

**SUBJECT: HOUSESTAFF / FACULTY FATIGUE**

**INTENT:** The Accreditation Council for Graduate Medical Education requires that the sponsoring institution ensures that all clinicians (housestaff and faculty) are educated about the signs and consequences of fatigue and sleep deprivation. In addition, the institution must ensure that methods to mitigate fatigue are in place and readily available for all training programs.

**POLICY**

**STATEMENT:** All residency and fellowship programs must provide an education program specifically addressing the signs of fatigue / sleep deprivation and the effects on patient care and clinician health. The education program must specifically also address fatigue mitigation techniques including but not limited to strategic napping and good sleep hygiene. Appropriate facilities must be available to permit sleeping while on in-house call and strategic napping as required.

**DESCRIPTION:** Each training program must provide education on recognition and mitigation of fatigue/sleep deprivation. A broad-based education program on this subject is available from the GME office. However, each program may elect to provide its own training relevant to clinicians in its specialty. Training programs may also elect to use commercially available programs such as the LIFE curriculum to meet this requirement. Training for each resident AND faculty member must be documented and be available for the internal review staff at the time of the review. Programs are encouraged to provide education / training annually, but at a minimum, all residents and faculty MUST complete the online S.A.F.E.R. program provided by the GME office, and successful passage of the associated assessment (test) must be documented in New Innovations.

Residents on duty in the hospital must be provided adequate and appropriate sleeping quarters. These call facilities MUST be available at all times to allow for residents too fatigued to safely drive home to rest prior to returning home. Alternatively, programs may elect to provide other methods to return the housestaff member home (e.g. cab fare from hospital to home and back) if sleeping facilities are not available when needed.

In the event that a housestaff or faculty member cannot perform his/her duties because of fatigue (or other reasons), each program must have a backup system in place that will make available alternate providers to assure appropriate provision and continuity of patient care.