



# ICU Transition Year Fellow Sunshine Hospital 2027

*Western Health is the major healthcare provider to one of the fastest growing and most diverse regions of Australia.*

## **Transition Year at Western Health:**

The CICM approved ICU Transition Year (TY) Fellow position at Western Health is a clinical position somewhere between senior registrar and consultant, with the aim of the year to enable the doctor to gradually transition from mostly supervised clinical practice (as a registrar) to minimally supervised clinical practice (as in a junior consultant role). In addition, rostered Clinical Support Time actively supports the TY Fellow to become involved in the diverse non-clinical portfolios of the Intensive Care Unit.

## **Local Work Environment:**

The role is based at Sunshine Hospital ICU which is a 25-minute drive from the CBD. Sunshine Hospital is a very busy metropolitan hospital, with 600 hospital beds, including medical, surgical, psychiatric, obstetric & paediatric patients. Sunshine ICU is one of two ICUs within Western Health (WH), with the other 11 bed ICU located at the new Footscray Hospital.

Sunshine Hospital ICU is a 13-bed mixed medical, surgical & obstetric adult ICU, admitting approximately 1250 patients per year. Patients admitted to Sunshine ICU are relatively young, with very high severity of illness scores (average APACHE3 score is 65). We are proud to have an established Cardiogenic Shock Service, and we offer Mechanical Cardiac Support in the form of Impella. Additionally, the Joan Kirner Women's and Children's centre (co-located with Sunshine Hospital) opened in 2019 and allows us to manage critically unwell and complex obstetric, paediatric, and neonatal patients on site. While Sunshine ICU does admit obstetric patients it does not admit paediatric patients. ICU medical staff are not required to attend paediatric MET calls or Code Blues.

The ICU consultant group at Western Health work across both Footscray & Sunshine sites, are all FCICM qualified, and have a variety of subspecialty interests and expertise (e.g. education, mechanical cardiac supports, echocardiography, sustainability, research, mentoring, welfare, organ donation, health informatics, bioethics).

## **Clinical Role of the TY Fellow:**

The Transition Year Fellow will be rostered to Sunshine Hospital ICU for 12 months and will report directly to the on-call Intensivist for all clinical matters. The Transition Year Fellow has an individual roster line, with a combination of day, evening, night and on call shifts. The exact shift proportions may vary to ensure the clinical needs of the unit are met. There will be 3 monthly feedback provided to the TY fellow (including the required CICM ITERs), with more frequent feedback by the CICM SOTs or ICU Director, as necessary.

The Supervisors of Training and Directors of Intensive Care are responsible for determining what level of clinical autonomy is recommended for an individual TY Fellow over time. The degree of clinical



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autonomy will also be discussed at the ICU consultant group's regular review of the fellow's performance. It is anticipated the level of direct clinical supervision provided by the supervising Intensivist will vary over time, and will allow for independent unit management, ward round, and first on call opportunities in preparation for junior consultant role.

**Clinical TY Fellow daily workflow:**

- Receive handover; lead the morning or afternoon multidisciplinary ICU ward round and determine the clinical management of the ICU patients (in accordance with relevant WH policies & guidelines, best evidence and consultation with other health care professionals as needed)
- Supervise and guide the junior medical staff in the performance of their routine duties (e.g. ensure appropriate ward round notes are made, timely care is provided, teach and supervise the performance of relevant procedures, review results and investigations)
- Modify management and treatment of patients (as necessary) initiated by junior staff to provide the highest quality of care.
- Ensure continuity of care for all patients via appropriate handover procedure in the unit, including training of the junior medical staff in these procedures.
- Attend Code Blues as needed, attend MET calls (if requested by the ICU liaison nurse or the parent unit medical team) and review & manage referrals as needed.
- Manage workflow in the ICU, e.g. bed state/ admissions/ discharges/ ward or ED referrals/ intrahospital transports of ICU patients and liaise with the nursing staff regarding this.
- Liaise with the on-call consultant via phone or in person, as necessary.

