

### Policy Number: GME 09

## Policy Title: Clinical and Educational Work Hours Policy

### **Policy Statement:**

Clinical and educational work (CEW) hours are defined as time spent on educational and clinical activities related to the residency program, including patient care, administrative duties related to patient care and academic activities, regardless of location. CEW hours must be such that they support the residents' physical and emotional well-being, promote an environment conducive for education and facilitate excellent patient care.

The specific requirements are as follows: :

- 1. Resident/fellows are limited to a maximum of 80 CEW hours per week, averaged over four weeks, inclusive of all in-house clinical and educational activities, clinical work done from home, and all moonlighting.
- Residents/fellows must be given one day out of seven free from all clinical and educational responsibilities, averaged over four weeks. At-home call cannot be assigned during this day off. OHSU defines a "day off" as a 24 hour period free from all responsibilities that is exclusive of days following night call.
- 3. Residents/fellows cannot be scheduled for in-house call more than once every three nights, averaged over four weeks.
- 4. CEW hour periods for residents/fellows must not exceed 24 hours of continuous scheduled clinical assignments. Residents/fellows may remain on duty for four additional hours, as long as no additional patient care responsibilities are assigned, to participate in didactic activities, transfer care of patients, conduct outpatient clinics and maintain continuity of medical and surgical care as defined in Specialty and Subspecialty Program Requirements.

In unusual circumstances, residents/fellows, on their own initiative, may remain beyond their scheduled period of work to continue to provide care to a single patient in the following circumstances: 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.

- 5. Residents/fellows should have 8 hours for rest and personal activities between daily CEW periods and must have at least 14 hours after 24 hours of in-house call.
- 6. The demands of home-call must be monitored by program director and faculty to ensure that it does not cause excessive service demands or fatigue. Each program is expected to have a specific policy on home-call. When called into the hospital from home, the hours worked by the trainee must count toward the 80-hour limit.
- 7. Clinical work (including using electronic health record or taking calls from home) must be counted toward the 80-hour weekly maximum. Each program must have a policy regarding the documentation of clinical work at home.
- 8. All moonlighting counts toward the weekly CEW hour limit. In addition, program directors must ensure that moonlighting does not interfere with the resident/fellow's achievement of his/her educational goals and objectives, RRC-specified activities, or compromise the resident/fellow's fitness for work or ability to provide patient care.



GMEC will not consider any requests for exceptions to the 80-hour weekly limit under ACGME Core Program Requirement VI.F.4.c).

Reports of non-compliance will be presented to and reviewed by the Division of Graduate Medical Education. In addition, two specific methods will be utilized:

- A. The MEDHUB System will be used by residents/fellows to report weekly CEW hours. The Program Directors must review all CEW hours specific to their program for violations. The GME Office will review the CEW hours for assurance that all programs are in compliance with ACGME regulations.
- B. B. The GME Office at 503-494-8652 will serve as a Hot Line for reporting CEW hours' concerns by residents/fellows, faculty and any staff. If requested the identity of the person presenting the concern will be kept confidential. With help from the CEW Hours Sub-committee of GMEC, the Designated Institutional Official will investigate and resolve any issues raised in a confidential manner.

# Policy Owner Graduate Medical Education

Amendment/Approving Committee GMEC

## Additional Resources

Form/Document	Use	Links

## **Version control**

Version	Effective Date	Author	Description of Change
1	2010	GMEC	Original
2	6/5/2017	GMEC	Implementing new ACGME requirements
3	4/16/2020	GMEC	Minor changes for clarity; explicit prohibition of exceptions under CPR VI.F.4.c)