

Position Description

Position title:	Neonatology Fellow
Department:	Neonatal Services
Classification:	As per award
Agreement:	Victorian Public Health Sector (AMA Victoria) – Doctors in Training (Single Enterprise Agreement) 2022-2026
Reporting to:	Clinical Lead, Neonatology Fellowship Program

About us

Located in Melbourne on the traditional lands of the Wurundjeri people of the Kulin Nation, the Royal Women's Hospital is Australia's first and leading specialist hospital for women and newborns. We offer expertise in maternity services, neonatal care, gynaecology, assisted reproduction, women's health and cancer services. We advocate for women's health in areas that have long been overlooked or stigmatised, including abortion, endometriosis, family violence, female genital mutilation, menopause, women's mental health, sexual assault and substance use in pregnancy.

Our vision, values and declaration

The Women's vision, values and declaration reflect our promise to our patients and consumers, and articulate our culture and commitment to our community and each other.

Our vision is **'Creating healthier futures for women and babies'**. Our values are:



Courage



Passion



Discovery



Respect

The Women's declaration reflects the principles and philosophies fundamental to our hospital, our people and our culture.

- **We are committed to the social model of health**
- **We care for women from all walks of life**
- **We recognise that sex and gender affect health and healthcare**
- **We are a voice for women's health**
- **We seek to achieve health equity**

Our commitment to inclusion

The Women's is committed to creating and maintaining a diverse and inclusive environment which enhances staff and consumer wellbeing, and nurtures a sense of belonging. We strongly encourage anyone identifying as Aboriginal and/or Torres Strait Islander to join us. We offer a range of programs and services to support First Nations employees. We invite people with disability to work with us, and we welcome anyone who identifies as linguistically, culturally and/or gender diverse, people from the LGBTQIA+ community and people of any age.

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About the department/unit

The Women's is a tertiary-level maternity and neonatal referral hospital, with more than 7,000 births per year. In addition, the Women's is the major referral centre in Victoria for fetal anomalies. The Neonatal Intensive Care Unit (NICU) admits approximately 1600 infants per year, including approximately 250 infants born at less than 32 weeks' gestation and 120 infants born at less than 28 weeks' gestation and/or <1000 g.

The Department of Neonatal Services at the Women's is a major tertiary-level referral unit serving the local population and the State of Victoria. The NICU is one of the largest in the Southern Hemisphere and has the capacity to accommodate 62 infants, including 26 NICU, 12 High Dependency Unit and 24 Special Care Nursery cots. Our mission is to provide high quality care and support to newborn infants and their families.

The Department employs 16 Consultant Neonatologists, 12 full time equivalent Fellows, and approximately 20 full time equivalent Neonatal Medical Officers and Advanced Neonatal Nurse Practitioners. The Women's is a major teaching hospital with academic affiliations to the University of Melbourne and the Murdoch Children's Research Institute. A Departmental Professor leads research activities, including in the fields of neonatal resuscitation, respiratory medicine, neonatal neurology and developmental follow-up.

The clinical case-mix and research activity of the unit provide a unique environment for the neonatology and/or paediatric trainee.

Position purpose

A Clinical Fellowship in Neonatology at the Women's offers a rounded training experience in Neonatal and Perinatal Medicine. It provides a balance between clinical exposure to neonatal intensive and special care both as the attending physician and in a supervisory capacity, participation in specialist clinics and time dedicated to quality assurance and improvement activities, teaching and learning, and research.

Each Fellow is assigned two Consultant Neonatologists to be their immediate mentors whilst working at the hospital. The Neonatology Fellows are jointly overseen by the Medical Director (or delegate) of the Department of Neonatal Services and the Consultant Neonatologist Clinical Lead for the Neonatology Fellowship Program. In their absence, the on-call Consultant Neonatologist is available to support the trainees.

