

The true worth of a nurse ... time to act!

The COVID-19 outbreak has shown the world the true value of the nursing profession to the healthcare system and to humanity. Indeed, without nurses (and midwives) there would be no health care! (Editorial, 2020). The timing of this "freak" (although not unpredictable) viral pandemic with the World Health Assembly declaration that 2020 is the International Year of the Nurse and Midwife is a poignant coincidence. For almost 200 years we have witnessed the progressive growth of professionalization, capacity and capability of the nursing profession globally. In most countries in the world that survey the public trust and confidence in professional groups, most select nursing in the top group, often ahead of doctors and other noble professions (Reinhart, 2020).

And in 2020, we are witnessing one of the best examples of how the nursing profession are selflessly responding to the COVID-19 pandemic in a manner that has characterized them as super heroes on Facebook and other social media outlets further emphasizing the strong regard for which the public hold nurses in contemporary society (Matthews, 2020).

During the pandemic we are also witnessing how dependent we are on professional nursing care and processes to hold the health system together and to manage this crisis on the frontline. In fact, in some cases non-nurses are skilling up to learn how to be nurses as was the case when a cardiac surgeon decided to upskill as an Intensive Care Unit (ICU) nurse. Consultant thoracic surgeon Joel Dunning realized, like many others, that he would be more helpful to his patients at this time if he had ICU nursing skills as opposed to his regular surgical skills (Dunning, 2020). The current pandemic crisis has exposed the failings of many governments globally who have not only failed to invest in pandemic preparedness (World Bank Group, 2019), but even more so, they have failed to invest in preparing a sufficient nursing workforce and a sufficiently skilled nursing workforce. (Royal College of Nursing, 2018; WHO, 2020a)

Nowhere has this been more profoundly felt but in the area of intensive and critical care, where it is known that chronic shortages of qualified and skilled intensive and critical care nurses have existed for decades in many countries with inadequate government response. (Williams, Fulbrook, Kleinpell, Schmollgruber, & Aberto, 2015) However, it is not just intensive and critical care that has suffered but the entire nursing workforce. In the State of the World Nursing 2020 report released on 7 April 2020, it shows that the world has 28 million nurses, or one nurse for every 250 people on the planet, 7 million less than required. (WHO, 2020b) And nowhere more acutely is this deficit felt than in lower-income countries

where the nurse-to-population ratio can be as little as 1:2500 (World Bank, 2020).

There are 10 fundamental actions required of world governments to address this appalling and worsening situation: (Williams et al., 2015):

- Educate more nurses to build a more solid workforce base
- Strengthen data collection so we actually understand and know where the nursing workforce needs are
- Establish stronger monitoring and reporting to ensure rich countries DO NOT exploit the nursing workforce of poor countries
- Ensure the curriculum of nurses is broad enough to encompass strong primary and public healthcare methods
- Develop nurses as leaders, not just in the workplace but in the community more broadly
- Optimize nursing practice by supporting a broader scope of nursing practice that will add extra capacity to the health system
- Support greater recognition and in particular remuneration of nurses so that they do not need to leave nursing because of poor salary and working conditions
- Encourage gender diversity. Sadly, it is a fact that where there are more men in nursing there are better pay and conditions. However, nursing is a very fulfilling and rewarding profession for many men that should be advertised and encouraged
- Regulators and bureaucracies need to take a modern and liberalizing attitude towards nurses and nursing to allow nursing to fulfil its full potential in all aspects of professional life
- The response to these needs is a whole-of-government responsibility. Through collaboration with sectors such as education, finance, immigration as well other professions and representative bodies, we all need to make a shared commitment to this call for a stronger and more capable nursing workforce.

The above 10 points summarize the 144-page State of the World Nursing 2020 report and apply to the broader profession of nursing. However, the final discussion relates specifically to intensive and critical care nursing. We can never have another weak response to a pandemic as we have had this time, especially in terms of intensive and critical care, as this is where many of the lives are lost unnecessarily.


