Introduction

Intensive care nurse shortages and nursing shortages generally have been documented in many countries around the world [1–4].

In 2001, a published study of critical care nursing organizations in 23 countries found that staffing levels, followed by working conditions, were the two most important issues and priorities facing critical care nurses at that time [5]. In that study all 23 responding countries identified staffing levels as the most important issue for their country’s critical care nurses. The researchers repeated the study in 2005 and found that staffing levels and working conditions remain among the most important issues to critical care nurses in 51 countries of the world [6]. A similar study is being conducted again in 2009 and similar results are expected [7], although the current world-wide financial crisis may influence this slightly as economic recessions often result in more nurses wishing to work to supplement the family income and subsequently the nursing shortage is less evident during the recession period [8].

The need for intensive care workforce and workload management systems is a common concern of many, yet in 2003 when the World Federation of Critical Care Nurses (WFCCN) was requested by its Council to develop guidelines on critical care nursing workforce requirements, few countries actually had documented workforce guidelines in place; Australia [9] and the UK [10] were notable exceptions.

Finding common, consistent, and (hopefully) evidence-based approaches to nursing workforce and workload management issues is of particular importance to all groups interested in intensive care… not just nurses, physicians, hospital administrators, and other departments that depend on a responsive intensive care service, but also the community at large and of course our patients and their families.
Definition

The WFCCN describes a critical care nurse as a person who holds a recordable or registered nursing qualification in their own country and contributes to the field of critical care nursing [11]. Further, critical care nursing is specialized nursing care of critically ill patients who have manifest or potential disturbances of vital organ functions. Critical care nursing means assisting, supporting, and restoring the patient towards health, or easing the patient’s pain and preparing them for a dignified death. The aim of critical care nursing is to establish a therapeutic relationship with patients and their relatives and to empower the individuals’ physical, psychological, sociological, and spiritual capabilities by preventive, curative, and rehabilitative interventions [11].

Although sometimes the terms critical care and intensive care are used interchangeably, it is helpful to clarify the nomenclature. In this context, it is useful to first consider what is meant by an “intensive care unit” (ICU). For the purpose of this discussion, it is understood to mean a centralized location within a hospital environment where the sickest patients (critically ill) with severe organ failure are treated, advanced technological support is provided, and specialized staff provide the workforce. Usually, nurse-to-patient ratios are significantly higher than those found in general ward areas. In this context, “intensive care” is provided within an intensive care unit, and refers to the specialized interventions that are required to care for critically ill patients. By definition, the nature of this work is “intensive,” and requires multiprofessional teamwork.

Critical care is an expansive term that incorporates all areas of high intensity care. While intensive care is included under this umbrella term, other acute areas such as, but not limited to, emergency departments, recovery rooms, and coronary care units are covered also. The term is very broad, and generally includes all areas of high care, where “high” can be defined as care over and above that normally provided in a general ward area. As with intensive care units, these critical care areas are usually centralized, and provide higher levels of technological support and multiprofessional expertise than that found on general wards.

Intensive care nursing workforce management has been identified as having similar characteristics to general nursing although more complex and difficult for the following reasons:

- Patient care is labor intensive, many patients requiring one nurse 24 h per day [12].
- Aspects of the role can be very demanding and stressful, resulting in burnout and frustration; hence, many intensive care nurses move on to other roles [13].
- Many critical care nurses are highly qualified and experienced but their remuneration and career choices do not reflect this fact compared with other nursing positions or other jobs that they could perform for more money and recognition [14].

It is the large numbers of highly skilled nurses required to deliver safe care in these intensive care environments that make the workforce demands and management so critical to care delivery. Good planning and management of workloads and workforce in a critical care nursing environment will lead to staff job satisfaction and retention.