are safeguard against loss from unauthorized use or disposition; and transactions are properly authorized and that they are recorded as necessary to permit the preparation of true and fair profit and loss accounts and statement of financial position and to maintain accountability of assets.

#### ***Auditors' Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Singapore Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements whether due to fraud or error. In making those risk assessments, the auditor considers internal controls relevant to the entity's and fair presentation of the financial statements that give a true and fair view in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal controls. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Board's Management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
SINGAPORE NURSING BOARD**

*(continued)*

***Opinion***

In our opinion,

- (a) the financial statements are properly drawn up in accordance with the Act and the Singapore Statutory Board Financial Reporting Standards so as to give a true and fair view of the state of affairs of the Board as at 31 March 2015 and the results, changes in accumulated surplus and cash flows of the Board for the year ended on that date;
- (b) the accounting and other records, and the registers required by the Act to be kept by the Board have been properly kept in accordance with the provisions of the Act; and
- (c) the receipt, expenditure and investments of monies and the acquisition and disposal of assets by the Board during the year are in accordance with the provisions of the Act.

**PAUL HOOI & CO.**

*Public Accountants and  
Chartered Accountants  
Singapore*

# STATEMENTS OF FINANCIAL POSITION AS AT 31 MARCH 2015

	<u>Note</u>	<u>2015 S\$</u>	<u>2014 S\$</u>
<b><u>ACCUMULATED SURPLUS</u></b>		<b><u>1,902,502</u></b>	<b><u>1,990,173</u></b>
REPRESENTED BY:			
<b><u>NON-CURRENT ASSETS</u></b>			
Property, Plant and Equipment	4	61,481	96,801
<b><u>CURRENT ASSETS</u></b>			
Fees receivable		7,650	11,845
Other receivables	5	71,171	65,346
Fixed deposits with financial institution	6,7	2,077,080	2,068,692
Cash and bank balances	7	1,678,040	1,538,423
		<b>3,833,941</b>	<b>3,684,306</b>
<b><u>CURRENT LIABILITIES</u></b>			
Other payables	8	820,828	614,066
Advance practising certificate fees received		1,172,092	1,176,868
		<b><u>1,992,920</u></b>	<b><u>1,790,934</u></b>
<b><u>NET CURRENT ASSETS</u></b>		<b><u>1,841,021</u></b>	<b><u>1,893,372</u></b>
<b><u>TOTAL NET ASSETS</u></b>		<b><u>1,902,502</u></b>	<b><u>1,990,173</u></b>

The accompanying notes form an integral part of these financial statements.



# STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 31 MARCH 2015

	<u>Note</u>	<u>2015 S\$</u>	<u>2014 S\$</u>
Revenue	9	2,396,909	2,094,886
Other Income	10	<u>11,049</u>	<u>16,524</u>
		<b>2,407,958</b>	<b>2,111,410</b>
<b>Less:</b>			
Interboard charges	11	1,338,969	1,204,318
Depreciation expenses	4	35,320	40,361
General and administration expenses	12	<u>1,121,340</u>	<u>995,340</u>
		<b>2,495,629</b>	<b>2,240,019</b>
Deficit before contribution to consolidated fund		(87,671)	(128,609)
Contribution to consolidated fund		<u>-</u>	<u>-</u>
<b>Total comprehensive loss for the year</b>		<b><u>(87,671)</u></b>	<b><u>(128,609)</u></b>

The accompanying notes form an integral part of these financial statements.

**STATEMENT OF CHANGES IN ACCUMULATED SURPLUS**  
**FOR THE YEAR ENDED 31 MARCH 2015**

	<b>Accumulated surplus \$</b>
	<hr/>
Balance as at 1 April 2013	2,118,782
Total comprehensive loss for the year	<hr/> (128,609)
Balance as at 31 March 2014	1,990,173
Total comprehensive loss for the year	<hr/> (87,671)
<b>Balance as at 31 March 2015</b>	<b><u><u>1,902,502</u></u></b>

The accompanying notes form an integral part of these financial statements.

# STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 MARCH 2015

	Note	2015 S\$	2014 S\$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
Deficit before contribution to consolidated fund		(87,671)	(128,609)
<b>Adjustments for:</b>			
Depreciation on property, plant and equipment	4	35,320	40,361
Interest income		(8,899)	(8,147)
<b>Operating surplus before working capital changes</b>		(61,250)	(96,395)
<b>Changes in operating assets and liabilities:</b>			
(Increase)/Decrease in receivables		(1,630)	79
Increase in payables		206,762	120,536
(Decrease)/Increase in advance practising certificate fees received		(4,776)	45,927
Cash flows from operations		139,106	70,147
Interest received		8,899	8,147
<b>Net cash flows from operating activities</b>		148,005	78,294
<b>Net increase in cash and cash equivalents</b>		148,005	78,294
<b>Cash and cash equivalents at beginning of the year</b>		3,607,115	3,528,821
<b>Cash and cash equivalents at end of the year</b>	7	3,755,120	3,607,115

The accompanying notes form an integral part of these financial statements.

## **NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED TO 31 MARCH 2015**

### **1. GENERAL INFORMATION**

The Singapore Nursing Board (the "Board") is domiciled and set up in the Republic of Singapore under the Nurses and Midwives Act (Chapter 209). Its registered address is located at 16 College Road, #01-01 College of Medicine Building, Singapore 169854 and its operation office is located at 81 Kim Keat Road, #08-00, Singapore 328836.

The principal activities of the Board are as listed in Section 8 of The Nurses and Midwives Act (Chapter 209).

### **2. SIGNIFICANT ACCOUNTING POLICIES**

#### **2.1 Basis of Preparation**

The financial statements have been prepared in accordance with Statutory Board Financial Reporting Standards (SB-FRS). The financial statements have been prepared on the historical cost basis except as disclosed in the accounting policies below.

The financial statements are presented in Singapore Dollars (SGD or S\$) and all values are rounded to the nearest one dollar.

#### **2.2 Changes in accounting policies**

The accounting policies adopted are consistent with those of the previous financial year except in the current financial year, the Board has adopted all the new and revised standards which are relevant to the Board and are effective from the date stated in the relevant SB-FRSs. The adoption of these standards does not have any material effect on the financial statements.

There are a number of new standards, amendments to the standards and interpretations which are issued but are not effective yet. These have not been applied in the preparation of these financial statements. The Board does not plan to adopt these standards early.

The Board expects that the adoption of the other standards and interpretations will have no material impact on the financial statements in the period of initial application.

## **2      SIGNIFICANT ACCOUNTING POLICIES (CONT'D)**

### **2.3    Property, Plant and Equipment**

All items of property, plant and equipment are initially recorded at cost. The cost of an item of property, plant and equipment is recognised as an asset if, and only if, it is probable that future economic benefits associated with the item will flow to the Board and the cost of the item can be measured reliably.

Property, plant and equipment are stated at cost less accumulated depreciation and impairment loss, if any.

Depreciation is calculated on the straight line basis so as to write off the cost, less the residual value, of the assets over their estimated useful lives. The estimated useful lives are as follows:

Furniture, fixtures and fitting	8 years
Office equipment	5 years
Computer systems	3 years
Computer and communication systems	5 years

Fully depreciated assets are retained in the financial statements until they are no longer in use.

The residual values, useful lives and depreciation methods of property, plant and equipment are reviewed at each financial year-end. The effect of any revision is recognized in profit and loss when the change arises.

An item of property, plant and equipment is derecognized upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on derecognition of the assets is included in profit or loss in the year the asset is derecognized.

### **2. 4    Receivables**

Receivables are initially recognised at fair value and subsequently measured at amortised cost using the effective interest method, less allowance for impairment. Short-term receivables are not discounted.

The Board assesses at each reporting date whether there is any objective evidence that financial asset is impaired.

When there is objective evidence that the Board will not be able to collect all amounts due according to the original terms of the receivables, an impairment loss is recognised. The amount of the impairment loss is measured as the difference between the carrying value of the receivable and the present value of the estimated future cash flows discounted at the original effective interest rate. The carrying value of the receivable is reduced through the use of an allowance account. The amount of the loss is recognised in profit or loss.

