Charleston Area Medical Center Office of Graduate Medical Education

Moonlighting

CAMC strives to ensure a sound academic and clinical education carefully balanced with concerns for patient safety and overall resident/fellow well-being. Administration, faculty and residents/fellows collectively have responsibility for ensuring the safety and welfare of patients and the adherence to duty hours and moonlighting policies.

Moonlighting: A term used to refer collectively to both External Moonlighting and Internal Moonlighting.

External Moonlighting: Voluntary, compensated, medically related work performed outside the institution where the resident/fellow is in training or at any of its related participating sites.

Internal Moonlighting: Voluntary, compensated, medically related work (not related to training requirements) performed within the institution in which the resident/fellow is in training or at any of its related participating sites.). Compensated employment of residents/fellows for *non-patient care* services performed outside the scope of residency or fellowship program duties and performed at CAMC Health System facilities or on behalf of CAMC Health System facilities shall also be considered Internal Moonlighting and is subject to all provisions set forth in this policy.

General Institutional Criteria

- Residents/Fellows must not be required to engage in moonlighting.
- Moonlighting must not interfere with the ability of the resident/fellow to achieve the goals and objectives of the educational program.
- Time engaged by residents/fellows in moonlighting must be counted as duty hours for purposes of meeting all work and duty hour requirements as defined by accreditation standards, institutional or program requirements and policies. This provision applies to all moonlighting.
- "Sunlighting" (working for income during hours when an individual has duties and responsibilities to the service on which they are training) is not permitted at any time.
- Individual residency and fellowship programs must adhere to program-level and institutionallevel requirements specific to their accrediting institution (i.e. ACGME, ASHP, etc).
- The Graduate Medical Education Committee (GMEC) or Charleston Area Medical Center (CAMC) may monitor policy compliance at any time.

Resident/Fellow requirements and responsibilities

The primary responsibility of the resident/fellow is to the service or activity to which the resident/fellow is assigned. Residents/fellows who choose to engage in moonlighting of any type shall do so outside the scope of their residency program. CAMC shall not be responsible or liable for the consequences of a resident/fellows external moonlighting activity unless otherwise agreed to in writing.

Moonlighting must not interfere with clinical and educational performance. The resident/fellow must obtain permission for moonlighting and adhere to criteria for moonlighting that is set forth in this policy and

by the residency/fellowship program director. The residency/fellowship program director has the authority to restrict or prohibit moonlighting at any time and may establish more stringent reporting requirements than outlined in this handbook. Permission will be based on individual academic, clinical and professional performance. An adverse effect on performance may lead to withdrawal of permission.

The following requirements must be met and maintained before moonlighting permission can be granted:

- PGL1 level physician residents are <u>not</u> permitted to engage in moonlighting.
- Residents/fellows with J-1 or other restrictive visa status are <u>not</u> allowed to engage in internal or external moonlighting.
- Residents/fellows must be in good academic standing within their residency/fellowship training program demonstrating overall satisfactory performance.
- Residents/fellows must demonstrate in-training exam scores at the national median or 50th percentile for residents/fellows in training at the comparable training level in order to be granted permission to moonlight. Program directors are responsible for scheduling the residents/fellows off at least 8 hours prior to and during the exam for ideal conditions conducive to enhancing the resident's performance on the exam.
- Residents/fellows must accurately report and document moonlighting hours through New Innovations or through other recording methods as defined by the institution and program.
- Residents/fellows are solely responsible for securing confirmation of malpractice coverage for patient care services provided outside the scope of the residency training assignment for external moonlighting activities. Such confirmation shall be required in writing prior to obtaining permission to moonlight.
- Residents/fellows who moonlight external to CAMC must be licensed for independent medical practice or obtain any other license/certification that may be required in the state where the moonlighting occurs. The program director shall not approve external moonlighting for any residents/fellows who does not meet state licensing/certification requirements.
- Residents/fellows must obtain a separate Drug Enforcement Administration (DEA) certificate for use in prescribing medications while for external moonlighting activities.
- Residents in combined programs must have permission to moonlight from both programs.

Requesting Permission to Moonlight

A resident/fellow desiring to moonlight must complete a "Request for Permission to Moonlight" Form prior to moonlighting. It is the responsibility of the individual resident/fellow to provide all additional information and documents required by the program director, coordinator or institution.

- Permission to moonlight will be granted for a maximum period of six months and be approved for effective time periods from January 1 through June 30 and from July 1 through December 31 of each academic year. Permission cannot extend beyond June 30 or December 31 within each 6-month period without completion of and approval of a new request form. Interim reporting may be required by the program director, coordinator or institution at any time.
- A request form is required for each employer of a moonlighting resident/fellow. Multiple sites staffed by the same employer may be listed on one request form and may be updated at any time prior to the

resident/fellow performing services at a new location.

- A copy of the resident/fellow's license or certification requirements, DEA certificate in their name and confirmation of malpractice insurance at the moonlighting institution must be submitted with the request form for all external moonlight activities.
- Upon approval by the program director, the program shall provide a copy of the approved request form and all attachments to the Graduate Medical Education (GME) office. Originals will be placed in the resident/fellow's permanent program file.

Program Director Responsibilities

The program director is responsible for monitoring and for determining the potential and actual impact of moonlighting on the clinical or educational performance of resident/fellow, program, accreditation status or impact on patient care, patient quality and safety requirements of CAMC and the residency program. The program director must:

- Inform and communicate policies, requirements or updates as may be required to residents/fellows who seek approval to moonlight.
- Support and enforce applicable policies and procedures regarding moonlighting.
- Monitor the resident or fellow's eligibility to moonlight as defined by this policy as well as
 - accreditation standards, institutional and program requirements.
- Establish appropriate mechanisms for continuous monitoring of overall duty hours including the number of hours and the workload of residents/fellows who moonlight.
- Review and approve the resident or fellow's "Request for Permission to Moonlight" form and ensure that resident/fellow has submitted all required paperwork and documentation.
- Consider and approve a maximum number of hours per week specified by location. Any change that results in additional Moonlighting hours or changes in locations will require an updated application and approval by the program director.
- Forward a copy of the completed and approved permission form and all required attachments to the GME office <u>prior to</u> resident/fellow engagement in moonlighting activity.
- Provide summary reports or respond to requests for reports/information from the GMEC, the GME Office or the Designated Institutional Official (DIO) at any time.

Institutional Oversight Responsibilities

The GMEC shall monitor program compliance to policies and procedures and have authority to revoke moonlighting privileges at the program or individual level. CAMC and/or the DIO have ultimate authority to permit, restrict or withdraw permission to moonlight or to revoke moonlighting privileges at the program or individual level.

Residents/Fellows are professionally responsible for compliance to moonlighting policies, accurate completion of moonlighting requests, accurate reporting of moonlighting experiences/requirements and for compliance

with duty hour requirements. Failure to comply with the moonlighting policy requirements will result in revocation of moonlighting privileges. Reporting of false information when requesting permission to moonlight or when reporting moonlighting information or hours will result in disciplinary action including potential dismissal/termination. Engaging in moonlighting without obtaining permission as outlined per policy will result in immediate termination.

Signatures:

GMEC Chair:	Arthur B Rubin, DO, FACOP, MHA Digitally signed by Arthur B Rubin, DO, FACOP, MHA Date: 2024.06.26 10:42:47 -04'00'			
	Art Rubin, DO		Date	_
DIO:	Dinchen Jardine	Digitally signed by Dinchen Jardine Date: 2024.06.25 08:09:21 -04'00'	25 Jun 24	
	Dink Jardine, MD		Date	_