

New Zealand College of Critical Care Nurses Position Statement (2019) on the Definition of Critical Care Nursing

Background

Intensive and high dependency care in New Zealand has historically been incorporated under the concept of critical care. As the hospital patient population have become more complex, there is an increasing interest in providing high dependent care within a high dependency care unit. The national critical care nursing standards reflect the different standard requirements for both intensive and high dependency care units.

This document replaces the original document Critical Care Nurses Section. (2009) Critical Care Nurses Section position statement (2009) on the definition of critical care nursing. Wellington, New Zealand: New Zealand Nurses Organisation.

Purpose

The aim of this position statement is to define critical care nursing, intensive care and high dependency unit care. This paper also reflects the need for both intensive and high dependency care units to comply with all the New Zealand College of Critical Care Nurses (NZCCCN) national standards and position statements.

The following definition statements have been agreed and supported by the NZCCCN.

- Critical care nursing is defined by the NZCCCN as:

Critical care nursing is defined as caring for the high acuity patient requiring intensive monitoring and organ support therapies. The nurse will be able to apply knowledge, skills and critical thinking in the holistic approach to caring for these acutely unwell patients and their whānau/family. Critical care nursing is the provision of nursing care for patients and their families within critical care, intensive care, combined intensive/high dependency/coronary care, or high dependency care units (NZCCCN, 2015). A critical care nurse is a nurse who has completed a speciality practice post registration programme that meets the New Zealand Standards for Critical Care Nursing Education (NZCCCN, 2019) or a nurse who has successfully completed another critical care nursing programme and is able to provide evidence of continued professional development reflecting their theoretical knowledge and clinical expertise that meets the standards outlined in the New Zealand Standards for Critical Care Nursing Education (NZCCCN, 2019). The critical care nurse works cohesively and collaboratively with the multi-disciplinary team of the intensive/critical care environment.

- A Intensive Care Unit (ICU) is defined by the College of Intensive Care Medicine (2016) is:
An Intensive Care Unit (ICU) is a specially staffed and equipped, separate and self-contained area of a hospital dedicated to the management of patients with life-threatening illnesses, injuries and complications, and monitoring of potentially life-threatening conditions. It provides special expertise and facilities for support of vital functions and uses the skills of medical, nursing and other personnel experienced in the management of these problems. In many units, ICU staff are required to provide services outside of the ICU such as emergency response (e.g. rapid response teams) and outreach services. Where applicable the hospital must provide adequate resources for these activities.
- Intensive care units, whether being Level 1, 2, or 3, comply with the College of Intensive Care Medicine (2016) standards.
- A High Dependency Unit (HDU) is defined by the Intensive Care Clinical Advisory Group (2005) is:
A discrete unit within a hospital, able to supply critical care expertise at less intensive resource levels, providing a level of care that falls between the general ward level and the Intensive Care Unit. A high dependency unit should be able to provide monitoring and support to patients [but] should not manage patients requiring multiple organ support or mechanical ventilation.
- Smaller hospitals which have developed self-described HDUs that are occasionally required to provide ventilation or other advanced support should comply with the standards for Level 1 units (Intensive Care Advisory Group, 2005).
- Hospitals that have developed separate, subspecialty, high dependency areas or central, dedicated HDUs, whatever their nature and purpose, must have a defined relationship with, and ready access to, the expertise and resources of an ICU via a mutually agreed access policy (Intensive Care Advisory Group, 2005).

Outcome

Both intensive care and high dependency units will comply with the NZCCCN national standards and position statements.

References and related documents

Intensive Care Clinical Advisory Group (2005). *Intensive Care Services in New Zealand: A Report the Deputy Director-General, Clinical Services*. Wellington, New Zealand: Ministry of Health.

College of Intensive Care Medicine of Australia and New Zealand. 2016. *Minimum Standards for Intensive Care Units. Review IC-1(2016)*. Melbourne: FICANZCA.
https://www.cicm.org.au/CICM_Media/CICMSite/CICM-Website/Resources/Professional%20Documents/IC-1-Minimum-Standards-for-Intensive-Care-Units_2.pdf

New Zealand College of Critical Care Nurses (2015). *New Zealand Standards for Critical Care Nurse Staffing*. Wellington, New Zealand: New Zealand Nurses' Organisation.

New Zealand College of Critical Care Nurses (2019). *New Zealand Standards for Critical Care Nursing Education*. Wellington, New Zealand: New Zealand Nurses' Organisation.

Date adopted: 2010

Reviewed: 2019

Review date: 2024

Correspondence to: nurses@nzno.org.nz

Principal author: NZ College of Critical Care Nurses

Mission statement

NZNO is committed to the representation of members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa/ New Zealand through participation in health and social policy development.

ISBN: 978-1-98-856013-7

This material is copyright to the New Zealand Nurses Organisation.

Apart from any fair dealing for the purpose of private study, research, criticism or review, as permitted under the Copyright Act, no part of this publication may be reproduced by any process, stored in a retrieval system or transmitted in any form without the written permission of the Chief Executive of the New Zealand Nurses Organisation (NZNO), PO Box 2128, Wellington 6140.