

Policy: AT Res/Fellows 17
Department: Academic Training
Subject: Work Hours Implementation & Monitoring

HSS resident and fellow schedules shall be prepared and implemented in accordance with New York State (NYS) and Accreditation Council on Graduate Medical Education (ACGME) work hour regulations.

Attending physicians will be held accountable to supporting and adhering to the work hours policy, described herein. If an attending physician does not follow this policy, they will receive a warning that any subsequent violation of the policy will result in an administrative time out whereby admitting privileges will be suspended by the Surgeon-in-Chief. Admitting privileges will only be reinstated after review and resolution in order to adhere to the policy.

Refer to the policy addendum for the specifics of the NYS and ACGME regulations and requirements.

Orthopaedic Residents, PGY 1 – PG 5

- Orthopaedic Residents will be expected to leave their “duty site” by 8:30 p.m.
- If a resident is in the operating room, they will be expected to leave by 8:30 p.m., irrespective of the case status.
 - A time out of 30 minutes (at approximately 8:00 p.m.) prior to the resident’s departure will be implemented by nursing to ensure resources are in place for the change in manpower.
- Residents will rotate through in-house call no more often than every 3rd night.

Clinical Fellows

- Clinical Fellows will be expected to leave their “duty site” by 10:30 p.m.
- If a clinical fellow is in the operating room, they will be expected to leave by 10:30 p.m., irrespective of the case status, unless a program has otherwise made the decision to have the fellow stay late and start late (10 hours later) the following morning.
 - A time out 30 minutes prior to the Fellow’s departure will be implemented by Nursing,

NOTE Each fellowship program director will submit a coverage plan to be reviewed on a periodic basis for compliance as necessary.

- Orthopaedic Fellows should not work late on Wednesdays so as to protect their core education conferences that take place on Thursdays.

Applicable to Residents and Fellows

- If a resident or fellow stays later than 8:30 p.m. or 10:30 p.m., respectively, they will be expected to communicate their anticipated late arrival to work the following morning by utilizing the established communication channels (i.e. e-mail distribution LateStartResidentsFellows@HSS.edu list) to ensure appropriate coverage the following morning, allowing the resident or fellow a 10 hour shift break.
- Residents / fellows will also be expected to utilize the established communication channel when an emergency patient care matter either requires them to stay later than the aforementioned times or return to the hospital from "home call".

NOTE: For the purpose of this section, an "emergency" is defined as a condition in which a patient requires immediate medical care and serious permanent harm would result to a patient or the life of a patient would be in danger if there were any delay in administering the necessary treatment.

- All residents shall be supervised in accordance with New York State regulations as well as the ACGME requirements.
- Residents / Fellows must complete the HSS work hours survey, conducted a minimum of twice per year. The ACGME conducts a survey annually through their ADS database. Residents and fellows are expected to provide accurate accounts of their work hours when completing these surveys. [**Note:** The ACGME surveys are applicable to accredited core specialty programs and subspecialty programs with 4 or more fellows.]
- Moonlighting is prohibited for PGY-1, 2, 3, 4, and 5 postgraduate trainees (orthopaedic residents). Fellows can moonlight, per the specific policies and procedures outlined in policy AT Res/Fellows 17a.
- Each HSS resident and fellow must enter into a written agreement ("Resident's Agreement") with HSS that defines the scope of the resident/fellow's responsibilities while in training, including adhering to all applicable laws and to HSS rules, policies and procedures. A sample agreement is available in the Academic Training Department.
- The HSS Resident Working Hours Policy shall be reviewed with all residents, Medical Staff, and Service Chiefs at least annually.

Implementation and Monitoring Resident Work Hours

- Each Orthopaedic Service Chief and Department Chairs (or his or her designee) shall be responsible for overseeing the work schedules of residents / fellows rotating on the Service or Department.
- The Program Directors and/or the Surgeon-in-Chief will review resident work hours for residents and fellows at the GME Council meetings to ensure compliance with NYS and ACGME regulations. A summary report will be presented, thereafter, to the Medical Board by the Designated Institutional Officer.

