

## Critical Care HMO3 Positions

<b>Business unit/department:</b>	Anaesthesia
<b>Division:</b>	SAPM - Surgery, Anaesthesia & Procedural Medicine
<b>Head of Unit:</b>	Anaesthesia - Professor Laurence Weinberg Intensive Care - A/Prof Stephen Warrillow
<b>Contact persons:</b>	<b>Anaesthesia positions</b> Dr Bridget Bishop Dr Vanessa Andean Dr Shervin Tosif <b>Intensive Care positions</b> Dr Caleb Fisher Dr Sarah Jones
<b>Contact details:</b>	Email: <a href="mailto:CriticalCare.HMOsupervisors@austin.org.au">CriticalCare.HMOsupervisors@austin.org.au</a>

Austin Health acknowledges the Traditional Custodians of the land on which we operate, the Wurundjeri Woi Wurrung People of the Kulin Nation. We pay our respects to Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples.

### Important Dates for this position

<b>Opening date for applications</b>	Monday, 20 April 2026
<b>Closing date for applications</b>	Sunday, 17 May 2026
<b>References due</b>	Sunday, 17 May 2026
<b>Critical Care information night</b>	Tuesday, 28 April 2026 18:30 Austin Doyle Lecture Theatre, Austin Health, Level 4 Austin Tower
<b>Interviews</b>	Tuesday, 30 June 2026

### Summary of Position

Thank you for your interest in applying for a position at Austin Health. An exciting opportunity currently exists for enthusiastic Critical Care Orientated HMOs to join our Anaesthesia and Intensive Care Departments.

There will be six anaesthesia stream and four ICU stream Critical Care HMO3 positions incorporating rotations through the Anaesthesia Department, Emergency Department (ED) and Intensive Care Unit (ICU) at Austin Health. These positions aim to provide a high-quality, broad-based practical experience for potential entry into vocational training positions in critical care.

**Note: Applicants are required to clearly indicate in their application a preference for either the Anaesthesia or ICU stream. Applicants interested in both streams must state a clear preference for one stream to be considered. Applications that do not contain a clear statement of preference will not be considered.**

**All applications or enquiries to work as an Emergency Medicine HMO should be directed to the Emergency Department via the Medical Workforce Unit.**

Successful applicants will spend a minimum of six months in their allocated specialty stream throughout the year. Each HMO is offered at least three months in their preferred specialty stream in the first six months. The remainder of the year is spent rotating through the other Critical Care specialties.

The Critical Care HMO year is supported by a regular education program delivered by members of each specialty department on themes important to HMOs in Critical Care. Workshops, tutorials and clinical simulation modes of education are offered. Each applicant is also entitled to a period of five weeks annual leave.

#### **Anaesthesia**

The anaesthesia component of this job involves assisting with the provision of anaesthesia services inside and outside the operating suite throughout the entire perioperative period. You will always be assigned to either a supervising consultant or fellow. The roster involves a default 38 hour week, with a rotating roster including day shifts, evening shift, weekends and public holidays. HMOs will have exposure to theatre lists, perioperative medicine, and pain medicine.

## **Intensive Care Unit (ICU)**

This role is within the Austin Hospital's tertiary metropolitan practice offering complex medical and surgical services including cardiothoracic and neurosurgical intensive care. Exposure to state-based specialised services in Acute Liver Failure, Liver Transplantation, Acute Spinal Cord Injury and Complex Epilepsy is available. The HMO role importantly supports the clinical activity in admissions, daily care, discharge planning of complex patient care in three to four 'pods' of ICU work teams comprising consultant, registrar and HMO. The rotation involves approximately 50% night shifts on a rotating roster.

## **Emergency Department (ED)**

Throughout their year, Anaesthesia stream and ICU stream critical care HMOs will rotate through the Emergency Department at Austin Health. Shifts include days, evenings, weekends, nights and public holidays. Furthermore, there will be three ED stream Critical Care HMOs, hired separately by the Emergency Department, who will rotate in anaesthesia and ICU throughout the year.

**All applications or enquiries to work as an Emergency Medicine HMO should be directed to the Emergency Department via the Medical Workforce Unit.**

## **About the Directorate/Division/Department**

Austin Health operates across three campuses: the Austin Campus, the Repatriation Campus, and the Royal Talbot Rehabilitation Centre. Anaesthesia services are provided by the Department of Anaesthesia at both the Austin and Repat sites, with the department based on Level 2 of the Austin Tower. The department includes a diverse team of medical, nursing, and administrative staff, and supports anaesthesia across 11 theatres, 2 endoscopy suites, and 2 procedure rooms in the Harold Stokes building, as well as in Radiology and the Cardiology Cath Lab. The Repatriation Campus houses the Surgery Centre, an elective surgery facility with 8 theatres and independent anaesthesia leadership, although administrative support comes from the Austin Campus.

