On January 9, 2013,

Policy Name: FPGME Resident Moonlighting Policy

Application/Scope: PGME Residency Programs

Approved (Date): Dean’s Council – Approved – June 4, 2013

Review Date: June 2016

Revised (Date): Approved By:
Faculty Executive Council – Approved – June 18, 2013.

BACKGROUND

Moonlighting is defined as the extracurricular practice of medicine for remuneration by residents registered in a postgraduate medical education program leading to certification with the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC). The Royal College and the College of Family Physicians do not encourage nor prohibit moonlighting and have outlined principles which must be considered; included in Appendix 1.

University of Manitoba residents are in the unique situation of functioning as students in the PGME learning environment and as employees of the Winnipeg Regional Health Authority (WRHA). There is a fine balance between these two roles. Moonlighting by residents is considered an employment activity requiring rules and regulations in order to maintain the education/employment balance.

While the Faculty Postgraduate Medical Education (PGME) Office at the University of Manitoba does not encourage moonlighting, it recognizes that resident moonlighting can make a valuable contribution to patient care, while providing additional clinical exposure and experience for residents.

Moonlighting has the potential to negatively affect a resident’s performance. However, all residents will be judged on their performance, not the fact that they are moonlighting. If a resident’s performance is not satisfactory and it is determined that moonlighting is the likely cause of negative performance, moonlighting privileges will be withdrawn.

Residents are encouraged to maintain a balance between their personal and professional life to promote their own physical and mental health and well-being as essential to effective life-long practice (Royal College of Physicians and Surgeons Statement on Moonlighting, 2002).

1. DEFINITIONS

1.1 Scholarly Activity: A scholarly activity project (clinical or basic science research, or a review) designed to facilitate understanding of research methodology and critical appraisal, and potentially spark interest in some to further a research career. This work can be a research project or it can be a comprehensive analytical review.

1.2 Resident supervision: A designated clinical supervisor is available in person or by call for consultation; nature of supervision based on graduated responsibility.
1.3 **Resident Duty Hours**: Means on-site clinical work (patient care) as a resident in a training program including but not limited to on-call duties.

1.4 **On-site Moonlighting**: Moonlighting that requires the resident to stay in a health care facility.

1.5 **Off-site Moonlighting**: Moonlighting that allows the resident to stay at home and be available to a health care facility/organization or patient as required.

2. **PURPOSE**

2.1 Provide guidance to all PGME departments, programs and residents for compliance with guidelines and requirements of the University of Manitoba Faculty of Medicine, Royal College of Physicians and Surgeons of Canada (RCPSC), College of Family Physicians of Canada (CFPC), College of Physicians and Surgeons of Manitoba (CPSM), Manitoba Health, the Winnipeg Regional Health Authority (WRHA), and the Professional Association of Residents and Interns of Manitoba (PARIM).

2.2 Promote better communication amongst stakeholders.

3. **STATEMENT OF POLICY**

3.1 Moonlighting does not accumulate educational credits leading to certification with the RCPSC or the CFPC.

3.2 Residents must have the appropriate licence in order to carry out moonlighting as required by the CPSM.

3.3 Resident moonlighting at the University of Manitoba falls into three categories:

3.3.1 Residents providing on-call coverage of certain clinical units under restricted licensure from CPSM, who must be supervised by physicians with faculty appointments at the University of Manitoba.

3.3.1.1 These are duties that would normally be carried out by residents, but the coverage of the duties is provided by residents outside of their academically-mandated call/service expectations. These residents must be supervised by an attending physician with a faculty appointment at the University of Manitoba.

3.3.2 Residents with full licensure from CPSM providing unsupervised clinical activities (e.g. private medical clinic, adult emergency departments in WRHA), who may only work in the areas stated on their licence, and are free to work without resident supervision (e.g. WRHA Emergency Rooms).

3.3.3 Residents with full licensure from CPSM providing on-call coverage of certain clinical units, supervised by attending physicians (e.g. Critical Care).

3.4 Moonlighting shall be permitted subject to the following requirements:

3.4.1 **Residents under restricted (Educational Register-ER) licensure from CPSM**

3.4.1.1 Must obtain written approval from their Residency Program Director prior to commencing moonlighting.
3.4.1.2 Require verification by their clinical supervisor(s), in advance of the shift(s), confirming that they will supervise the resident(s). The verification may be documented on paper or electronically.

