



Singapore Nursing Board

ANNUAL REPORT

2015

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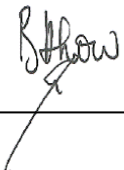
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In the opinion of the Board, the annual report of the SINGAPORE NURSING BOARD are drawn up so as to present fairly the state of affairs of the SINGAPORE NURSING BOARD as at 31 March 2016.

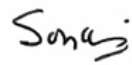
On behalf of the Board,



Ms Low Beng Hoi

Chairman

August 2016



Ms Tan Soh Chin

Registrar

August 2016

ORGANISATIONAL DETAILS

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



SINGAPORE NURSING BOARD

VISION

World-Class Nursing for a Healthy Nation

MISSION

To uphold professional nursing standards and honour public trust

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FOREWORD



Welcome to Singapore Nursing Board's (SNB) Report for 2015.

The total number of nurses and midwives on SNB's Register and Roll continue in an upward trend, with a total of 39,005 as of December 2015. The rate of increment averages at 4% over the past 3 years (2013 to 2015). The highest increment was seen on the register of nurses (single register) that saw a 3.5% increase in new registrations.

SNB has consolidated all its standards and guidelines in one location on its website "Nursing Standards and Guidelines" on the left hand side of SNB's homepage. This allows nurses & midwives to locate and retrieve all current and new regulatory guidelines for nursing.

In 2015, SNB introduced the "Scope of Professional Nursing Practice with Glossary" and "Guidelines for Agency Nurses/ Midwives and Agencies engaging them".

Finally, I'm pleased to announce that SNB's Professional Registration System (PRS) has been stable and running smoothly and that the majority of nurses are familiar with the on-line system and its functionalities.

Ms Low Beng Hoi
Chairman

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BOARD MEMBERS

APPOINTED TILL 30 APRIL 2018

Position	Name	Designation
Chairman	Ms Low Beng Hoi	Chief Nurse Khoo Teck Puat Hospital
Registrar	Ms Tan Soh Chin	Chief Nursing Officer Ministry of Health
Ex-officio Members	Dr Jeffery Lawrence Cutter	Director Communicable Diseases Division Ministry of Health
	Mr Ling Khoon Chow	Principal Bendemeer Secondary School
Members	Mr Ang David Chee Chim	Advisor Human Capital Singapore
	Dr Ayre Tracy Carol	Chief Nurse Singapore General Hospital Group Chief Nursing Singapore Health Services
	Dr Choo Li Nah	Group Director, Communications & Corporate Relations Department Agri-Food & Veterinary Authority of Singapore
	Ms Karen Koh Wei Lin	Advanced Practice Nurse Assistant Director Nursing National University Hospital
	Ms Koh Paulin	Chief Nurse Changi General Hospital
	Dr Ma Lina Yee Sheung	Deputy Executive Director Lions Home for the Elders
	Ms Koh Sioh Eng	Deputy Director Nursing Institute of Mental Health
	Ms Kok Kum Yoke	Director of Nursing Thomson Medical Centre
	Dr Janet Choo Kim Lan	Director Case Management Changi General Hospital
	Mr Tay Wei Sern	Deputy Director (Health Sciences) School of Applied & Health Sciences ITE College East
	Ms Tan Hwee Ngan	Director School of Health Sciences (Nursing) Nanyang Polytechnic
	Ms Nirmala Bte Karmaroon	Deputy Director (Nursing) Tan Tock Seng Hospital

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Position	Name	Designation
Members	Dr Pauline Tan	Chief Executive Officer Yishun Community Hospital (Appointed till 30 April 2016)
	Associate Prof Ho Wai Loon Calvin	Assistant Professor Centre for Biomedical Ethics, Yong Loo Lin School of Medicine, National University of Singapore (Appointed from 1 May 2016)

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KEY MANAGEMENT PERSONNEL

Designation	Name
Registrar	Ms Tan Soh Chin
Executive Secretary	Mdm Kwek Puay Ee
Assistant Executive Secretary	Ms Ow Jee Hia

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KEY HIGHLIGHTS

Scope of Professional Nursing Practice

Singapore Nursing Board introduced the Professional Scope of Practice for the Registered Nurse (RN), Enrolled Nurse (EN) and Midwives (MW) statements with glossary in 2015. The Scope of Practice statements were formulated with the help of a workgroup and in consultation with nurse leaders and nurses in practice. The purpose of the statements is to assist nurses and midwives in decision making with regards to their scope of practice.

Board staff facilitated a total of 18 roadshows on the scope of practice statements for nurses and midwives across all settings, from acute care to home care. The roadshows took place from April to June 2015 at various venues and saw a total of 1500 attendees.

Enhanced Advanced Practice Nurse (APN) Certification Process

In 2014, a new APN internship framework was introduced to ensure that all APN interns achieve the same entry level competencies prior to certification. In this new competency based clinical training, interns will be guided, assessed using workplace based tools and monitored for their progress against a prescribed set of core competencies or developmental milestones. At the end of the internship, they sit for an Objective Structured Clinical Examination (OSCE) which they are examined on their readiness to perform the APN scope of practice. The first batch of interns sat for their OSCE in October 2015.

Guidelines for Agency Nurses/Midwives and Agencies engaging them

In April 2015 Singapore Nursing Board introduced guidelines for Agency nurses and midwives and the private nursing agencies themselves. The guidelines define who Agency nurses/midwives are; the criteria for practice as agency nurses/midwives; standards of care expected of them; training and professional development requirements and finally the liability for disciplinary action when regulatory standards and guidelines are not complied with.

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REGISTRATION

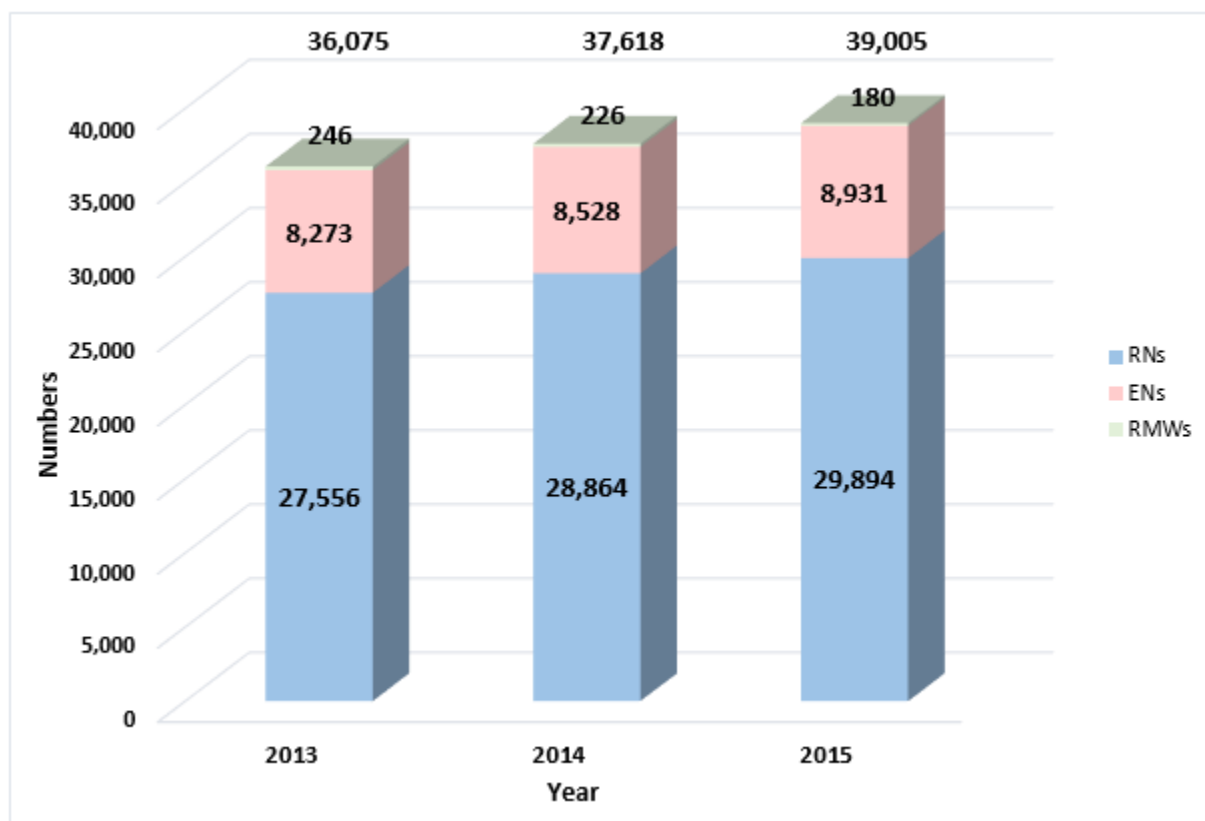
I) Total Number of Nurses and Registered Midwives

