



Singapore Nursing Board

ANNUAL REPORT

2016

ANNUAL REPORT 2016

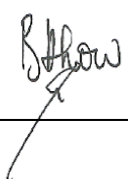
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In the opinion of the Board, the annual report of the SINGAPORE NURSING BOARD are drawn up so as to present fairly the state of affairs of the SINGAPORE NURSING BOARD as at 31 March 2017.


On behalf of the Board,



Ms Low Beng Hoi

Chairman

August 2017



Ms Tan Soh Chin

Registrar

August 2017

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

FOREWORD



Welcome to Singapore Nursing Board's (SNB) Report for 2016.

The total number of nurses and midwives on SNB's Register and Roll continue in an upward trend, with a total of 40,561 as of December 2016. The rate of increment averages at 4% over the past 3 years (2014 to 2016).

A significant initiative by SNB in 2016 was the implementation of its online Competency Assessment reports via the Professional Registration System (PRS). The PRS is a common portal for all healthcare professional boards in Singapore. It was launched in 2014 and since then, many of SNB's services have been available fully online. There have been positive feedback from end users regarding the Competency Assessment reports; specifically the ease of online submission reports (versus hard copy) and timely submissions by institutions that resulted in reduced processing time.

Singapore Nursing Board's Ethics Committee continued its review of the Code of Ethics and Professional Conduct (1999), Code of Practice for Midwives (2001) and Standards of Practice (2011), engaging consultations and feedback from nursing stakeholders (including students) from various public & private healthcare settings and academic institutions.

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	Adjunct A/Prof Jeffery Lawrence Cutter	Senior Consultant Public Health Group Ministry of Health (wef 1/2/2017)
	Mr Ling Khoon Chow	Principal Beatty Secondary School
Members	Mr Ang David Chee Chim	Advisor Human Capital Singapore
	Dr Ayre Tracy Carol	Chief Nurse Singapore General Hospital Group Chief Nurse Singapore Health Services
	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
	A/Prof Ho Wai Loon Calvin	Assistant Professor Centre for Biomedical Ethics, Yong Loo Lin School of Medicine, National University of Singapore
	Ms Koh Paulin	Chief Nurse Changi General Hospital
	Ms Koh Sioh Eng	Deputy Director Nursing Institute of Mental Health
	Ms Karen Koh Wei Ling	Advanced Practice Nurse/Assistant Director Nursing National University Hospital
	Ms Kok Kum Yoke	Senior Assistant Director of Nursing Gleneagles Hospital
	Ms Nirmala Bte Karmaroon	Deputy Director (Nursing) Tan Tock Seng Hospital
	Dr Ma Lina Yee Sheung	Group Vice President (Clinical/Aged Care) Allium Healthcare Holdings Pte Ltd
	Ms Tan Hwee Ngan	Director School of Health Sciences (Nursing) Nanyang Polytechnic
	Mr Tay Wei Sern	Deputy Director (Health Sciences) School of Applied & Health Sciences ITE College East

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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

International Nurse Regulator Collaborative (INRC) Annual Meeting

Singapore Nursing Board (SNB) hosted the 2016 INRC Annual Meeting from 2 to 3 March 2016.

Members of the INRC comprises members from Nursing & Midwifery Board of Australia (NMBA), Nursing Council of New Zealand (NCNZ), Nursing & Midwifery Board of Ireland (NMBI), National Council of State Boards of Nursing (NCSBN), Singapore Nursing Board (SNB), College of Nurses of Ontario (CNO) and College of Registered Nurses of British Columbia (CRNBC).

A total of 11 nursing regulators of the INRC participated in the meeting hosted by SNB. Members were engaged in an active discussion on shared topics that affect nursing regulators, these included reviewing position statements on confidentiality and privacy; maintenance of professional boundaries and the need for other future position statements.

The meeting also deliberated on member countries guidelines and the creation of an INRC website.



Back Row (left to right): Ow Jee Hia, SNB; David Benton, NCSBN, Cynthia Johansen, CRNBC; Anne Coghlan, CNO; Catherine Byrne, NCNZ;; Carolyn Reed, NCNZ; Tanya Vogt, NMBA & Chan Huay Lian, SNB. Front Row (left to right): Kwek Puay Ee, SNB; Shirley Brekken; NCSBN; Tan Soh Chin, SNB; Low Beng Hoi, SNB; Lynette Cusack, NMBA; Christine Penny, CRNBC & Rita Gan, SNB.

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Visit by members of the Sri Lanka Nursing Council

At the request of the Sri Lanka Nursing Council, Singapore Nursing Board hosted a 3 days study visit for 10 members of the Sri Lanka Nursing Council from 30 May to 1 June 2016. The 3 day programme comprised sharing and exchange of experiences on the role, functions and processes of a nursing regulatory body.



Delegates from the Sri Lanka Nursing Council with SNB's Registrar Tan Soh Chin, Executive Secretary, Kwek Puay Ee and Assistant Executive Secretary, Ow Jee Hia.

Online submission of Competency Assessment and introduction of Supervisory Framework

As of 1 February 2017, the transition from hard copy to online submission of Registered Nurses' Competency Assessment reports via SNB's Professional Registration System (PRS) portal was completed. This followed a year-long pilot progressive implementation, starting with the restructured hospitals to private institutions.

User guides and briefing sessions were facilitated for representatives from various healthcare institutions in 2016.

The online submission had positive feedback: there was more timely submissions and follow up on the reports. Users were able to get real-time feedback on the status of their submissions and processing time was shortened. This marks another milestone in SNB's online PRS.

