POLICY ON GW RESIDENT/FELLOW DUTY HOURS IN THE LEARNING AND WORK ENVIRONMENT

Policy Statement

This policy is designed to establish an institutional policy to ensure an appropriate work environment for all residents of The George Washington University School of Medicine and Health Sciences and to assist program directors in the development of their individual program policy governing the learning and working environment and duty hours.

Who Needs to Know This Policy

All Accreditation Council for Graduate Medical Education (ACGME)-accredited residency and fellowship programs sponsored by the GW School of Medicine and Health Sciences (SMHS)

Policy Contact

Associate Dean for Graduate Medical Education, DIO

Who Approved This Policy

Graduate Medical Education Committee (GMEC)

History/Revision Dates

APPROVED BY GMEC: November 20, 1995
REVIEWED BY GMEC: March 18, 2002
REVIEWED AND APPROVED BY GMEC: Feb. 24, 2003
REVISED, REVIEWED AND APPROVED BY GMEC: May 16, 2011
REVISED, REVIEWED AND APPROVED BY GMEC: February 2, 2015
Policy

Each residency/fellowship program must have a formal, written policy governing resident duty hour limits that is consistent with ACGME Institutional and Program-specific Requirements.

1. Program policies must be approved by the GME Committee and distributed to residents, fellows and faculty.
2. The educational goals of the program and learning objectives of trainees must not be compromised by excessive reliance on trainees to fulfill service obligations. Monitoring of duty hours is required with frequency sufficient to ensure an appropriate balance between education and service. Didactic and clinical education must have priority in the allotment of trainees’ time and energies.
3. The program must provide services and develop systems to minimize the work of residents/fellows that is extraneous to their educational programs. Trainees must be provided with appropriate backup support when patient care responsibilities are especially difficult or prolonged.
4. Program policies must document that all participating institutions used by the residents/fellows assure that the duty hour requirements are met.

Requirements

Mandatory Time Free of Duty
Trainees must be scheduled for a minimum of one day free of duty every week (when averaged over four weeks). At-home call cannot be assigned on these free days.

Maximum Weekly Duty Hours
1. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities and all moonlighting.
2. Duty periods of PGY 1 residents must not exceed 16 hours in duration.
3. Duty periods of PGY 2 residents and above may be scheduled to a maximum of 24 hours of continuous duty in the hospital. Programs must encourage residents to use alerntness management strategies in the context of patient care responsibilities. Strategic napping, especially after 16 hours of continuous duty and between the hours of 10:00 pm and 8:00 am is strongly suggested.
   a. Residents may be allowed to remain on-site in order to accomplish effective transitions in patient care; this period of time must not exceed an additional four hours.
   b. Residents must not be assigned additional clinical responsibilities after 24 hours of continuous in-house duty.
   c. In unusual circumstances, residents, on their own initiative, may remain beyond their scheduled period of duty to continue to provide care to a single patient. Justifications for such extensions of duty are limited to reasons of required continuity for a severely ill or unstable patient, academic importance of the events transpiring, or humanistic attention to the needs of a patient or family. In these circumstances, the resident must:
      i. Appropriately hand over care of all other patients to the team responsible for their continuing care; and
      ii. Document the reasons for remaining to care for the patient in question and submit that documentation in every circumstance to the program director,
which must review each submission of additional service and track both individual resident and program-wide episodes of additional duty.

Minimum Time Off between Scheduled Duty Periods
1. **PGY 1 residents should have 10 hours**, and must have 8 hours, free of duty between scheduled duty periods.
2. **Intermediate-level residents** (as defined by the Review Committee) **should have 10 hours free of duty, and must have 8 hours between scheduled duty periods. They must have at least 14 hours free of duty after 24 hours of in-house duty.**
3. Residents in the final years of education (as defined by the Review Committee) must be prepared to enter the unsupervised practice of medicine and care for patients over irregular or extended periods.
   a. This preparation must occur within the context of the 80-hour, maximum duty period length, and one-day-off-in-seven standards. While it is desirable that residents in their final years of education have 8 hours free of duty between scheduled duty periods, there may be circumstances (as defined by the Review Committee) when these residents must stay on duty to care for their patients or return to the hospital with fewer than 8 hours free of duty.
   b. Circumstances of return-to-hospital activities with fewer than 8 hours away from the hospital by residents in their final years of education must be monitored by the program director.

Maximum Frequency of In-House Night Float
Residents must **not be scheduled for more than six consecutive nights of night float.** The maximum number of consecutive weeks of night float, and maximum number of months of night float per year may be further specified by the Review Committee.

Maximum In-House On-Call Frequency
PGY 2 residents and above must be scheduled for in-house call **no more frequently than every 3rd night**, when averaged over a 4-week period, or as specified by the Review Committee.

At-Home Call
1. **Time spent in the hospital by residents on at-home call must count** towards the 80-hour maximum weekly hour limit. The frequency of at-home call is not subject to the every-third-night limitation, but **must satisfy the requirement for one-day-in-seven free** of duty when averaged over four weeks.
2. At home call must not be so frequent or taxing as to preclude rest or reasonable personal time for each resident.
3. Residents 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 weekly maximum, will not initiate a new “off-duty period”.

Moonlighting
1. Moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program.
2. **Time spent by residents in internal and external moonlighting must be counted towards the 80-hour Maximum Weekly Hour Limit.**
3. **PGY 1 residents are not permitted to moonlight.**
4. Please refer to the Institutional and Departmental Policies on Moonlighting for additional requirements.

**Monitoring and Oversight**

**Requirements**

As the sponsoring institution, The George Washington University School of Medicine and Health Sciences, through its Graduate Medical Education Committee, is responsible for promoting education and for ensuring that the working environment and duty hours are appropriate and in compliance with Institutional and Program Requirements. This is accomplished by the GMEC through the following methods:

1. Review of programs' policies on duty hours and resident working environment as part of the GMEC Annual Program Review (APE).
2. Review of monthly duty hour reports from the MedHub system.
3. Monitoring the duty hour hotline in the GME Office which allows anonymous reporting of duty hour violations. The hotline number is 202-994-9760.
4. Review of call schedules, OR schedules, and medical records as needed.

Residents and Fellows are required to log duty hours using the MedHub system during reporting periods according to program requirements for yearly vs. sampling.

**Process**

1. The Program Director and DIO (or designee) will review monthly duty hour reports from the MedHub system and address any violations. This will be reported to the GMEC at the monthly meeting.
2. The Program Director will report duty hours annually through the ACGME Web Accreditation System as part of the Annual Update. The DIO will review results of the duty hour section of the ACGME Resident Survey as part of the Annual Program Evaluation. Program Directors will be required to provide a response to any areas of non compliance related to duty hours.
3. All residents/fellows, Program Directors, and designated faculty are required to complete the sleep education training program developed and adapted from the SAFER program of the American Academy of Sleep Medicine. Compliance will be monitored by the GMEC.

**Requests for increases/changes**

1. A request to increase/change trainee duty hours must be made to the GME Committee.
2. Programs selected to participate in duty hour-related studies are subject to the rules of the study.
3. Study requirements for duty hours must be shared with all affected programs, residents and fellows in advance of rotations, and presented to the GME Committee for approval.
4. The decision of the GME Committee to approve/reject study participation or otherwise exceptions to the duty hour rules shall be made after discussion and vote by the membership and shall be recorded in the minutes of the meeting.