



Policy Number GME-2220-008
Date of Last Review Month Year: 06/2022
Date of Last Revision Month Year :
Policy Owner(s) Department GME

Institutional Requirement IV.K.
2022 Accreditation Council for Graduate
Medical Education (ACGME)

Graduate Medical Education: Clinical Experience and Educational Work Hours

I. Purpose

To provide programs in partnership with the sponsoring institution, an effective program structure that is configured to provide residents with educational and clinical experience opportunities, as well as reasonable opportunities for rest and personal activities.

II. Scope

All Ochsner employed Residents and Fellows, Education Program Directors and GME Administrative Staff. For the purposes of this policy the term resident includes any trainee in an Ochsner sponsored program.

III. Policy Statements

- A. Supervising physicians know, honor and assist in implementing the applicable clinical and educational work limitations.
- B. Residents comply with those limitations, accurately report work hours and cooperate with work hour monitoring procedures.
- C. All involved identify and report sources of potential work hour violations and collaborate to evaluate and implement appropriate action plans to mitigate non-compliance.

IV. Responsibilities and Requirements

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.

Mandatory Time Free of Clinical Work and Education

- A. 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.
- B. Residents should have eight hours off between scheduled clinical work and education periods.
- C. 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



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experience and education. This must occur within the context of the 80-hour and the one-day-off-in-seven requirements.

- D. Residents must have at least 14 hours free of clinical work and education after 24 hours of in-house call.
- E. Residents must be scheduled for a minimum of one day in seven free of clinical work and required education (when averaged over four weeks). At-home call cannot be assigned on these free days.

Maximum Clinical Work and Education Period Length

- A. Clinical and educational work periods for residents must not exceed 24 hours of continuous scheduled clinical assignments.
- B. 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.
- C. Additional patient care responsibilities must not be assigned to a resident during this four hours of additional time.
- D. Program Directors and faculty are encouraged to perform fitness for duty assessments on a regular basis.

Clinical and Educational Work Hour Exceptions

- A. 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:
 - a. To continue to provide care to a single severely ill or unstable patient
 - b. Humanistic attention to the needs of a patient or family
 - c. To attend unique educational eventsThese additional hours of care or education will be counted toward the 80-hour weekly limit.
- B. Programs who wish to apply for the 10% extension of the weekly 80-hour limit must follow the clinical and educational work hour exception policy from the *ACGME Manual of Policies and Procedures*;



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- a. 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.
- b. A formal request with supporting documentation must be submitted to the GMEC for review and approval.
- c. If the Ochsner GMEC approves the request, it will provide a supporting letter to the program director to include with the programs request to the RRC.

Additional Clinical Experience and Education work hours

In-House Night Float

- Night float must occur within the context of the 80-hour and one-day-off-in-seven requirements.

In-House On-Call Frequency

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

At-Home Call

- Time spent on patient care activities on at-home call must count toward the 80-hour maximum weekly limit. All at-home call 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 care must be included in the 80-hour maximum weekly limit.

Moonlighting

- Must not interfere with the ability of the resident to achieve the goals and objectives of the educational program and must not interfere with the resident's fitness for work nor compromise patient safety.
- Time spent by residents in internal and external moonlighting must be counted toward the 80-hour maximum weekly limit.



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V. Oversight

1. Each program must have criteria and procedures consistent with the Institutional and Program Requirements for resident clinical experience and educational work environment.
2. Monitoring of clinical experience and educational hours is required at the program level with frequency enough to ensure compliance with limits as defined in this policy.
 - a. The Program Director is responsible for final decisions related to schedules and clinical experience and educational hour decisions.
 - b. Individual programs must monitor resident clinical experience and educational hours to determine that trainees are in compliance with limits and provide reporting as requested by the DIO and/or GMEC.
 - c. Each program will establish a mechanism for back up support when patient care responsibilities are unusually difficult or prolonged, or if unexpected circumstances create resident fatigue sufficient to jeopardize patient care.
 - d. The GMEC will review clinical experience and educational reports at least quarterly during committee meetings. Reports will be generated through the current residency management systems and at the time of the programs annual review of program.
 - i. Programs identified with areas of non- compliance will be requested to provide clarification and/or action plans to mitigate non-compliance.

Definitions

A. Clinical and Educational Work Hours:

Defined as all clinical and academic activities related to the program. This includes patient care, administrative duties relative to patient care (including those, if any conducted from home), provision of transfer of patient care, on-call time spent in-house, and scheduled activities such as conferences.

B. Schedule Duty Periods:

Assigned duty at this hospital or other training site encompassing clinical experience and education which may be within the normal work day, beyond the normal work day, or a combination of both.

C. RRC: Residency Review Committee

D. ACGME: Accreditation Council for Graduate Medical Education



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External References:

ACGME Common Program Requirements

https://www.acgme.org/globalassets/PFAssets/ProgramRequirements/CPRResidency_2022v2.pdf

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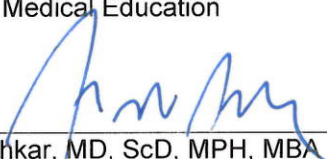
Approved



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Policy History

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