3.4.1.3 Must not moonlight on the same units or services to which they are currently assigned. (e.g. a resident on a Critical Care rotation and taking call should not also cover the same ICU as a moonlighting physician on other days of the same rotation. This has been seen to lead to difficulties in lines of responsibility and resident evaluation; Royal College Statement on Moonlighting, 2002)

3.4.1.4 May only moonlight in areas (clinical domains), where they have satisfactorily completed rotations.

3.4.1.5 Will be approved for moonlighting on request, if in good standing. Residents in academic difficulty or who are on academic remediation or probation are prohibited from moonlighting.

There must be no interference with performance of clinical, academic and scholarly activities.

3.4.1.6 Must maintain attendance at academic activities (grand rounds, talk rounds).

3.4.1.7 Must ensure program needs take precedence, in the event of scheduling conflicts.

3.4.1.8 Will not moonlight and perform resident duty hours simultaneously.

3.4.1.9 Shall conform to the following related to moonlighting activities:

1. Moonlighting on weekends off is permitted with the following restrictions:

   a. The resident shall ensure that the on-site moonlighting activity does not exceed 26 consecutive hours.

   b. The resident shall ensure that their resident duty activity and their on-site moonlighting activity do not exceed 26 consecutive hours.

   c. If moonlighting involves working 12-18 hour shifts of consecutive on-site moonlighting activity and none of the hours worked is between midnight and 0600 then the resident requires at least 7 hours off prior to resuming resident duty hours.

   d. If moonlighting involves working 12-18 hour shifts of consecutive on-site moonlighting activity and at least one of the hours worked is between midnight and 0600 then the resident requires at least 11 hours off prior to resuming resident duty hours.

   e. If moonlighting involves working 19-26 hour shifts of consecutive on-site moonlighting activity then the resident requires at least 17 hours off prior to resuming resident duty hours.

   f. The resident must have at least 7 hours off prior to resuming resident duty hours for off-site moonlighting activity (being available from home to come in as required).
2. **Moonlighting on vacation** is permitted with the following restrictions:

   a. The resident shall ensure that the on-site moonlighting activity does not exceed 26 consecutive hours.

   b. The resident shall ensure that the resident duty activity and on-site moonlighting activity do not exceed 26 consecutive hours on the first day of their vacation or the first day of resuming resident duty hours.

   c. Residents receive 4 weeks of vacation; on-site moonlighting activity shall not exceed 282 hours total during this 4 weeks of vacation.

   d. If moonlighting involves working 12-18 hour shifts of consecutive on-site moonlighting activity and none of the hours worked is between midnight and 0600 then the resident requires at least 7 hours off prior to another shift of on-site moonlighting activity.

   e. If moonlighting involves working 12-18 hour shifts of consecutive on-site moonlighting activity and at least one of the hours worked is between midnight and 0600 then the resident requires at least 11 hours off prior to another shift of on-site moonlighting activity.

   f. If moonlighting involves working 19-26 hour shifts of consecutive on-site moonlighting activity then the resident requires at least 17 hours off prior to another shift of on-site moonlighting activity.

   g. Off-site moonlighting activity (being available from home to come in as required) shall not exceed 356 hours during the 4 weeks of vacation and there must be at least 14 consecutive non-working hours once every 3 days.

3. **Moonlighting when not on vacation or a weekend off** is permitted with the following restrictions:

   a. The resident will not moonlight and perform resident duty hours simultaneously.

   b. The resident shall ensure that the on-site moonlighting activity does not exceed 26 consecutive hours.

   c. The resident shall ensure that their resident duty activity and their on-site moonlighting activity do not exceed 26 consecutive hours.

   d. Any on-site moonlighting activity that involves working 12-18 consecutive hours and none of the hours worked is between midnight and 0600 requires the resident to have 7 hours off before beginning their resident duty hours.

   e. If the on-site moonlighting activity is 12-18 consecutive hours and at least one of the hours worked are between midnight and 0600 then the resident requires at least 11 hours off prior to resuming resident duty hours.

   f. If the on-site moonlighting activity is <12 hours and at least one of the hours worked is between midnight and 0600 then the resident requires at least 7 hours off prior to resuming resident duty hours.

   g. If moonlighting involves working 19-26 hour shifts of consecutive on-site moonlighting activity then the resident requires at least 17 hours off prior to resuming resident duty hours.
h. The resident must have at least 7 hours off prior to resuming resident duty hours for off-site moonlighting activity (being available from home to come in as required).

i. The scheduled work week including all moonlighting and resident duty hours shall not exceed an average of eighty-nine (89) hours per seven (7) day week over a four (4) week period.

3.4.2 Residents with FULL licensure from CPSM

3.4.2.1 Will comply with all policy statements noted under 3.4.1 for residents under restricted licence, with the exception of 3.4.1.2.