## **2      SIGNIFICANT ACCOUNTING POLICIES (CONT'D)**

### **2. 4      Receivables (Cont'd)**

When the receivable becomes uncollectible, the carrying value of the impaired receivable is reduced directly or if an amount was charged to the allowance account, the amount charged to the allowance account are written off against the carrying value of the receivable.

If in a subsequent period, the amount of the impairment loss decreases and the decrease can be related objectively to an event occurring after the impairment was recognised, the previously recognised impairment loss shall be reversed to the extent that the carrying value of the asset does not exceed its amortised cost at the reversal date. The amount of reversal is recognized in the profit and loss.

### **2. 5      Cash and Cash Equivalents**

Cash and cash equivalents comprise cash on hand, cash at bank and short-term highly liquid investments that are readily convertible to known amounts of cash and which are subject to insignificant risks of changes in value.

### **2. 6      Other Payables**

Payables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest method. Short-term payables are not discounted.

### **2. 7      Income Tax**

The income of the Board is exempted from income tax under Section 13(1)(e) of the Singapore Income Tax Act.

### **2. 8      Revenue Recognition**

Revenue is recognized to the extent that it is probable that the economic benefit will flow to the Board and the revenue can be reliably measured. The following specific revenue recognition criteria must also be met before revenue is recognized:

#### **Rendering of Service**

Revenue from practising fees, which is levied yearly on nurses and midwives, is recognised in the financial statements on accrual basis. Other types of income are recognised on cash basis.

## **2      SIGNIFICANT ACCOUNTING POLICIES (CONT'D)**

### **Interest Income**

Interest income is accrued on a time basis, by reference to the principal outstanding and at the effective interest rate applicable.

## **2. 9    Employee Benefits**

### **Defined Contribution Plans**

The Board makes contributions to the state provident fund (Central Provident Fund). Such contributions are recognised as compensation expenses in the same period as the employment that gave rise to the contributions.

### **Short-term Compensated Absences**

Employee entitlements to annual leave are recognized when they accrue to employees. A provision is made for the estimated liability for employee entitlements to annual leave as a result of services rendered by employees up to the balance sheet date.

## **2. 10   Impairment of Non-Financial Assets**

The carrying amounts of the Board's non-financial assets subject to impairment are reviewed at each reporting date to determine whether there is any indication of impairment. If such indication exists, the asset's recoverable amount is estimated. An impairment loss is recognised whenever the carrying amount of an asset exceeds its recoverable amount. The recoverable amount is the higher of the asset's fair value less cost to sell and its value in use. The value in use is the present value of estimated future cash flows expected to be generated from the continuing use of the asset and from its disposal at the end of its useful life.

An impairment loss on a non-revalued asset is recognised in profit or loss. An impairment loss on revalued asset is recognised in other comprehensive income to the extent that the impairment loss does not exceed the amount in the previous revaluation. An impairment loss is reversed if there has been a change in the estimates used to determine the recoverable amount or when there is an indication that the impairment loss recognised for the asset no longer exists or decreases. An impairment loss is reversed only to the extent that the asset's carrying amount does not exceed the carrying amount that would have been determined if no impairment loss had been recognised.

## **2. 11   Provisions**

Provisions are recognised when the Board has a present legal or constructive obligation, where as a result of past events, it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation, and a reliable estimate of the amount of obligation can be made.

## **2      SIGNIFICANT ACCOUNTING POLICIES (CONT'D)**

### **2. 12   Operating Leases**

Leases whereby the lessor effectively retains substantially all the risks and benefits of ownership of the leased item are classified as operating leases. Operating leases payments are recognised as an expense in the statement of comprehensive income on a straight line basis over the lease term.

## **3.      SIGNIFICANT ACCOUNTING JUDGEMENTS AND ESTIMATES**

The preparation of the financial statements in conformity with SB-FRSs requires management to exercise judgements and requires the use of estimates and assumptions. These judgements affect the application of Board's accounting policies. The use of estimates and assumptions affect the reported amounts of assets, liabilities, income and expenses and disclosures made. They are assessed on an on-going basis and are based on experience and other relevant factors, including expectations of future events that are believed to be reasonable under the circumstances.