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REGISTRATION

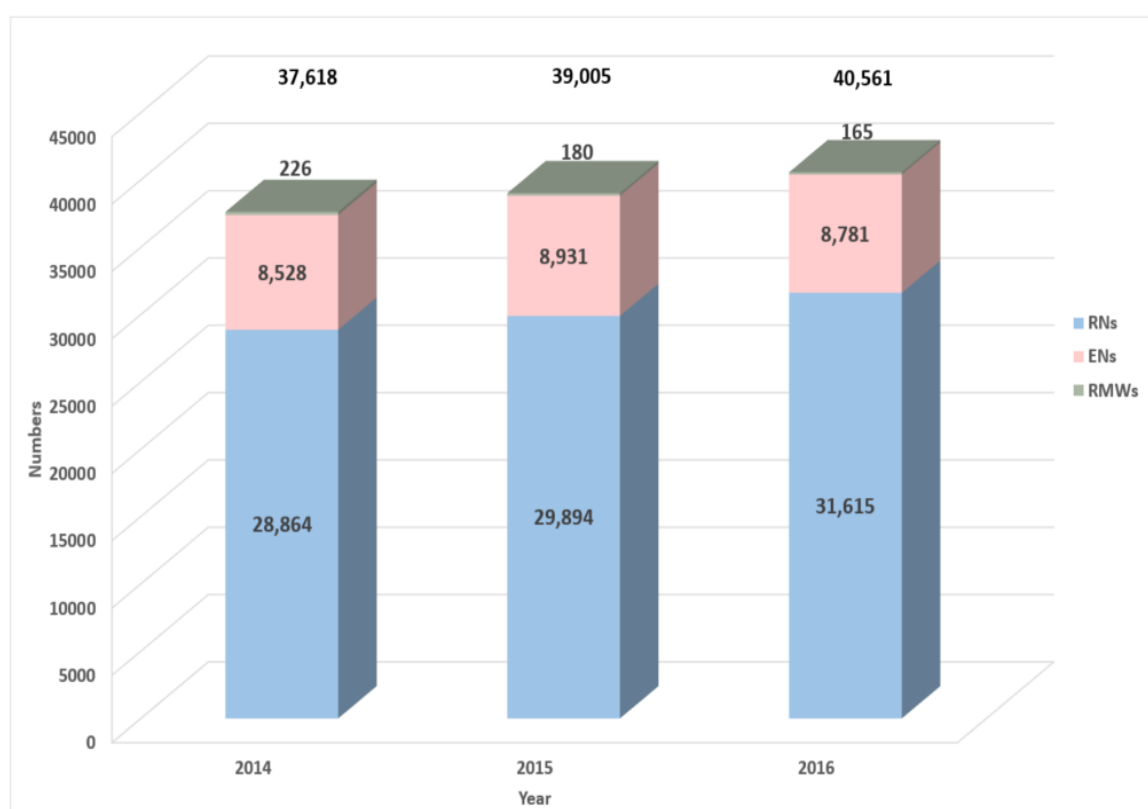
I) **Total Number of Nurses and Registered Midwives**

By the end of 2016, there were a total of 40,561 Nurses and Registered Midwives on the Register and Roll. These numbers increased by 4.0% over the preceding year.

Of the 40,561 Nurses and Registered Midwives, 31,615 were Registered Nurses (RNs), 8,781 were Enrolled Nurses (ENs) and 165* 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).

II) New Registrations/Enrolments

In 2016, a total of 3,473 new nurses/midwives were registered/enrolled

Table 1: Number of New Registrations/Enrolments for 2016

	Local*	Foreign	Total
Registered Nurse	771	1,849	2,620
Enrolled Nurse	198	652	850
Registered Midwife	1	2	3
Total Nurses	970	2,503	3,473

* Singaporeans and PRs

III) Number of Registered Midwives

In 2016, there were a total of 1,092 midwives on the register of midwives (RMWs). A total of 165 RMWs were registered as RMWs only (Single Register), with the remaining 927 RMWs concurrently registered on at least one other register. To streamline the reporting of statistics, the 927 RMWs were counted as nurses instead (as reported in section (I)).

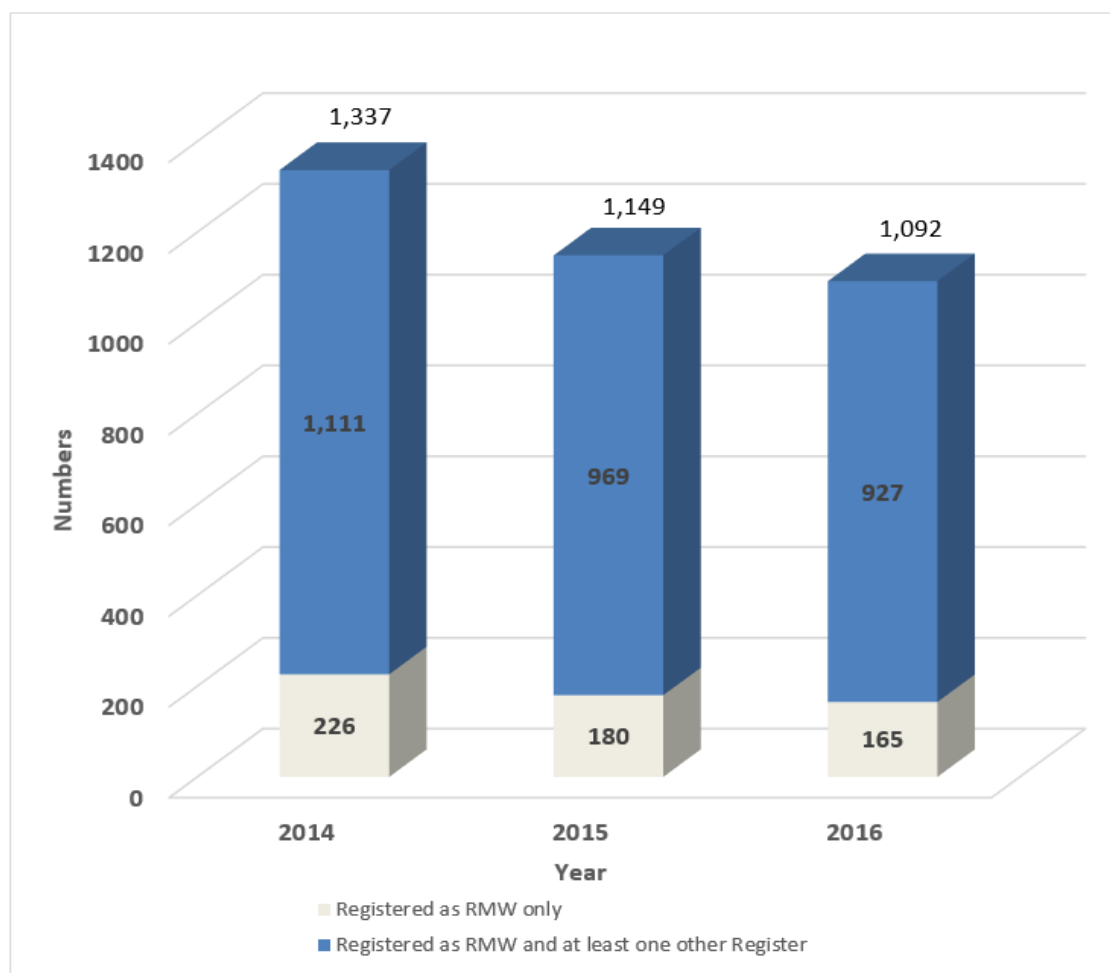
When RMWs were concurrently registered as RNs (for example), it means that they can practise in both the scope of RN and RMW.

Selected characteristics of all 1092 RMWs are available at Figure (D) on page 43.

Table 2: Number of Registered Midwives

	2014	2015	2016
Registered as RMW only	226	180	165
Registered as RMW and at least one other Register	1,111	969	927
Total Number of RMWs	1,337	1,149	1,092

Chart 2: Total Number of Registered Midwives



IV) Number of Registered Nurse (Psychiatric)

In 2016, there were a total of 645 on the psychiatric part of the register of Registered Nurses (RNP). A total of 19 RNPs were registered as RNPs only with the remaining 626 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 645 RNPs are available at Figure (E) on page 44.

