

Sam Houston State University

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

College of Osteopathic Medicine GRADUATE MEDICAL EDUCATION Sam Houston Regional Education Consortium (SHREC)

CLINICAL AND EDUCATIONAL WORK HOURS POLICY

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	Graduate Medical Education Administration
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	Graduate Medical Education Institutional Coordinator
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SCOPE:

This policy applies to all applicants to Accreditation Council of Graduate Medical Education (ACGME)-accredited Programs at Sam Houston State University College of Osteopathic Medicine (SHSU-COM).

PURPOSE:

To outline the ACGME clinical and educational work hour requirements and the responsibilities of the Residents/Fellows, the Programs, and SHSU-COM.

To monitor Programs' adherence of their Residents/Fellows with the ACGME clinical and educational work hour standards as outlined in the revised ACGME Common Program Requirements and with the Program-specific guidelines as outlined by their individual Review Committees (RCs) through regular review of clinical and educational work hour violations in the Residency Management Suite (RMS), the internal review process, as well as annual review of Program manuals.

To monitor Programs' promoting of patient safety and Resident/Fellow well-being and providing a supportive educational environment.

To monitor Programs' protecting learning objectives from compromise by excessive reliance on Residents/Fellows to fulfill service obligations, prioritizing didactic and clinical education in the allotment of Residents/Fellows' time and energy, and assigning clinical and educational work hour assignments that recognize patient safety and welfare as a collective responsibility of faculty and Residents/Fellows.

POLICY:

SUPERVISION

- Programs must
 - Ensure that appropriate levels of supervision are provided to each Resident/Fellow based on their level of education, knowledge, skills, and experience
 - o Enhance their current supervision policies to include the new ACGME requirements
- The Sponsoring Institution must
 - Ensure that Programs have the appropriate supervisory lines in place for each PGY (post graduate year) level

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TRANSITIONS OF CARE

- Programs must
 - o Design clinical assignments to minimize the number of transitions in patient care
 - Ensure that Residents/Fellows are competent in communication with team members in the handover process
- Faculty and Residents/Fellows must
 - o Inform patients and family members of their roles in their care
- The Sponsoring Institution must
 - Along with the Program, ensure and monitor effective, structured handover processes to facilitate both continuity of care and patient safety
 - Assure that patients and all members of the healthcare team are informed of faculty and Residents/Fellows currently responsible for patient care

ALERTNESS MANAGEMENT

- Programs must
 - o Educate Faculty and Residents/Fellows to recognize the signs of fatigue and sleep deprivation
 - Develop fatigue mitigation processes to manage potential issues with patient care and learning (i.e. strategic napping, back-up call schedules)
 - o Educate Faculty and Residents/Fellows in fatigue mitigation processes
 - Have a process in place to ensure that there is backup in case a Resident/Fellow is unable to perform his/her patient care duties
- The Sponsoring Institution must
 - Ensure processes for Programs to provide adequate sleep facilities and/or safe transportation options for those Residents/Fellows who may be too fatigued to safely drive home

CLINICAL AND EDUCATIONAL WORK HOURS

Clinical and educational work hours are defined as all clinical and educational activities related to the Program, i.e., patient care (both inpatient and outpatient), administrative duties relative to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled activities, such as conferences. Clinical and educational work hours do NOT include reading and preparation time spent away from the duty site.

MAXIMUM CLINICAL AND EDUCATIONAL WORK HOURS PER WEEK

Clinical and educational work hours must not exceed 80 hours per week averaged over a four-week period inclusive of call and moonlighting activities. Residents/Fellows are required to accurately record their clinical and educational work hours in the RMS. Residents/Fellows in their final years of education must be prepared to enter the unsupervised practice of medicine and care for patients over irregular or extended periods within the context of the 80-hour Maximum.

CONTINUOUS CLINICAL AND EDUCATIONAL WORK HOURS

Residents/Fellows:



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- Must not exceed 24 hours of continuous scheduled clinical assignments
- May spend an additional 4 hours to complete transitions of care
- Must have at least 14 hours free after 24 hours of continuous scheduled clinical assignments

CLINICAL AND EDUCATIONAL WORK HOUR EXCEPTIONS

A Review Committee may grant rotation-specific exceptions for up to 10 percent or a maximum of 88 clinical and educational work hours to individual programs based on a sound educational rationale. A Program must obtain permission from the Designated Institutional Official (DIO) and Graduate Medical Education Committee (GMEC) prior to submitting the request for a work hour exception to their Review Committee.

MANDATORY TIME FREE OF CLINICAL AND EDUCATIONAL WORK

Residents/Fellows must have a minimum of one day free of clinical and educational work every week (when averaged over four weeks). At-home call cannot be assigned during this time. All residents should have 10 hours and must have eight hours free between clinical and educational work periods. There must be at least 14 hours free of work after 24 hours of continuous scheduled clinical assignments.

IN-HOUSE CALL

Residents/Fellows can be assigned in-house call a maximum of every third night when averaged over a four- week period. Time spent in the hospital must count towards the 80-hour maximum.

AT-HOME CALL

At-home call is not subject to the 'every third night' limitation. Residents/Fellows must receive one-in-seven days free of clinical and educational work, inclusive of at-home call, when averaged over a four-week period. At-home call should not be so frequent or taxing to preclude rest or reasonable personal time for each Resident/Fellow. Residents/Fellows are permitted to return to the hospital while on at-home call to care for new or established patients. Each episode of this type of care, while it must be included in the 80-hour maximum, will not initiate a new off-duty period.

NIGHT FLOAT

Residents/Fellows must not be scheduled for more than six consecutive nights of night float. Individual Programs will have specific requirements for the maximum number of months of night float per year that may be allowed.

MOONLIGHTING

PGY-1 Residents are not permitted to moonlight. Moonlighting must not interfere with the ability of a Resident/Fellow to achieve the goals and objectives of the educational Program. Time spent by Residents/Fellows in internal and external moonlighting must be counted towards the 80-hour maximum.

REPORTING CLINICAL AND EDUCATIONAL WORK HOURS VIOLATIONS

Residents/Fellows concerned about continuous clinical and educational work hour violations by their Program should contact the DIO.

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LINKED/RELATED POLICIES: N/A

REFERENCES/AUTHORITIES:

 Institutional Requirements, Accreditation Council for Graduate Medical Education, 2022 <u>ACGME</u> <u>Common Program Requirements</u>