In addition to the above 10 broader points, it is timely to focus on the specific elements that governments, chief nurses and regulators need to be acutely aware of now during the COVID-19 recovery:

- Keep all the nurses currently in ICU that wish to stay in ICU after COVID-19 demands have subsided and continue to up skill them as critical care nurses, in addition bring more nurses into ICU and

upskill them. Always have a full ICU nursing workforce complement – it is easier to deploy excess ICU nurses to the wards than it is to deploy ward nurses to ICU... and cheaper! Reduce dependency on over time and deployment to ICU from non-critical care areas, such methods should only be used as a last resort.

- Fund ICU courses for nurses. Registered Nurses should not have to pay for their own up-skilling so they can care for critically ill patients. This is a government responsibility and must be funded by government as part of its mitigation plan towards future large-scale mortality outcomes in the future.
- Allow existing critical care nurses to have advanced training (to be ICU clinical specialists and nurse practitioners) so they can provide advanced practice and preserve medical staff for the most complex and difficult tasks and decisions.
- Pay critical care nurses a premium for the additional advanced education, training and personal development necessary to be an expert in this field and mitigate the need for them to leave ICU for a better pay and more fulfilling work conditions elsewhere.
- Collaboration: Every government of the world needs to establish a post-COVID-19 intensive and critical care nursing taskforce to examine the above points and put in place a 5-year plan to reach the goals needed to prevent another COVID-19-like failing of our communities.

The nursing profession is the backbone of the healthcare system and critical care nurses are a necessary, integral and critical element to this system that needs special attention. The experience of the COVID-19 pandemic has highlighted these points poignantly..... let us learn from this important lesson.

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REFERENCES

- Dunning, J. (2020). COVID19 has taken me from surgeon to ICU nurse. *Nursing Standard*. Retrieved from <https://rcni.com/nursing-standard/opinion/comment/covid-19-has-taken-me-surgeon-to-icu-nurse-159586>
- Editorial. (2020). The status of nursing and midwifery in the world. *Lancet*. [https://doi.org/10.1016/S0140-6736\(20\)30821-7](https://doi.org/10.1016/S0140-6736(20)30821-7)
- Matthews, R. (2020). Nurses and Doctors aren't angels, they're super-heroes. *The Daily Examiner*. Retrieved from <https://www.dailyexaminer.com.au/news/nurses-and-doctors-arent-angels-theyre-superheroes/3986385/>
- Reinhart, R. J. (2020). Nurses continue to rate highest in honesty and ethics. *Gallup*. Retrieved from <https://news.gallup.com/poll/274673/nurses-continue-rate-highest-honesty-ethics.aspx>
- Royal College of Nursing. (2018). *Investing in a safe and effective workforce: Continuing professional development for nurses in the UK*. London, UK: RCN. Retrieved from <https://www.rcn.org.uk/professional-development/publications/pdf-007028>
- WHO. (2020a). *Nursing and midwifery*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/nursing-and-midwifery>
- WHO. (2020b). *State of the world's nursing 2020: Investing in education, jobs and leadership*. Geneva: World Health Organization; Licence: CC BY-NC-SA 3.0 IGO. Retrieved from <https://www.who.int/publications-detail/nursing-report-2020>
- Williams, G., Fulbrook, P., Kleinpell, R., Schmollgruber, S., & Aberto, L. (2015). Critical care nursing organizations and activities: A fourth worldwide review. *International Nursing Review*, 62(4), 453–461. <https://doi.org/10.1111/inr.12205>
- World Bank Group. (2019). Pandemic preparedness financing: Status update. Retrieved from https://apps.who.int/gpmb/assets/thematic_papers/tr-4.pdf
- World Bank. (2020). Nurses and Midwives (per 1000). Retrieved from <https://data.worldbank.org/indicator/sh.med.numw.p3>