



<b>Policy Number:</b>	<b>26-12</b>
<b>Policy Name:</b>	<b>Graduate Medical Education: Clinical Education and Work Hours Policy</b>
<b>Authority:</b>	ACGME Institutional Requirements effective September 3, 2025, section 4.11; ACGME Core Program Requirements (Residency), effective September 3, 2025, sections 6.20-6.22; ACGME Core Program Requirements (Fellowship), sections 6.20-6.22
<b>Original Policy Date:</b>	April 10, 2026 Effective Date: 04/10/26
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<b>Attachments:</b>	N/A

**PURPOSE**

This policy describes how Behavioral Health and Recovery Services, San Mateo County (BHRS-SMC), as a Sponsoring Institution for ACGME-accredited graduate medical education (GME) programs, ensures institutional and program-level compliance with ACGME clinical and educational work hour requirements.

**BACKGROUND**

The Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirement 4.11 requires the Sponsoring Institution to maintain a clinical and educational work hour policy that ensures effective oversight of institutional and program-level compliance with ACGME clinical and educational work hour requirements. This policy establishes how BHRS-SMC and its ACGME-accredited programs meet and implement these requirements.

**DEFINITIONS**

**Clinical and Educational Work Hours:** All clinical and academic activities related to the ACGME-accredited program, including in-house call, clinical patient care (inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, in-house call, clinical work done from home, and other scheduled activities, such as conferences, and required scholarly activities. These hours do not include reading, studying, research done from home, and preparation for future cases. Clinical and educational work hours include all in-house and external moonlighting that is part of or related to the training program.

**Moonlighting:** Any compensated, voluntary, medically related work performed (internal or external to BHRS-SMC and its participating sites) that is in addition to the resident’s or fellow’s clinical experience



and educational hours and additional to the work required for successful completion of the ACGME-accredited program.

## **POLICY**

### **I. Clinical and Educational Work Hours Oversight**

- A. BHRS-SMC will maintain an institutional clinical and educational work hour policy consistent with ACGME requirements that applies to all BHRS-SMC-sponsored ACGME-accredited programs.
- B. Each BHRS-SMC-sponsored ACGME-accredited program will maintain a program-specific clinical and educational work hour policy that is consistent with this institutional policy and all applicable ACGME Common and specialty/subspecialty-specific Program Requirements.
- C. GMCC, under the leadership of the DIO, will oversee institutional and program-level compliance with clinical and educational work hour requirements, including:
  1. maximum weekly hours and required time off;
  2. in-house call and night float structures;
  3. time between clinical duties; and
  4. other ACGME-defined work hour parameters.
- D. Clinical and educational work hours must be structured to:
  1. promote patient safety and quality care;
  2. support resident/fellow well-being and professional development; and
  3. ensure an environment conducive to learning and supervision.
- E. Programs must ensure that schedules and work assignments allow residents/fellows to comply with ACGME work hour limits and that residents/fellows have mechanisms to report work hour concerns without fear of retaliation.

### **II. Scope and Applicability**

- A. This policy applies to all BHRS-SMC-sponsored ACGME-accredited residency and fellowship programs and to all residents and fellows in those programs.
- B. This policy applies to all BHRS-SMC clinical and administrative departments, any County departments or agencies involved in scheduling or supervising residents/fellows, and all participating sites that host BHRS-SMC residents and fellows under Program Letters of Agreement.

## **PROCEDURE/PROTOCOL**

### **I. Development, Review, and Communication of Work Hour Policy**

- A. GMCC, in collaboration with the DIO and relevant stakeholders, will develop and maintain the institutional clinical and educational work hour policy consistent with ACGME requirements.



- B. The institutional work hour policy will be reviewed at least annually or more frequently if ACGME requirements or applicable laws change.
- C. The institutional work hour policy will be made available to residents, fellows, Program Directors, and relevant administrative staff through the GME manual, BHRS-SMC intranet, or similar accessible location.

## **II. Program-Level Implementation and Monitoring**

- A. Program Directors will develop and maintain program-specific work hour policies that:
  - 1. align with this institutional policy and ACGME requirements;
  - 2. specify expectations for call schedules, night float, and duty assignments; and
  - 3. describe mechanisms for residents/fellows to report work hour violations or fatigue-related concerns.
- B. Program Directors will ensure that resident/fellow schedules and work assignments are designed to comply with ACGME work hour limits and that work hours are prospectively planned and retrospectively monitored.
- C. Programs will use a standardized process (e.g., electronic logging system or equivalent) to track clinical and educational work hours, including moonlighting hours.
- D. Program Directors will regularly review work hour and moonlighting data, address identified violations, and report persistent or systemic issues to GMEC.

## **III. Reporting and Addressing Work Hour Concerns**

- A. Residents and fellows may report concerns about work hour violations, fatigue, or the impact of moonlighting on performance through:
  - 1. direct communication with the Program Director or other program leadership;
  - 2. confidential reporting mechanisms established by BHRS-SMC;
  - 3. peer representative at GMEC; or
  - 4. other channels identified by GMEC.
- B. BHRS-SMC prohibits retaliation or adverse consequences against residents/fellows who report work hour or moonlighting concerns in good faith.
- C. Program Directors will investigate reported concerns, implement corrective actions as needed, and inform the DIO and GMEC of significant or recurrent issues.
- D. GMEC and/or the DIO may designate a program as requiring Special Review if the program has repeated or significant work hour violations. See the Special Review Process policy for details.

## **IV. Policy Review**

- A. This policy will be reviewed at least every year, or more frequently if ACGME requirements, County policies, or applicable laws change, to ensure ongoing compliance with ACGME Institutional Requirements and institutional and County standards.



SAN MATEO COUNTY HEALTH  
**BEHAVIORAL HEALTH  
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**SIGNATURES**

Approved: \_\_\_\_\_ *Signature on File*  
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**REVISION HISTORY**

Date of Revision	Type of Revision	Revision Description