By the end of 2015, there were a total of 39,005 Nurses and Registered Midwives on the Register and Roll. These numbers increased by 3.7% over the preceding year.

Of the 39,005 Nurses and Registered Midwives, 29,894 were Registered Nurses (RNs), 8,931 were Enrolled Nurses (ENs) and 180* 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 40 to 43.

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).

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II) New Registrations/Enrolments

In 2015, a total of 4,262 new nurses/midwives were registered/enrolled

Table 1: Number of New Registrations/Enrolments for 2015

	Local*	Foreign	Total
Registered Nurse	723	1,869	2,592
Enrolled Nurse	220	1,431	1,651
Registered Midwife	18	1	19
Total	961	3,301	4,262

* Singaporeans and PRs

III) Number of Registered Midwives

In 2015, there were a total of 1,149 midwives on the register of midwives (RMWs). A total of 180 RMWs were registered as RMWs only (Single Register), with the remaining 969 RMWs concurrently registered on at least one other register. To streamline the reporting of statistics, the 969 RMWs were counted as nurses instead (as reported in section (I)).

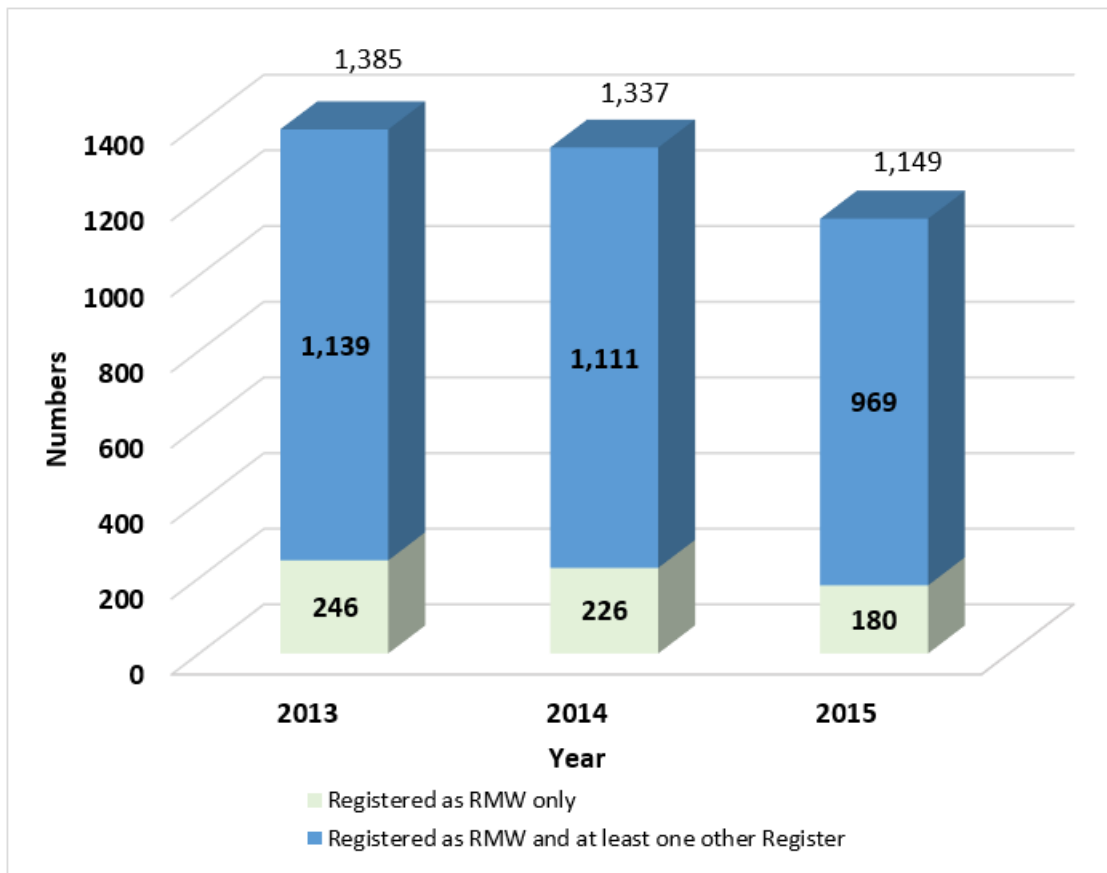
When RMWs were concurrently registered as RNs (for example), it means that they can practise in both the scope of RN and RMW.

Selected characteristics of all 969 RMWs are available at Figure (D) on page 42.

Table 2: Number of Registered Midwives

	2013	2014	2015
Registered as RMW only	246	226	180
Registered as RMW and at least one other Register	1,139	1,111	969
Total Number of RMWs	1,385	1,337	1,149

Chart 2: Total Number of Registered Midwives



IV) Number of Registered Nurse (Psychiatric)

In 2015, there were a total of 639 on the psychiatric part of the register of Registered Nurses (RNP). A total of 20 RNPs were registered as RNPs only with the remaining 619 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.