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Table 3: Number of Registered Nurse (Psychiatric)

	2014	2015	2016
Registered as RNP only	24	20	19
Registered as RNP and at least one other Register	616	619	626
Total Number of RNP	640	639	645

Chart 3: Total Number of Registered Nurse (Psychiatric)



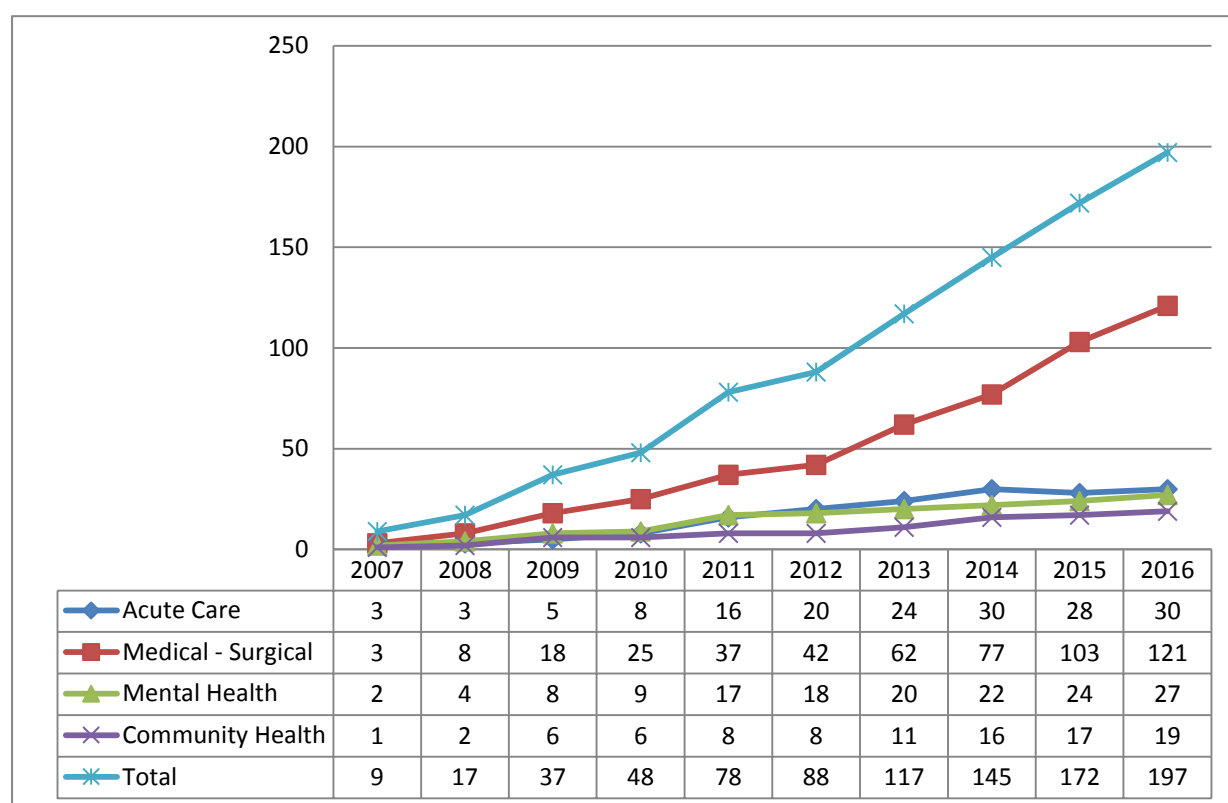
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ADVANCED PRACTICE NURSE (APN) CERTIFICATION

With 25 additional APNs certified in 2016, there were 197 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 specialized branch of Nursing.

Selected characteristics of all 197 APNs are available at Figure (F) on page 45.

Chart 4: Total Number of APNs - 2007 to 2016

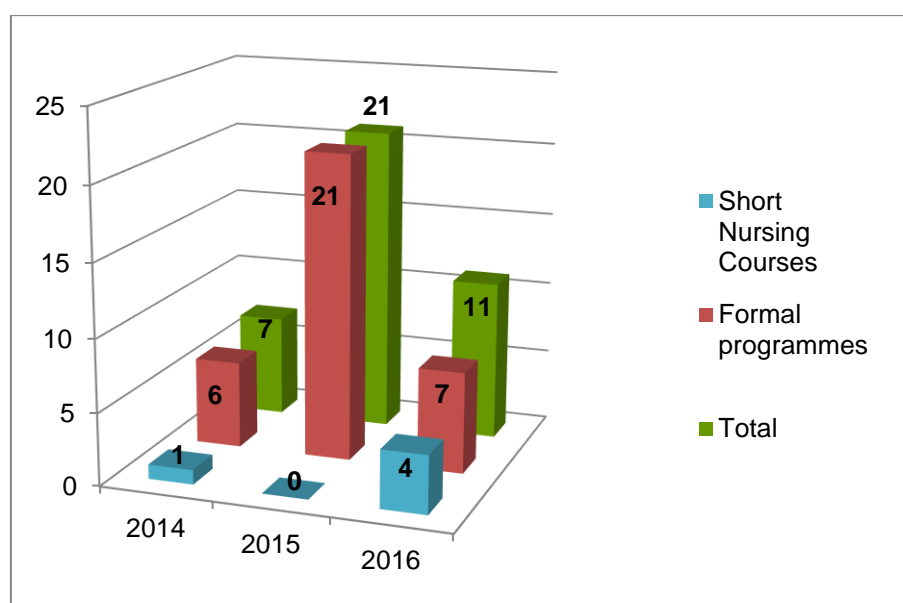


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EDUCATION

A total of 11 programmes were accredited/re-accredited in 2016.

Accreditation & re-accreditation of nursing programmes



	2014	2015	2016
Short Nursing Courses	1	0	4
Formal programmes	6	21	7
Total	7	21	11

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 2016, a total of 10 clinical areas were re-accredited and 1 new clinical area (Sengkang Health @ Alexandra) accredited for clinical nursing education.

As of December 2016, there are a total of 61 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, day care centres and specialised centres.

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Programmes Accredited or Re-accredited in 2016

Programme Title		Institution	Period
Pre-enrolment Programme			
1	Diploma in Nursing	Parkway College	In-Principle Approval

Programme Title		Institution	Period
Post-registration Programmes (Advanced Diploma and Specialist Diploma)			
1	Specialist Diploma in Community Gerontology Nursing	Ngee Ann Polytechnic (NP)	In-Principle Approval
2	Specialist Diploma in Clinical Education	NP	In-Principle Approval
3	Specialist Diploma in Nursing (Gerontology)	Nanyang Polytechnic (NYP)	In-Principle Approval
4	Specialist Diploma in Clinical Education	NYP	28 March 2017 to 27 March 2020

Programme Title		Institution	Period
Post-registration Programmes (Bachelor)			
1	Bachelor of Science in Nursing (Hons)	Singapore Institute of Technology & University of Glasgow	4 May 2016 to 3 May 2020
2	Bachelor of Nursing	Griffith University	16 November 2016 to 15 November 2020

Programme Title		Institution	Period
Short Nursing Course			
1	Return to Nursing (RTN) Course for Registered Nurse (RN)	Singhealth Alice Lee Institute of Advanced Nursing	May 2016 to May 2019
2	RTN Course for Enrolled Nurse (EN)		
3	RTN for RN	National University Hospital	April 2016 to April 2019
4	RTN for EN		

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COMPLAINTS

In 2016, Inquiry was conducted into 9 cases.

