PURPOSE

In compliance with the ACGME Institutional and Common Program Requirements, it is the goal of Creighton University to provide residents with a sound academic and clinical education. This requires the Institution to provide “formal written policies and procedures governing resident duty hours. (IR.II.D.4.i).

SCOPE

House Staff Officers are required to comply with this operating procedure. The policy applies to all Creighton University residents, fellows and their respective training programs.

DEFINITIONS

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

- **At-Home Call**: Same as pager call or 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).

- **External moonlighting**: Voluntary, compensated, medically-related work performed outside the institution where the resident is in training or at any of its related participating sites.

- **Internal Moonlighting**: Voluntary, compensated, medically-related work (not related with training requirements) performed within the institution in which the resident is in training or at any of its related participating sites.

POLICY

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 energies. Duty hour assignments must recognize that faculty and residents collectively have responsibility for the safety and welfare of patients. The ACGME common program requirements require the following:

a. Duty hours must be limited to 80 hours per week with one-day-off in seven averaged over a four-week period, inclusive of all in-house activities and all moonlighting; (CPR.VI.G.1.,VI.G.2.b)

b. Duty periods of PGY-1 residents must not exceed 16 hours in duration;

c. Duty hours for PGY-2 residents and above may be scheduled for a maximum of 24 hours of continuous duty in the hospital. After this period, residents may remain on-site for 4 additional hours to accomplish effective transitions of patient care. After 24 hours of continuous duty,
residents must not be assigned new patients or additional clinical responsibilities including attendance at ambulatory or continuity clinics or procedures.

d. All residents should have 10 hours, and must have eight hours, free of duty between scheduled duty periods; exception to the 10 hour rule must have educational benefit to the resident.

e. Intermediate level residents must have at least 14 hours free of duty after 24 hours of in-house duty (VI.G.5.b)

f. Residents must not be scheduled for more than 6 consecutive nights of night float. However, 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 programs Review Committee (VI.G.6)

g. PGY – 2 residents and above must be scheduled for in-house call no more frequently than every third night when averaged, when allowed by the programs Review Committee, over a four-week period.

h. Duty periods of PGY-2 residents and above may be scheduled to a maximum of 24 hours of continuous duty in the hospital.

i. Time spent in the hospital by residents on at-home call must count toward the 80-hour maximum weekly hour limit;

j. PGY-1 residents are not permitted to moonlight. (CPR.VI.G.2.c).

k. Comply with any other requirements as outlined in specialty specific program requirements.

Program Director Responsibilities

The program director must implement policies and procedures consistent with the institutional and program requirements for resident duty hours and the working environment, including moonlighting, and, to that end, must:

a. distribute these policies and procedures to the residents and faculty; (CPR.II.A.4.j)(1)).

b. monitor resident duty hours, according to sponsoring institutional policies, with a frequency sufficient to ensure compliance with GMEC and ACGME requirements(CPR.II.A.4.j)(2)).

c. adjust schedules as necessary to mitigate excessive service demands and/or fatigue; (CPR.II.A.4.j)(3)).

d. if applicable, monitor the demands of at-home call and adjust schedules as necessary to mitigate excessive service demands and/or fatigue. (CPR.II.A.4.j)(4)).

e. comply with any additional requirements as outlined in specialty specific program requirements.
Institution Responsibilities

a. The institution 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. (CPR.VI.A.1)
b. Ensure that there are adequate and appropriate sleeping quarters that are safe, quiet, and private. This includes rooms for naps and post call residents to use for fatigue mitigation.
c. Must develop and implement procedures to regularly monitor resident duty hours for compliance with the Sponsoring Institution's policies and the Institutional and Program Requirements