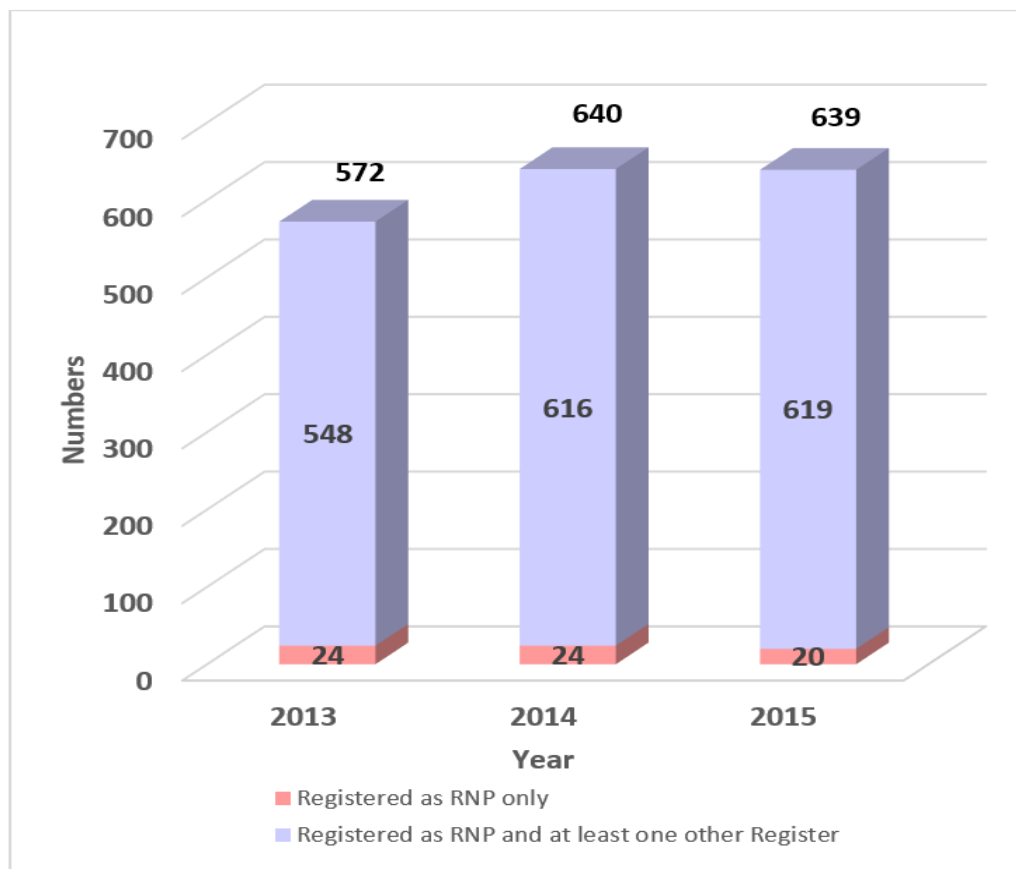
Selected characteristics of all 639 RNPs are available at Figure (E) on page 44.

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Table 3: Number of Registered Nurse (Psychiatric)

	2013	2014	2015
Registered as RNP only	24	24	20
Registered as RNP and at least one other Register	548	616	619
Total Number of RNP	572	640	639

Chart 3: Total Number of Registered Nurse (Psychiatric)



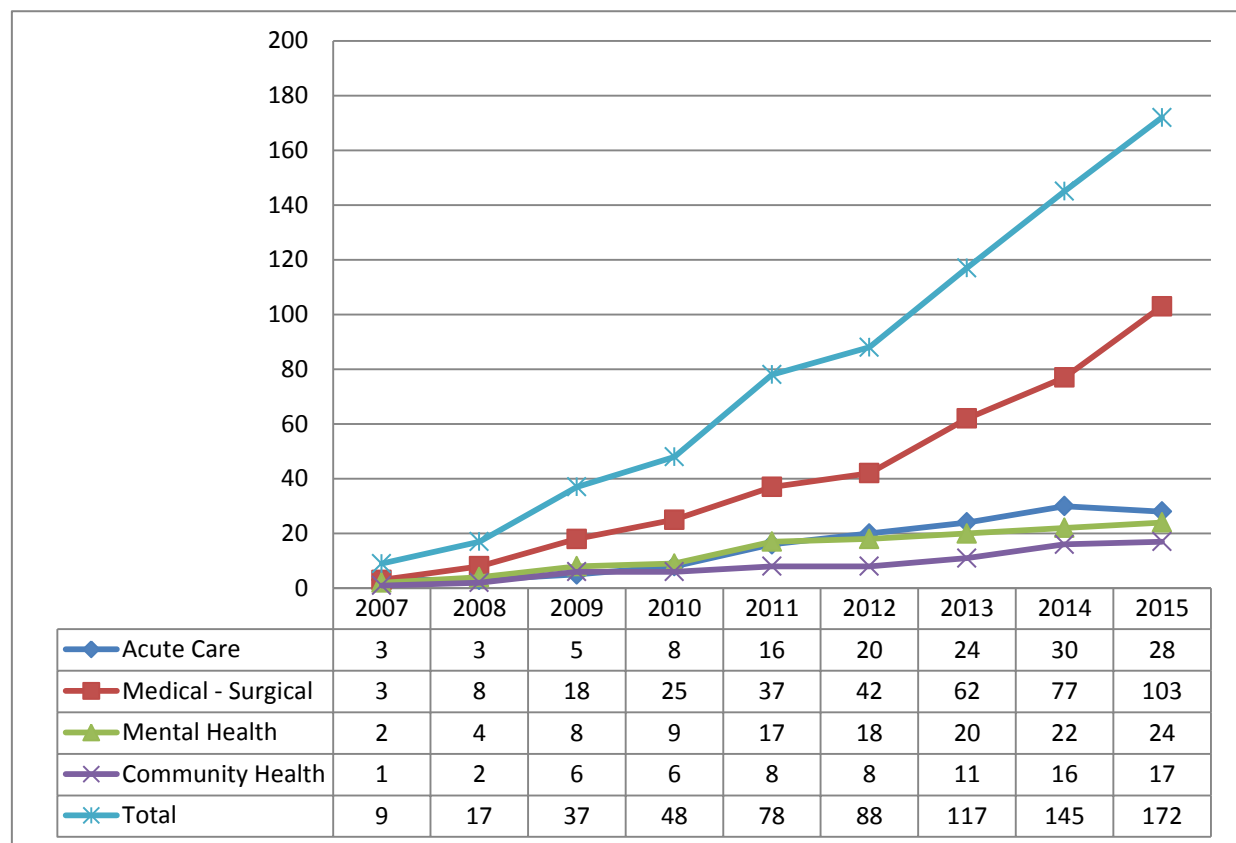
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ADVANCED PRACTICE NURSE (APN) CERTIFICATION

With 27 additional APNs certified in 2015, there were 172 fully certified APNs under the 4 Specialised Branches of Nursing namely Acute Care, Community, Medical/Surgical and Mental Health. We have 7 newly certified APNs working with paediatric population and are certified under Medical/Surgical.

Selected characteristics of all 172 APNs are available at Figure (F) on page 45.

