The figures do not suggest an absolute shortage of intensive care specialist numbers in Australia and New Zealand currently, but there are ICU staffing discrepancies between rural and metropolitan areas. These conclusions are based on current data and do not assume changes to ICU scope and practice in the future. These data are also consistent with ICU workforce projections in resource-rich countries such as the United States, as well as in resource-poor countries. Alternative staffing models in ICUs in the US have challenged the notion that there is a critical care workforce shortage. Several issues may influence the number of intensive care specialists required in the future, eg, increases in ICU bed numbers; requirements of hospitals and jurisdictions for intensivists to work shifts providing 24-hour cover; and the increasing role of intensivists outside the ICU, such as in retrievals and perioperative medicine, may increase the demand for the workforce. These projections do not take account of retirement plans of intensivists, healthy and sustainable work patterns for the “ageing intensivist” and higher rates of burnout among intensivists.

In summary, this summit highlights an emerging area for ongoing attention, and has provided CICM and ANZICS with baseline data and a framework on which to plan future summits. CICM and ANZICS plan to host regular summits to discuss workforce issues and ensure appropriate trainee selection processes, maintenance of training standards and satisfactory career progression for those choosing a career in intensive care medicine.

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Competing interests
None declared.

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