Key responsibilities

Neonatology Fellowship Program

The Women's Neonatology Fellowship Program is accredited by the Royal Australasian College of Physicians for up to 2 years (limited to 18 months of core training) of Advanced Training in Neonatal and Perinatal Medicine. Training includes development of skills, knowledge and expertise in the diagnosis and management of congenital abnormalities, disorders of postnatal adaptation and prematurity. In addition, training at the Women's allows trainees to develop an understanding of pharmacological principles related to the management of the preterm and term-born infant.

Practical procedures relevant to the practice of neonatology, including delivery room resuscitation and stabilisation of preterm and term-born infants, insertion of central vascular access devices (peripherally-inserted central catheters and umbilical venous and arterial

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catheters), insertion of peripheral arterial lines, and insertion of intercostal chest drains, are taught and learned through a credentialing program. Communication, teamwork, neonatal resuscitation and crisis resource management skills are taught through the NeoResus courses and regular simulation sessions.

Neonatology Ultrasound Fellowship

There is potential for Neonatology Fellows to be trained in basic neonatal ultrasound and echocardiography. A formal education program based on the Australasian Society for Ultrasound in Medicine (ASUM) curriculum forms the foundation for trainees to work towards the Certificate in Clinician Performed Ultrasound (CCPU) in neonatal medicine. As part of this training, Neonatology Fellows who can be supported to learn ultrasound skills may participate in the clinical ultrasound service.

Education Program

Fellows are provided with the following educational opportunities:

- Melbourne Neonatal Fellowship Program. Monthly teaching program delivered over a full day and protected for most Fellows, including interactive sessions covering professional development, core teaching and case-based discussions. This program is facilitated by faculty staff across all neonatal intensive care units in Melbourne, including the Women's, the Royal Children's Hospital, Monash Children's Hospital, Mercy Hospital for Women, Joan Kirner Women's and Children's Hospital, and the Paediatric Infant Perinatal Emergency Retrieval service.
- Monthly Melbourne Neonatal Grand Rounds.
- Weekly teaching program (approximately 3.5 hours and protected for most Fellows), including: practical teaching, journal club, case-based discussion, simulation and core teaching.
- Teaching "on the go" on Consultant-led ward rounds in neonatal intensive and special care, and postnatal wards.
- Weekly Radiology meetings.
- Access to regular teaching delivered by the Royal Hospital for Women, Sydney.
- Monthly Neonatal Mortality and Morbidity meetings.
- Monthly hospital-wide Perinatal Mortality and Morbidity meetings.
- Courses in biostatistics and clinical epidemiology are available at the nearby University of Melbourne and Murdoch Children's Research Institute.

Professional Responsibilities

Fellows are responsible for the care of patients and their families and are an essential part of our multidisciplinary team. They will contribute to and assist in the supervision and delivery of training for Neonatal Medical Officers and will liaise with medical, nursing and allied health staff to facilitate the multidisciplinary care of patients and their families. They will also be involved in participating in other projects on the neonatal unit as allocated by the Department Head or the Clinical Lead.

Fellows work as part of the multidisciplinary team in the following areas: Neonatal Intensive Care Unit (neonatal intensive and special care), antenatal and postnatal wards, Women's Emergency Care (WEC), statewide perinatal trauma unit (Royal Melbourne Hospital),

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outpatient clinics (Growth and Development, UpStart Clinic, Newborn Neurology, Women's Alcohol and Drug Service, and Fetal Medicine Unit).

Fellows will be aware of and work in accordance with Hospital policies and procedures, including Occupational Health and Safety, Infection Prevention and Control, Equal Employment Opportunity and Confidentiality. They will be respectful of the needs of patients, visitors and other staff and maintain a professional approach to all interactions.

Leadership

Fellows are allocated to clinical duties utilising a rotating roster which includes: Neonatal Intensive and Special Care, Postnatal Wards and Deliveries, and Clinics. These rotations include participation in overnight, after-hours and weekend shifts. In addition, they have protected teaching time and dedicated time for professional development. On average Fellows are rostered on a 38-hour working week, with an additional 5 hours paid training time as per the Doctors in Training Enterprise Agreement 2022 – 2026.