**Non-clinical role/s of the TY Fellow:**

The TY Fellow will be supported to contribute to the non-clinical functions of the ICU with an average of five hours of rostered Clinical Support Time per week. The specific non-clinical roles will be decided upon (in the first three months of the year) by mutual agreement between the TY Fellow, CICM SOTs and the relevant supervising consultant of the non-clinical portfolio/s. Choices of non-clinical portfolio/s will depend on the TY Fellow's interests & skills, as well as the needs of the ICU department. Such activities may include (but are not limited to) the following:



<b>Mechanical Cardiac Support and Echocardiography</b>	Support for advanced degrees in ultrasound e.g. DDU, CCPU (e.g. examiners in house for supervising cases)
	Participation in the WH Cardiogenic Shock Service, including the Impella Programme
	Opportunity for supervision of Masters/ PhD in conjunction with cardiology e.g. maternal cardiac disease, Mechanical Cardiac Support
	Co-ordinate or participate in teaching junior ICU staff basic echo/ ultrasound skills
	Co-ordinate or participate in regular QA meeting with other hospitals from the Australia-wide CICM Ultrasound SIG
	Ultrasound scanning with echo technicians & ICU clinicians
	Ability to join multidisciplinary weekly echo teaching sessions e.g. cardiac surgical conference, cardiology registrar teaching, ICU registrar teaching
	Clinical support with ultrasound services to critical care areas in acute need (e.g. OT or ED)
	Echo reporting and recording on existing system (Cardiac Synapse)
	TOE sessions in both inpatient and outpatient settings
	Multidisciplinary clinical and research projects (e.g. heart failure, coronary artery disease, STEMI)
<b>Teaching</b>	Regular bedside teaching of junior medical and nursing staff
	Co-ordinating weekly journal club
	Co-ordinating and/or presenting monthly 'interesting cases' sessions
	Co-ordinating and/or presenting at weekly CICM primary exam teaching
	Co-ordination and/or presentation of weekly resident teaching program
	Co-ordinating or presenting at fellowship teaching sessions including taking CICM fellowship candidates for written/ VIVA/ hot case practice
	Presenting at ICU registrar or medical student teaching sessions
	Involvement in simulation education within/ outside the ICU at WH
	Involvement in ICU run courses at WH e.g. BASIC
	Involvement in broader WH education e.g. ALS courses, PROMPT course, simulation centre teaching, presenting at grand rounds etc.
<b>Research</b>	Undertaking own research project/s

	Participating in WH research programs
	Supervision of a registrar formal project (if suitably qualified to do this)
<b>Quality Assurance</b>	Involvement in the review/ updating of relevant ICU clinical guidelines
	Co-ordination/ presentation at ICU JMS orientation in terms 2-4
	WH hospital committee memberships
	WH ICU special interest group memberships
	Involvement in preparing slides and presenting at WH ICU M&M
<b>Administration</b>	Attendance at WH ICU consultant meetings
	Involvement in WH hospital JMS recruitment processes
<b>Mentoring</b>	Mentoring of JMS (e.g. junior registrars/ residents)
<b>CICM activities</b>	Assistance at CICM examinations if held at WH
	Attendance at CICM hospital inspections in the region
	Attend the CICM ASM and other regional events

### **Selection Criteria:**

#### **Essential requirements:**

- MBBS or equivalent
- AHPRA registration to practice as Medical Practitioner
- CICM trainee who has completed all prescribed CICM training requirements as per the CICM document 'Objectives of Training: The Transition Year':
  - Satisfactory completion of the required clinical training time and assessments for the core intensive care medicine, anaesthesia, and medicine years
  - Satisfactory completion of the Second Part Examination
  - Satisfactory completion of all prescribed courses, learning packages and WBAs.
  - Submission of a Formal Project in the format prescribed in the guideline.
  - Satisfactory exposure to two out of the three sub-specialities in: a) Cardiothoracic surgery intensive care b) Neurological / Neurosurgery intensive care and c) Trauma intensive care

#### **Desirable criteria for the position:**

- Excellent communication & teamwork skills.
- Ability to supervise and teach junior medical staff.
- Advanced technical, non-technical and crisis resource management skills to enable safe autonomous clinical practice.
- Sufficient clinical expertise to be able to make a timely, structured, and accurate assessment of a comprehensive range of life-threatening problems in a critically ill patient and to be able to apply life-supporting therapy as appropriate.



Apply at <https://careers.wh.org.au>

Your application should include a cover letter, your CV and at least two (2) written references.

Closing date Wednesday 3<sup>rd</sup> June 2026

**Further Information**

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