3.4.2.2 Are able to moonlight without resident supervision.

3.5 Programs must be cognizant of the unequal relationship between themselves and their residents. They must not coerce residents to moonlight for the direct benefit of the faculty to whom they may be beholden for future career success.

3.6 Any inquiry regarding the contravention of this policy shall be reviewed by the Associate Dean, PGME, in conjunction with the appropriate Residency Program Director. Prior to disposition, the Faculty PGME Office shall provide a copy of the inquiry and all details related thereto to the resident. The resident shall be provided with sufficient time to provide a written response. The Associate Dean, PGME shall dispose of the inquiry by:

a) dismissing the inquiry and taking no further action;

b) resolving the matter informally;

c) requiring the resident to obtain remedial education regarding moonlighting;

d) including comments about the contravention on the resident's evaluation with respect to professionalism;

e) suspending moonlighting privileges;

f) referring the matter to the Probation Committee;

g) referring the matter to CPSM: Section 66(2) of the Manitoba Medical Act (offence for practicing without a current licence)

3.7 The remedial action indicated in the instance of moonlighting in contravention of this policy shall be determined by the Residency Program Director and/or the Associate Dean, PGME, and may include the following:

3.7.1. Negative comments on the yearly summary evaluation with respect to professionalism;

3.7.2 Unsatisfactory evaluation on the yearly summary evaluation with respect to professionalism and possible referral to the Probation Committee for Probation or Dismissal;

3.7.3 Referral to CPSM: Section 66(2) of the Manitoba Medical Act (offence for practicing without a current licence)
3.8 Confirmation of credentialing/eligibility and CMPA coverage of residents who engage in moonlighting is the responsibility of the Employer.

4.0 PROCEDURES

4.1 Residents under restricted (Educational Register-ER) licensure from CPSM:

4.1.1 Must indicate to their Residency Program Director their intention to moonlight.

4.1.2 Must indicate to their Residency Program Director on which unit or at which clinical site they intend to moonlight.

4.1.3 Will receive written or e-mail verification from the person/organization hiring the residents, before the shifts start, that all their clinical supervisors understand that the residents have restricted (Educational Register-ER) licensure from CPSM and that they have agreed to supervise the residents in the same manner in which they supervise residents assigned to rotations in their clinical areas in order to fulfill their educational objectives. See Appendices 2 and 3 for Minimum Requirements for E-mail Verification and for Written Verification of Supervision for Residents on Restricted (Educational Register-ER) Licensure from CPSM.

4.1.4 Will send the verification of supervision to their Residency Program Director.

4.1.4.1 In some cases, especially where there are frequent moonlighting shifts and many supervisors (e.g. Critical Care; Emergency Departments), the verification may be annually documented by the Medical Director/Department Head prior to the commencement of the academic year as a document that includes the names of all of the supervisors and that covers all of the moonlighting shifts on those units for the academic year. See Appendix 4 for template Program verification letter.

4.2 Residents with full licensure from CPSM:

4.2.1 Must indicate to their Residency Program Director their intention to moonlight.

4.2.2 Must indicate to their Residency Program Director on which unit or at which clinical site they intend to moonlight.

4.2.3 Are advised to ensure they have appropriate and current malpractice protection through CMPA or through another insurance company particularly if intending to perform unsupervised moonlighting activities.

4.3 Residency Program Directors will:

4.3.1 Annually approve moonlighting privileges and moonlighting activities of residents under restricted licensure, who have good academic standing.

4.3.1.1 Approval will be withdrawn if schedules from the employer are not provided upon request.

4.3.2 Not provide any references for the purpose of the resident obtaining moonlighting privileges.

4.3.3 Will not mention moonlighting in any reference letter that advantage or disadvantage the resident.
4.3.4 Maintain documentation of residents under restricted licensure approved for moonlighting, and upon request, inform the Faculty PGME Office of their residents’ moonlighting activities.

4.3.5 Notify the Faculty PGME Office when residents under restricted licensure are no longer allowed to engage in moonlighting activities for academic and/or other reasons.

4.3.6 Advise the Associate Dean, PGME of any issues of concern related to resident moonlighting.

4.3.7 Not arbitrarily refuse moonlighting privileges for residents with good academic standing.

4.3.8 Not create additional rules and/or additional restrictions on moonlighting outside of this policy.

4.4 The Associate Dean, PGME will:

4.4.1 Require Residency Program Directors to maintain documentation of all residents under full and restricted licensure approved for moonlighting and provide this information to the Faculty PGME Office, as requested.

4.4.2 Communicate regularly with:

4.4.2.1 The WRHA, Doctors Manitoba, clinical departments and other employers regarding call schedules, to enable tracking of resident moonlighting activity.

