

UCSF RESIDENT DUTY HOURS POLICY

Approved by vote of the GMEC 2-24-03

In June 2002, the Accreditation Council for Graduate Medical Education (ACGME) granted preliminary approval to new duty hour standards for residency programs. In July 2003, these standards become a requirement for all residencies in all specialties to maintain accredited status. The ACGME standards emphasize the responsibilities of programs, sponsoring institutions, and the accrediting body (ACGME) relating to safe patient care and an appropriate learning environment for residents. The recommended mechanisms to achieve these goals include the following: a set of common requirements that define a minimum standard that must be met by all accredited programs; enhanced requirements for institutional oversight and support; and strengthening the system for compliance.

The standards address three areas:

- 1.) Placing appropriate limits on duty hours.
- 2.) Promoting institutional oversight.
- 3.) Fostering high-quality education and safe patient care.

The UCSF Resident Work Hours Improvement Project (RWHIP) was approved by vote of the Graduate Medical Education Committee (GMEC) on March 16, 2001. This followed a year-long effort which was in response to the report of a large Taskforce on Resident Work Hours. Represented on the Taskforce and on the RWHIP Committee were residents, students, faculty, program directors, program coordinators, hospital administration, and the Dean's office.

There are both practical and idealistic reasons to seek improvements in resident work hours at UCSF:

- 1.) To ensure the highest standards for delivery of patient care.
- 2.) To enhance the integrity of resident education.
- 3.) To maintain the competitiveness of UCSF with respect to other residency programs for outstanding residents.
- 4.) To satisfy ACGME requirements regarding resident training hours.
(New ACGME standards will be inserted into the Common Program Requirements effective July 1, 2003.)

Resident Duty Hours and the Working Environment

Providing residents with a sound academic and clinical education must be carefully planned and balanced with concerns for patient safety and resident well-being. UCSF will ensure that the learning objectives of all residency programs are not compromised by excessive reliance on residents to fulfill service obligations. Didactic and clinical education will have priority in the allotment of residents' time and energies. Duty hour assignments will recognize that faculty and residents collectively have responsibility for the safety and welfare of patients.

Resident is defined as interns, residents, and fellows enrolled in ACGME-approved training programs at UCSF.

1. Supervision of Residents

- a. All patient care must be supervised by qualified faculty. Each program director will ensure, direct, and document adequate supervision of residents at all times. Residents

will be provided with rapid, reliable systems for communicating with supervising faculty.

- b. Faculty schedules will be structured to provide residents with continuous supervision and consultation.
- c. Faculty and residents will be educated to recognize the signs of fatigue and adopt and apply policies to prevent and counteract the potential negative effects.

2. Duty Hours

- a. Duty hours are defined as all clinical and academic activities related to the residency program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site. These standards apply to all UCSF training sites including, but not limited to, the VA, SFGH, Mt. Zion, and Moffitt-Long hospitals.
- b. Duty hours will be limited to 80 hours per week, averaged over four-week period, inclusive of all in-house call activities.
- c. Residents will be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a four week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.
- d. A-10 hour time period for rest and personal activities should be provided between all daily duty periods, and after in-house call.

3. On-Call Activities

The objective of on-call activities is to provide residents with continuity of patient care experiences throughout a 24 hour period. In-house call is defined as those duty hours beyond the normal work day when residents are required to be immediately available in the assigned institution.

- a. In-house call will occur no more frequently than every third night, averaged over a four-week period.
- b. Continuous on-site duty, including in-house call, will not exceed 24 consecutive hours. Residents may remain on duty for up to 6 additional hours to participate in didactic activities, maintain continuity of medical and surgical care, transfer care of patients, or conduct outpatient continuity clinics.
- c. No new patients may be accepted after 24 hours of continuous duty, except in outpatient continuity clinics. A new patient is defined as any patient for whom the resident has not previously provided care.
- d. At-home call (pager call) is defined as call taken from outside the assigned institution.
 - 1.) The frequency of at-home call is not subject to the every third night limitation. However, at-home call will not be so frequent as to preclude rest and reasonable personal time for each resident. Residents taking at-home call will be provided with 1 day in 7 completely free from all educational and clinical responsibilities, averaged over a 4-week period.
 - 2.) When residents are called into the hospital from home, the hours residents spend in-house are counted toward the 80-hour limit.
 - 3.) The program director and the faculty will monitor the demands of at-home call in their programs and make scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue.

4. Moonlighting

- a. Residents and ACGME Clinical Fellows may moonlight if programmatic policy permits and under specific guidelines. All moonlighting must be pre-approved by the Program

Director. Specific agreements are necessary for this activity (please see the UCSF Institutional Moonlighting policy for more information). The Chair and Program Director must assure that this effort will not interfere with the educational experience of the resident's training program. No resident can be required to moonlight.

- b. Each program must have a program policy regarding moonlighting. The policy must be approved by the GMEC and the Program must be in compliance with Duty Hours limitations.
- c. Each program director will comply with the sponsoring institution's written policies and procedures regarding moonlighting, in compliance with the Institutional Requirements.
- d. Moonlighting that occurs within the program and/or the sponsoring institution or the non-hospital sponsor's primary clinical site(s), i.e., internal moonlighting, will be counted toward the 80-hour weekly limit on duty hours.

5. Oversight

- a. Each program will have written policies and procedures consistent with the Institutional and Program Requirements for resident duty hours and the working environment. These policies will be distributed to the residents and the faculty.
 - 1.) Monitoring of duty hours is required with frequency sufficient to ensure an appropriate balance between education and service. In the first year of implementation of these standards, programs that are out of compliance will be monitored quarterly; programs in compliance will be monitored twice a year. Thereafter, programs that have been out of compliance will be monitored with a frequency to be determined by the UCSF GMEC Sub Committee for Resident Duty Hours. The Sub Committee will include the Associate Dean of Graduate Medical Education, the Resident Duty Hours Compliance Officer, and a subset of members of the GMEC. Programs in compliance after the first year will be monitored yearly.
 - 2.) Each program director will be responsible for obtaining data on compliance with the Resident Duty Hours Policy for their programs. Each resident will be responsible for providing accurate and timely data on compliance with the Resident Duty Hours Policy to her/his program director, the GME Office, and the ACGME when this information is requested.
 - 3.) Directors of programs that are out of compliance with the Resident Duty Hours Policy will determine a plan and timeline to come into compliance and submit this plan and timeline to the GMEC Sub Committee for Resident Duty Hours.
- b. Back-up support systems will be provided by each program when patient care responsibilities are unusually difficult or prolonged, or if unexpected circumstances create resident fatigue sufficient to jeopardize patient care.

6. Duty Hours Exception

An RRC may grant exceptions for up to 10 % of the 80-hour limit, to individual programs based on a sound educational rationale. However, prior permission of the UCSF GMEC Sub Committee for Resident Duty Hours is required. The Sub Committee will include the Associate Dean of Graduate Medical Education, the Resident Duty Hours Compliance Officer, and a subset of members of the GMEC.

* UCSF Fellowship Moonlighting Agreement
(Form is available from GME and on the GME website)

The agreement must define and specify the terms of the clinical work to be performed by stating the following on a form obtained from the GME office:

- 1.) The nature and location of the service to be provided

- 2.) The UCSF training program in which the Clinical Fellow is currently enrolled
- 3.) The dates of the service to be performed
- 4.) The compensation and funding information from the Department receiving the service
- 5.) A statement of who will provide Medical Malpractice and General Liability coverage
- 6.) The dates and type of Departmental Professional Fee Billing Compliance training the Clinical Fellow received
- 7.) The date the Clinical Fellow was licensed in California.