Chart 4: Total Number of APNs

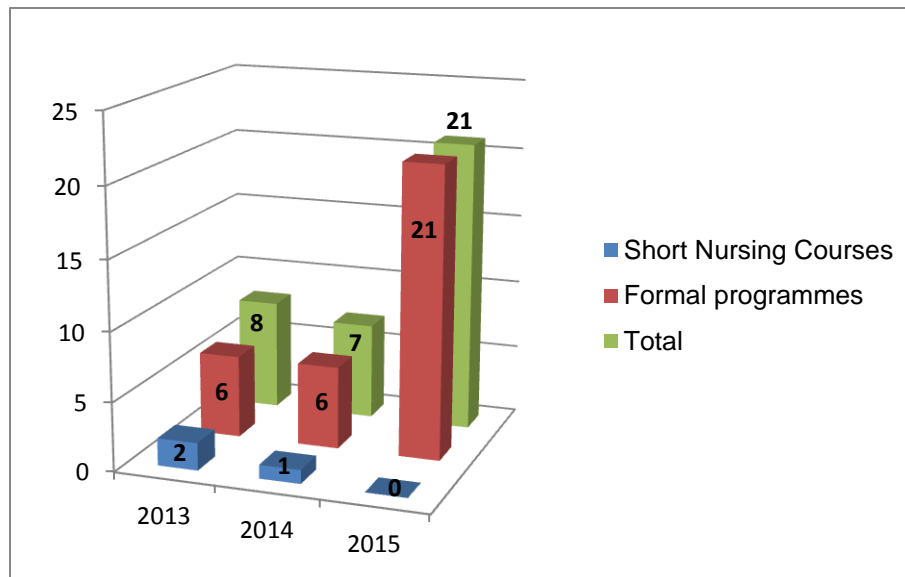


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EDUCATION

A total of 21 programmes were accredited in 2015.

Accreditation & re-accreditation of nursing programmes



	2013	2014	2015
Short Nursing Courses	2	1	0
Formal programmes	6	6	21
Total	8	7	21

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 2015, a total of 15 clinical areas were re-accredited and 2 new clinical areas accredited for clinical nursing education.

As of December 2015, there are a total of 59 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.

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Programmes Accredited or Re-accredited in 2015

Programme Title		Institution	Period
Pre-enrolment Programme			
1	Bachelor of Science (Nursing)	Alice Lee Centre for Nursing Studies NUS	22 April 2015 to 21 April 2020
2	Bachelor of Science (Nursing) (Hons)	Alice Lee Centre for Nursing Studies NUS	22 April 2015 to 21 April 2020

Programme Title		Institution	Period
Post-registration Programmes (Advanced Diploma and Specialist Diploma)			
1	Advanced Diploma in Nursing (Critical Care)	Nanyang Polytechnic (NYP)	July 2015 to June 2017
2	Advanced Diploma in Nursing (Emergency)	NYP	July 2015 to June 2017
3	Advanced Diploma in Nursing (Mental Health)	NYP	July 2015 to June 2017
4	Advanced Diploma in Nursing (Gerontology)	NYP	July 2015 to June 2017
5	Advanced Diploma in Nursing (Medical-Surgical)	NYP	July 2015 to June 2017
6	Advanced Diploma in Nursing (Midwifery)	NYP	July 2015 to June 2017
7	Advanced Diploma in Nursing (Neuroscience)	NYP	July 2015 to June 2017
8	Advanced Diploma in Nursing (Nephro-Urology)	NYP	July 2015 to June 2017
9	Advanced Diploma in Nursing (Oncology)	NYP	July 2015 to June 2017
10	Advanced Diploma in Nursing (Orthopaedics)	NYP	July 2015 to June 2017
11	Advanced Diploma in Nursing (Paediatrics)	NYP	July 2015 to June 2017
12	Advanced Diploma in Nursing (Perianaesthesia)	NYP	July 2015 to June 2017
13	Advanced Diploma in Nursing (Perioperative)	NYP	July 2015 to June 2017
14	Advanced Diploma in Nursing (Management)	NYP	July 2015 to June 2017
15	Specialist Diploma (Diabetes Management & Education)	NYP	July 2015 to June 2017
16	Advanced Diploma in Critical Care Nursing	Ngee Ann Polytechnic (NP)	Oct 2015 to Sep 2018
17	Advanced Diploma in Perioperative Nursing	NP	Oct 2015 to Sep 2018
18	Advanced Diploma in Chronic Disease Management	NP	Oct 2015 to Sep 2018
19	Specialist Diploma in Palliative Care Nursing	NP	Oct 2015 to Sep 2018

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COMPLAINTS

In 2015, Inquiry was conducted into 10 cases.

Case 1

A Registered Nurse was found to have submitted a forged Medical Certificate on 8 July 2014 to cover her absence from work on 21 and 22 June 2014 and was subsequently dismissed for cause on 30 September 2014. The Board decided to suspend her registration for a period of three months.

Case 2

An Enrolled Nurse from Myanmar acted in professional misconduct by misrepresenting to the Singapore Nursing Board that she held a current nursing license/practising certificate and registration with the Myanmar Nursing and Midwife Council (NNMC) when she did not. The Board decided to suspend her enrolment for a period of 18 months.

Case 3

An Enrolled Nurse acted in misconduct by misrepresenting to the Singapore Nursing Board (SNB) that she held a current nursing license/practising certificate registration with the Myanmar Nursing and Midwife Council when she applied to be an Enrolled Nurse and subsequently gained approval to take for the Registered Nurses Licensure Examination. She gained admission to SNB's register as a Registered Nurse. The Complaints Committee considered all the evidence presented during the hearing and recommended that the nurse's enrolment be cancelled.

Case 4

An Enrolled Nurse acted in misconduct by misrepresenting to the Singapore Nursing Board (SNB) that she had a current nursing license/ practising certificate registration with Myanmar Nurse and Midwife Council when she applied to be on SNB's Roll as an Enrolled Nurse. In fact, she did not hold a valid nursing license/ practising certificate and thereby wrongfully induced the Board to permit her to sit for the Enrolled Nurse's exam and the Board granted her registration as an Enrolled Nurse. The Complaints Committee considered all the evidence presented during the hearing and recommended that the nurse's enrolment be cancelled.

Case 5

An Enrolled Nurse acted in misconduct by misrepresenting to the Board that she had a current nursing license/practising certificate registration with Myanmar Nurse and Midwife Council when she applied to be enrolled with the Board to be a Singapore Enrolled Nurse in 2011 and later to be registered with the Board as a Singapore Registered Nurse in 2013. The Complaints Committee considered all the evidence presented during the hearing and recommended that the Nurse's enrolment be cancelled.

Case 6

A Registered Nurse working at a hospital rendered inappropriate care to 6 antenatal patients during her shift by failing and/or omitting to monitor these patients' fetal heart movements in the afternoon and by wrongfully entering false values for fetal heart monitoring in the e-Charting system for the 6 patients' patient records. After consideration, the Committee recommended that nurse be suspended for a period of 6 months pursuant to Section 19(2) (b) of the Nurses and Midwives Act and to be censured.

Case 7

A Registered Nurse carried out insertion of a nasogastric tube for one patient on 24 March 2014. She proceeded to allow feeding for the patient to take place relying on a test method to ascertain correct placement of the naso-gastric (NG) tube which is not recommended by the Ministry of Health's Nursing Practice Guidelines 1/2010. Secondly, she failed and/or omitted to take into account the significance of the aspirate PH 6-7 which is indicative of gastric or intestinal aspirate before allowing feeding to take place. The nurse also failed and/or omitted to withhold feeding for the patient until confirmation of the NG tube's position which included confirmation by radiological means. With the Complaint Committee's recommendation, the Board decided to suspend her registration for a period of one year.