### **3.1      Key Sources of Estimation Uncertainty**

The key assumptions concerning the future and other key sources of estimation uncertainty at the reporting date, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

#### **Impairment of non-financial assets**

The Board assesses whether there are any indicators of impairment for all non-financial assets at each reporting date. Other non-financial assets are tested for impairment when there are indicators that the carrying amounts may not be recoverable.

When value in use calculations are undertaken, management must estimate the expected future cash flows from the asset or cash-generating unit and choose a suitable discount rate in order to calculate the present value of those cash flows.

#### **Impairment of receivables**

The Board assesses at each reporting date whether there is any objective evidence that a financial asset is impaired. To determine whether there is objective evidence of impairment, the Board considers factors such as the probability of insolvency or significant financial difficulties of the debtor and default or significant delay in payments.

Where there is objective evidence of impairment, the amount and timing of future cash flows are estimated based on historical loss experience for assets with similar credit risk characteristics.



#### 4. PROPERTY, PLANT AND EQUIPMENT

	Furniture, Fixtures and Fitting	Office Equipment	Computer Systems	Computer and Communication Systems	Total
	S\$	S\$	S\$	S\$	S\$
<b>Cost</b>					
At 1 April 2013	220,967	6,569	45,568	53,526	326,630
Additions	-	-	-	-	-
At 31 March 2014	220,967	6,569	45,568	53,526	326,630
Additions	-	-	-	-	-
At 31 March 2015	220,967	6,569	45,568	53,526	326,630
<b>Accumulated Depreciation</b>					
At 1 April 2013	105,573	6,049	43,839	34,007	189,468
Charge for the year	27,482	445	1,729	10,705	40,361
At 31 March 2014	133,055	6,494	45,568	44,712	229,829
Charge for the year	27,482	75	-	7,763	35,320
At 31 March 2015	160,537	6,569	45,568	52,475	265,149
<b>Carrying amount</b>					
At 31 March 2015	60,430	-	-	1,051	61,481
At 31 March 2014	87,912	75	-	8,814	96,801

#### 5. OTHER RECEIVABLE

	2015 S\$	2014 S\$
Deposit	37,390	37,390
Interest receivable	5,609	5,098
Prepayments	4,005	9,274
Sundry receivables	24,167	13,584
	<u>71,171</u>	<u>65,346</u>

Receivables are unsecured, non-interest bearing and are normally settled within 30 days or on demand.

Sundry receivables represent IT service charges shared with Singapore Pharmacy Council, Singapore Dental Council, Traditional Chinese Medicine Practitioners Board, and Singapore Medical Council.

#### 6. FIXED DEPOSITS WITH FINANCIAL INSTITUTIONS

All fixed deposits mature within one year and earn interest at rates ranging from 0.4200% to 0.4900% (2014: 0.3900% to 0.4200%) per annum.

**7. CASH AND CASH EQUIVALENTS**

	<b>2015 S\$</b>	<b>2014 S\$</b>
Fixed deposits (Note 6)	2,077,080	2,068,692
Cash and bank balances	1,678,040	1,538,423
	<u>3,755,120</u>	<u>3,607,115</u>

**8. OTHER PAYABLES**

	<b>2015 S\$</b>	<b>2014 S\$</b>
Allowance for unutilised leave	9,587	17,954
Sundry payables	625,579	516,334
Accruals	185,662	79,778
	<u>820,828</u>	<u>614,066</u>

Payables are unsecured, non-interest bearing and are normally settled within 30 days or on demand.

Included under sundry payables are unpaid staff costs and performance bonus recharged by Singapore Medical Council as of 31 March 2015 amounting to S\$463,653 (2014: S\$193,231). Staff costs and performance bonus incurred for the year are reported under inter-board charges in the statement of comprehensive income.

