

## I. POLICY STATEMENT

Training programs must at a minimum maintain the following program-specific policies:

- i. Transitions of Care - Common Program Requirement (CPR) VI.E.3
- ii. Selection and Evaluation of Teaching Faculty – CPR II.A.4/V.B
- iii. Promotion and Appointment Renewal of Housestaff – Institutional Program Requirements IV.D
- iv. Levels of Supervision – CPR IV.A.2
- v. Housestaff and faculty well-being
- vi. Housestaff clinical and educational work hours, including moonlighting

## II. REASON FOR POLICY

Training programs must follow national and local guidelines to ensure continued accreditation of the program and eligibility of graduates to obtain board certification. Individual programs may have nuances in training making program-by-program policies more appropriate than broad institutional based policies.

## III. SCOPE

This policy applies to all training programs accredited by the Accreditation Council for Graduate Medical Education (ACGME), or approved by the American Board of Medical Specialties (ABMS), and/or sponsored by the UF College of Medicine.

## IV. DEFINITION OF TERMS

- i. Program Evaluation Committee (PEC) – committee mandated by ACGME to monitor program delivery and outcomes, generate annual program evaluations (APE), facilitate strategic planning and implement continuous quality
- ii. Housestaff – resident or fellow

## V. PROCEDURES

- i. Training program policies must be reviewed and approved by the program's PEC (or equivalent) at a minimum every three years and no later than 3 months prior to the effective date of change in the pertinent program or institutional requirements.
- ii. Training program policies must be kept as part of the training program's policy and procedure manual, which should be readily available to program Housestaff and faculty
- iii. **Transitions of Care** – Training programs must have a program-specific transitions of care policy to include at a minimum
  - a) Effective, structured hand-over processes to facilitate continuity of care and patient safety
  - b) Procedure to ensure coverage in patient care when a Housestaff is unable to perform patient care responsibilities due to excessive fatigue or illness, or family emergency.
  - c) Ensure Housestaff are competent in communicating with team members in the hand-over process
- iv. **Selection and Evaluation of Teaching Faculty** – Training programs must have a policy outlining the process, overseen by the Program Director, to evaluate faculty candidates prior to approval for participation in the training program education and at least annually thereafter. This process for annual evaluation must include:
  - a) A review of all items outlined in the specialty's program requirements, including written, confidential evaluations by fellows.
  - b) Process for faculty to receive feedback at least annually
  - c) Incorporation into program-wide faculty development plans
- v. **Promotion and Appointment Renewal of Housestaff** – Training programs must have a program specific policy for Housestaff Promotion and Appointment Renewal which includes criteria for promotion and/or renewal of a Housestaff appointment. Final evaluations must be completed within 30 days.
- vi. **Levels of Supervision** – Training programs must provide a program specific policy to define levels of supervision for Housestaff, including:
  - a) Definition of when the physical presence of a supervising is required
  - b) Criteria for clinical setting in which direct supervision, indirect supervision or oversight may be appropriate. Program should use the descriptions provided in the specialty-specific program requirements.
  - c) Circumstances and events in which Housestaff must communicate with the supervising faculty member(s)
- vii. **Housestaff and Faculty Wellbeing**
- viii. **Housestaff Clinical and Educational Work Hours**
  - a) Programs must have a program specific moonlighting policy, either as a separate policy or as part of a Clinical And Education Work Hours policy

- b) Programs which allow at-home call must include within the policy a process for Housestaff to follow when fatigued

Revised and Approved by GMEC 06/25/2022; 4/11/2024