Case 1

Registered Nurse Tan Peng Liang was charged in Court for offences under Section 170 of the Penal Code (Cap 224, 2008 Rev Ed), Section 380 of the Penal Code and Section 22A (1) of the Miscellaneous Offences (Public Order & Nuisance) Act punishable under Section 22A(2) of the Miscellaneous Offences (Public Order & Nuisance) Act. The nurse was sentenced to 3 months imprisonment. The Board suspended his registration for a period of 12 months.

Case 2

Enrolled Nurse Rachel Anne Preece was convicted for offences under Section 380 read with Section 34 of the Penal Code (Cap 224, 2008 Rev Ed) and sentenced to 18 months' supervised probation and 120 hours of community service. The Board suspended her enrolment for a period of 9 months.

Case 3

Registered Nurse Candy Wong Shin Ting was found to have pilfered 109 tablets of Diazepam 5 mg from her employer and presented forged documents into evidence for the renewal of her Practising Certificate when her nursing registration was being suspended. Nurse Wong wrote to the SNB regarding her misconduct and stated that she was not suitable for nursing. She asked to be removed from the Register of Nurses. The Complaints Committee considered all the evidence presented during the hearing and recommended that the nurse's registration be cancelled.

Case 4

Enrolled Nurse Mohammad Sufian Bin Mohd Jemin had consumed controlled drug(s) and was detained at the Drug Rehabilitation Centre from 28 February 2015 to 27 February 2016. Subsequently, he was served with a Supervision Order and Urine Notice under Regulation 15 of the Misuse of Drugs (Approved Institutions and Treatment and Rehabilitation) Regulation. The Complaints Committee was of the view that Nurse Sufian ought to be suspended for the period of the Supervision Order until February 2018 pursuant to Section 19 (2) of the Act. In the event the Supervision Order is revoked prior to February 2018, the suspension period can be shortened and he can return to nursing.

Case 5

Enrolled Nurse Wong Qiao Fen provided nursing care to a patient independently without the prior written consent of the Board, thereby breaching Regulation 52 of the Nurses and Midwives Regulations 2012 (Cap. 209, S 119/2012). She further practised nursing beyond her scope of practice by independently administering IV medications to a patient at the patient's own home in breach of Standard 1 of the Standards of Practice for Nurses and Midwives and in breach of the Core Competencies and Generic Skills for Enrolled Nurses. The Board suspended her enrolment for a period of 5 months.

Case 6

Registered Nurse Ting Ai Ngor pilfered 5 Midazolam ampoules belonging to her employer without authorization, for personal use. Nurse Ting was undergoing psychiatric treatment at the time and was found to be suffering from symptoms consistent with depression. The Board decided that Nurse Ting ought to be suspended for a period of 6 months pursuant to Section 19 (2) of the Act subject to Nurse Ting undergoing continued psychiatric treatment and receipt of a medical report from her doctor towards the end of the suspension period stating that she is fit to return to the nursing.

Case 7

Enrolled Nurse Ello Ed Mundsel Bello was convicted of 1 charge under section 4 (1) (c) of the Sedition Act and Section 3 (1) (e) of the same Act for promoting ill-will and hostility between different classes of people; and 2 charges under section 4 (1) (c) of the Sedition Act punishable under Section 182 of the Penal Code (Cap. 224, 2008 Rev Ed) for providing false information to 2 police officers with the intention of causing them to omit to conduct investigations. Nurse Bello was sentenced to a total of 4 months imprisonment. The Complaints Committee considered all the evidence presented during the hearing and recommended that the nurse's enrolment be cancelled.

Case 8

Registered Nurse Aung Phyto Thu was convicted of 1 charge under section 325 of the Penal Code for voluntarily causing grievous hurt to a patient that caused the patient to sustain a fracture on the left 6th and 7th ribs, left periorbital hematoma, left mastoid hematoma and left chest wall bruise. Nurse Aung was sentenced to 12 months' imprisonment. The Board decided that Nurse Aung's registration be cancelled pursuant to Section 19 (1) of the Act.

Case 9

Enrolled Nurse Khin Marlar Aung misconducted herself by submitting false/fraudulent documents when she applied to be enrolled with the Board. Nurse Khin wrongfully induced the Board to approve her for the Enrolled Nurse Licensure Examination. The Complaints Committee considered all the evidence presented during the hearing and recommended that the nurse's enrolment be cancelled.

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FINANCIAL REPORT


STATEMENT BY THE BOARD OF MEMBERS

In the opinion of the Board of Members,

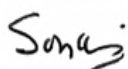
- (a) the financial statements of Singapore Nursing Board (the “Board”) together with the notes thereto are properly drawn up in accordance with the provisions of the Nurses and Midwives Act Chapter 209 (the “Act”) and Statutory Board Financial Reporting Standards in Singapore (“SB-FRSs”) so as to give a true and fair view of the financial position of the Board as at 31 March 2017 and the financial performance, changes in fund and cash flows of the Board for the financial 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

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

On behalf of the Board of Members,



.....
Ms Low Beng Hoi
Chairman



.....
Ms Tan Soh Chin
Registrar
Singapore

INDEPENDENT AUDITORS' REPORT

Report on the audit of the financial statements

Opinion

We have audited the financial statements of Singapore Nursing Board (the "Board"), which comprise the statement of financial position of the Board as at 31 March 2017, the income and expenditure statement, statement of changes in fund and statement of cash flows of the Board for the financial year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements are properly drawn up in accordance with the provisions of the Nurses and Midwives Act Chapter 209 (the "Act") and Statutory Board Financial Reporting Standards in Singapore ("SB-FRS") so as to give a true and fair view of the financial position of the Board as at 31 March 2017 and of the financial performance, changes in funds and cash flows of the Board for the financial year ended on that date.

Basis for Opinion

We conducted our audit in accordance with Singapore Standards on Auditing (SSAs). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Board in accordance with the Accounting and Corporate Regulatory Authority (ACRA) Code of Professional Conduct and Ethics for Public Accountants and Accounting Entities (ACRA Code) together with the ethical requirements that are relevant to our audit of the financial statements in Singapore, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the ACRA Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other information

Management is responsible for the other information. The other information obtained at the date of this auditor's report is the Statement by the Board set out on page 1, but does not include financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, we conclude that there is a material misstatement of this other information; we are required to report that fact. We have nothing to report in this regard.

INDEPENDENT AUDITORS' REPORT

Other matters

The financial statements of the Board for the financial year ended 31 March 2016, were audited by another firm of auditor who expressed an unmodified opinion on those statements on 30 August 2016.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the provisions of the Act and SB-FRS, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

A statutory board is constituted based on its Act and its dissolution requires Parliament's approval. In preparing the financial statements, management is responsible for assessing the Board's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is intention to wind up the Board or for the Board to cease operations.