4.4.2.2 CPSM with respect to changes in registration and licensure for residents.

4.5 Advise the CPSM, WRHA, Manitoba Health, PARIM and Doctors Manitoba of any issues of concern related to resident moonlighting.

4.6 Seek consultation from the CPSM, WRHA, Manitoba Health, PARIM and Doctors Manitoba for any policy review or revisions to the moonlighting policy.

RELATED DOCUMENTS / REFERENCES

- College of Physicians and Surgeons of Manitoba Categories of Registration, 2012
  http://cpsm.mb.ca/registration/categories-of-registration

- Royal College of Physicians and Surgeons Statement on Moonlighting, 2002
APPENDICES

Appendix 1: Royal College of Physicians and Surgeons Statement on Moonlighting, 2002

Residents are encouraged to maintain a balance between their personal and professional life to promote their own physical and mental health and well-being as essential to effective life-long practice.

The Royal College of Physicians and Surgeons of Canada defines moonlighting as the independent practice of medicine during residency training in situations that are not part of required training in the residency program.

The Royal College neither condemns nor condones the practice of moonlighting during residency training. However, if moonlighting does occur, the following principles should be considered:

1. Moonlighting must not be coercive. Residents must not be required by their residency program to engage in moonlighting.

2. The moonlighting workload must not interfere with the ability of the resident to achieve the educational goals and objectives of the residency program. All Residency Program Directors have an obligation to monitor resident performance to assure that factors such as resident fatigue from any cause are not contributing to diminished learning or performance or detracting from patient safety.

Residency Program Directors should bring to the attention of all residents any factors which appear to detrimentally affect the performance of the resident. To facilitate this, it is advisable that the Residency Program Director be informed when a resident chooses to moonlight.

3. If residents do moonlight, it should not occur on the same unit or service to which they are currently assigned as a resident. For example, a resident on an ICU rotation and taking call should not also cover the same ICU as a moonlighting physician on other days of the same rotation. This has been seen to lead to difficulties in lines of responsibility and resident evaluation.

Confirmation of licensing, credentialing and appropriate liability coverage is the responsibility of the employer.
Appendix 2: MINIMUM REQUIREMENTS FOR E-MAIL VERIFICATION OF SUPERVISION FOR RESIDENTS ON RESTRICTED (EDUCATIONAL REGISTER-ER) LICENSURE FROM CPSM:

Email to Clinical Supervisor:

Re: VERIFICATION OF SUPERVISION FOR RESIDENTS ON RESTRICTED (EDUCATIONAL REGISTER-ER) LICENSURE FROM CPSM

By replying to this email you are confirming that you understand the following:

Dr. (name of resident inserted here) has been hired as a moonlighting resident for (insert name of clinical activity or unit or department here) on the following dates: (insert dates or date ranges here).

Dr. (name of resident inserted here) has restricted (Educational Register-ER) licensure from CPSM and requires supervision in the same manner as a resident assigned to a clinical area to meet the educational requirements of their training program.

Appendix 3: MINIMUM REQUIREMENTS FOR WRITTEN VERIFICATION OF SUPERVISION FOR RESIDENTS ON RESTRICTED (EDUCATIONAL REGISTER-ER) LICENSURE FROM CPSM:

VERIFICATION OF SUPERVISION FOR RESIDENTS ON RESTRICTED (EDUCATIONAL REGISTER-ER) LICENSURE FROM CPSM

Dr. (name of resident inserted here) has been hired as a moonlighting resident for (insert name of clinical activity or unit or department here) on the following dates: (insert dates or date ranges here).

Dr. (name of resident inserted here) has restricted (Educational Register-ER) licensure from CPSM and requires supervision in the same manner as a resident assigned to a clinical area to meet the educational requirements of their training program.

Date:______________  Signature of Clinical Supervisor _____________________________

Printed name of Clinical Supervisor_________________________
Date

To: PGME Residency Program Directors

C.C. Associate Dean, Postgraduate Medical Education

Fr: Medical Director or Department Head, receiving moonlighting residents, Title, Program

Re: Annual Verification Of Supervision For Residents On Restricted (Educational Register-ER) Licensure, College Of Physicians And Surgeons Of Manitoba

This letter will confirm that the physicians listed below in the _____________________ Program have agreed to supervise all moonlighting residents with restricted (Educational Register-ER) licensure from the College of Physicians and Surgeons of Manitoba, on all shifts, for this academic year, from July 1, XXXX to June 30, XXXX.

It is understood that these residents require supervision in the same manner as a resident assigned to a clinical area to meet the educational requirements of their training program.

SUPERVISING PHYSICIANS: