

**Policy of the Graduate Medical Education Committee**  
**Section: Resident Supervision/ Work Environment**  
**Subject: Duty Hours in the Learning and Working Environment**  
**Number: 3.200**  
**Date Developed: 7/98**  
**Last Review/Revision: 10/04, 1/08, 1/11, 6/2014**  
**Replaces: Previous policy of same name, dated 1/08**  
**ACGME Requirements: Institutional I.B.4.b).(10); II.F.2; III.B.5; Common II.A.4.j); II.A.4.k); VI.A.5; VI.B.; VI.C.; VI.D.; VI.F.; VI.G.**

### **Purpose**

To establish University of Arkansas for Medical Sciences College of Medicine standards for duty hours in the learning and working environment for residents (includes fellows).

To inform the GME community that the offense of negligent homicide Arkansas Code § 5-10-1-5 has been amended to include persons having been without sleep for a period of 24 consecutive hours.

### **Definitions**

**Duty hours:** all clinical and academic activities related to the residency program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences, didactic sessions. Duty hours do not include reading and preparation time spent away from the duty site.

**In-house call:** those duty hours beyond the normal workday when residents are required to be immediately available in the assigned institution.

**At-home call (pager call):** is call taken from outside the assigned site. Time in the hospital, exclusive of travel time, counts against the 80 hour per week limit but does not restart the clock for time off between scheduled in-house duty periods. At-Home Call may not be scheduled on the resident's one free day per week (averaged over four weeks).

**Fatigue management:** Recognition by either a resident or supervisor of a level of resident fatigue that may adversely affect patient safety and enactment of appropriate countermeasures to mitigate the fatigue.

### **Policy**

**Falsification of duty hour data or pressure to cause the falsification of such data is considered egregious behavior for residents and can result in disciplinary action to include dismissal. Faculty members are governed by the Faculty Group Practice and University policies and procedures and terms of the Faculty Group Practice agreement. Residents must notify the Program Director of requests or pressure to work in excess of duty hours authorized by this policy.**

Each Program Director must establish, distribute and implement formal written policies and procedures governing duty hours and work environment for residents, which comply with this institutional GME policy and the Common and Specialty-specific Program Requirements. Programs must be committed to and responsible for promoting patient safety and resident well-being in a supportive educational environment. The learning

objectives of the program must not be compromised by excessive reliance on residents to fulfill non-physician service obligations.

The Sponsoring Institution provides health care delivery systems to minimize residents'/fellows' work that is extraneous to programs' goals and objectives. The educational experience must not be compromised by excessive reliance to fulfill non-physician service obligations.

The Sponsoring Institution ensures access to food while on duty at all participating sites, sleep/rest facilities available for residents/fellows and security and safety measures appropriate to the participating site.

The Sponsoring Institution and programs must provide environment in which residents/fellows have the opportunity to raise concerns and provide feedback without intimidation or retaliation.

The Sponsoring Institution will oversee and document resident/fellow engagement in patient safety, quality improvement, appropriate supervision and mechanisms for reporting inadequate supervision.

The GMEC shall monitor compliance with this policy through:

- a. Annual ACGME Survey of residents,
- b. Special Review Process for underperforming programs, and
- c. Requests for duty hour exceptions.

### **Professionalism, Personal Responsibility, and Patient Safety**

The program director and institution must ensure a culture of professionalism that supports patient safety and personal responsibility. The Sponsoring Institution provides systems for education in and monitoring of educational and professional responsibilities, accurate completion of documentation and identification of resident/fellow mistreatment. Residents and faculty members must demonstrate an understanding and acceptance of their personal role in the following:

1. Assurance of the safety and welfare of patients by recognizing that the best interest of the patient may be served by transitioning that patient's care to another qualified and rested provider.
2. Provision of patient- and family-centered care  
Assurance of their fitness for duty, which includes: Management of their time before, during, and after clinical assignments
  - a. Recognition of impairment, including illness and fatigue, in themselves and their peers
3. Attention to lifelong learning.
4. The monitoring of their patient care performance improvement indicators
5. Honest and accurate reporting of duty hours, patient outcomes, and clinical experience data

