Stony Brook Southampton Hospital

POLICY MANUAL

Effective Date: June 27, 2011 **Section: Medical Education**
Supersedes: June 2020 **Page 1 of 4**
Last Reviewed: September 2024

Subject: Clinical and Educational Work Hours

PURPOSE

To promote patient safety and education through carefully constructed clinical and educational work hour assignments for all graduate medical education training programs within Stony Brook Southampton Hospital. This institutional policy governs resident clinical and educational work hours that supports the physical and emotional well-being of the resident, promote an educational environment and facilitate patient care while monitoring the resident work hours.

POLICY

Stony Brook Southampton Hospital abides by the New York State Health Code 405.4 established in July 1989 and ACGME requirements with regard to resident clinical and educational work hour. Each program must have a departmental clinical and educational work hour compliance plan which is available upon request for any NYS DOH and/or ACGME audit. It is the responsibility of each residency/fellowship program to have a clinical and educational work hour compliance plan.

1. Trainees will not be assigned to work in excess of eighty-hours (80) per week, averaged over a four (4) week period.
2. Trainees will be required to sign a "Work Hours Compliance Attestation" during trainee orientation and yearly thereafter, indicating that the trainee has received the work hour policy and agrees to abide by its requirements
3. Trainees assigned to emergency medicine will not work in excess of twelve (12) hours per shift, including attendance at required didactic activities.
4. All trainees will be scheduled for a minimum of alternate 48-hour weekends off clinical work and required education or at least one (1) twenty-four (24) hour period off each week.
5. Trainees will not be assigned to more than twenty-four (24) hours of continuous clinical work and required education. The twenty-four rule does not include call from home. When called in from home, time spent physically present in the hospital will count towards the twenty-four hour limit.
6. Trainees will not be allowed to admit or care for new patients after twenty-four (24) hours of continuous work and education.
7. Trainees must be allowed a minimum of 12 hours off upon the conclusion of twenty-four (24) hours of continuous scheduled clinical assignment.
8. Trainees will not be assigned to call more than every third night, inclusive of call from home, averaged over a four-week period.

Clinical and Educational Work Hours Requirements:

Clinical and educational work hours are defined as all clinical and academic activities related to the program, i.e., patient care (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.

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.

Residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational and administrative activities. At home call cannot be assigned on these free days.

Maximum Hours of Clinical and Educational Work

Strategic napping, especially after 16 hours of continuous duty and between the hours of 10:00PM and 8:00AM is strongly suggested with the use of call rooms.

- 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 three hours.
- Residents must not be assigned additional clinical responsibilities after 24 hours of continuous in-house work.
- The program director must review each submission of additional service, and track both individual resident and program-wide episodes of additional work and education.
- When residents and fellows are assigned to a rotation outside their program, the specialty-specific Program Requirements regarding work hours, as well as the receiving program's clinical and educational work hours policy apply.

Minimum Time Free of Clinical Work and Education:

A. Residents should have eight hours off between scheduled clinical work and education periods.
   a. This preparation must occur within the context of the 80-hour and one-day-off-in-seven standards. While it is desirable that residents in their final years of education have eight hours free of work and education

between scheduled work periods, there may be circumstances (as defined by the Review Committee) when these residents must stay on duty to care for their patients or return to the hospital with fewer than eight hours free of work and education.

i. 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.

B. **Maximum Frequency of In-House Night Float:** Residents must not be scheduled for more than six consecutive nights of night float. This may be further specified by the Review Committee.

C. Providing residents with a sound didactic and clinical education must be carefully planned and balanced with concerns of patient safety and resident well-being. Each program must ensure that the learning objectives of the program are not compromised by excessive reliance on residents to fulfill service obligations. Didactic and clinical education must have priority in the allotment of residents' time and energy. Work hour assignments must recognize that faculty and residents collectively have responsibility for the safety and welfare of patients.

D. The GME Committee (GMEC) has developed and implemented procedures to regularly monitor resident work hours for compliance.

Maximum Clinical Work Period Length:

PGY 1 Residents may not work over 16 hours, may not take at home call, and may not moonlight.

PGY 2 and above have a 24 hour maximum.

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 (when averaged over a four-week period).

ONMM 3, Program Specific:

All ONMM 3 residents must enter clinical work hours daily into New Innovations. All time spent on patient care activities by the resident (in-patient, clinically and on at home call) counts toward the eighty-hour (80) per week maximum. The work hours report must be monitored monthly by the program director. Clinical work hours are monitored by the GME office for compliance.

On-Call Activities

The objective of on-call activities is to provide residents with continuity of patient care experiences throughout a 24-hour period. In-house call is defined as those clinical work hours beyond the normal workday when residents are required to be immediately available in the assigned institution.

At-Home Call

At-home call (pager call) is defined as call taken from outside the assigned institution. Time spent in the hospital by residents on at-home call must count towards the 80-hour maximum weekly hour limit.

A. 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, 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/fellow.

B. Types of work from home that must be counted include using an electronic health record and taking calls from home.

C. Resident decisions to leave the hospital before their clinical work has been completed and to finish that work later from home must be made in consultation with the resident's supervisor. In such circumstances, residents should be mindful of their professional responsibility to complete work in a timely manner and to maintain patient confidentiality.

D. 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 patient care must be included in the 80-hour maximum weekly limit.

PROCEDURE

The Program Director and/or Director of Medical Education will review trainee call schedules monthly to ensure that the schedules do not violate the work hour policy. Each trainee is required to complete a Work Hour Compliance Form on a monthly basis.

There are no exceptions to Clinical and Educational Work Hours. We are bound by the ACGME Institutional and Common Requirements and New York State Regulations.