ArnotHealth
A Member of Centralus Health
Graduate Medical Education

Intern/Resident/Fellow Work Hour Policy

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Effective Date: 05/28/2013
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Approved By: GMEC

Purpose

Each residency program must be committed to and responsible for promotion of patient safety and intern/resident/fellow well-being, and to providing a supportive educational environment. Regardless of where affiliated rotations are offered, work hours and on-call time periods must not be excessive for the trainees. Work hours must be consistent with ACGME Common and Specialty-specific Program Requirements and New York State Department of Health regulations.

- The structuring of work hours and on-call schedules must focus on the needs of the patient, continuity of care, and the educational needs of the trainee. Work hour assignments must recognize that faculty and trainees collectively have responsibility for the safety and welfare of patients.
- Didactic and clinical education must have priority in the allotment of trainees' time and energy.
- The learning objectives of the program must not be compromised by excessive reliance upon residents to fulfill service obligations.

Situations in which trainees work an excessive numbers of hours can lead to errors in judgment and clinical decision-making, and negatively impact the physical and mental wellbeing of trainees. These errors can impact patient safety, as well as the safety of the physician trainees through increased motor vehicle accidents, stress, depression and illness.

Work hours must comply with the following standards:

- Clinical and educational work hours must be limited to no more than 80 hours per week, averaged over a four-week period, inclusive of all in-house clinical and educational activities, clinical work done from home, and all moonlighting
- The program must design an effective program structure that is configured to provide residents with educational opportunities, as well as reasonable opportunities for rest and personal well-being
- Residents should have eight hours off between scheduled clinical work and education periods
- There may be circumstances when residents choose to stay to care for their patients or return to the hospital with fewer than eight hours free of clinical experience and education. This must occur within the context of the 80-hour and the one-day-off-in-seven requirements

Residents must have at least 14 hours free of clinical work and education after 24 hours of in-house call.

- Residents must be scheduled for a minimum of one day in seven free of clinical work and required education. At-home call cannot be assigned on these free days.

As per IPRO requirements, the one day in seven free of clinical work cannot be averaged over a four-week period.

- Clinical and educational work periods for residents must not exceed 24 hours of continuous scheduled clinical assignments
- Up to four hours of additional time may be used for activities related to patient safety, such as providing effective transitions of care, and/or resident education.
- Additional patient care responsibilities must not be assigned to a resident during this time
- In rare circumstances, after handing off all other responsibilities, a resident, on their own initiative, may elect to remain or return to the clinical site in the following circumstances:
    - to continue to provide care to a single severely ill or unstable patient;
    - humanistic attention to the needs of a patient or family; or,
    - to attend unique educational events
- These additional hours of care or education will be counted toward the 80-hour weekly limit.
- 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.
- In preparing a request for an exception, the program director must follow the clinical and educational work hour exception policy from the ACGME Manual of Policies and Procedures.
- Prior to submitting the request to the Review Committee, the program director must obtain approval from the Sponsoring Institution's GMEC and DIO
- Night float must occur within the context of the 80-hour and one day-off-in-seven requirements.

- Residents must be scheduled for in-house call no more frequently than every third night (when averaged over a four-week period)

- Time spent on patient care activities by residents on at-home call must count toward the 80-hour maximum weekly limit. The frequency of at-home call is not subject to every third-night limitation, but must satisfy the requirement for one day in seven free of clinical work and education, when averaged over four weeks
- At-home call must not be so frequent or taxing as to preclude rest or reasonable personal time for each resident.
- Residents are permitted to return to the hospital while on at home call to provide direct care for new or established patients. These hours of inpatient patient care must be included in the 80-hour maximum weekly limit.

Arnot Ogden Medical Center Graduate Medical Education follows ACGME and IPRO requirements. See enclosed comparison. Programs are to follow the IPRO requirements when more strict than ACGME requirements. Arnot Ogden Medical Center allows no exceptions to the work hours listed above.

For details related to moonlighting, please see GME-011 Policy on Moonlighting.