Surgical services at Austin encompass most specialties except Cardiac Transplantation, Obstetrics, and Complex Paediatric Surgery, with the hospital recognized as a statewide referral centre for liver transplantation and spinal injuries. The department also manages a comprehensive Pain Service and maintains a strong research program led by a Head of Research and supported by dedicated research staff. Despite separate anaesthesia departments, the Austin and the adjacent Mercy Hospital for Women maintain close ties. Recognizing the complexity of modern anaesthesia, the department values a wide range of specialist skills, encouraging individual anaesthetists to contribute their unique expertise to ensure high-quality, well-rounded care.

## **Eligibility & Exclusion criteria**

### **Eligibility criteria include:**

- PGY2 level or greater in the year of application (i.e. will be PGY3 or greater in 2027).
- Valid, full, general AHPRA registration at the time of application, preferably without conditions. Your AHPRA number must be included in your application.
- Clear preference for either Anaesthesia or ICU stream expressed in the application.

### **Exclusion criteria include:**

- Applicants who have had (or will you have) *three months or more* of anaesthetic experience at PGY3 level or greater (regardless of when during the year this is undertaken)
- In this case, we strongly encourage and advise you to apply for a position as a Registrar in Anaesthesia.

International applicants are only considered if they meet the criteria above, *and have a valid working visa.*

### **Notes on criteria:**

*Limited AHPRA registration is insufficient* as we do not fulfil criteria to accept practitioners with limited registration (we are not an area of need, for example). You are more than welcome to apply once you have obtained general registration. Refer to the AHPRA website for more information - <https://www.medicalboard.gov.au/Registration/Types/Limited-Registration.aspx>

The reason for excluding applicants with three months or more of anaesthesia experience at PGY3 level or greater is two-fold:

1. The program is designed as an entry-level position where we aim to teach HMOs the ropes. As such, people with significant experience would find the job insufficiently stimulating and not worthwhile.
2. The program is not designed as an alternate pathway for doctors who have been unsuccessful in applying to formal ANZCA training - there are unaccredited registrar jobs for this. Having this exclusion criteria means that doctors who can apply to be registrars do not apply inappropriately to our program as a back-up.



**Our actions  
show we care**



**We bring  
our best**



**Together  
we achieve**



**We shape  
the future**

## Application Process

- **Complete online application at <https://www.austin.org.au/careers/>**
  - Only online applications will be accepted
- **Resume, Cover Letter & Evidence of COVID-19 Vaccination must be attached**
  - **Resume should include as a minimum**
    - **Undergraduate Medical Degree and date of graduation**
    - **Full chronological working history since graduation**, including gaps in employment.
    - **List of referees** which must relate to work completed since February 2023, include dates worked and contact details of referee.
    - **Evidence of academic achievements:** academic transcript from university, please include pubmed citation details for publications in peer-reviewed journals, (or if articles are not pubmed listed please attach a copy of the paper), and certificates for courses completed.
    - **Passport-sized photo** on the front page of your CV – photocopy or black and white digital photo acceptable.
  - **Cover Letter**
    - Must be no more than one typed A4 page addressing the question “Why would I be suitable for this job?” Please draw on your knowledge of this job, previous experience, previous academic record and other background.
  - **Organise 3 references**
    - Attached to this file is the reference form.
    - 3 references must be submitted by application closing date.
    - It is the responsibility of the candidate to ensure 3 references are submitted to Austin Health Anaesthesia department via email (preferred) [anaesthesia.admin@austin.org.au](mailto:anaesthesia.admin@austin.org.au) or fax (03) 9496 6313. Check with your referees to ensure they have completed the process.
    - Refer to the form for further instructions.
    - References are subject to audit.
- **All applicants will be shortlisted and interviewed by a panel consisting of representatives from Anaesthesia and ICU.**

## Information evening

- This is a highly competitive application process, as such, unfortunately we cannot meet up with prospective applicants individually in person.
- An information session will be held on **Tuesday 28<sup>th</sup> April 2026, 1830hrs**. The venue is the Austin Doyle Lecture Theatre at Austin Health, Austin Tower building, Level 4. This event will not be recorded or available electronically.
- **Attendance is in person only.**



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## VICTORIAN PUBLIC HOSPITALS – Anaesthesia Trainee Reference Form

### Applicant Details – to be completed by applicant

First Name		FAMILY NAME	
Contact Phone		Email	
Position Applied for			

### Referee's Details – to be completed by referee

Name		Qualifications	
Organisation		Position	
Contact Phone			
Email			
When did applicant work with you		For how long (months)	

### Candidate Performance – to be completed by referee

Please rate the applicant below from 1-5 using x, where 1 is poor and 5 is exceptional. Refer to page 2 for guidance

<u>Academic</u>	1	2	3	4	5	NA
Factual Knowledge						
Understanding						
Information Gathering & Presentation						
Organization						
Ability to Pass Exams						
<u>Clinical Skills</u>	1	2	3	4	5	NA
Information Gathering and Presentation						
Decision Making						
Organization						
Procedural Skills						
Situational Awareness						
Documentation						
<u>Interpersonal Skills</u>	1	2	3	4	5	NA
Guidance Seeking						
Empathy						
Communication						
Teamwork						
Interaction with:						
Senior Medical Staff						
Other Health Care Staff						
Patients and Family						
<u>Professional Attributes</u>	1	2	3	4	5	NA
Ethical Practice						
Initiative						
Integrity						
Leadership						
Quality Assurance						
Teaching						

<b>General Comments:</b>	

Declaration	YES	NO
I certify this opinion is based on my own personal knowledge of the applicant and is free from bias		
I recommend that the applicant be considered for or continue, training as an Anaesthetic Registrar		
I would be happy to have the applicant work in my department/unit in the future		

Date		Signature	
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#### Referee:

Please retain the original Assessment until the end of the year in the event of additional requests or audits.

