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**EFFECTIVE DATE:** Not Approved Yet

**POLICY & PROCEDURE TITLE:**

Pharmacy Residency - Moonlighting and Duty Hours

**REVIEW BY:** No Review Date

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As with all St. Mary Medical Center (SMMC) policies, we strive to advance our mission: "We, St. Mary Medical Center and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities. As a community of caring people, we are committed to extending and strengthening the healing ministry of Jesus." By so doing, we live out our values of Reverence, Commitment to those who are Poor, Justice, Stewardship, Integrity and Excellence. As a Catholic Health System, we are also guided by the Ethical and Religious Directives for Catholic Healthcare Services as promulgated by the U.S. Conference of Catholic Bishops.

This policy & procedure impacts the following core values: Excellence

**PURPOSE**

Residents, program directors, and preceptors have the professional responsibility to ensure they are fit to provide services that promote patient safety. The residency program director (RPD) must ensure that there is not excessive reliance on residents to fulfill service obligations that do not contribute to the educational value of the residency program or that may compromise their fitness for duty and endanger patient safety. Providing residents with a sound training program must be planned, scheduled and balanced with concerns for patients' safety and residents' well-being. The purpose of this policy is to define the Pharmacy Residency Program duty hour requirements, including moonlighting.

**POLICY**

It is important that pharmacy residency programs provide an exemplary environment for residents' learning. This policy is provided to help protect residents and St. Mary Medical Center during situations that may arise during the conduct of the pharmacy residency program.

**PROCEDURE**

- **Personal and Professional Responsibility for Patient Safety**
  - The residency program director (RPD) will educate residents and preceptors about their professional responsibilities to be appropriately rested and fit for duty to provide services required by patients.
  - Residents and preceptors must accept personal and professional responsibility for patient care that supersedes self-interest. At times, it may be in the best interest of patients to transition care to another qualified, rested provider.
- **Maximum Hours of Work per Week and Duty-Free Times**
  - Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities and all moonlighting.
  - Moonlighting (internal or external) must not interfere with the ability of the resident to achieve the educational goals and objectives of the residency program.
    - All moonlighting hours must be counted towards the 80-hour maximum weekly hour limit.

## Title: Pharmacy Residency - Moonlighting and Duty Hours

- Only internal moonlighting will be allowed following pre-approval by the RPD, or in their absence, the residency program coordinator or pharmacy director. No external moonlighting will be allowed.
- Moonlighting hours will be documented/reported through the resident's use of the time clock. The resident will clock in and out of their moonlighting shift utilizing a secondary "pool pharmacist" badge. This badge will allow for proper compensation at the "pool pharmacist" hourly rate in addition to tracking moonlighting hours.
- No more than 16 hours of moonlighting will be allowed in any 2-week pay period. The resident may fill any regularly-defined pharmacist or technician role while moonlighting, as defined by department work flow guidelines, the pharmacist in charge of scheduling, and/or the lead pharmacist on duty at the time the moonlighting shift is occurring.
- Resident performance and judgement during duty hours, including moonlighting, will be evaluated by individual preceptors and discussed by the Residency Advisory Committee (RAC). Should any issues with resident performance or judgement either during or following moonlighting activities be identified, the RPD, in conjunction with the RAC, will make the determination if a resident will be allowed to participate in moonlighting activities thereafter.
- Mandatory time free of duty: residents must have a minimum of one day in seven days free of duty (when averaged over four weeks). At-home call will not be assigned on these free days.
- Residents should have 10 hours free of duty between scheduled duty periods, and must have at a minimum 8 hours between scheduled duty periods.
- SMMC will not have an in-house call program.
- **Maximum Duty-Period Length**
  - Continuous duty periods of residents should not exceed 16 hours. The maximum allowable duty assignment must not exceed 24 hours even with built in strategic napping or other strategies to reduce fatigue and sleep deprivation, with an additional period of up to two hours permitted for transitions of care or educational activities.
- **At-Home On-Call Program**
  - Residents will begin acting as the primary clinical pharmacist for at-home call beginning 90 days after the start of the residency period.
  - Weekday call- The residents will rotate weeks for on-call responsibilities
  - Weekend call- Each resident will be the primary on-call contact only during weekends on which they are scheduled for their staffing commitment. Residents will not take on-call responsibilities during their non-scheduled weekends. In those situations, the clinical team will assume primary on-call contact responsibilities.
  - A designated clinical team member will serve as back-up contact for any clinical or operational questions that the resident requires assistance or guidance with.
  - The resident will complete an SBAR report, including time spent, for each call received and email the report(s) to the RPD and residency coordinator at the end of their on-call period. These reports will be used for tracking purposes and process improvement efforts.

## Title: Pharmacy Residency - Moonlighting and Duty Hours

### SCOPE/APPLICABILITY

Pharmacy residents, RPD, and preceptors.

### DEFINITIONS

- **Duty Hours:** Duty hours are defined as all scheduled clinical and academic activities related to the pharmacy residency program. This includes inpatient and outpatient care; in-house call; administrative duties; and scheduled and assigned activities, such as conferences, committee meetings, and health fairs that are required to meet the goals and objectives of the residency program. Duty hours must be addressed by a well-documented, structured process. Duty hours do not include: reading, studying, and academic preparation time for presentations and journal clubs; travel time to and from conferences; and hours that are not scheduled by the residency program director or a preceptor.
- **Scheduled duty periods:** Assigned duties, regardless of setting, that are required to meet the educational goals and objectives of the residency program. These duty periods are usually assigned by the residency program director or preceptor and may encompass hours which may be within the normal work day, beyond the normal work day, or a combination of both.
- **Moonlighting:** Voluntary, compensated, pharmacy-related work performed outside the organization (external), or within the organization where the resident is in training (internal), or at any of its related participating sites. These are compensated hours beyond the resident's salary and are not part of the scheduled duty periods of the residency program.
- **Continuous Duty:** Assigned duty periods without breaks for strategic napping or resting to reduce fatigue or sleep deprivation.
- **Strategic napping:** Short sleep periods, taken as a component of fatigue management, which can mitigate the adverse effects of sleep loss.

### RESPONSIBLE DEPARTMENT

Further guidance regarding specific items in the policy are available via the Pharmacy Resident Agreement, referenced organizational policies, and the Pharmacy Residency Manual.

### RELATED PROCEDURES AND OTHER MATERIALS

ASHP Duty Hours Guidelines. Available at: <https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.pdf>.