**9. REVENUE**

	<b>2015 S\$</b>	<b>2014 S\$</b>
Practising certificate fees	1,691,241	1,607,479
Application fees	279,040	170,440
Service charges	189,208	112,572
Registration fees	106,300	99,655
Enrolment income	48,010	35,000
Late payment fees	44,860	37,910
Replacement charges	37,750	31,650
Re-registration fees	500	180
	<u>2,396,909</u>	<u>2,094,886</u>

**10. OTHER INCOME**

	<b>2015 S\$</b>	<b>2014 S\$</b>
Interest on fixed deposit	8,899	8,147
Speaker fee	1,400	1,000
Others	750	7,377
	<u>11,049</u>	<u>16,524</u>

**11. INTERBOARD CHARGES**

	<b>2015 S\$</b>	<b>2014 S\$</b>
Staff cost	1,275,201	1,133,679
HR and registry costs	26,598	26,586
Medical expense	106	3,979
Temporary staff	45,431	25,494
Allowance for unutilised leave	(8,367)	14,580
	<u>1,338,969</u>	<u>1,204,318</u>

On 1 April 2011, the function of Finance, Information Technology and Human Resource of Singapore Nursing Board, Singapore Dental Council, Singapore Pharmacy Council, Singapore Medical Council (SMC) and Traditional Chinese Medicine Practitioners Board were amalgamated with a shared support service team managed by SMC. SMC recharged to the Board on a monthly basis the share service for Human Resource at a monthly cost of S\$2,040 (2014: S\$2,040) and dispatch services at monthly costs of S\$173 (2014: S\$173). These charges are subject to review on a yearly basis.

**12. GENERAL AND ADMINISTRATION EXPENSES**

Included in the general and administration expenses are the following significant expenses:

	<b>2015 S\$</b>	<b>2014 S\$</b>
Seconded staff costs	392,428	365,902
Office rental	209,301	160,350
Computer operations	193,971	170,411
Legal fees	<u>178,832</u>	<u>134,195</u>

### 13. **OPERATING LEASE EXPENSES AND COMMITMENTS**

- (a) Operating lease expenses incurred during the year amounted to \$209,301 (2014: \$160,350).
- (b) As at the financial position date, the Board has the following commitments under cancellable operating leases where the Board is the lessee:

	<b>2015</b> <b>S\$</b>	<b>2014</b> <b>S\$</b>
Payable within 1 year	160,029	160,029
Payable after 1 year but not later than 5 years	106,686	13,336
	<u>266,715</u>	<u>173,365</u>

The above operating lease commitments are based on known rates as at the date of this report and do not include any revision in rates which may be determined by the lessor.

### 14. **FINANCIAL RISK MANAGEMENT**

The Board is exposed to minimal financial risks arising from its operations and the use of financial instruments. The key financial risks are credit risk, liquidity risk and interest rate risk. Management reviews and agrees on policies for managing each of these risks and they are summarised below:

#### **Credit risk**

Credit risk is the potential risk of financial loss resulting from the failure of counterparties to settle their financial and contractual obligations to the Board when they fall due. The Board's exposure to credit risk arises primarily from its financial assets which consist of cash and cash equivalents and fees receivable.

Management regularly monitors the Board's exposure to credit risks on an ongoing basis. The Board minimizes credit risks by dealing exclusively with counter party which high credit ratings. Cash and cash equivalents are placed with a financial institution which are regulated and with good credit ratings.

As at the reporting date, there was no significant concentration of credit risk. The maximum exposure to credit risk is represented by the carrying amount of each financial asset in the statement of financial position.

There are no financial assets that are past due or impaired as at the statement of financial position date.

#### **14. FINANCIAL RISK MANAGEMENT(CONT'D)**

##### **Liquidity risk**

Liquidity risk is the risk that the Board will encounter difficulty in meeting financial obligations as they fall due.

The Board monitors its liquidity risk and maintains a level of cash and cash equivalents deemed adequate to finance the Board's operations and to mitigate the effects of fluctuations in cash flows.

All of the financial liabilities of the Board are either payable on demand or mature within one year from the statement of financial position date.

##### **Interest rate risk**

Interest rate risk is the risk that the fair value or future cash flows of the Board's financial instruments will fluctuate because of the changes in market interest rates. The Board's exposure to interest rate risk arises primarily from fixed deposits placed with a financial institution.

