Advanced Practice Nursing in Singapore-The American Experience

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Objectives

- History of APN in Singapore
- Nurse Practitioners (USA) and Advanced Practice Nurse (Singapore), similarities and differences between the 2 programs
- How do foreign APNs facilitate change?
- Challenges, limitations and obstacles
- Role of APN in EMD, 1 yr after
History of APN in Singapore

- 2003: Started the Master of Nursing at the National University of Singapore
- 2004: First 15 students graduate from the MN program
- 2005: Amended the Nurses & Midwives Act
- 2006: Second cohort of 12 students graduate from the MN program
- 2006: Established the APN Register
- 2007: 9 Certified APNs
- 2008: 17 Certified APNs under 4 specialties
  - 3 Acute Care
  - 3 Community Health
  - 8 Med/Surg
  - 4 Mental Health
- 2009: 37 Certified APNs (118% increase)
- 2010: 48
- 2011: 78 (62.5% increase)
- 2012: 88 (24 APNs in NUH, 11 Interns)
  - 20 Acute Care
  - 8 Community Health
  - 42 Med/Surg
  - 18 Mental Health
Family Nurse Practitioner Care
(Background)

- is characterized by an emphasis on health promotion and disease prevention and, in addition,
  - involves the **diagnosis and management** of common acute illnesses/injuries and stable chronic diseases.
  - may **order, conduct, and interpret** appropriate diagnostic and laboratory tests
  - **Prescribe** pharmacologic agents, treatments, and non pharmacologic therapies
  - **Educating and Counseling** individuals and their families regarding healthy lifestyle behaviors are key components of NP care
Illinois

- General authority to prescribe is outlined in the APN's collaborative practice agreement with a physician.
- The APRN may prescribe and dispense within the scope of practice of the collaborating physician.
- All prescriptions must show collaborating physician's name; the collaborating physician's signature is not required.
- Authority to prescribe controlled substances includes schedule II-V. (Schedule II drugs e.g. Morphine, Pethidine, Fentanyl, Ritalin etc.)
Advanced Practice Roles

- **US**
  - Certified RN Anesthetist
  - Certified Nurse Midwife
  - Clinical Nurse Specialist
  - Nurse Practitioner

- **Singapore**
  - Clinical Nurse Specialist
    +
  - Nurse Practitioner
    =
  - Singapore APN

**HYBRID**
# Comparison: Nurse Practitioner/Advanced Practice Nurse

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<thead>
<tr>
<th></th>
<th>US Nurse Practitioner</th>
<th>Singapore APN</th>
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<tbody>
<tr>
<td>MN programme requirement: BSN</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Diagnosis and management</td>
<td>✓</td>
<td>collaborative</td>
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<tr>
<td>Order, conduct and interpret</td>
<td>✓</td>
<td>collaborative</td>
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<tr>
<td>Prescribe</td>
<td>✓</td>
<td>❌</td>
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<td>Education and counseling</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>On-site oversight requirement</td>
<td>State dependent (Illinois: once per month, no duration specified)</td>
<td>✓</td>
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<tr>
<td>Quantitative requirement for Physician chart review</td>
<td>Periodic review for medication orders</td>
<td>5 records every 3 months (NUH EMD)</td>
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<td>Maximum NP/APN to Physician ratio</td>
<td>State dependent (Illinois-non stated)</td>
<td>Non stated</td>
</tr>
<tr>
<td>Clinical Nurse Specialist Role</td>
<td>NIL to minimum</td>
<td>✓ ✓ ✓ ✓ ✓</td>
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CNS Role, my challenges

Education

- Provides education in area of expertise to staff, community and education organizations
- Develops, implements and evaluates educational programmes based on identified needs
- Facilitates a staff development culture
CNS

- **Resource person**
  - Serves as a consultative resource to nursing staff and other health team members
  - Contributes to the determination of health and service needs, evaluates and improves on the services and programmes for the patient population
  - Monitors and initiates strategies to improve the quality of care
CNS

- Research
  - Appraises and synthesizes outcomes or research critically
  - ✔ Uses evidence-based approach to patient care management and outcomes
  - Identifies research questions and conducts or participates in clinical research activities
  - Communicates research findings at professional meetings or by publications
CNS

- **Leadership**
  - Provides clinical supervision to nursing staff
  - Facilitates the development of nursing staff to promote their professional growth, including APN/Interns
  - Develops practice through participating in professional organization’s initiatives
  - Promotes change and innovation proactively
Challenges, limitations and obstacles

- Role change from NP to APN
- Lack of knowledge by staff (nurses and MDs)
- Lack of support from physicians
- Inadequate level of knowledge for the CNS role
- No prescriptive authority
- Low level of autonomy
- Lack of knowledge by patients and families (lack of acceptance)
- Cultural differences/Language differences
Moving forward:

- Respect and recognition from other health care providers
- Respect, recognition and acceptance by patients
- Increase level of autonomy and empowerment of patient care
- Improve collaboration with other health care providers (better patient outcomes)
- Ability to influence change to improve clinical care
- Obtain prescriptive authority (distant future)
Thank You!!

Questions?