POLICY: Duty Hours in the Learning and Working Environment

PURPOSE: To comply with ACGME duty hour requirements and maintain patient safety and resident/fellow well-being.

UCSF Fresno Medical Education Programs follow the ACGME Common Program Requirements (effective 7/1/13) for duty hours in the leaning and working environment as stated below. All UCSF Fresno housestaff must report duty hours into the e-Value system.

Every UCSF Fresno Medical Education residency/fellowship training program must have their own policy which addresses their specialty/subspecialty specific duty hours and working environment requirements in addition to incorporating this institutional policy for duty hours in the learning and working environment.

Professionalism, Personal Responsibility, and Patient Safety
UCSF Fresno residency and fellow training programs must educate residents and faculty members concerning the professional responsibilities of physicians to appear for duty appropriately rested and fit to provide the services required by their patients.

UCSF Fresno programs must be committed to and be responsible for promoting patient safety and resident well-being in a supportive educational environment.

Program Directors must ensure that residents are integrated and actively participate in interdisciplinary clinical quality improvement and patient safety programs.

The learning objectives of the program must:
- be accomplished through an appropriate blend of supervised patient care responsibilities, clinical teaching, and didactic educational events; and,
- not be compromised by excessive reliance on residents to fulfill non-physician service obligations.

UCSF Fresno and the Program Directors must ensure a culture of professionalism that supports patient safety and personal responsibility.

Residents and faculty members must demonstrate:
- assurance of the safety and welfare of patients entrusted to their care;
- provision of patient- and family-centered care;
- assurance of their fitness for duty;
- management of their time before, during, and after clinical assignments;
• recognition of impairment, including illness and fatigue, in themselves and in their peers;
• attention to lifelong learning;
• the monitoring of their patient care performance improvement indicators; and,
• honest and accurate reporting of duty hours, patient outcomes, and clinical experience data.

All residents and faculty members must demonstrate responsiveness to patient needs that supersede self-interest. Physicians must recognize that under certain circumstances, the best interests of the patient may be served by transitioning that patient’s care to another qualified and rested provider.

Transitions of Care
UCSF Fresno programs must design clinical assignments to minimize the number of transitions in patient care.

UCSF Fresno programs must ensure and monitor effective, structured hand-over processes to facilitate both continuity of care and patient safety.

Programs must ensure that residents are competent in communicating with team members in the hand-over process.

UCSF Fresno programs must ensure the availability of schedules that inform all members of the health care team of faculty members and residents currently responsible for each patient’s care.

Alertness Management
The program must:
• educate all faculty members and residents to recognize the signs of fatigue and sleep deprivation;
• educate all faculty members and residents in fatigue mitigation processes; and,
• adopt fatigue mitigation processes to manage the potential negative effects of fatigue on patient care and learning, including naps and back-up call schedules.

Each program must have a process to ensure continuity of patient care in the event that a resident may be unable to perform his/her patient care duties.

The sponsoring institution must provide adequate sleep facilities and/or safe transportation options for residents who may be too fatigued to safely return home.

Resident Duty Hours

Maximum Hours of Work per Week
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.
Duty Hour Exceptions

A Review Committee may grant exceptions for up to 10% or a maximum of 88 hours to individual programs based on a sound educational rationale.

- In preparing a request for an exception the program director must follow the duty hour exception policy from the ACGME Manual on Policies and Procedures.
- Prior to submitting the request to the Review Committee, the program director must obtain approval of the UCSF Fresno GMEC and DIO.

Moonlighting
Time spent by residents in Internal and External Moonlighting (as defined in the ACGME Glossary of Terms) must be counted towards the 80-hour Maximum Weekly Hour Limit.

PGY-1 residents are not permitted to moonlight.

UCSF Fresno residency and fellowship training programs will track moonlighting through the on-line e-Value system and report monthly to the GMEC Subcommittee for Duty Hours. The Duty Hours Subcommittee reports to the GMEC every other month.

Mandatory Time Free of Duty
Residents 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 Duty Period Length
Duty periods of PGY-1 residents must not exceed 16 hours in duration.

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 alertness 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 p.m. and 8:00 a.m., is strongly suggested.

- It is essential for patient safety and resident education that effective transitions in care occur. Residents may be allowed to remain on-site in order to accomplish these tasks; however, this period of time must be no longer than an additional four hours.
- Residents must not attend continuity clinics after 24 hours of continuous in-house duty.
- 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.

Under those circumstances, the resident must:
• appropriately hand over the care of all other patients to the team responsible for their continuing care; and,
• document the reasons for remaining to care for the patient in question and submit that documentation in every circumstance to the program director.

The program director 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
PGY-1 residents should have 10 hours, and must have eight hours, free of duty between scheduled duty periods.

Intermediate-level residents (as defined by the Review Committee and identified within individual UCSF Fresno program specific policies regarding duty hours) should have 10 hours free of duty, and must have eight hours between scheduled duty periods. They must have at least 14 hours free of duty after 24 hours of in-house duty.

Residents in the final years of education (as defined by the Review Committee and identified within individual UCSF Fresno program specific policies regarding duty hours) should have eight hours between scheduled duty periods. However, these residents must be prepared to enter the unsupervised practice of medicine and care for patients over irregular or extended periods. Under circumstances defined and approved by the Review Committee, residents in their final years of education (as determined by the Review Committee and identified within individual UCSF Fresno program specific policies regarding duty hours) may be permitted to return to duty with fewer than eight hours between in hospital activities. This must occur only within the context of the 80-hour and one-day-off-in-seven standards.

Circumstances of return-to-hospital activities with fewer than eight 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 and identified within individual UCSF Fresno program specific policies regarding duty hours.)

Maximum In-House On-Call Frequency
PGY-2 residents and above must be scheduled for in-house call no more frequently than every-third-night (no averaging).

At-Home Call
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.

At-home call must not be so frequent or taxing to preclude rest or reasonable personal time for each resident.

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.”

*(Original signed Policy is available in the UCSF Fresno Graduate Medical Education Office)*

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