Management and those charged with governance are responsible for overseeing the Board's financial reporting process

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level assurance, but is not a guarantee that an audit conducted in accordance with SSAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SSAs, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

INDEPENDENT AUDITORS' REPORT

As part of an audit in accordance with SSAs, we exercise professional judgement and maintain professional scepticism throughout the audit. We also: (Cont'd)

- Obtain an understanding of internal control relevant to the audit 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 Board's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Board's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Board to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board's management regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Report on other legal and regulatory requirements

In our opinion, the accounting and other records required by the Act to be kept by the Board have been properly kept in accordance with the provisions of the Act.

Tan, Chan & Partners

Public Accountants and Chartered Accountants

Singapore

SINGAPORE NURSING BOARD

(Constituted under the Nurses and Midwives Act Chapter 209)

STATEMENT OF FINANCIAL POSITION AS AT 31 MARCH 2017

	Note	2017 \$	2016 \$
ASSETS			
Non-current asset			
Plant and equipment	4	<u>10,697</u>	<u>40,240</u>
Current assets			
Cash and cash equivalents	5	<u>3,492,734</u>	<u>3,616,384</u>
Other receivables	6	<u>113,085</u>	<u>53,927</u>
		<u>3,605,819</u>	<u>3,670,311</u>
Total assets		<u>3,616,516</u>	<u>3,710,551</u>
FUND			
Accumulated Fund		<u>1,557,492</u>	<u>1,763,696</u>
LIABILITY			
Current Liability			
Other payables	7	<u>2,059,114</u>	<u>1,946,855</u>
Total fund and liability		<u>3,616,516</u>	<u>3,710,551</u>

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

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SINGAPORE NURSING BOARD

(Constituted under the Nurses and Midwives Act Chapter 209)

INCOME AND EXPENDITURE STATEMENT FOR THE FINANCIAL YEAR ENDED 31 MARCH 2017

	Note	2017 \$	2016 \$ (Represented)
Income			
Application fee		178,270	237,155
Enrolment income		40,230	64,040
Late payment fee		54,580	41,050
Practising certificate fee		1,843,545	1,727,306
Registration fees		108,805	132,410
Replacement charges		39,600	36,100
Services charges		114,255	187,462
Interest income		24,638	16,334
Miscellaneous income		1,300	1,200
Total income		2,405,223	2,443,057
Less: Expenses			
Depreciation	4	29,543	29,908
Computer operations		249,169	250,442
Interboard charges	8	1,394,698	1,464,733
Legal fees		82,817	76,690
MMF surcharge	9	212,000	15,000
Office rental		160,029	210,029
Postage and courier		33,208	30,037
Printing and stationery		23,064	27,208
Seconded staff		327,998	383,060
Other expenses	10	98,991	94,756
Total expenses		2,611,517	2,581,863
Deficit before contribution to consolidated fund		(206,294)	(138,806)
Contribution to consolidated fund		-	-
Deficit for the financial year, representing total comprehensive loss for the financial year		(206,294)	(138,806)

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

SINGAPORE NURSING BOARD

(Constituted under the Nurses and Midwives Act Chapter 209)

STATEMENT OF CHANGES IN FUND FOR THE FINANCIAL YEAR ENDED 31 MARCH 2017

	Accumulated Fund \$
As at 01 April 2015	1,902,502
Deficit for the financial year, representing total comprehensive loss for the financial year	<u>(138,806)</u>
As at 31 March 2016	1,763,696
Deficit for the financial year, representing total comprehensive loss for the financial year	<u>(206,294)</u>
As at 31 March 2017	<u>1,557,402</u>

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

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SINGAPORE NURSING BOARD

(Constituted under the Nurses and Midwives Act Chapter 209)

STATEMENT OF CASH FLOWS FOR THE FINANCIAL YEAR ENDED 31 MARCH 2017

	Note	2017 \$	2016 \$
Cash flows from operating activities			
Deficit before contribution to consolidated fund		(206,294)	(138,806)
Adjustments for:			
Depreciation of plant and equipment	4	29,543	29,908
Interest income		(24,638)	(16,334)
Operating cash flows before changes in working capital		(201,389)	(125,232)
Changes in working capital:			
Other receivables		(59,158)	148,573
Other payables		112,259	(169,744)
Cash flows used in operations		(148,288)	(146,403)
Interest received		24,638	16,334
Net cash flows used in operating activities		(123,650)	(130,069)
Cash flows from investing activity			
Purchase of plant and equipment	4	-	(8,667)
Net cash flows used in investing activity		-	(8,667)
Net changes in cash and cash equivalents		(123,650)	(138,736)
Cash and cash equivalents at beginning of financial year		3,616,384	3,755,120
Cash and cash equivalents at end of financial year	5	3,492,734	3,616,384

The accompanying notes form an integral part of these financial statements

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED TO 31 MARCH 2017

These notes form an integral part of and should be read in conjunction with the accompanying financial statements.

1. GENERAL INFORMATION

Singapore Nursing Board (the “Board”) was constituted under the Nurses and Midwives Act (Chapter 209). The Board’s registered office is located at 16 College Road, #01-01 College of Medicine Building, Singapore 169584 and its principal place of business is located at 81 Kim Keat Road, #08-00, NKF Centre, Singapore 328836.

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

The financial statements of the Board for the financial year ended 31 March 2017 were authorised for issue by the Board of Members on the date of the statement.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

2.1 Basis of preparation

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

2.2 Changes in accounting policies

On 01 April 2016, the Board has adopted all the new and revised standards and Interpretations of SB-FRS that are effective for annual periods beginning on or after 01 April 2016. The adoption of these standards and interpretations do not have any effect on the financial performance or position of the Board.

2.3 New or revised accounting standards and interpretations

Certain new standards, amendments to standards and interpretations are effective for annual periods beginning on or after 1 April 2017 and which has not been early adopted by the Board in preparing these financial statements. None of these are expected to have a significant impact on the Board’s financial statements

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Cont'd)

2.4 Currency transactions

Functional and presentation currency

Items included in the financial statements of the Board are measured using the currency of the primary economic environment in which the entity operates (the "functional currency"). The financial statements of the Board are presented in Singapore dollar (\$) which is the Board's functional currency.

2.5 Plant and equipment

Plant and equipment are recognised at cost less accumulated depreciation and accumulated impairment losses.

Subsequent expenditure relating to plant and equipment that has already been recognised is added to the carrying amount of the asset only when 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.

Depreciation is computed on the straight-line method to write-off the cost of the plant and equipment over its estimated useful lives. The estimated useful lives of the plant and equipment are as follows:

	<u>Estimated useful lives</u>
Furniture, fixtures and fitting	8 years
Office equipment	5 years
Computer systems	3 years
Computer and communication systems	5 years

Fully depreciated plant and equipment are retained in the financial statements until they are no longer in use and no further charge for depreciation is made in respect of these assets.

