

INSTITUTIONAL GME POLICY – Clinical Experience and Education Work Hours

Approved by GMEC 1/28/11, 5/24/2013, 10/4/2013, 9/28/2018, 5/27/2022

Residents and Fellows are educated at all levels of training regarding the importance of Work Hours compliance. The respective Program Directors are required to include Principles, Supervision of Residents and Fellows, Fatigue, the definition of Work Hours, On-Call Activities, and Moonlighting restrictions in the respective Program Orientation at the beginning of each academic year, and periodically throughout the year.

The Sponsoring Institution, the University of Hawaii, John A. Burns School of Medicine and its affiliated residency programs adheres to and complies with the ACGME by adapting the following requirements:

- Maximum clinical and educational work hours are limited to no more than 80 hours per week, averaged over a four-week period.
- Residents should have eight hours off between scheduled clinical work and educational periods.
 - In circumstances when residents choose to stay for the care of their patients or return to the hospital with fewer than eight hours free of clinical experience and education, the context of the 80-hour and one-day-off-in-seven requirements must still apply.
- 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 (averaged over four weeks). At-home call cannot be assigned on these free days.
- Clinical and educational work periods 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 (e.g., transitions of care and/or resident education). Additional patient care responsibilities must not be assigned to a resident during this time.
- In rare circumstances, a resident may elect to remain or return to the clinical site in the following:
 - To continue to provide care to a single severely ill or unstable patient,
 - Humanistic attention to the needs of a patient or family,
 - To attend unique educational events.These additional hours will be counted toward the 80-hour weekly limit.
- Night float must occur within the context of the 80-hour and one-day-off-in-seven requirement.
- 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 while on at-home call must count towards the 80-hour weekly 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 clinical work and education, when averaged over four weeks.

Moonlighting (Refer to Appointment Agreement for details and/or contact your program administrator/coordinator for additional information)

- Moonlighting includes all paid and unpaid (voluntary) activities outside the scope of the Program's curriculum.
- Moonlighting must not interfere with the residents' ability to achieve the goals and objectives of the program, with the resident's fitness for work, nor compromise patient safety.
- Fellows who have completed a core residency program are permitted to moonlight and should refer to the respective Appointment Agreement for details regarding moonlighting.
 - Approval and monitoring of hours by the Program Director must be documented.
 - A proper unrestricted license for the independent practice of medicine is required.
 - Appropriate professional liability coverage for outside employment is required.