Outline

• Why Worry?
• LCME requirements
• Current DMS policy
• DMS student survey
• Data from other schools
• Pros/cons
• Proposed Changes
Why Worry?

• Students learn best when not excessively fatigued
• Student well-being
• Given steep learning curve of 3rd year, time is necessary outside of clinical and didactic obligations to understand, absorb, and synthesize lessons learned on the wards
• Patient safety can be compromised
• Student safety (especially post-call) is a worry

→ Student learning/work hour regulations should provide an optimal environment to facilitate learning
Current LCME Requirement

ED-38

• “The committee responsible for the curriculum at a medical education program, along with the program’s administration and leadership, must develop and implement policies regarding the amount of time medical students spend in required activities, including the total number of hours medical students are required to spend in clinical and educational activities during clinical clerkships (or, in Canada, clerkship rotations).

  – Attention should be paid to the time commitment required of medical students, especially during the clinical years. Medical students' hours should be set after taking into account the effects of fatigue and sleep deprivation on learning, clinical activities, and health and safety.”
Summary of Current DMS Policy

• Clerkships establish frequency of call. No more than one night in three on average.

• Clerkships should be designed to not exceed 80 hrs/week for all clinical and educational activities. In unusual circumstances, a student can exceed this target for a specific, unscheduled, unanticipated activity of significant educational value…

• On average, one 24 hr period/week free

• When post-call, patient care activities should be done by 1 pm and the student will be excused when the on-call team goes home. However, if a student has had adequate (several hours of) sleep while on call, there is no prohibition to remaining later in the day.

• Students should attend required teaching conferences, even when post-call, and conferences should be scheduled to end by 4 pm.

• On-call rooms will be available for post-call students.
DMS Work Hours Survey Results

• (PDFs)
Survey of Medical School Deans on Student Work Hour Policy

- 81/126 (64%) deans responded
- 66/81 (82%) “have a written policy that defines or restricts medical student work hours”
- 87% of those with policy limited weekly hours worked
- 72% of those with policy limited consecutive hours worked
- Opinion of number of continuous hours a student should work ranged from 12-30 hours
- Opinion of total work hours per week had greater consensus with 82% indicating “up to 80 hours” and 15% said “up to 60 hours”. Only 3% reported no restrictions should be placed.
- 82% believed medical student well-being would be positively affected by creating medical student work hour restrictions

Friedman, E., Karani, R., & Fallar, R. Regulation of Medical Student Work Hours: A National Survey of Deans. *Academic Medicine, 2011; 86: 30-33.*
Other Medical Schools

• Web search of policies from the 8 comparable medical schools in the Northeast

• Four had medical student work hour policies online for public viewing
  – 4/4 limit work hours to 80 hrs/week
  – 4/4 require 1 day off/7 days
  – 3/4 limit consecutive work hours to 24-30 hours

• Unknown if other 4 have policies or not
Pros and Cons of Work Hour Restrictions

• Pros
  – Improved student well-being
  – More time outside clinic/didactic time to absorb and learn clerkship material
  – Student safety and patient safety

• Cons
  – Difficult to schedule teaching conferences before 1 pm on post-call days
  – Possibly difficult to enforce (although can be monitored on student evaluations)
Summary of Proposed Changes to Policy

• Clerkships establish frequency of call. No more than one night in three, on average.

• Clerkships should be designed to not exceed 80 hrs/week for all clinical and educational activities. In unusual circumstances, a student can exceed this target for a specific, unscheduled, unanticipated activity of significant educational value...

  Students should be allowed to stay past maximum hours at the specific request of the student to their supervisor in the event of an unanticipated and unscheduled event of significant educational opportunity. The student and supervisor must judge the student adequately rested to take advantage of this opportunity.

• On average, One 24 hr period/week free.

• When post-call, patient care activities should be done by 1 pm and the student will be excused when the on-call team goes home. However, if a student has had adequate (several hours of) sleep while on call, there is no prohibition to remaining later in the day.

• Students should attend required teaching conferences, even when post-call, and conferences should be scheduled to end by 4 pm. 1 pm.

• On-call rooms will be available for post-call students
Implementation

• Clerkship directors must arrange the clerkship schedule (i.e. didactics) to comply with this proposal

• Clerkship directors must announce this policy to all attendings and resident who work with students (including the contact physicians at away sites)

• Clerkship directors must announce this policy at all clerkship orientations

• Add 2 questions to end of clerkship survey:
  1) During this clerkship, how many weeks were you asked to work over 80hrs? (0,1,2,3,4,5,6)
  2) During this clerkship, how many days were you asked to work beyond 30 consecutive hours? (0,1,2,3,4,5,6,>7)

• MEC will evaluate student work hours and re-assess enforcement of policy in 6 months from implementation