Case 8

A Registered Nurse (RN) acted in misconduct by drawing drugs from the Omnicell without authorised approval and by using the drugs for his personal consumption from May 2010 to September 2014. The RN was subsequently dismissed for cause by the hospital on 20 January 2015 and given a stern warning in lieu of prosecution to refrain from such similar conduct in the future by the Singapore Police on 9 April 2015. The Board decided to suspend his registration for a period of six months.

Case 9

A Registered Nurse was convicted of an offence under section 332 of the Penal Code (Cap. 224, 2008 Rev Ed) for voluntarily causing hurt to a public servant while in a drunken state. As a result, the nurse was sentenced to one week imprisonment. Having regards to the evidence presented by SNB's counsel and the plea made by the nurse during the inquiry, the Complaints Committee was of the view that the Nurse's conviction and her conduct therein does not render her unfit to remain on the Register. However, the Committee recommended that the nurse be suspended for a period of (1) month pursuant to Section 19(2)(b) of the Nurses and Midwives Act and be given a written warning.

Case 10

An Enrolled Nurse was convicted by the State Courts for forging her Practising Certificate by altering the year of expiry, with the intention of causing it to be believed that the said Certificate was valid and issued by the Board. Secondly, the nurse committed another offence under section 417 of the Penal Code (Cap 224, 2008 Rev Ed) for cheating a Human Resource Officer of an Employment Agency by dishonestly concealing the fact that she did not have a valid Practising Certificate issued by the Board. She dishonestly induced the Human Resource Officer to assign her to work as a part-time nurse at a hospital. The nurse also committed an offence under section 468 of the Penal Code for forging a time sheet in or around July 2012, intending that it be used for the purpose of cheating or deceiving her company to deliver salary for the month of June 2012 amounting to S\$2,116.80 to her. As a result she was convicted and placed under a 24 months supervised probation on 6 November 2014 by the State Courts. The Committee recommended that the Nurse be suspended for a period of 6 months in light of the repetitive nature of her forgery and cheating offences.

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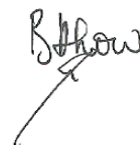
STATEMENT BY THE BOARD'S MANAGEMENT

In our opinion,

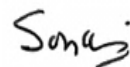
- (a) the accompanying financial statements of Singapore Nursing Board (the "Board") as set out on pages 20 to 38 are properly drawn up in accordance with the provisions of the Nurses and Midwives Act (Chapter 209) so as to give a true and fair view of the financial position of Singapore Nursing Board as at 31 March 2016 and of the financial performance, changes in accumulated fund and cash flows of the Board for the year ended on that date;
- (b) 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; and
- (c) nothing came to our notice that caused us to believe that the receipts, expenditure and investment of monies and the acquisition and disposal of assets by the Board during the financial year have not been in accordance with the provisions of the Act.

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 23 to 38, which comprise the statement of financial position as at 31 March 2016, and the statement of comprehensive income, statement of changes in accumulated fund 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 provisions of the Nurses and Midwives Act (Chapter 209)) (the "Act") and Statutory Board Financial Reporting Standards ("SB-FRS), and for devising and maintaining a system of internal accounting controls sufficient to provide a reasonable assurance that assets are safeguarded against loss from unauthorised use or disposition; and transactions are properly authorised and that they are recorded as necessary to permit the preparation of true and fair financial statements and to maintain accountability of assets.

Auditor's 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 about 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 judgement, 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 control relevant to the entity's preparation of the financial statements that gives 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 control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by 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, the financial statements are properly drawn up in accordance with the provisions of the Act and SB-FRS so as to present fairly, in all material respects, the financial position of the Board as at 31 March 2016, and of the financial performance, and changes in accumulated fund and cash flows of the Board for the year ended on that date.

Report on Other Legal and Regulatory Requirements

Management's Responsibility for Compliance with Legal and Regulatory Requirements

Management is responsible for ensuring that receipts, expenditure, investment of moneys and the acquisition and disposal of assets, are in accordance with the provisions of the Act. This responsibility includes implementing accounting and internal controls as management determines as necessary to enable compliance with the provisions of the Act.

Auditor's Responsibility

Our responsibility is to express an opinion on management's compliance based on our audit of the financial statements. We conducted our audit in accordance with Singapore Standards on Auditing. We planned and performed the compliance audit to obtain reasonable assurance about whether the receipts, expenditure, and investment of moneys and the acquisition and disposal of assets, are in accordance with the provisions of the Act.

Our compliance audit includes obtaining an understanding of the internal control relevant to the receipts, expenditure, investment of moneys and the acquisition and disposal of assets; and assessing the risks of material misstatement of the financial statement from non-compliance, if any, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Because of the inherent limitations in any accounting and internal control system, non-compliances may nevertheless occur but not detected.

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

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INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF SINGAPORE NURSING BOARD

(continued)

Opinion

In our opinion:

- a) the receipts, expenditure, investment of moneys and acquisition and disposal of assets by the Board during the year are, in all material respects, in accordance with the provisions of the Act; and
- b) proper accounting and other records have been kept by the Board, in accordance with the provisions of the Act.

Audit Alliance LLP
Public Accountants and Chartered Accountants

Singapore,

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STATEMENTS OF FINANCIAL POSITION AS AT 31 MARCH 2016

	Note	2016 S\$	2015 S\$
Non-current asset			
Plant and equipment	7	40,240	61,481
Current assets			
Fees receivable		1,440	7,650
Other receivables	8	52,487	71,171
Fixed deposits with financial institution	9	2,086,517	2,077,080
Cash and cash equivalents	10	1,529,867	1,678,040
Total current asset		<u>3,670,311</u>	<u>3,833,941</u>
Total assets		<u><u>3,710,551</u></u>	<u><u>3,895,422</u></u>
Equity			
Accumulated surplus		<u>1,763,696</u>	<u>1,902,502</u>
Net equity		<u>1,763,696</u>	<u>1,902,502</u>
Current liabilities			
Other payables	11	651,084	820,828
Advance practising certificate fees received		<u>1,295,771</u>	<u>1,172,092</u>
Total current liabilities		<u>1,946,855</u>	<u>1,992,920</u>
Total equity and liabilities		<u><u>3,710,551</u></u>	<u><u>3,895,422</u></u>

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

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STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 31 MARCH 2016

	Note	2016 S\$	2015 S\$
Income			
Practising certificate fees		1,727,306	1,691,241
Application fees		237,155	279,040
Service charges		187,462	189,208
Registration fees		131,830	106,300
Enrolment income		64,040	48,010
Late payment fees		41,050	44,860
Replacement charges		36,100	37,750
Re-registration fees		580	500
Other income	4	17,534	11,049
Total Income		<u>2,443,057</u>	<u>2,407,958</u>
Less: Expenditure			
Interboard charges	5	1,479,733	1,338,969
Depreciation expense	7	29,908	35,320
General and administration expenses	6	1,072,222	1,121,340
		<u>2,581,863</u>	<u>2,495,629</u>
Deficit before contribution to consolidated fund		(138,806)	(87,671)
Contribution to consolidated fund		<u>-</u>	<u>-</u>
Total comprehensive loss for the year		<u>(138,806)</u>	<u>(87,671)</u>

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

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STATEMENT OF CHANGES IN ACCUMULATED FUND