Program

a. Be familiar with the ACGME and Review Committee policies and procedures governing Duty Hours and the procedures for requesting exceptions;
b. Implement policies and procedures for duty hours consistent with the institutional and program requirements for resident duty hours and the working environment, including moonlighting;
c. Distribute the duty hour policies to faculty and residents;
d. 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. (CPR.VI.A.1)
e. Monitor honest and accurate reporting of in-house duty hours by residents monthly
f. Monitor at-home call;
g. Provide documentation of the program’s duty hours policies and monitoring at each review;
h. Include all moonlighting in the work hours limits;
i. Monitor all resident and fellow moonlighting reporting to New Innovations
j. Programs must encourage residents to use alertness management strategies in the context of patient care responsibilities. (CPR.VI.G.4.b)
k. programs must ensure that residents are provided appropriate backup support when patient care responsibilities are especially difficult or prolonged beyond duty hours standards

Exceptions

Exceptions to maximum 24 hours of continuous duty in the hospital

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

ii. The program director must review each submission of additional service, and track both individual resident and program-wide episodes of additional duty.

**Reporting**

In addition to the usual lines of reporting concerns, residents may report concerns about work hours to the University GME Blueline site, which is available 24 hours a day and to which reports may be made anonymously.

**Moonlighting**

Creighton University neither encourages nor discourages moonlighting. Residents are specifically not required to moonlight. All residents that are eligible to participate in moonlighting must first complete a Moonlighting Activity Request (MAR) form and obtain approval and signature by their Chair, Program Director and Graduate Medical Education Office, prior to undertaking such activity. Moonlighting Activity Request forms are available through the GME office or GME BlueLine Site [https://blueline.instructure.com/courses/967488](https://blueline.instructure.com/courses/967488). Please refer to Appendix 1 for MAR.

**A resident must have the following to participate:**

- Malpractice insurance provided by Creighton University covers house staff while moonlighting with proper authorization in the State of Nebraska. Moonlighting outside the State of Nebraska is permissible providing proper authorization is obtained. The house staff physician is responsible for obtaining their own liability coverage for moonlighting performed outside the State of Nebraska. The house staff physician may contact the Liability Carrier utilized by the University to obtain an individual policy for moonlighting performed outside the State of Nebraska.
- A federal DEA is required for practice.

**All approvals for moonlighting:**

- Shall remain in force for the current academic year unless terminated by the program director.
- Shall automatically expire on June 30 of a given academic year.
- Renewal requests the next academic year must be processed and approved before undertaking additional moonlighting activities.
Responsibilities

Program Director Responsibilities

- Each program must have a written program-specific Moonlighting policy which meets RRC requirements and which is consistent with the Creighton University GME policy. The program-specific policy must be readily available to residents. Programs may elect to not allow moonlighting for all of their trainees.
- Prospective written approval from the Program Director and the Chair of the Program is required for all moonlighting activity.
- The Program must maintain a copy of the completed Moonlighting Request form as part of the resident’s personnel file.
- The program director is ultimately responsible for assuring that moonlighting activities do not interfere with the ability of the resident to meet the goals, objectives, assigned duties, and responsibilities of the educational program. They are expected to monitor all moonlighting activities in their program on an ongoing basis.
- The program director may withdraw permission to moonlight if, at any time, moonlighting activities are seen as producing adverse effects on the resident’s training experience.

Resident Responsibilities

- All residents participating in moonlighting must first complete a Moonlighting Activity Request (MAR) form and obtain approval and signature by their program director and the Chair of the Program prior to undertaking such activity.
- It is the sole responsibility of the resident to:
- Moonlighting outside the State of Nebraska is permissible providing proper authorization is obtained. The house staff physician is responsible for obtaining their own liability coverage for moonlighting performed outside the State of Nebraska. The house staff physician may contact the Liability Carrier utilized by the University to obtain an individual policy for moonlighting performed outside the State of Nebraska.
- apply for and obtain a permanent license to practice medicine to support any moonlighting activities.
- Duty Hour reporting:
- All moonlighting activities, internal and external, must be reported by the resident as duty hours within New Innovations
- Moonlighting must not cause a resident or fellow to be too fatigued for their training or regular duties.
- All moonlighting must be counted toward the 80-hour weekly limit on duty hours.
- PGY-1 residents may not moonlight.
- Residents employed under a J-1 visa are strictly prohibited by law from participating in moonlighting activities.
Violation of these moonlighting rules and procedures by the resident may lead to disciplinary action up to and including immediate dismissal.

