



CLINICAL AND EDUCATIONAL WORK HOURS POLICY

Nationwide Children's Hospital (NCH) and its Graduate Medical Education (GME) and Dental Education (DE) programs will provide a learning and working environment that balances the educational needs of the residents and fellows (trainees) and the service needs of the patients based on the following principles:

1. Commitment to, and responsibility for, patient safety and trainee well-being
2. Sufficient staffing so education is not compromised by excessive reliance on residents to fulfill service obligations

All GME and DE programs must comply with the ACGME and NCH requirements for clinical and educational work hours. Clinical and educational work hours are defined as all clinical and academic activities related to the program; i.e., patient care (inpatient, outpatient and clinical work done from home), 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 hospital. Individual RRC's may have additional clinical and educational work hour requirements – see program-specific requirements.

Programs must encourage residents to continuously monitor their alertness and to utilize appropriate strategies such as napping, food/cafeine ingestion, and other appropriate tactics to overcome transitory declines. Any resident who feels unfit to safely perform his/her duties for any reason should notify the attending or Program Director as soon as possible.

Clinical and Educational Work Hour Requirements

Maximum Hours per Week

- Clinical and educational work hours must be limited to no more than 80 hours per week, averaged over the rotation or 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

- Trainees should have eight hours off between scheduled work and educational periods
- There may be circumstances when trainees 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 one-day-off-in-seven requirements
- Trainees must have at least 14 hours free of clinical work and education after 24 hours of in-house call.
- Trainees 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

- Clinical and educational work periods for trainees 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 trainee education. Additional patient care responsibilities must not be assigned to the trainee during this time.

Clinical and Educational Work Hour Exceptions

- In rare circumstances, after handing off all other responsibilities, a trainee, 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

Moonlighting (See also Moonlighting policy)

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

In-House Night Float

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

- Trainees 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 by trainees 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.
- At-home call must not be so frequent or taxing as to preclude rest or reasonable personal time for each trainee. Trainees 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.

Oversight

- Each program must have written policies and procedures consistent with the Institutional and Program requirements for trainee clinical and educational work hours. These policies must be distributed to the trainees and faculty.
- Trainees must report their clinical and educational work hours in MedHub accurately and in a timely manner.
- Monitoring of trainee clinical and educational work hours is a shared responsibility of trainees, attendings, and PD. Trainees must immediately report any violations or concerns. PDs must review logs routinely and document violations and program follow up.
- Attendings must allow trainee who have reached their clinical and educational workhours' maximum and/or who are experiencing excessive fatigue/stress to leave without negative consequences.
- Back-up support systems must be provided when patient care responsibilities are unusually difficult or prolonged, or if unexpected circumstances create trainee fatigue sufficient to jeopardize patient care.
- The GMEC and DIO will monitor program clinical and educational work hours via monthly violations reports and Annual Program Evaluations.
- Compliance with clinical and educational work hour rules will be reported annually to the organized Medical Staff and Board as a component of the Annual Institutional Review.

- The DIO, working with the President/Chief Operating Officer, Chief Medical Officer, and the Chief Nursing Officer, will identify additional NCH resources which may be needed to assure that the quality of patient care is maintained.

Requests for RRC Exception

- A program may request a maximum of 10% (8 hours) increase in the 80 hour limit. Any request must be reviewed and approved by the GMEC before it is submitted to ACGME.
- Programs are expected to fully comply with the clinical and educational work hours. Exceptions will only be considered if the following criteria are met:
 - ACGME Accreditation Status –program must be in good standing with ACGME
 - Patient Safety – how the program will monitor, evaluate, and ensure that patient safety is maintained.
 - Educational Rationale – how the exception will improve residents’ education in ways which cannot be achieved any other way.
 - Changes Made to Reduce Clinical and Educational Work Hours – steps taken to comply with the clinical and educational work hour requirements, e.g., elimination of non-essential tasks, hiring of additional personnel, schedule changes.
 - Moonlighting Policy – elimination of moonlighting.
 - Call Schedules – current call schedules must be submitted to the GMEC as part of the RRC Exception request. The GMEC will review the call schedules to identify additional opportunities which would not involve an increase in hours.
 - Faculty Monitoring – description of how the faculty has been educated about, and is monitoring, the effects of fatigue and stress
- If the request is approved at a GMEC meeting (no mail vote permitted), the DIO will submit written documentation of institutional endorsement. This endorsement will include this policy.
- If the Residency Review Committee (RRC) approves the request, the exception can be granted for only one year. The PD is responsible for submitting a new request, following these procedures each year.

Trainee Concerns;

Trainee concerns regarding clinical and educational work hours should be addressed with the PD, the DIO and/or the Fellow and Resident Advisory Council (FRAC). GME Grievance policy and procedure are also available if trainee does not feel concerns have been address through other available channels.

Approved by GMEC: 6/25/03; 12/10/03; 6/22/04, 04/18/2007; 9/24/2009, 6/15/2011, 10/20/2014, 8/15/2018