The residual value, estimated useful life and depreciation method are reviewed at each reporting date and adjusted prospectively, if appropriate.

Gains or losses arising from the retirement or disposal of plant and equipment are determined as the difference between the estimated net disposal proceeds and the carrying amount of the asset and are recognised in income and expenditure statement on the date of retirement or disposal.

The carrying values of plant and equipment are reviewed for impairment when events or changes in circumstances indicate that the carrying value may not be recoverable.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Cont'd)

2.6 Impairment of non-financial assets

Non-financial assets are reviewed for impairment whenever there is any indication that these assets may be impaired.

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 income and expenditure statement.

An impairment loss for an asset is reversed if, and 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 (net of accumulated depreciation) had no impairment loss been recognised for the asset in prior years. A reversal of impairment loss for an asset is recognised in income and expenditure statement.

2.7 Loans and receivables

Loans and receivables are initially recognised at their fair values plus transaction costs and subsequently carried at amortised cost using the effective interest method, less accumulated impairment losses.

A financial asset is derecognised when the contractual right to receive cash flows from the asset has expired or the Board has transferred substantially all risks and rewards of the asset. On de-recognition of a financial asset, the difference between the carrying amount and the sum of the consideration received is recognised in income and expenditure statement.

2.8 Cash and cash equivalents

Cash and cash equivalents include cash on hand, cash at bank and fixed deposits that are subject to an insignificant risk of changes in value.

2.9 Impairment of financial assets

The Board assesses at the end of each reporting period whether there is any objective evidence that a financial asset is impaired.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Cont'd)

2.9 Impairment of financial assets (cont'd)

If there is objective evidence that an impairment loss on loans and receivables carried at amortised cost has been incurred, the amount of the loss is measured as the difference between the assets' carrying amount and the present value of estimated future cash flows discounted at the financial asset's original effective interest rate. The carrying amount of the asset is reduced through the use of an allowance account. The amount of the loss is recognised in income and expenditure statement.

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 is reversed. Any subsequent reversal of an impairment loss is recognised in income and expenditure statement, to the extent that the carrying value of asset does not exceed its amortised cost at the reversal date.

2.10 Financial liabilities

Financial liabilities are recognised when, and only when, the Board becomes a party to the contractual provisions of the financial instrument. Financial liabilities are recognised initially at fair value plus in the case of financial liabilities not at fair value through profit or loss, directly attributable transaction costs. After initial recognition, financial liabilities are subsequently measured at amortised cost using the effective interest method. Gains or losses are recognised in income and expenditure statement when the liabilities are derecognised, and through the amortisation process.

A financial liability is de-recognised when the obligation under the liability is discharged or cancelled or expires.

2.11 Provisions

Provisions are recognised when the Board has a present obligation (legal or constructive) where as a result of a past event, 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 the obligation can be made.

Where the Board expects some or all of a provision to be reimbursed, the reimbursement is recognised as a separate asset but only when the reimbursement is virtually certain. The expense relating to any provision is presented in income and expenditure statement net of any reimbursement.

Provisions are reviewed at each reporting date and adjusted to reflect the current best estimate. If it is no longer probable that an outflow of resources embodying economic benefits will be required to settle the obligation, the provision is reversed.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Cont'd)

2.12 Income recognition

Income is recognised to the extent that it is probable that the economic benefits will flow to the Board and the income can be reliably measured and when the specific criteria for each of the Board's activities are met as follows:

Fees

Application fees, service charges, registration fees enrolment income, late payment fees, replacement charges and re-registration fees are recognised upon receipt.

Practising certificate fees are recognised on an accrual basis over the validity period of the certificate.

Other income

Other income is recognised upon receipt.

2.13 Leases

Operating lease – when the Board is the lessee

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

Contingent rents are recognised as expense in income and expenditure statement when incurred.

2.14 Taxation

The Board is exempted from income tax under Section 13(1) (e) of the Singapore Income Tax Act Chapter 134.

2.15 Related parties

SB-FRS 24 defines a related party as a person or entity that is related to the reporting entity and it includes a person or a close member of that person's family if that person:

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Cont'd)

2.15 Related parties (cont'd)

SB-FRS 24 defines a related party as a person or entity that is related to the reporting entity and it includes a person or a close member of that person's family if that person:

- (i) has control or joint control over the reporting entity;
- (ii) has significant influence over the reporting entity; or
- (iii) is a member of the key management personnel of the reporting entity or of a related entity.

For the purpose of the financial statements related parties are considered to be related to the Board if the Board has the ability, directly or indirectly, to control or exercise significant influence over the party in making financial and operating decisions or vice versa, or where the Board and the party are subject to common control or common significant influence.

Related parties of the Board include all government ministries, departments, other statutory boards, Organs of the State and individuals who are key management personnel or close member of their families.

2.16 Contingencies

A contingent liability is a possible obligation that arises from past events and whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the Board; or a present obligation that arises from past events but is not recognised because it is not probable that an outflow of resources embodying economic benefits will be required to settle the obligation or the amount of the obligation cannot be measured with sufficient reliability.

A contingent asset is a possible asset that arises from past events and whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the Board.

Contingent liabilities and assets are not recognised on the statement of financial position of the Board.

3. SIGNIFICANT ACCOUNTING JUDGEMENTS AND ESTIMATES

No critical judgement was made by the management in the process of applying the Board's accounting policies nor were there key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements.

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4. PLANT AND EQUIPMENT

	Furniture and fittings	Office equipment	Computer systems	Computer & communication systems	Total
	\$	\$	\$	\$	\$
<u>Cost</u>					
As at 1 April 2015	220,967	6,569	45,568	53,526	326,630
Additions	-	2,461	-	6,206	8,667
As at 31 March 2016 and 2017	220,967	9,030	45,568	59,732	335,297
<u>Accumulated depreciation</u>					
As at 1 April 2015	160,537	6,569	45,568	52,475	265,149
Depreciation	27,482	136	-	2,290	29,908
As at March 2016	188,019	6,705	45,568	54,765	295,057
Depreciation	27,482	820	-	1,241	29,543
As at 31 March 2017	215,501	7,525	45,568	56,006	324,600
<u>Net carrying amount</u>					
As at 31 March 2017	5,466	1,505	-	3,726	10,697
As at March 2016	32,948	2,325	-	4,967	40,240

5. CASH AND CASH EQUIVALENTS

	2017	2016
	\$	\$
Cash on hand	7,851	5,903
Cash at bank	1,376,951	1,523,964
Fixed deposits	2,107,932	2,086,517
	<u>3,492,734</u>	<u>3,616,384</u>

Cash at bank earns interest at the banks' prevailing interest rates.

Fixed deposits placed with banks for a period of 12 months (2016: 12 months), bear interest at 1.20% (2016: 0.42% to 1.14%) per annum.

6. OTHER RECEIVABLES

	2017	2016
	\$	\$
Fee receivables	53,208	1,440
Deposits	37,390	37,390
Prepayments	6,757	1,049
Other receivables	15,730	14,048
	<u>113,085</u>	<u>53,927</u>

Other receivables are unsecured, non-interest earning and short-term in nature.

