The purpose of establishing neurology resident work hour guidelines is to ensure the highest quality of both patient care, as well as the education of our medical resident. This policy outlines the Department of Neurology, University of Utah Hospitals and Clinics guidelines for house staff work schedules, with adherence to the guidelines listed under the ACGME Common Program Requirements on Duty Hours for All Core and Subspecialty Programs.

The GME office at the University of Utah and the adult neurology training program are actually cognizant of the importance of adequate sleep and rest for the optimal mental health of residents and faculty. The importance of adequate rest and sleep in assuring quality patient care and in reducing medical errors is likewise acknowledged. The GME office requires all residents to participate in a yearly formal educational program dealing with the problem of sleep loss and fatigue during residency training. The course addresses approaches to limiting sleep loss and fatigue, avoiding or minimizing sleep deprivation, coping with work hours and shift changes, and learning to recognize signs and symptoms of inadequate rest and sleep. Yearly participation in the module is required of all residents and completion is documented.

**Duty Hours:** Duty hours are defined as all clinical and academic activities related to the residency program, including both inpatient outpatient care, administrative duties related to patient care, time provisions for transfer of patient care, and scheduled academic activities such as conferences and didactic lectures. Duty hours do not include reading, studying, and preparation time spent away from the duty site.

- Duty hours are limited to 80 hours per week, averaged over a four-week period, the four-week period averaged must be within the same rotation including in house on-call activities.
- Residents must be provided with time off at minimum 1 day in 7, averaged over a four-week period. This period of time off is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.
- An eight-hour time period for rest and personal activities must be provided between all daily duty periods, and after in house call.

**On-Call Activities:** On call activities provide residents with continuity of patient care throughout a 24-hour period. *In house* call is defined as duty hours beyond a normal workday whereby residents are required to be immediately available in the assigned institution. *Home call* is defined as duty hours beyond a normal workday taken from outside the assigned institution, although residents are required to be accessible via pager.

- In house call is limited to a frequency of no more than every third night, averaged over a four week period.
• Continuous on-site duty, including in house call, must not exceed 24 consecutive hours. Six additional hours may be spent on duty to participate in didactic activities, maintain continuity of medical and surgical care, transfer of patients, or conduct outpatient continuity clinics.

• No new patients (patients for whom the resident has not previously provided care) may be accepted after 24 hours of continuous duty.

• Home call is exempt from the every third night limitation. Residents on home call must be provided with a minimum of 1 day completely free from all educational and clinical responsibilities, averaged over a 4 week period.

• When residents on home call are called into the hospital, the hours that the resident spends in house are counted toward the 80-hour workweek limit.

• The program director and the faculty must monitor the demands of at home call and make scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue.

• The adult neurology residency program tracks the number of hours a resident works each week, and addresses violations of the work hour policy immediately, and works with the chief residents to enact policies to ensure compliance.

• Programs 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.

• The program must be committed to and responsible for promoting patient safety and resident well-being in a supportive educational environment.

• The program director must ensure that residents are integrated and actively participate in interdisciplinary clinical quality improvement and patient safety programs.

• The learning objectives of the program must: Be accomplished through an appropriate blend of supervised patient care responsibilities, clinical teaching and didactic educations events, and not be compromised by excessive reliance on residents to fulfill non-physician service obligations.

• The program director and institution must ensure a culture of professionalism that supports patient safety and personal responsibility. Residents and faculty members must demonstrate an understanding and acceptance of their personal role in the following: Assurance of the safety and welfare of patients entrusted to their care; Assurance of their fitness for duty; Management of their time, before, during and after clinical assignments; Recognition of impairment, including illness and fatigue, in themselves and in their peers; Attention to lifelong learning; The monitoring of patient care performance improvement indicators; and Honest and accurate reporting of duty hours, patient outcomes, and clinical experience data.

• All residents and faculty must demonstrate responsiveness to patient needs that supersedes self-interest. Residents must recognize that under certain circumstances, the best interests of the patients may be served by transiting that patient’s care to another qualified and rested provider.

• Residents are permitted to return to the hospital while on at-home call to care for new or established patients. Each episode of this type of care must be included in the 80-hour weekly maximum but will not initiate a new “off duty” period.