FOR THE YEAR ENDED 31 MARCH 2016

	Accumulated Surplus S\$
2016	
Beginning of financial year	1,902,502
Total comprehensive loss for the year	<u>(138,806)</u>
End of financial year	<u>1,763,696</u>
2015	
Beginning of financial year	1,990,173
Total comprehensive loss for the year	<u>(87,671)</u>
End of financial year	<u>1,902,502</u>

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

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STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 MARCH 2016

	Notes	2016 S\$	2015 S\$
Cash flows from operating activities			
Deficit before contribution to consolidated fund		(138,806)	(87,671)
Adjustments for:			
Depreciation on plant and equipment	7	29,908	35,320
Interest income		(16,334)	(8,899)
Operating Surplus before working capital changes		(125,232)	(61,250)
Changes in working capital:			
Decrease/(Increase) in receivables		24,894	(1,630)
(Decrease)/Increase in payables		(169,744)	206,762
Increase/(Decrease) in advance practising certificate fees received		123,679	(4,776)
Cash flows from operations		(146,403)	139,106
Interest received		16,334	8,899
Cash flows (used in)/ from operating activities		(130,069)	148,005
Cash flows from investing activity			
Purchase of plant and equipment	7	(8,667)	-
Cash flows used in investing activities		(8,667)	-
Net (decrease)/increase in cash and cash equivalents		(138,736)	148,005
Cash and cash equivalents at beginning of the year		3,755,120	3,607,115
Cash and cash equivalents at end of the year	10	3,616,384	3,755,120

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

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED TO 31 MARCH 2016

1. GENERAL INFORMATION

Singapore Nursing Board (“the Board”) was constituted 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, NKF Centre, 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

These financial statements have been prepared in accordance with Statutory Board Financial Reporting Standards (“SB-FRS”) under the historical cost convention, except as disclosed in the accounting policies below.

The preparation of financial statements in conformity with SB-FRS requires management to exercise its judgement in the process of applying the Board’s accounting policies. It also requires the use of certain critical accounting estimates and assumptions. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the financial statements are disclosed in Note 3.

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

On 1 April 2015, the Board adopted the new or amended SB-FRS and Interpretations of SB-FRS (“INT SB-FRS”) that are mandatory for application for the financial year. Changes to the Board’s accounting policies have been made as required, in accordance with the transitional provisions in the respective SB-FRS and INT SB-FRS.

The adoption of these new or amended SB-FRS and INT SB-FRS did not result in substantial changes to the accounting policies of Board and had no material effect on the amounts reported for the current or prior financial years.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.3 Plant and Equipment

(i) Measurement

All items of plant and equipment are initially recorded at cost. The cost of an item of 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 item can be measured reliably.

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

(ii) Depreciation

Depreciation on plant and equipment is calculated using the straight-line method to allocate their depreciable amounts over their estimated useful lives as follows:

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

The residual values, estimated useful lives and depreciation method of plant and equipment are reviewed, and adjusted as appropriate, at each balance sheet date. The effects of any revision are recognised in profit or loss when the changes arise.

(iii) Disposal

An item of plant and equipment is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. On disposal of an item of plant and equipment, the difference between the disposal proceeds and its carrying amount is recognised in statement of comprehensive income within "other income and expense".

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

2.4 **Financial assets**

The Board classifies its financial assets as loans and receivables

(i) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They are presented as current assets, except for those expected to be realised later than 12 months after the balance sheet date which are presented as non-current assets. Loans and receivables are presented as "other receivables" (Note 8) and "cash and cash equivalents" (Note 10) on the balance sheet.

(ii) Recognition and derecognition

Regular way purchases and sales of financial assets are recognised on trade date – the date on which the Board commits to purchase or sell the asset.

Financial assets are derecognised when the rights to receive cash flows from the financial assets have expired or have been transferred and the Board has transferred substantially all risks and rewards of ownership. On disposal of a financial asset, the difference between the carrying amount and the sale proceeds is recognised in statement of comprehensive income. Any amount previously recognised in other comprehensive income relating to that asset is reclassified to statement of comprehensive income.

(iii) Initial measurement

Financial assets are initially recognised at fair value plus transaction costs

(iv) Subsequent measurement

Loans and receivables are subsequently carried at amortised cost using the effective interest method.

(v) Impairment

The Board assesses at each balance sheet date whether there is objective evidence that a financial asset is impaired and recognises an allowance for impairment when such evidence exists. Significant financial difficulties of the debtor, probability that the debtor will enter bankruptcy and default or significant delay in payments are objective evidence that these financial assets are impaired.

2. SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.4 Financial assets (continued)

The carrying amount of these assets is reduced through the use of an impairment allowance account which is calculated as the difference between the carrying amount and the present value of estimated future cash flows, discounted at the original effective interest rate. When the asset becomes uncollectible, it is written off against the allowance account. Subsequent recoveries of amounts previously written off are recognised against the same line item in statement of comprehensive income. The impairment allowance is reduced through statement of comprehensive income in a subsequent period when the amount of impairment loss decreases and the related decrease can be objectively measured. The carrying amount of the asset previously impaired is increased to the extent that the new carrying amount does not exceed the amortised cost had no impairment been recognised in prior periods.

2.5 Other payables

Other payables represent liabilities for goods and services provided to the Board prior to the end of financial year which are unpaid. They are classified as current liabilities if payment is due within one year or less. Otherwise, they are presented as non-current liabilities. Other payables are initially recognised at fair value, and subsequently carried at amortised cost using the effective interest method.

2.6 Operating leases

Leases where substantially all risks and rewards incidental to ownership are retained by the lessors are classified as operating leases. Payments made under operating leases (net of any incentives received from the lessors) are recognised in statement of comprehensive income on a straight-line basis over the period of the lease.

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 Provisions

Provisions for legal claims are recognised when the Board has a present legal or constructive obligation as a result of past events, it is more likely than not that an outflow of resources will be required to settle the obligation and the amount has been reliably estimated. Provisions are not recognised for future operating losses.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.9 Cash and cash equivalents

For the purpose of presentation in the statement of cash flows, cash and cash equivalents include cash on hand, cash at bank and deposits with financial institutions which are subject to an insignificant risk of change in value. For cash subjected to restriction, assessment is made on the economic substance of the restriction and whether they meet the definition of cash and cash equivalents.

2.10 Revenue recognition

The Board recognises revenue when the amount of revenue and related cost can be reliably measured, it is probable that the collectability of the related receivables is reasonably assured and when the specific criteria for each of the Board's activities are met as follows:

(i) Rendering of service

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

(ii) Interest income

Interest income, including income arising from finance leases and other financial instruments, is recognised using the effective interest method.

2.11 Employee compensation

Employee benefits are recognised as an expense, unless the cost qualifies to be capitalised as an asset.

(i) Defined contribution plans

Defined contribution plans are post-employment benefit plans under which the Board pays fixed contributions into separate entities such as the Central Provident Fund on a mandatory, contractual or voluntary basis. The Board has no further payment obligations once the contributions have been paid.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.11 Employee compensation (continued)

(ii) Short-term compensated absences

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

2.12 Impairment of non-financial assets

Plant and equipment are tested for impairment whenever there is any objective evidence or indication that these assets may be impaired. For the purpose of impairment testing, the recoverable amount is determined on an individual asset basis unless the asset does not generate cash inflows that are largely independent of those from other assets. If this is the case, the recoverable amount is estimated. If the recoverable amount of the asset is estimated to be less than its carrying amount, the carrying amount of the asset is reduced to its recoverable amount. The difference between the carrying amount and recoverable amount is recognised as an impairment loss in profit or loss, unless the asset is carried at revalued amount, in which case, such impairment loss is treated as a revaluation decrease.

