

## **Policy on Clinical Experience and Education Compliance and Monitoring**

Effective 03/2005

Reaffirmed by GMEC 04/11/2025

Previous 04/2014; 05/2015; 07/2016; 01/2017; 04/2023

Every McGaw training program, be it ACGME-accredited or a NAMF track, must comply with the current Clinical Experience and Education (CEE) requirements specified by the Accreditation Council for Graduate Medical Education (ACGME). A request for exception to these requirements must first be approved by the GMEC and then by the program's ACGME Review Committee (RC), if applicable.

The terms "clinical experience and education," "clinical and educational work," and "work hours" replace the terms "duty hours," "duty periods," and "duty" in the ACGME Common Program Requirements Section 6.

The Program Director from each training program must:

- file a detailed CEE policy with the GMEC which covers all major assignments and specifies the means by which CEE work and fatigue will be monitored (new programs);
- through the Annual Program Evaluation (APE) process, provide the GMEC with the program's current policy annually and whenever changes to the program impact clinical experience and / or education (existing programs);
- ensure faculty and trainees in the program have received education on the effects of sleep, fatigue, and fitness;
- ensure trainees respond to surveys regarding compliance with CEE from both the ACGME and McGaw;
- specify the method and frequency of their review of trainees' clinical and educational work hours within the program's CEE policy;
- ensure trainees utilize New Innovations (NI) to record a daily log of their clinical and educational work (the frequency of entering hours may be at the discretion of the Program Director but should not exceed four-week intervals);
- ensure trainees utilize NI to accurately record vacation / PTO and sick time (although the frequency of logging may be at the discretion of the Program Director, vacation / PTO and sick entries in NI must be updated as changes occur);
- utilize NI to identify areas of risk for violations of McGaw and ACGME policy and implement corrective actions; and
- utilize NI to track trainees' CEE hours. This process must include real-time reviews of all trainees across all rotations at least quarterly. Most programs will require more frequent monitoring.

Program Directors must ensure the following when reviewing logs:

- Clinical and educational work is limited to 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 moonlighting.
- Clinical work done from home must be counted toward the 80-hour weekly maximum.

These hours should be logged in NI using the “Home Call” duty type. Types of work from home that must be counted include using an electronic health record and taking calls. Reading done in preparation for the following day’s cases, studying, and research done from home do not count toward the 80 hours.

- Clinical work periods for all trainees must not exceed 24 hours of continuous scheduled clinical assignments.
- In-house call can occur no more frequently than once every three nights (when averaged over a four-week period).
- All trainees must have at least 14 hours free of clinical work after 24 hours of clinical assignments.
- Trainees must be scheduled a minimum of one day in seven free of clinical work and education (when averaged over four weeks). At-home call cannot be assigned on these free days.
- In-house night float must occur within the context of both the 80-hour and one-day-off-in-seven requirements.

The GMEC shall:

- approve and maintain a CEE policy from each training program via the (APE) process;
- review instances of non-compliance based on NI data and request follow-up as warranted;
- review the results of externally conducted surveys of trainees regarding CEE (including the ACGME Resident / Fellow and Faculty Surveys) and request follow-up when appropriate; and
- review a program’s compliance with the CEE policy at the time of Internal Review.

The GME Office / DIO shall:

- review the NI CEE logs quarterly;
- request a formal response from the Program Director for isolated or extremely rare instances of non-compliance; and
- bring to the GMEC any instances of non-compliance deemed to be more than extremely rare.

### **Program-Initiated Request for Clinical Work Hour Exceptions**

A program desiring to petition its ACGME specialty RC for an exception to the Common Program Requirements regarding CEE (i.e., for up to a 10% increase in total weekly hours averaged over four weeks for one or more specific rotations) must first submit a written request to the GMEC for endorsement. The application to be submitted to the GMEC must follow all requirements requested under Section 26.00 of the ACGME Manual of Policies and Procedures.

Such requests, if submitted by the first day of the month, will be considered by the GMEC at its next regularly scheduled monthly meeting. If the GMEC endorses the request, the petition may be forwarded to the specialty RC signed by the Program Director and Designated Institutional Official (DIO). No modifications may be made in training hours until ACGME approval has been granted in writing by the specialty RC.

The prerequisites to GMEC consideration of endorsement are as follow:

- The program must submit the educational rationale to be reviewed and approved by the GMEC.

- The program must have full accreditation status and with no warning language based on its most recent RC accreditation letter.
- The Program Director must provide a plan for monitoring CEE on the specific rotation(s) for which the requested exception is to be considered. The plan must include the anticipated frequency with which monitoring will be performed to ensure there is complete compliance within the limits of the exception, if granted.
- GMEC review of the most recent ACGME Resident / Fellow and Faculty Survey.