The Board manages its interest rates risks by placing such fixed deposits over different maturity periods with optimal rates of return.

#### **15. FAIR VALUE OF FINANCIAL ASSETS AND LIABILITIES**

The fair value of a financial instrument is the amount at which the instrument could be exchanged or settled between knowledgeable and willing parties in an arm's length transaction, other than in a forced or liquidation sale.

The following methods and assumptions are used to estimate the fair value of each class of financial instruments for which it is practicable to estimate that value.

*Cash and cash equivalents, receivables and payables.*

The carrying amounts of these balances approximate their fair values due to the short-term nature of these balances.

**16. CLASSIFICATION OF FINANCIAL INSTRUMENTS**

<b><u>2015</u></b>	<b>Loans and receivables S\$</b>	<b>Financial liabilities at amortised cost S\$</b>	<b>Total S\$</b>
<b>Assets</b>			
Fees receivable	7,650	-	7,650
Other receivables	67,166	-	67,166
Fixed deposits with financial institution	2,077,080	-	2,077,080
Cash and bank balances	1,678,040	-	1,678,040
Total	<u>3,829,936</u>	<u>-</u>	<u>3,829,936</u>
<b>Liabilities</b>			
Other payables	-	820,828	820,828
Total	<u>-</u>	<u>820,828</u>	<u>820,828</u>

<b><u>2014</u></b>	<b>Loans and receivables S\$</b>	<b>Financial liabilities at amortised cost S\$</b>	<b>Total S\$</b>
<b>Assets</b>			
Fees receivable	11,845	-	11,845
Other receivables	56,072	-	56,072
Fixed deposits with financial institution	2,068,692	-	2,068,692
Cash and bank balances	1,538,423	-	1,538,423
Total	<u>3,675,032</u>	<u>-</u>	<u>3,675,032</u>
<b>Liabilities</b>			
Other payables	-	614,066	614,066
Total	<u>-</u>	<u>614,066</u>	<u>614,066</u>

**17. RESERVE MANAGEMENT**

The primary objective in the management of the Board's reserve is to ensure that it maintains a strong and healthy accumulated surplus so as to enable and support the Board in carrying out its statutory duties under the Nurses and Midwives Act.

The Board monitors its cash flow and overall liquidity position on a continuous basis, taking into consideration the prevailing and projected operating income and expenditure, and other financial obligations, including projected capital expenditure.

The Board is not subject to externally imposed reserve requirements and there were no changes to the Board's approach to reserve management during the year.

**18. AUTHORISATION OF FINANCIAL STATEMENTS**

The financial statements of the Board for the year ended 31 March 2015 were authorized for issue in accordance with a Board member's resolution dated 22 July 2015.

## **SELECTED CHARACTERISTICS OF NURSES AND MIDWIVES**



**FIGURE A: SELECTED CHARACTERISTICS OF REGISTERED NURSES**

		2012	2013	2014
	<b>TOTAL</b>	<b>25971</b>	<b>27556</b>	<b>28864</b>
<b>SEX</b>				
	Male	2292	2547	2748
	Female	23679	25009	26116
<b>ETHNIC GROUP</b>				
	Chinese	14284	14926	15493
	Malay	2921	3156	3366
	Indian	2979	3213	3368
	Others	5787	6261	6637
<b>ACTIVITY STATUS</b>				
	Working Full-time	21382	22528	23628
	Working Part-time	899	926	902
	Not Working/Unknown	2665	3024	3752
	Doing Non-nursing work	1025	1078	582
<b>EMPLOYMENT</b>				
	Public Sector	15916	16738	17667
	Private Sector	6365	6716	6863
<b>CITIZENSHIP</b>				
	Singaporean/Permanent Resident	19912	20565	21168
	Malaysian	1125	1481	1749
	Chinese (PRC)	763	868	908
	Filipino	3108	3406	3713
	Indian	359	415	455
	Myanmar	429	530	589
	Others	275	291	282
<b>MARITAL STATUS</b>				
	Single	14633	16091	15284
	Married	10856	10984	12958
	Others	482	481	622
<b>AGE</b>				
	Median Age (years)	34	33	33
	Average Age (years)	37	37	37
	Under 25 yrs	3848	3865	3722
	25 - 34 yrs	9871	10790	11621
	35 - 44 yrs	5823	6255	6596
	45 - 54 yrs	2897	2939	3169
	55 - 59 yrs	1591	1677	1517
	Above 60 yrs	1941	2030	2239