An impairment loss for an asset is reversed only if, there has been a change in the estimates used to determine the asset's recoverable amount since the last impairment loss was recognised. The carrying amount of this asset is increased to its revised recoverable amount, provided that this amount does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset in prior years.

3. CRITICAL ACCOUNTING ESTIMATES, ASSUMPTION AND JUDGEMENTS

Estimates, assumptions and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances

(i) Impairment of loans and 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.

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4 OTHER INCOME

	2016 S\$	2015 S\$
Interest on fixed deposit	16,334	8,899
Speaker fee	1,200	1,400
Others	-	750
	<u>17,534</u>	<u>11,049</u>

5 INTERBOARDS CHARGES

	2016 S\$	2015 S\$
Staff cost	1,367,929	1,275,201
HR and registry costs	41,695	26,598
Medical expense	175	106
Temporary staff	60,693	45,431
Allowance for unutilised leave	9,241	(8,367)
	<u>1,479,733</u>	<u>1,338,969</u>

6 GENERAL AND ADMINISTRATION EXPENSES

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

	2016 S\$	2015 S\$
Seconded staff costs	383,060	392,428
Office rental	210,029	209,301
Computer operations	250,442	193,971
Legal fees	<u>76,690</u>	<u>178,832</u>

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7 PLANT AND EQUIPMENT

	Furniture, Fixtures and Fitting	Office Equipment	Computer Systems	Computer and Communication Systems	Total
	S\$	S\$	S\$	S\$	S\$
<u>Cost</u>					
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
Additions	-	2,461	-	6,206	8,667
At 31 March 2016	220,967	9,030	45,568	59,732	335,297
<u>Accumulated Depreciation</u>					
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
Charge for the year	27,482	136	-	2,290	29,908
At 31 March 2016	188,019	6,705	45,568	54,765	295,057
<u>Carrying amount</u>					
At 31 March 2016	32,948	2,325	-	4,967	40,240
At 31 March 2015	60,430	-	-	1,051	61,481

8 OTHER RECEIVABLES

	2016 S\$	2015 S\$
Deposit	37,390	37,390
Interest receivable	12,506	5,609
Prepayments	1,049	4,005
Sundry receivables	1,542	24,167
	<u>52,487</u>	<u>71,171</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.

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9 FIXED DEPOSITS WITH FINANCIAL INSTITUTIONS

All fixed deposits mature within one year and earn interest at rates ranging from 0.4200% to 1.1400% (2015: 0.4200% to 0.4900%) per annum.

10 CASH AND CASH EQUIVALENTS

	2016 S\$	2015 S\$
Fixed deposits (Note 9)	2,086,517	2,077,080
Cash and bank balances	<u>1,529,867</u>	<u>1,678,040</u>
	<u>3,616,384</u>	<u>3,755,120</u>

11 OTHER PAYABLES

	2016 S\$	2015 S\$
Allowance for unutilised leave	18,828	9,587
Sundry payables	539,615	625,579
Accruals	<u>92,641</u>	<u>185,662</u>
	<u>651,084</u>	<u>820,828</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 2016 amounting to S\$404,015 (2015: S\$463,653). Staff costs and performance bonus incurred for the year are reported under inter-board charges in the statement of comprehensive income

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12 OPERATING LEASE COMMITMENTS

The Board leases office space from non-related parties under non-cancellable operating lease agreements. The leases have varying terms, escalation clauses and renewal rights.

The future minimum lease payables under non-cancellable operating leases contracted for at the balance sheet date but not recognised as liabilities, are as follows:

	2016	2015
	S\$	S\$
Operating lease payments due		
- within 1 year	160,029	160,029
- after 1 year but not later than 5 years	106,686	106,686
	<u>266,715</u>	<u>266,715</u>

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

13 RESERVES MANAGEMENT

The reserves management objective of the Board is to safeguard the Board's ability to continue as a going concern.

The management monitors its cash flows, availability of funds and overall liquidity position to ensure the Board is able to fulfil its continuing obligations.

The Board is not subject to externally imposed reserve requirements.

There were no changes to the Board's approach to reserves management during the year.

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14 **FAIR VALUE OF FINANCIAL ASSETS AND LIABILITIES**

The carrying amounts of cash and cash equivalents, receivables and payable approximate their respective fair values due to the relatively short-term maturity of these financial statements.

Categories of financial instruments

The following table sets out the financial instruments as at the end of the reporting period:

	2016	2015
	S\$	S\$
Financial Assets		
Fees receivable	1,440	7,650
Other receivable	51,438	67,166
Fixed deposits with financial institution	2,086,517	2,077,080
Cash and cash equivalents	<u>1,529,867</u>	<u>1,678,040</u>
	<u>3,669,262</u>	<u>3,829,936</u>
Financial Liability		
Other payables	<u>651,084</u>	<u>820,828</u>

15 **FINANCIAL RISK MANAGEMENT OBJECTIVES AND POLICIES**

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

Credit risk

Credit risk refers to the risk that counterparty will default on its contractual obligations resulting in financial loss to the Board. The major classes of financial assets of the Board are bank deposits and other receivables. For other receivables, the Board adopts the policy of dealing only with customers of appropriate credit standing and history, and obtaining sufficient collateral or buying credit insurance where appropriate to mitigate credit risk. For other financial assets, the Board adopts the policy of dealing only with high credit quality counterparties.

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 as at the balance sheet date.

15 FINANCIAL RISK MANAGEMENT OBJECTIVES AND POLICIES (CONTINUED)

Interest rate risk

Interest rate risk is the risk that the future cash flows of a financial instrument will fluctuate because of changes in market interest rates. As the Board has no significant interest-bearing assets, the Board's income is substantially independent of changes in market interest rates.

The management monitors movements in interest rates to ensure deposits are placed with financial institutions offering optimal rates of return.

Liquidity risk

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

The management exercises prudence in managing its operating cash flows and aims at maintaining a high level of liquidity at all times.

All financial liabilities of the Board are repayable on demand or mature within one year.

16 AUTHORISATION OF FINANCIAL STATEMENTS

The financial statements of the Singapore Nursing Board for the year ended 31 March 2016 were authorised for issue by the Board on 30 August 2016.