- Residents will perform monitoring to ensure adequate rest periods during on-call time. Documentation will be obtained by the Academic Training Department and reviewed for compliance by the Program Directors, GME Council Chair, and/or the Surgeon-in-Chief as well as the Designated Institutional Officer. Based on these reviews, modifications to the daily schedule to ensure rest time or adjust a resident's work hours will be made by the Program Director and/or the Service Chief.
- Fellows can moonlight, however hours anticipated to be spent moonlighting must be reported in advance to the Service Chief, and actual hours worked, if different, must be reported immediately to the Director of Academic Training.
- Attendings, residents and fellows and academic training are all responsible for implementing the work hours policy. Academic training is responsible to administer surveys, review data and issue reports to the service chiefs and education directors. Academic Training is also responsible to ensure that work hours are reviewed by the appropriate academic committee and reported to the medical board.
- The Academic Training Department will survey resident and fellow work hours via E*Value, at least twice per year, to assure compliance with NYS and ACGME regulations. (See below sample of survey tool)

E*Value Duty Hours Entry Screen

Add Time Entry	
Clock In: Date:	Nov. 16 2009
Time:	12:00 AM
Clock Out: Date:	Nov. 16 2009
Time:	12:00 PM

Select a task for this period of time tracking:

- Patient Care Responsibilities
- Transition Time
- Required Educational Activities/Conferences
- Sports Team Coverage
- In House Call
- Home Call
- Home Call Interrupted Time
- Moonlighting Activities
- Time Off
- Vacation

Any attending physician or resident who has questions about the New York State resident work hours or supervision requirements, ACGME requirements or this Policy should call Academic Training at 606-1466. Academic Training will monitor any circumstances that are not consistent with the policy, herein, and review adjustments made, where necessary.

Anyone who has concerns about a resident/fellow working beyond the required hours should contact the relevant Service Chief, the Designated Institutional Officer at 606-1057 or the HSS Corporate Compliance Officer at 606-1236 or the New York-Presbyterian Healthcare Network Corporate Compliance Help line at 1 (888)308-4435

Date Issued: 03/29/00

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To GME Committee: 07/07/2009

Approved by Medical Board: 4/21/04, 07/15/09, 10/21/09

Approved by Board of Trustees: 4/29/04; 7/23/09, 10/15/09



Martha O'Brasky, MPA
Assistant Vice President, Education & Academic Affairs

12/01/09

Date



Laura Robbins, DSW
Vice President, Education & Academic Affairs

12/01/09

Date

Addendum to AT Res/Fellows 17 Policy, *Work Hours Implementation & Monitoring*

Summary of New York State Department of Health Work Hour Regulations and Accreditation Council on Graduate Medical Education (ACGME) Work Hour Requirements

Both New York State law and the Accreditation Council on Graduate Medical Education requires that academic institutions, including Hospital for Special Surgery, limit the working hours of postgraduate trainees and provide them with adequate supervision. While their regulations are comparable, HSS is obligated to follow the strictest regulation between NYS and the ACGME.

Postgraduate trainees include both residents and fellows (hereinafter "residents").

New York State Law: Under the New York Health Care Reform Act of 2000 ("HCRA 2000"), hospitals must have a plan for complying with the State's resident working hours and supervision requirements, and the plan will be audited annually by the New York State Department of Health according to the New York Code of Rules and Regulations, Title 10, Section 405.4, Medical Staff.

ACGME Common Program Requirements, Resident Duty Hours in the Learning and Working Environment:

- Programs must be committed to and be responsible for promoting patient safety and resident well-being and to providing a supportive educational environment.
- The learning objectives of the program must not be 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.
- Duty hour assignments must recognize that faculty and residents collectively have responsibility for the safety and welfare of patients.
- Programs must ensure that qualified faculty provide appropriate supervision of residents in patient care activities.

To GME Committee: 07/07/2009, 9/23/09

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In view of the aforementioned, see below Work Hour Regulations followed by HSS:

Duty Hours - Work Week	A maximum 80 hour work week for residents, inclusive of all in-house activities. <i>Duty hours do not include reading and prep time spent away from the duty site.</i>
	At least one 24-hour period of scheduled non-working time per week must be provided, free from all educational, clinical and administrative responsibilities.
	<u>10</u> hours off between all daily duty periods and after in-house call.
On-Call Activities	In-house call must occur no more frequently than every third night
	Residents shall not be scheduled to work for more than 24 consecutive hours. Residents may remain on duty for 3 additional hours of transition time to be used for transfer of patient care, rounds, and educational activities. No new patient care may be assigned during this 3 hour transition time.
Home Call	The frequency of at-home call is not subject to the every-third-night, or 24+6 limitation. However at-home call must not be so frequent as to preclude rest and reasonable personal time for each resident. Residents taking at-home call must be provided with one day in seven completely free from all educational and clinical responsibilities, averaged over a four-week period. When called into the hospital from home, the hours a resident spends in-house are counted toward the 80-hour limit.
Moonlighting	Applicable to Fellows only: Under Program Director Supervision, , all moonlighting hours worked are included in total weekly hours. Dual employment or "moonlighting": residents must notify the hospital of any employment and the hours worked outside the hospital. Moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program. Residents are not permitted to moonlight.

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