**Working Environment:** The work environment for adult neurology residents is designed to provide residents with appropriate dedicated space for work, rest and, when needed, for sleep and personal care. Access to food throughout a 24-hour period if needed is also always available. Details are as follows:
• **Work and office space.** Adult neurology residents have assigned and dedicated work space in several locations.
  o **University Hospital:**
    ▪ Residents rotating at University Hospital on wards and consults may utilize the Rounding Room, and residents working on neurocritical care may utilize the Work Space within the neurocritical care unit. Space for storage of resident belongings is designated in the resident call room, as well as in the resident lounge (where lockers with locks are available for each resident). Four computers are available in this area.
  o **Clinical Neurosciences Clinic:** Residents have a dedicated office and workspace on the 3rd floor of this building. This common neurology resident office and work space houses lockers for all residents (including the pediatric neurology residents). Computers are located there attached to a dedicated printer. Desks are equipped with phones. Computers are connected to the internet and provide access to all University hospital databases and the electronic medical record (PowerChart) and to HELP2 via RemoteAccess.
  o **VA hospital:** Residents work in a dedicated team room with 2 computers and 2 phones. It is a large room with a large central table; desks are located around the sides of the room. Computers are connected to a printer located in an adjacent hallway. This room accommodates 6-8 people comfortably. In the outpatient Neurology clinic, the main work space contains 7 computers with comfortable space for 7 people. An overflow area is located immediately adjacent to the clinic area.

• **Rest space.** Adult Neurology residents have access to shared rest space at the Clinical Neurosciences Center (CNC), University Hospital and Primary Children’s Medical Center (PCMC): all sites within a 5 minute walk from each other. At CNC the office and work space provides an area for rest. A small conference room on the 3d floor of University Hospital adjacent to the NAC (Neuro Acute Care unit) is also available to residents. At PCMC, residents access the resident lounge on the 4th floor of the hospital as needed where there are couches, chairs, phone and food. Clinical libraries at all three facilities are either open or accessible by card access at all hours 7 days per week. These provide a setting for quiet reading. All three facilities harbor a chapel or related area for retreat and quiet reflection and are accessible to residents at all times.

• **On-call rooms and space for sleep and personal care.** Facilities for sleep and personal care are located at all three facilities.
  o **Site 1 (PCMC):** Dedicated call rooms for pediatric neurology residents are not available at PCMC due to the fact that residents do not take in-house call while on the Clinical Child Neurology rotation. However, residents are able to use the on-call facilities at University hospital (5 min walk). Several shower facilities available to the Child Neurology residents are readily accessible on the second, third and fourth floors of PCMC.
  o **Site 2 (UUMC):** Two dedicated call rooms are reserved for the neurology residents at site 2. These are located on the 5th floor of the University Hospital (Eccles Wing) and include shower facilities. One of these is available for pediatric neurology residents as needed.
o Site 3 (VAMC): 8 call rooms are located on the top floor of the VA hospital. Each has a private bathroom with shower. A white board outside the rooms allows residents to indicate room usage. There are always at least two rooms per night that go unused.

- **Food.** All three sites contain a hospital cafeteria. In addition, other food facilities including vending machines are accessible at all hours.
  
  o Site 1 (PCMC): The Cafeteria is open from 7-10 AM, 11 AM to 4 PM, 5 to 8 PM, and the grill alone remains open from 8 PM until 2 AM.
  
  o Site 2 (UUMC): The cafeteria is open from 6:30 AM to 10 PM Mon-Fri and from 8AM to 8 PM Sat, Sun. In addition, the Starbucks Coffee located on the main floor of University Hospital is open twenty four hours per day, seven days a week and has sandwiches and other snacks as well as beverages at all times. Vending machines are located on most floors of the University Medical Center. Two cafeterias are located at the Huntsman Cancer Institute, another 5 minute walk from University Hospital. At least one of these is open daily.
  
  o Site 3 (VAMC): The cafeteria is open from 7:30 AM to 3:00 PM. The Top Cafe is open daily as late as 6:15 PM. Otherwise, numerous vending machines are located throughout the facility.

Updated 1/2014