During clinical rotations, Fellows will be part of a team, comprising Neonatal Medical Officers, Advanced Neonatal Nurse Practitioners, Fellows and Consultant staff. Fellows will be responsible for providing 24-hour supervision for the Neonatal Medical Officers and in turn will operate under the guidance of the attending Consultant Neonatologist. It is expected that the level of supervision will vary according to the experience of the trainee. During times when the hospital is busy and/or the Neonatal Medical Officer is inexperienced, Fellows will be expected to carry out basic technical procedures and write orders.

On night duty, care is provided by a team of two Neonatal Medical Officers/Advanced Neonatal Nurse Practitioners and one Fellow on site, with the Consultant Neonatologist on-call from home. On weekends, one Fellow will be responsible for Special Care, Postnatal Wards and Deliveries, with a second Fellow covering Neonatal Intensive Care during this time and who takes on all responsibilities once the other Fellow completes their shift. It is expected that the Fellow will liaise closely with the Neonatal Medical Officer/Advanced Neonatal Nurse Practitioners rostered to these areas and discuss problems with the Consultants Neonatologist on-call. Formal Consultant Neonatologist ward rounds will be held daily in Neonatal Intensive Care followed by reviews of specific problems as required in the rest of the hospital.

Administrative duties to be shared between the Fellows include:

- Organisation of the monthly Neonatal Mortality and Morbidity and Perinatal Mortality and Morbidity meetings
- Assistance with the Neonatal Medical Officer/Advanced Neonatal Nurse Practitioner credentialing program for procedural skills
- Assistance with the Junior Medical Staff education program
- Involvement in departmental committees and working groups, as appropriate
- Formulation and dissemination of appropriate documentation in the event of neonatal deaths in the unit

Evaluation

All trainees will be evaluated using multi-source feedback. Each trainee will have nominated education supervisors and/or mentors. At least three meetings during a six-month term are expected between supervisor/mentor and trainee/mentee to discuss progress. The multi-source

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evaluations will be discussed with the trainees during and at completion of their rotation at the Women's. In turn, the trainees will be asked to evaluate the training program, with any suggestions for improvement welcomed.

Research projects that are accepted for presentation at a national meeting may gain some trainee financial support to attend the meeting. Funding for international travel for presentation of upstanding research work may be available on a competitive basis.

Key Performance Indicators (KPI's)

Fellows will have goals established at the commencement of their employment, and these will be reviewed regularly by their supervisor/mentor. A logbook of procedures and skills will be maintained by the Fellow.

Key selection criteria

Experience/Qualifications/Competencies

The FRACP Written and Clinical Examinations (or equivalent) are essential, along with a minimum of 12 months' experience in a tertiary-level Neonatal Intensive Care Unit. The applicant should have experience in commonly performed procedures in the Neonatal Intensive Care Unit.

Essential Criteria

- Primary medical degree MBBS (or equivalent)
- Registration with the Australian Health Practitioner Regulation Agency (AHPRA)

Organisational Relationships

Internal relationships

Fellows will be working with a multidisciplinary team and shared services within and external to the Royal Women's Hospital.

External relationships

Fellows will provide feedback and support (with the support of Consultant staff) to referring physicians and obstetricians as well as family members. Fellows will liaise with external services to whom they are referring babies for ongoing care.

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Inherent Requirements

There are a number of critical work demands (inherent requirements) that are generic across all positions at the Women's. The generic inherent requirements for this position are detailed below. These may be added to with more specific inherent requirements, if required, by your manager and Occupational Health and Safety.