### **Transitions of Care**

1. The Sponsoring Institution must facilitate professional development for faculty and residents/fellows regarding effective transitions of care, and ensure sites engage in standardized transitions of care consistent with the setting and type of patient care.
2. Programs must design clinical assignments to minimize the number of transitions in patient care, and inform all members of the health care team of attending physicians and residents currently responsible for each patient's care.
3. See GME Policy 3.800

## **Fatigue Management and Mitigation**

1. Programs will educate faculty and residents in fatigue mitigation processes, in recognition of the signs of fatigue and sleep deprivation, and have a fatigue mitigation plan such as napping, adjusting schedules or back up support including a process to ensure continuity of patient care should faculty or resident be unable to perform his/her duties.
2. The program director will monitor individual as well as aggregate program use of the fatigue mitigation process.
  - a. Individual monitoring for signs of fatigue should be at a minimum during the semi-annual evaluation.
  - b. The program aggregate use of the fatigue mitigation process may indicate the need for program-wide changes.
3. The Sponsoring Institution provides nap facilities for residents who may be too fatigued to safely return home.
4. Resources on the UAMS COM GME webpage include a 10-minute video on managing fatigue, and access to the L.I.F.E. Curriculum which covers prevention, identification and management of fatigue and impairment.

## **Supervision and Clinical Responsibilities**

The program director and faculty members will assign the appropriate level of authority, responsibility, conditional independence and supervisory role for each resident based on PGY-level, patient safety, resident education, severity and complexity of patient illness/condition and available support services. See GME Policy 3.100.

## **Teamwork**

Residents must care for patients in an environment that maximizes effective communication. This must include the opportunity to work as a member of effective inter-professional teams that are appropriate to the delivery of care in the specialty. (further specified by RRCs).

## **Duty Hours**

Programs will comply with resident duty hours and definitions as set forth in the applicable Program Requirements. The Sponsoring Institution will monitor duty hours annually and programs will monitor duty hours with a frequency to ensure compliance with ACGME requirements. Programs will adjust schedules as necessary to mitigate excessive service demands and/or fatigue. Moonlighting is addressed in GME policies 3.300 & 3.400.

## **Duty Hours Exceptions**

An RRC may grant exceptions for up to 10 % or a maximum of 88 hours to individual programs based on a sound educational rationale. **The GMEC must review and formally endorse the exemption prior to submission to the RRC** according to the following procedures:

1. The Program Director must submit a written request for an exemption to the GMEC Chair. The request must clearly document the following:
  - a. **Patient Safety:** Information must be submitted that describes how the program and institution will monitor, evaluate, and ensure patient safety with extended resident work hours.
  - b. **Educational Rationale:** The request must be based on a sound educational rationale which should be described in relation to the program's stated goals and objectives for the particular assignments,

rotations, and level(s) of training for which the increase is requested. Blanket exceptions for the entire educational program should be considered the exception, not the rule.

- c. **Moonlighting Policy:** Specific information regarding the program's moonlighting policies for the periods in question must be included.
  - d. **Call Schedules:** Specific information regarding the resident call schedules during the times specified for the exception must be provided.
  - e. **Faculty Monitoring:** Evidence of faculty development activities regarding the effects of resident fatigue and sleep deprivation must be appended.
2. The Program Director will present the request in person to the GMEC for discussion..
  3. If approved by the GMEC, the Designated Institutional Official (DIO) or the GMEC Chair will provide a documented written statement of institutional endorsement of the proposal.
  4. The Program Director must submit the request to the RRC according to the *ACGME's RRC Procedures for Granting Duty Hours Exceptions*. The proposal to the RRC must include a copy of this policy (which contains the institution's written procedures and criteria for endorsing requests for an exception to the duty hours limits) and the current accreditation status of the program and of the sponsoring institution.