

PROCEDURE GME14

Subject:
RESIDENT MOONLIGHTING

Effective Date:
OCTOBER 2004

Applies to:
HOUSTON METHODIST HOSPITAL SYSTEM -
GME PROGRAMS

Date Revised:
September 2022

Originating Area:
GRADUATE MEDICAL EDUCATION COMMITTEE

Target Review Date:
September 2025

I. GENERAL STATEMENT

The Graduate Medical Education Committee (GMEC) and Houston Methodist-sponsored Programs of GME take seriously the responsibility of ensuring a quality learning environment for Residents, notably by ensuring a proper balance between education and patient care activities within the duty hour limitations of the ACGME Institutional and Program Requirements. Because of these concerns, Moonlighting is, in general, discouraged for Residents in ACGME-accredited and other Programs sponsored by Houston Methodist. During residency training, the Resident's primary responsibility must be to acquire the competencies associated with the specialty in which he/she is being instructed. Moreover, no Resident shall be required to participate in Moonlighting.

II. PROCEDURE

- A. **General Requirements:** Methodist Hospital (Houston), as Sponsoring Institution, or each individual HM-sponsored ACGME-accredited program may prohibit moonlighting by Residents. Under certain circumstances, a Program Director may permit a Resident to engage in Moonlighting. In such cases, the Moonlighting workload must not interfere with the Resident's ability to achieve the goals and objectives of the residency program, and must not interfere with the resident's fitness for work nor compromise patient safety.
1. Each Program must have its own policy on Moonlighting activities and must submit the policy to the GME Office. A Program Policy may be more restrictive than this GMEC Procedure. For example, a Program policy may disallow any form of Moonlighting for all Residents.
 2. Programs must post their Moonlighting Policy on New Innovations.
 3. A Resident must possess a full medical license in the state where the Moonlighting activities will occur before the Resident may apply for approval of Moonlighting.
 4. A Resident must have a personal DEA number for Moonlighting activities outside of Houston Methodist.
 5. A Resident must possess and provide documentation of professional liability coverage for Moonlighting activities that occur outside of Methodist Hospital (Houston).
 6. A Resident on a Visa may not participate in Moonlighting activities.
 7. PGY-1 Residents may not participate in Moonlighting activities.
 8. Any request for a Resident to engage in Moonlighting must be approved in advance by the Program Director, and forwarded to the GME Office for review and approval.
 9. Moonlighting hours must be entered into New Innovations.

- B. Program Policies to Permit Moonlighting: If the program decides to permit Moonlighting by Residents, the Moonlighting policy must:
1. Specify that Residents are not required to engage in Moonlighting;
 2. Specify that Residents must be in good academic standing and are not on remediation or an Adverse Academic Action.
 3. Require the Documentation of Moonlighting Form to be completed prospectively by the Resident and the Program Director, filed in the Resident's record, and available to the GME Office for monitoring;
 4. State that the program will monitor the Resident's performance for the effect of Moonlighting and that adverse effect may lead to withdrawal of permission to Moonlight; and
 5. Specify that hours spent in Moonlighting must be counted toward the 80-hour weekly limit on Duty Hours.
 6. Specify that moonlighting activities must be approved by the GME Office prior to the Resident starting the activity
- C. Instructions to Residents: Program Directors and Faculty must instruct Residents that Methodist does not provide professional liability coverage to Residents for compensated work that is not an approved component of the Program. Residents who wish to Moonlight should be advised to obtain written assurance of professional liability (including Tail Coverage) and workers' compensation coverage from any outside employer.

Approved by Graduate Medical Education Committee [14 October 2004] [revised 13 July 2006]
[8 January 2009] [9 February 2012] [14 April 2016] [9 May 2019] [14 September 2022]

AUTHORITATIVE REFERENCES:

Accreditation Council for Graduate Medical Education Institutional Requirement IV.J.1. and Common Program Requirements VI.F.1 and VI.F.5.)