Submit front page only to organisations selected by candidate on page 2 and let the applicant know when you have.

## Submission Details

Organisation	Email	Fax	Send
Austin Health	<a href="mailto:anaesthesia.admin@austin.org.au">anaesthesia.admin@austin.org.au</a>	(03) 9496 6313	

## Candidate Performance Indicators

### Academic

- **Factual Knowledge:** 1=Very poor for level of experience 3=What you would reasonably expect 5=Exceptional. What you would expect from someone many years' senior
- **Understanding** 1=No understanding of basic concepts 3=What you would expect 5=Understands complex concepts and their clinical applications
- **Information Gathering & Presentation** 1=Unaware of basic resources 3=What you would expect 5=Aware of the resources and how to use them. Efficient and perceptive in gathering and presenting information
- **Organization** 1=Procrastinates, can't commit and has no strategy 3=Fairly well organised 5=Highly committed to study, has a well formulated plan, follows through and efficiently uses time
- **Ability to Pass Exams** 1=unlikely to pass specialist exams 3=Will probably pass 5=Likely prize winner

### Clinical Skills

- **Information Gathering and Presentation:** 1=Unable to collate clinical facts 3=Thorough history and examination. Misses the odd fact. Reasonable synthesis of data 5=Thorough, efficient, accurate. Excellent synthesis, prioritisation and presentation of important facts and complex issues
- **Decision Making:** 1=Unable to make basic decisions 3=Reasonable for level of experience 5=Makes logical and appropriate decisions. Supports with multiple reasons. Advanced for years of experience
- **Organization:** 1=Unable to plan or prioritise. Very unreliable 3=What you would expect 5=Plans well ahead. Ensures has enough time for required tasks. Thoughtful and ordered set-up of environment
- **Procedural Skills:** Struggles with basic procedures and is difficult to teach 3=Good technique and reasonable success for level of experience 5=Picks up skills easily and is aware of the broader issues
- **Situational Awareness:** 1=Unaware of what is going on 3=What you would expect 5=Highly vigilant. Aware of all aspects of their environment. Aware of potential hazards and has made appropriate preparations and plans
- **Documentation:** 1=Insufficient information, poor legibility, verbosity 3=Legible and complete 5=Efficiently provides all the relevant information. Set out logically. No unnecessary data

### Interpersonal Skills

- **Guidance Seeking:** 1=Never seeks advice when required or seeks constantly when not. Is highly defensive and cannot accept constructive suggestions 3=Appropriate 80% of the time 5=Appropriate all the time
- **Empathy:** 1=No capacity to appreciate others perspective 3=Manages this well most of the time 5=Is highly skilled in this area
- **Communication:** 1=Cannot get their message across verbally 3= Manages well most of the time 5=Highly skilled and effective
- **Teamwork:** 1=Cannot work as part of a team 3=Manages well most of the time 5=Understands the role of other members, can assess others competency, can take on leadership and respond to others leadership as required
- **Interaction with: Senior Medical and Other Health Care Staff** 1=Seems to aggravate everybody, avoids contact 3=Manages well most of the time 5=Highly regarded by most, engages constructively and involved collaboratively in projects
- **Interaction with Patients and Family:** 1=Appears not to care, aloof and abrupt 3=Comprehensively explains issues but is not necessarily overs-killed at addressing concerns and managing challenging behaviours 5=Highly skilled in this area

### Professional Attributes

- **Ethical practice:** 1=Consistently behaves unethically 3=Acts ethically 5=Also has a highly developed framework and rationale for dealing with complex ethical issues
- **Initiative:** 1=Will not do anything unless told 3=Shows a reasonable amount of initiative 5=Is a self-starter. Has the capacity to see what needs to be done and gets on with it
- **Integrity:** 1 Consistently late, leaves early without communication. Blames other and never acknowledges personal responsibility 3= Appropriate most of the time 5=Exemplary
- **Leadership:** 1=Can only follow, will not take on responsibility, cannot coordinate others when required 3=Appropriate for level of experience 5=Deserves respect, highly effective
- **Quality Assurance:** 1=Shows no interest and never turns up to QA meetings 3=Reasonably involved 5=Runs projects and frequently presents. Always attends meetings when able
- **Teaching:** 1=Shows no interest or aptitude 3 Does some teaching consistent with level of training 5=Enthusiastic, engaging and affective. Aware of educational theories