Physical Demands	Frequency
Shift work – rotation of shifts – day, afternoon and night	Frequent
Sitting – remaining in a seated position to complete tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type even, vinyl, carpet	Frequent
Lean forward / forward flexion from waist to complete tasks	Occasional
Trunk twisting – turning from the waist to complete tasks	Occasional
Kneeling – remaining in a kneeling position to complete tasks	Rare
Squatting / crouching – adopting these postures to complete tasks	Occasional
Leg / foot movement to operate equipment	Rare
Climbing stairs / ladders – ascending and descending stairs, ladders, steps	Frequent
Lifting / carrying – light lifting and carrying less than 5 kilos	Occasional
– moderate lifting and carrying 5–10 kilos	Occasional
– heavy lifting and carrying 10–20 kilos	Rare
Push/Pull of equipment/furniture – light push/pull forces less than 10 kg	Occasional
– moderate push / pull forces 10–20 kg	Rare
– heavy push / pull forces over 20 kg	Rare
Reaching – arm fully extended forward or raised above shoulder	Occasional
Head / Neck Postures – holding head in a position other than neutral (facing forward)	Rare
Sequential repetitive actions in short period of time	
– Repetitive flexion and extension of hands wrists and arms	Occasional
– Gripping, holding, twisting, clasping with fingers / hands	Frequent
Screen Based Work – using computer, keyboard and mouse	Frequent
Driving – operating any motor-powered vehicle with a valid Victorian driver's license.	Rare
Sensory demands	Frequency
Sight – use of sight is integral to most tasks completed each shift	Constant
Hearing – use of hearing is an integral part of work performance	Constant
Touch – use of touch is integral to most tasks completed each shift.	Constant
Psychosocial demands	Frequency
Observation skills – assessing / reviewing patients in /outpatients	Constant
Problem Solving issues associated with clinical and non-clinical care	Constant
Attention to Detail	Constant
Working with distressed people and families	Constant
Dealing with aggressive and uncooperative people	Frequent
Dealing with unpredictable behaviour	Frequent
Job demands – high workload, tight deadlines, and competing priorities	Constant
Exposure to traumatic or distressing content or situations – including handling sensitive information arising from patient records, patient care activities, incident reports, adverse events, or investigations of adverse events.	Frequent
Role specific considerations Support is available for staff exposed to psychological risks. Any adjustments that may be required can be discussed with your manager.	Not Applicable

Definitions used to quantify frequency of tasks / demands as above

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Prolonged / Constant	70–100 % of time in the position
Frequent	31–69 % of time in the position
Occasional	16–30% of time in the position
Rare	0–15% of time in the position
Not Applicable	

Employee awareness and responsibilities

- Employees are required to be aware of, and work in accordance with, hospital policies and procedures.
- Employees are required to identify and report incidents, potential for error and near misses, to improve knowledge systems and processes and create a safe environment for staff and patients.
- Employees agree to provide evidence of a valid employment Working with Children Check and provide complete details for the Women's to undertake a Nationally Coordinated Criminal History Check (NCCHC).
- Our vision is a future free from violence and discrimination in which healthy, respectful relationships are the norm. The Women's expects all staff to contribute to a culture that promotes and supports diversity, equity, respect and inclusion.
- The Women's provides pregnancy termination services as part of its public health responsibility to provide safe health care to women.
- We are committed to the safety, wellbeing and empowerment of all children and young people. We prioritise an environment where children are protected and heard. We commit to safeguarding the social and emotional wellbeing of First Nations children, understanding that their connection to country, culture, kin and community is critical to their safety.

Vaccination requirements

As this role has direct physical contact with patients and clinical environments, employees are required to be vaccinated against or demonstrate immunity to influenza, COVID-19, whooping cough (pertussis), hepatitis B, chicken pox, MMR (measles, mumps, rubella) and may include hepatitis A, and complete screening for tuberculosis.

Employment with the Women's is conditional upon the provision of satisfactory evidence of vaccination and/or screening, and we may withdraw an offer of employment if the required evidence is not provided at least five business days prior to the intended start date.

Declaration

By accepting this position description electronically, I confirm I have read, understood and agreed to abide by the responsibilities and accountabilities outlined.

Developed date: April 2026

Developed by: Manager, Medical Workforce

Date of next review: April 2027

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