

GRADUATE MEDICAL EDUCATION

POLICY: MOONLIGHTING POLICY

GME Policy and Procedure Manual

Department Responsible Graduate Medical Education	Updated 3/2/2016	Effective Date July 1, 2016	Next Review/Revision Date April 2021
Title of Person Responsible Designated Institutional Official	Approved Council: Graduate Medical Education Committee		Date Approved by Council June 1, 2016

POLICY

The Sponsoring Institution must maintain a policy on moonlighting that includes the following:

- a) Residents/fellows must not be required to engage in moonlighting;
- b) Residents/fellows must have written permission from their program director to moonlight;
- c) An ACGME-accredited program will monitor the effect of moonlighting activities on a resident's/fellow's performance in the program, including that adverse effects may lead to withdrawal of permission to moonlight;
- d) Moonlighting hours must fall within the 80 hour work week; and,
- e) The Sponsoring Institution or individual ACGME-accredited programs may prohibit moonlighting by residents/fellows.

PURPOSE

The Graduate Medical Education Committee and the Long Beach Memorial sponsored graduate medical education (GME) programs are responsible for ensuring a high quality learning environment for the residents, notably by ensuring a proper balance between education and patient care activities within duty hour limitations as prescribed by the ACGME Institutional and Program Requirements. Because of these concerns, moonlighting is, in general, discouraged for residents in ACGME-accredited programs sponsored by LBM/MCWH. During residency training, the resident's primary responsibility is the acquisition of competencies associated with their specialty.

Moonlighting is a privilege, not a right. In addition, residents/fellows cannot be compelled to engage in moonlighting for any reason. All programs must have a program-specific moonlighting policy which may be more restrictive than this institutional policy.

Programs may prohibit moonlighting.

DEFINITION

"Moonlighting" refers to a service performed by a resident in the capacity of an independent physician, completely outside the scope of his/her residency-training program. For insurance purposes, "external moonlighting" refers to moonlighting at a non – LBM/MCWH Healthcare facility. "Internal moonlighting" refers to moonlighting within an LBM/MCWH facility.

GUIDELINES

1. Moonlighting - the compensated clinical work that is not a part of the residency program. LBM/MCWH does not provide professional liability coverage for moonlighting. Without compromising the goals of resident training and education, a program director may allow a resident to moonlight if all of the following conditions are met:
 - a. Because residency education is a full-time endeavor, the program director must ensure that moonlighting does not interfere with the ability of the resident to achieve the goals and objectives of the educational program.
 - b. The program director must comply with the sponsoring institution's written policies and procedures regarding moonlighting, in compliance with the Institutional Requirements.
 - c. Moonlighting that is either internal or external must be counted toward the 80-hour maximum weekly hour limit.
 - d. PGY-1 residents are not permitted to moonlight.
 - e. Program Directors will be responsible to develop selective moonlighting policies for their departments.
 - f. Programs may choose not to permit moonlighting.
 - g. Program Directors will be required to monitor all moonlighting activities within their departments to ensure that trainees are not overly stressed and/or fatigued.
 - h. All trainees must request approval of moonlighting activities in writing to the Program Director.
 - i. Program Directors will approve all moonlighting activities in writing to the trainee.
 - j. Program Directors will maintain records of all moonlighting with respect to compliance with the 80 hour work week.
 - k. Program Directors will report to the GME Office (at least annually in July) the names of the trainees with approved moonlighting activities and the facility where the moonlighting will occur. Updates are required as approvals are granted.
 - l. The GME Office will have oversight of all moonlighting activities.

OVERSIGHT

1. Each program must have written policies and procedures consistent with the Institutional and Program Requirements for resident duty hours and the working environment. These policies must be distributed to the residents and the faculty. Monitoring of duty hours is required with frequency sufficient to ensure an appropriate balance between education and service.

2. Back-up support systems must be provided when patient care responsibilities are unusually difficult or prolonged, or if unexpected circumstances create resident fatigue sufficient to jeopardize patient care.

By ACGME definition, internal moonlighting includes all moonlighting that occurs at MHS owned and operated hospitals and clinical or related sites, and at affiliated institutions where LBMMC/MCWH residents rotate to as part of their training program.