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7. OTHER PAYABLES

	2017 \$	2016 \$
Fees received in advance	1,331,921	1,295,771
Accruals	418,533	111,469
Amount due to Singapore Medical Council	250,975	404,015
Sundry payable	57,685	135,600
	<u>2,059,114</u>	<u>1,946,855</u>

Amount due to Singapore Medical Council is non-trade, unsecured, non-interest bearing and with credit term of 14 days.

Fees received in advance relate to the payment received for practising certificate fee.

8. INTERBOARD CHARGES

	2017 \$	2016 \$
Staff cost	1,323,010	1,367,929
HR and registry costs	26,562	26,562
Medical expense	131	175
Temporary staff	44,850	60,693
Recruitment expenses	145	133
Allowance for unutilised leave	-	9,241
	<u>1,394,698</u>	<u>1,464,733</u>

9. MMF SURCHARGE

	2017 \$	2016 \$
MMF surcharge	<u>212,000</u>	<u>15,000</u>

In December 2015, the Ministry of Finance (MOF) notified the Ministry of Health (MOH) that they will resume the collection of Management Manpower Framework (MMF) surcharge including the outstanding surcharge due for the financial year ended 2013 to 2015. In May 2016, MOH informed various agencies within MOH family of the total amount of surcharge apportioned based on the percentage of contribution to the overall excess in MMF headcount. As a result, MMF surcharge of \$212,000 was recognised by the Board entirely in this financial year.

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10. OTHER EXPENSES

	2017 \$	2016 \$
Audit fees	7,900	6,050
Bank charges	14,550	15,288
Committee expense	338	495
General expenses	5,930	5,747
Nursing regulatory conference	13,383	13,057
Office cleaning	11,824	10,005
Office equipment rental	7,219	7,035
Staff welfare, refreshment and recreation	2,631	2,324
Subscription fee	2,555	2,149
Telephone and utilities	15,318	18,192
Training and development	15,300	11,610
Transport expenses	2,043	2,804
	98,991	94,756

11. COMMITMENTS

Operating lease commitment - as a lessee

The Board leases office space from a non-related party under non-cancellable operating lease agreement. This lease has a tenure of 2 years with renewal option included in the tenancy agreement.

Minimum lease payments recognised as an expense in income and expenditure statement for the financial year ended 31 March 2017 amounted to \$160,029 (2016: \$160,029).

The future minimum lease payable under non-cancellable operating lease contracted for at the end of the reporting period but not recognised as liability is as follows:

	2017 \$	2016 \$
Operating lease payments due:		
- within one year	106,686	160,029
- Later than one year but not later than five years	-	106,686
	106,686	266,715

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.

12. SIGNIFICANT RELATED PARTY TRANSACTIONS

The Board is a statutory board incorporated under Ministry of Health. As a statutory board, all government ministries, departments, other statutory boards and Organs of State are deemed related parties of the Board.

In addition to the information disclosed elsewhere in the financial statements, the following significant transactions took place during the financial year between the Board and its related parties at rates and terms agreed:

	2017 \$	2016 \$
<u>Transactions with related parties</u>		
<u>Singapore Medical Council</u>		
- Expenses paid on behalf of the Board	168,727	107,965
- HR and registry cost charged to the Board	26,562	26,562
- Staff costs charged to the Board	<u>1,367,860</u>	<u>1,428,622</u>

13. FUND MANAGEMENT

The primary objective of the Board's fund management is to ensure that the funding from government grants and members' fees are properly managed and used to support its operations.

The Board manages its fund structure and makes adjustments to it, in light of changes in economic conditions. No changes were made in the objectives, policies or processes during the financial year ended 31 March 2017 and 31 March 2016 respectively.

The Board is not subjected to externally imposed capital requirements.

14. FINANCIAL RISK MANAGEMENT AND FAIR VALUE

14.1 Financial risk management

The Board is exposed to minimal financial risks arising from its operations and the use of financial instruments. The main area of financial risk faced by the Board is liquidity risk. The Board's management reviews and agrees on policies for managing the risks.

Liquidity risk

Liquidity risk is the risk that the Board will encounter difficulty in meeting financial obligations due to shortage of funds.

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 in the balance sheet are repayable within one year from the reporting date.

14. FINANCIAL RISK MANAGEMENT AND FAIR VALUE (Cont'd)

14.2 Fair value of financial assets and financial liabilities

The carrying amount of cash and cash equivalents (Note 5), other receivables (Note 6, excluding prepayments), other payables (Note 7, excluding fees received in advance and allowance for unutilised leave) are assumed to approximate their respective fair values due to the relatively short-term maturity of these financial instruments.

14.3 Financial instruments by categories

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

	2017 \$	2016 \$
<u>Financial assets</u>		
Cash and cash equivalents (Note 5)	3,492,734	3,616,384
Other receivables (Note 6)	113,085	53,927
Less: Prepayments (Note 6)	6,757	1,049
Loans and receivables	3,599,062	3,669,262
 <u>Financial liability</u>		
Other payables (Note 7)	2,059,114	1,946,855
Less: Fees received in advance (Note 7)	1,331,921	1,295,771
Financial liability carried at amortised cost	727,193	651,084

15. COMPARATIVE FIGURES

Representation of prior year income and expenditure statement have been made to enhance comparability with current year's financial statements. As a result, certain line items have been amended on the face of the income and expenditure statement and the related notes to the financial statements.

	As previously stated \$	As represented \$
31 March 2016		
<u>Income and expenditure statement</u>		
Expenses:		
Interboard charges	1,479,733	1,464,733
MMF surcharge	-	15,000
General and administrative expenses	1,072,222	-
Computer operations	-	250,442
Legal fees	-	76,690
Office rental	-	210,029
Postage and courier	-	30,037
Printing and stationery	-	27,208
Seconded staff	-	383,060
Other expenses	-	94,755

SELECTED CHARACTERISTICS OF NURSES AND MIDWIVES

FIGURE A: SELECTED CHARACTERISTICS OF REGISTERED NURSES

		2014	2015	2016
	TOTAL	28864	29894	31615
SEX				
	Male	2748	2991	3329
	Female	26116	26903	28286
ETHNIC GROUP				
	Chinese	15493	15518	16140
	Malay	3366	3489	3693
	Indian	3368	3464	3710
	Others	6637	7423	8072
ACTIVITY STATUS				
	Working Full-time	23628	25109	26461
	Working Part-time	902	813	773
	Not Working/Unknown	3752	3493	3332
	Doing Non-nursing work	582	479	1049
EMPLOYMENT				
	Public Sector	17667	18566	19618
	Private Sector	6863	7356	7616
CITIZENSHIP				
	Singaporean/Permanent Resident	21168	21100	21936
	Malaysian	1749	1949	2230
	Chinese (PRC)	908	1002	955
	Filipino	3713	4396	4942
	Indian	455	505	544
	Myanmar	589	678	742
	Others	282	264	266
MARITAL STATUS				
	Single	15284	15461	15911
	Married	12958	13740	14974
	Others	622	693	730
AGE				
	Median Age (years)	33	33	33
	Average Age (years)	37	37	37
	Under 25 yrs	3722	3403	3223
	25 - 34 yrs	11621	13040	14316
	35 - 44 yrs	6596	6720	7024
	45 - 54 yrs	3169	3268	3516
	55 - 59 yrs	1517	1319	1192
	Above 60 yrs	2239	2144	2344