### Alertness Management/Fatigue Mitigation

**The House Staff must:**
- Notify their Chief Resident or Program Director in the event that they are extremely fatigued.

**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 alertness management and fatigue mitigation processes; and, faculty should identify trainees as too fatigued and take them off duty when trainees do not recognize it for themselves.
- Adopt fatigue mitigation processes to manage the potential negative effects of fatigue on patient care and learning, such as naps or back-up call schedules.
- The 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 Program will take necessary action to remove the resident from duties and safe ride home (Refer to Safe Ride Home Policy).
- The Program must disseminate information cards for the cab service for house staff use.

All programs will be monitored for compliance through the Creighton University GME office review of programs Annual Review meeting minutes or reports, the Internal Review/Special Review process, and the ACGME Annual Survey of Residents.

### Safe Ride Home Program

If a situation arises where a resident or fellow (“trainee”) is unable to safely get home at the end of or during his/her shift due to extreme fatigue, illness or impairment, the trainee may use the Office of Graduate Medical Education (GME) Safe Ride Home Program. This program would provide transportation to the trainee’s place of residence via taxi from an approved training site due to an approved reason. The GME Office will pay for transportation 100% of the meter fare for your taxi ride (does not include tip).

**Examples of Approved Reasons:**
- You have worked extended hours (over 16 hours) and are feeling sleep-deprived.
- You feel fatigued or ill and are concerned about falling asleep while driving, regardless of the length of shift you’ve worked.
- You walk or use public transportation, and worked longer than expected and beyond when public transportation is available.
### Examples of Situations Not Considered Approved Reasons:
- Travel from work to a scheduled appointment or other destination that is not your home.
- Use of the program on a routine basis for commuting home when you have to work late.
- Travel from a training or non-training site location to your home because of a personal emergency situation at home.
- Travel for personal reasons/social activities
- Commuting from a distant training rotation site to your home.

### How to use the Emergency Ride Home Program
1. Call Happy Cab (402.292.2222)
2. Please provide the account code: 8603 to the driver
3. Program Coordinators have cab vouchers available for use
4. Information cards with process provided to Programs and House Staff for proper use

Any abuse of the Safe Ride Home Program may result in corrective action per the GME Corrective Action Policy.

### REFERENCES

- [www.acgme.org](http://www.acgme.org)

### AMENDMENTS OR TERMINATION OF THIS POLICY

Creighton University reserves the right to modify, amend or terminate this policy at any time.
Appendix 1

CREIGHTON UNIVERSITY
LIABILITY INSURANCE
Moonlighting Activity Report
For House Staff Physicians

All moonlighting activities must be reported to the Chairman and Program Director. This form should be completed for any moonlighting activities being performed. This form is not intended for credentialing or privileges at any institution. Credentials and privileges are granted by the employer. The House Staff Physician agrees and acknowledges that this form is for informational purposes only. Any moonlighting activity he/she engages in is performed individually and not as an agent, direct or indirect, of Creighton University or any of its employees. He/she agrees to indemnify and hold the University and its employees harmless from any claims, cause of action, or damages of any type arising from such moonlighting activity.

Print or type information.
Name: __________________________________________
Dept.: __________________________________________

*** License Information ***
Copy of Permanent License is to be attached to the back of this document

Permanent Nebraska License Number: ____________________
Permanent Iowa License Number: ____________________
Other State License Number: ____________________
Name of State: ____________________

*** Moonlighting Activity ***

Include name of Institution, City and State

Location: __________________________________________
Date(s) and/or Time Frame

Signature of the Chairman and Program Director indicates receipt of this reporting form for moonlighting activity. The House Staff Physician understands and acknowledges that the Chairman and Program Director have no involvement of any type of directing, controlling, supervising, reviewing, and/or credentialing the physician for any moonlighting activity and that the engagement in such activity by physician is at his/her sole risk.

Signature of Chairman ____________________ Date

Signature of Program Director ____________________ Date

Signature of House Staff Physician ____________________ Date

Return COMPLETED original form to the GRADUATE MEDICAL EDUCATION OFFICE
Department should retain a photocopy in department file