SELECTED CHARACTERISTICS OF NURSES AND MIDWIVES

FIGURE A: SELECTED CHARACTERISTICS OF REGISTERED NURSES

		2013	2014	2015
	TOTAL	27556	28864	29894
SEX				
	Male	2547	2748	2991
	Female	25009	26116	26903
ETHNIC GROUP				
	Chinese	14926	15493	15518
	Malay	3156	3366	3489
	Indian	3213	3368	3464
	Others	6261	6637	7423
ACTIVITY STATUS				
	Working Full-time	22528	23628	25109
	Working Part-time	926	902	813
	Not Working/Unknown	3024	3752	3493
	Doing Non-nursing work	1078	582	479
EMPLOYMENT				
	Public Sector	16738	17667	18566
	Private Sector	6716	6863	7356
CITIZENSHIP				
	Singaporean/Permanent Resident	20565	21168	21100
	Malaysian	1481	1749	1949
	Chinese (PRC)	868	908	1002
	Filipino	3406	3713	4396
	Indian	415	455	505
	Myanmar	530	589	678
	Others	291	282	264
MARITAL STATUS				
	Single	16091	15284	15461
	Married	10984	12958	13740
	Others	481	622	693
AGE				
	Median Age (years)	33	33	33
	Average Age (years)	37	37	37
	Under 25 yrs	3865	3722	3403
	25 - 34 yrs	10790	11621	13040
	35 - 44 yrs	6255	6596	6720
	45 - 54 yrs	2939	3169	3268
	55 - 59 yrs	1677	1517	1319
	Above 60 yrs	2030	2239	2144

FIGURE B: SELECTED CHARACTERISTICS OF ENROLLED NURSES

		2013	2014	2015
TOTAL		8273	8528	8931
SEX				
	Male	684	743	863
	Female	7589	7785	8068
ETHNIC GROUP				
	Chinese	1951	1936	1689
	Malay	2169	2135	2076
	Indian	1608	1574	1688
	Others	2545	2883	3478
ACTIVITY STATUS				
	Working Full-time	6716	6862	7504
	Working Part-time	222	222	178
	Not Working/Unknown	1075	1315	1148
	Doing Non-nursing work	260	129	101
EMPLOYMENT				
	Public Sector	4890	5006	5305
	Private Sector	2049	2078	2377
CITIZENSHIP				
	Singaporean/Permanent Resident	5277	5197	4914
	Malaysian	44	46	52
	Chinese (PRC)	310	328	276
	Filipino	1620	1963	2578
	Indian	472	467	609
	Myanmar	534	515	485
	Others	16	12	17
MARITAL STATUS				
	Single	5381	5067	5331
	Married	2733	3267	3412
	Others	159	194	188
AGE				
	Median Age (years)	29	30	29
	Average Age (years)	34	35	34
	Under 25 yrs	1638	1477	1404
	25 - 34 yrs	3690	4071	4810
	35 - 44 yrs	1199	1163	1089
	45 - 54 yrs	1020	1078	1023
	55 - 59 yrs	300	282	249
	Above 60 yrs	426	457	356

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

		2013	2014	2015
	TOTAL	246	226	180
SEX				
	Male	-	-	-
	Female	246	226	180
ETHNIC GROUP				
	Chinese	183	162	125
	Malay	19	18	15
	Indian	15	16	12
	Others	29	30	28
ACTIVITY STATUS				
	Working Full-time	117	107	101
	Working Part-time	23	25	21
	Not Working/Unknown	90	90	55
	Doing Non-nursing work	16	4	3
EMPLOYMENT				
	Public Sector	79	71	71
	Private Sector	61	61	51
CITIZENSHIP				
	Singaporean/Permanent Resident	231	212	167
	Malaysian	2	2	2
	Chinese (PRC)	0	0	0
	Filipino	4	4	4
	Indian	0	0	0
	Myanmar	0	0	0
	Others	9	8	7
MARITAL STATUS				
	Single	44	41	32
	Married	188	173	139
	Others	14	12	9
AGE				
	Median Age (years)	61	65	65
	Average Age (years)	60	64	63
	Under 25 yrs	0	0	0
	25 - 34 yrs	7	5	3
	35 - 44 yrs	13	16	17
	45 - 54 yrs	8	6	6
	55 - 59 yrs	45	28	14
	Above 60 yrs	173	171	140

* 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

		2013	2014	2015
	TOTAL	1385	1337	1149
SEX				
	Male	-	-	-
	Female	1385	1337	1149
ETHNIC GROUP				
	Chinese	1100	1051	876
	Malay	121	118	114
	Indian	107	109	100
	Others	57	59	59
ACTIVITY STATUS				
	Working Full-time	833	800	771
	Working Part-time	148	158	128
	Not Working/Unknown	335	355	232
	Doing Non-nursing work	69	24	18
EMPLOYMENT				
	Public Sector	592	572	563
	Private Sector	394	386	336
CITIZENSHIP				
	Singaporean/Permanent Resident	1353	1307	1122
	Malaysian	14	12	10
	Chinese (PRC)	1	1	1
	Filipino	7	7	8
	Indian	0	0	0
	Myanmar	0	0	0
	Others	10	10	8
MARITAL STATUS				
	Single	343	319	269
	Married	976	936	802
	Others	66	82	78
AGE				
	Median Age (years)	61	62	61
	Average Age (years)	59	60	59
	Under 25 yrs	0	0	1
	25 - 34 yrs	63	49	54
	35 - 44 yrs	86	92	95
	45 - 54 yrs	131	130	125
	55 - 59 yrs	331	261	176
	60 yrs and Above	774	805	698

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

		2013	2014	2015
	TOTAL	572	640	639
SEX				
	Male	242	265	259
	Female	330	375	380
ETHNIC GROUP				
	Chinese	345	363	350
	Malay	83	101	107
	Indian	79	89	94
	Others	65	87	88
ACTIVITY STATUS				
	Working Full-time	472	537	553
	Working Part-time	23	23	20
	Not Working/Unknown	58	72	60
	Doing Non-nursing work	19	8	6
EMPLOYMENT				
	Public Sector	424	480	495
	Private Sector	72	80	78
CITIZENSHIP				
	Singaporean/Permanent Resident	564	634	634
	Malaysian	1	0	0
	Chinese (PRC)	1	1	1
	Filipino	1	1	1
	Indian	0	0	0
	Myanmar	0	0	0
	Others	5	4	3
MARITAL STATUS				
	Single	167	170	154
	Married	386	443	460
	Others	19	27	25
AGE				
	Median Age (years)	52	49	47
	Average Age (years)	49	48	48
	Under 25 yrs	2	4	2
	25 - 34 yrs	113	135	140
	35 - 44 yrs	107	149	165
	45 - 54 yrs	95	94	92
	55 - 59 yrs	81	77	66
	60 yrs and Above	174	181	174

FIGURE F: SELECTED CHARACTERISTICS OF ADVANCED PRACTICE NURSES

		2013	2014	2015
SEX	TOTAL	117	145	172
	Male	11	12	12
	Female	106	133	160
ETHNIC GROUP				
	Chinese	100	126	149
	Malay	6	6	8
	Indian	6	8	11
	Others	5	5	4
ACTIVITY STATUS				
	Working Full-time	97	142	167
	Working Part-time	4	3	4
	Not Working/Unknown	2	0	1
	Doing Non-nursing work	0	0	0
EMPLOYMENT				
	Public Sector	110	137	166
	Private Sector	5	8	5
CITIZENSHIP				
	Singaporean/Permanent Resident	113	141	169
	Others	4	4	3
MARITAL STATUS				
	Single	48	56	65
	Married	66	85	100
	Others	3	4	7
AGE				
	Median Age (years)	41	40	40
	Average Age (years)	41	41	41
	Under 25 yrs	0	0	0
	25 - 34 yrs	15	23	22
	35 - 44 yrs	66	82	103
	45 - 54 yrs	29	33	40
	55 - 59 yrs	6	6	5
	Above 60 yrs	1	1	2