**FIGURE B: SELECTED CHARACTERISTICS OF ENROLLED NURSES**

		<b>2012</b>	<b>2013</b>	<b>2014</b>
	<b>TOTAL</b>	<b>8274</b>	<b>8273</b>	<b>8528</b>
<b>SEX</b>				
	Male	666	684	743
	Female	7608	7589	7785
<b>ETHNIC GROUP</b>				
	Chinese	2036	1951	1936
	Malay	2041	2169	2135
	Indian	1643	1608	1574
	Others	2554	2545	2883
<b>ACTIVITY STATUS</b>				
	Working Full-time	6799	6716	6862
	Working Part-time	224	222	222
	Not Working/Unknown	999	1075	1315
	Doing Non-nursing work	252	260	129
<b>EMPLOYMENT</b>				
	Public Sector	4995	4890	5006
	Private Sector	2028	2049	2078
<b>CITIZENSHIP</b>				
	Singaporean/Permanent Resident	5223	5277	5197
	Malaysian	42	44	46
	Chinese (PRC)	329	310	328
	Filipino	1579	1620	1963
	Indian	543	472	467
	Myanmar	539	534	515
	Others	19	16	12
<b>MARITAL STATUS</b>				
	Single	5238	5381	5067
	Married	2872	2733	3267
	Others	164	159	194
<b>AGE</b>				
	Median Age (years)	29	29	30
	Average Age (years)	34	34	35
	Under 25 yrs	1679	1638	1477
	25 - 34 yrs	3608	3690	4071
	35 - 44 yrs	1300	1199	1163
	45 - 54 yrs	968	1020	1078
	55 - 59 yrs	281	300	282
	Above 60 yrs	438	426	457

**FIGURE C: SELECTED CHARACTERISTICS OF REGISTERED MIDWIVES  
(SINGLE REGISTER)**

		2012	2013	2014
	<b>TOTAL</b>	<b>262</b>	<b>246</b>	<b>226</b>
<b>SEX</b>				
	Male	-	-	-
	Female	262	246	226
<b>ETHNIC GROUP</b>				
	Chinese	198	183	162
	Malay	22	19	18
	Indian	16	15	16
	Others	26	29	30
<b>ACTIVITY STATUS</b>				
	Working Full-time	127	117	107
	Working Part-time	27	23	25
	Not Working/Unknown	93	90	90
	Doing Non-nursing work	15	16	4
<b>EMPLOYMENT</b>				
	Public Sector	89	79	71
	Private Sector	65	61	61
<b>CITIZENSHIP</b>				
	Singaporean/Permanent Resident	252	231	212
	Malaysian	1	2	2
	Chinese (PRC)	0	0	0
	Filipino	4	4	4
	Indian	0	0	0
	Myanmar	0	0	0
	Others	5	9	8
<b>MARITAL STATUS</b>				
	Single	45	44	41
	Married	202	188	173
	Others	15	14	12
<b>AGE</b>				
	Median Age (years)	61	61	65
	Average Age (years)	60	60	64
	Under 25 yrs	0	0	0
	25 - 34 yrs	7	7	5
	35 - 44 yrs	15	13	16
	45 - 54 yrs	4	8	6
	55 - 59 yrs	59	45	28
	Above 60 yrs	177	173	171

\* Please note that the number of Registered Midwives refers to those who are not concurrently registered in another Register/Roll of Nurses.