FIGURE B: SELECTED CHARACTERISTICS OF ENROLLED NURSES

		2014	2015	2016
	TOTAL	8528	8931	8781
SEX				
	Male	743	863	938
	Female	7785	8068	7843
ETHNIC GROUP				
	Chinese	1936	1689	1596
	Malay	2135	2076	2087
	Indian	1574	1688	1664
	Others	2883	3478	3434
ACTIVITY STATUS				
	Working Full-time	6862	7504	7323
	Working Part-time	222	178	148
	Not Working/Unknown	1315	1148	1062
	Doing Non-nursing work	129	101	248
EMPLOYMENT				
	Public Sector	5006	5305	5149
	Private Sector	2078	2377	2322
CITIZENSHIP				
	Singaporean/Permanent Resident	5197	4914	4891
	Malaysian	46	52	58
	Chinese (PRC)	328	276	211
	Filipino	1963	2578	2557
	Indian	467	609	578
	Myanmar	515	485	463
	Others	12	17	23
MARITAL STATUS				
	Single	5067	5331	5083
	Married	3267	3412	3503
	Others	194	188	195
AGE				
	Median Age (years)	30	29	30
	Average Age (years)	35	34	34
	Under 25 yrs	1477	1404	1147
	25 - 34 yrs	4071	4810	4932
	35 - 44 yrs	1163	1089	1049
	45 - 54 yrs	1078	1023	1024
	55 - 59 yrs	282	249	258
	Above 60 yrs	457	356	371

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

		2014	2015	2016
	TOTAL	226	180	165
SEX				
	Male	-	-	-
	Female	226	180	165
ETHNIC GROUP				
	Chinese	162	125	112
	Malay	18	15	12
	Indian	16	12	14
	Others	30	28	27
ACTIVITY STATUS				
	Working Full-time	107	101	90
	Working Part-time	25	21	19
	Not Working/Unknown	90	55	45
	Doing Non-nursing work	4	3	11
EMPLOYMENT				
	Public Sector	71	71	62
	Private Sector	61	51	47
CITIZENSHIP				
	Singaporean/Permanent Resident	212	167	152
	Malaysian	2	2	2
	Chinese (PRC)	0	0	0
	Filipino	4	4	5
	Indian	0	0	0
	Myanmar	0	0	0
	Others	8	7	6
MARITAL STATUS				
	Single	41	32	28
	Married	173	139	128
	Others	12	9	9
AGE				
	Median Age (years)	65	65	65
	Average Age (years)	64	63	63
	Under 25 yrs	0	0	0
	25 - 34 yrs	5	3	4
	35 - 44 yrs	16	17	17
	45 - 54 yrs	6	6	5
	55 - 59 yrs	28	14	11
	Above 60 yrs	171	140	128

* 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

		2014	2015	2016
	TOTAL	1337	1149	1092
SEX				
	Male	-	-	-
	Female	1337	1149	1092
ETHNIC GROUP				
	Chinese	1051	876	828
	Malay	118	114	108
	Indian	109	100	100
	Others	59	59	56
ACTIVITY STATUS				
	Working Full-time	800	771	721
	Working Part-time	158	128	119
	Not Working/Unknown	355	232	201
	Doing Non-nursing work	24	18	51
EMPLOYMENT				
	Public Sector	572	563	530
	Private Sector	386	336	310
CITIZENSHIP				
	Singaporean/Permanent Resident	1307	1122	1066
	Malaysian	12	10	9
	Chinese (PRC)	1	1	1
	Filipino	7	8	9
	Indian	0	0	0
	Myanmar	0	0	0
	Others	10	8	7
MARITAL STATUS				
	Single	319	269	248
	Married	936	802	768
	Others	82	78	76
AGE				
	Median Age (years)	62	61	62
	Average Age (years)	60	59	60
	Under 25 yrs	0	1	0
	25 - 34 yrs	49	54	46
	35 - 44 yrs	92	95	99
	45 - 54 yrs	130	125	116
	55 - 59 yrs	261	176	127
	60 yrs and Above	805	698	704

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

		2014	2015	2016
	TOTAL	640	639	645
SEX				
	Male	265	259	261
	Female	375	380	384
ETHNIC GROUP				
	Chinese	363	350	346
	Malay	101	107	110
	Indian	89	94	98
	Others	87	88	91
ACTIVITY STATUS				
	Working Full-time	537	553	547
	Working Part-time	23	20	16
	Not Working/Unknown	72	60	69
	Doing Non-nursing work	8	6	13
EMPLOYMENT				
	Public Sector	480	495	486
	Private Sector	80	78	77
CITIZENSHIP				
	Singaporean/Permanent Resident	634	634	639
	Malaysian	0	0	0
	Chinese (PRC)	1	1	1
	Filipino	1	1	1
	Indian	0	0	1
	Myanmar	0	0	0
	Others	4	3	3
MARITAL STATUS				
	Single	170	154	148
	Married	443	460	473
	Others	27	25	24
AGE				
	Median Age (years)	49	47	45
	Average Age (years)	48	48	48
	Under 25 yrs	4	2	3
	25 - 34 yrs	135	140	137
	35 - 44 yrs	149	165	177
	45 - 54 yrs	94	92	89
	55 - 59 yrs	77	66	62
	60 yrs and Above	181	174	177

FIGURE F: SELECTED CHARACTERISTICS OF ADVANCED PRACTICE NURSES

		2014	2015	2016
	TOTAL	145	172	197
SEX				
	Male	12	12	13
	Female	133	160	184
ETHNIC GROUP				
	Chinese	126	149	175
	Malay	6	8	8
	Indian	8	11	11
	Others	5	4	3
ACTIVITY STATUS				
	Working Full-time	142	167	194
	Working Part-time	3	4	3
	Not Working/Unknown	0	1	0
	Doing Non-nursing work	0	0	0
EMPLOYMENT				
	Public Sector	137	166	189
	Private Sector	8	5	8
CITIZENSHIP				
	Singaporean/Permanent Resident	141	169	195
	Others	4	3	2
MARITAL STATUS				
	Single	56	65	74
	Married	85	100	112
	Others	4	7	11
AGE				
	Median Age (years)	40	40	40
	Average Age (years)	41	41	41
	Under 25 yrs	0	0	0
	25 - 34 yrs	23	22	25
	35 - 44 yrs	82	103	112
	45 - 54 yrs	33	40	50
	55 - 59 yrs	6	5	8
	Above 60 yrs	1	2	2