**FIGURE D: SELECTED CHARACTERISTICS OF REGISTERED MIDWIVES**

		2012	2013	2014
	<b>TOTAL</b>	<b>1507</b>	<b>1385</b>	<b>1337</b>
<b>SEX</b>				
	Male	-	-	-
	Female	1507	1385	1337
<b>ETHNIC GROUP</b>				
	Chinese	1212	1100	1051
	Malay	125	121	118
	Indian	117	107	109
	Others	53	57	59
<b>ACTIVITY STATUS</b>				
	Working Full-time	895	833	800
	Working Part-time	177	148	158
	Not Working/Unknown	354	335	355
	Doing Non-nursing work	81	69	24
<b>EMPLOYMENT</b>				
	Public Sector	626	592	572
	Private Sector	445	394	386
<b>CITIZENSHIP</b>				
	Singaporean/Permanent Resident	1476	1353	1307
	Malaysian	18	14	12
	Chinese (PRC)	1	1	1
	Filipino	6	7	7
	Indian	0	0	0
	Myanmar	0	0	0
	Others	6	10	10
<b>MARITAL STATUS</b>				
	Single	368	343	319
	Married	1067	976	936
	Others	72	66	82
<b>AGE</b>				
	Median Age (years)	61	61	62
	Average Age (years)	60	59	60
	Under 25 yrs	1	0	0
	25 - 34 yrs	57	63	49
	35 - 44 yrs	83	86	92
	45 - 54 yrs	156	131	130
	55 - 59 yrs	366	331	261
	60 Yrs and Above	844	774	805

**FIGURE E: SELECTED CHARACTERISTICS OF REGISTERED NURSES  
(PSYCHIATRIC)**

		2012	2013	2014
	<b>TOTAL</b>	<b>559</b>	<b>572</b>	<b>640</b>
<b>SEX</b>				
	Male	233	242	265
	Female	326	330	375
<b>ETHNIC GROUP</b>				
	Chinese	341	345	363
	Malay	79	83	101
	Indian	80	79	89
	Others	59	65	87
<b>ACTIVITY STATUS</b>				
	Working Full-time	472	472	537
	Working Part-time	24	23	23
	Not Working/Unknown	48	58	72
	Doing Non-nursing work	15	19	8
<b>EMPLOYMENT</b>				
	Public Sector	429	424	480
	Private Sector	67	72	80
<b>CITIZENSHIP</b>				
	Singaporean/Permanent Resident	551	564	634
	Malaysian	1	1	0
	Chinese (PRC)	1	1	1
	Filipino	1	1	1
	Indian	0	0	0
	Myanmar	0	0	0
	Others	5	5	4
<b>MARITAL STATUS</b>				
	Single	161	167	170
	Married	378	386	443
	Others	20	19	27
<b>AGE</b>				
	Median Age (years)	52	52	49
	Average Age (years)	49	49	48
	Under 25 yrs	3	2	4
	25 - 34 yrs	110	113	135
	35 - 44 yrs	96	107	149
	45 - 54 yrs	100	95	94
	55 - 59 yrs	91	81	77
	60 yrs and Above	159	174	181

**FIGURE F: SELECTED CHARACTERISTICS OF ADVANCED PRACTICE NURSES**

		2012	2013	2014
<b>SEX</b>	<b>TOTAL</b>	<b>88</b>	<b>117</b>	<b>145</b>
	Male	9	11	12
	Female	79	106	133
<b>ETHNIC GROUP</b>				
	Chinese	74	100	126
	Malay	5	6	6
	Indian	6	6	8
	Others	3	5	5
<b>ACTIVITY STATUS</b>				
	Working Full-time	85	97	142
	Working Part-time	2	4	3
	Not Working/Unknown	1	2	0
	Doing Non-nursing work	0	0	0
<b>EMPLOYMENT</b>				
	Public Sector	82	110	137
	Private Sector	5	5	8
<b>CITIZENSHIP</b>				
	Singaporean/Permanent Resident	87	113	141
	Others	1	4	4
<b>MARITAL STATUS</b>				
	Single	41	48	56
	Married	45	66	85
	Others	2	3	4
<b>AGE</b>				
	Median Age (years)	39	41	40
	Average Age (years)	40	41	41
	Under 25 yrs	0	0	0
	25 - 34 yrs	20	15	23
	35 - 44 yrs	46	66	82
	45 - 54 yrs	19	29	33
	55 - 59 yrs	3	6	6
	Above 60 yrs	0	1	1