

VOLUNTARY SUPPLEMENTAL CLINICAL ACTIVITY

PURPOSE

The University of Tennessee Health Science Center College of Medicine (“UTHSC”) recognizes that some UTHSC residency/fellowship training programs are able to provide residents and fellows (“residents”) opportunities to voluntarily provide additional clinical activity beyond their regularly scheduled assignments, such as extra shifts or extra call, within the scope of their approved training program for additional pay. UTHSC recognizes that these extra clinical activities provide residents with opportunities to continue to advance their skills and training and broaden their exposure to clinical situations when performed as part of their UTHSC residency/fellowship training program and, when performed voluntarily, demonstrate the resident’s initiative and commitment to professional growth within his or her training specialty. This policy establishes clear guidelines for approval, participation, and compensation for these additional clinical experiences, which are defined in this policy as “Voluntary Supplemental Clinical Services.”

DEFINITIONS & REQUIREMENTS

Approved Training Program means UTHSC residency and fellowship training programs approved by the Graduate Medical Education Committee (“Training Program”).

Clinical and Education Work Hours or Work Hours has the meaning set forth in the University of Tennessee College of Medicine GME Policy #310, *Resident Clinical and Educational Work Hours*.

Voluntary Supplemental Clinical Activity means approved, appropriately designated extra clinical activities performed by UTHSC residents as part of their Training Program in addition to the regularly scheduled clinical work hours assigned by the Training Program, such as extra call or extra shifts, for which the trainee receives additional pay.

The following requirements must be met for supplemental clinical activities to qualify as Voluntary Supplemental Clinical Activity under this policy:

1. The Program Director must specifically designate the supplemental clinical activities as “Voluntary Supplemental Clinical Activities” that are within the scope of the Training Program and subject to additional pay under this policy. (Any additional pay clinical activities that are not appropriately designated as Voluntary Supplemental Clinical Activities pursuant to this policy will be considered Moonlighting, subject to GME Policy #320*Moonlighting*).
2. The resident must have the same clinical responsibilities and duties during a Volunteer Supplemental Clinical Activity that he or she has during a regularly scheduled clinical activity and consistent with the scope of responsibilities normally assigned to trainees with the same level of training in the Training Program.
3. Residents must obtain advance written approval from their Program Director.

4. Participation must be voluntary.
5. Residents shall only receive additional pay from the University of Tennessee.
6. The resident is subject to the same level of supervision and control by University faculty member attending physicians as required during a regularly scheduled shift or rotation.
7. The Voluntary Supplemental Clinical Activity must be performed at a regular assigned clinical training site for residents in the Training Program.
8. Residents must record work hours from Voluntary Supplemental Clinical Activity in their total Clinical and Educational Work Hours in New Innovations.

Residents who participate in a designated, approved Voluntary Supplemental Clinical Activity do not need to purchase a separate professional liability insurance policy or obtain an unrestricted Tennessee medical license because Voluntary Supplemental Clinical Activities subject to this policy are within the scope of the resident's Training Program and the resident's University employment.

Voluntary Supplemental Clinical Activity differs from Moonlighting (External and Internal) because with moonlighting, the resident (a) is paid directly by an individual or entity other than the University of Tennessee (e.g., a medical group, health care facility, or clinical training site), and (b) is acting independently outside of the resident's UTHSC accredited Training Program. Likewise, residents who are Moonlighting must obtain an unrestricted medical license in the state in which the moonlighting occurs and a private malpractice insurance at the resident's expense, see GME Policy #320, *Moonlighting*.

POLICY

I. General

UT College of Medicine may allow residents to engage in Voluntary Supplemental Clinical Activity if it does not negatively impact the resident or the Training Program's learning environment. Residents may not participate in Voluntary Supplemental Clinical Activity if it violates the GME Policy on Work Hour scheduling and reporting requirements described below.

Voluntary Supplemental Clinical Activity must be work that is outside of the standard shift/rotation schedule for the Program.

Residents on a J-1, J-2 or H1-B visa may be permitted to engage in Voluntary Supplemental Clinical Activities.

Residents must be in good academic standing in order to be approved to engage in Voluntary Supplemental Clinical Activities. Residents on active Performance Improvement Plans are not permitted to engage in such activities.

II. Work Hour Considerations

Voluntary Supplemental Clinical Activity must be counted toward the 80-hour weekly maximum for Clinical and Educational Work Hours. Residents who participate in Voluntary Supplemental Clinical Activity are required to accurately log their work hours and site location in New Innovations. Residents must meet their professional responsibility to report to work appropriately rested and fit to provide safe, effective patient care at all times. In addition, time spent participating in approved Voluntary Supplemental Clinical Activity must not negatively impact the resident's scheduled UTHSC training responsibilities and requirements. Violations of this Voluntary Supplemental Clinical Activity Policy may result in disciplinary action, up to and including dismissal.

III. Request and Approval

If a Program Director determines that a supplemental clinical activity provides clinical experience within the scope of the Training Program and should be designated a "Voluntary Supplemental Clinical Activity" in accordance with this policy, the Program Director must obtain GME approval each academic year before residents are allowed to participate in the Voluntary Supplemental Clinical Activity.

If GME approves the Program Director's request to designate the supplemental clinical activity as a Volunteer Supplemental Clinical Activity subject to this policy, the Program Director or his or her designee should notify the residents in the Training Program which residents are eligible to request permission to participate in the Voluntary Supplemental Clinical Activity.

To receive permission for Voluntary Supplemental Clinical Activity, the resident must submit a written request to his/her Program Director for that program year (July 1-June 30). The request shall identify the location and schedule for the proposed Voluntary Supplemental Clinical Activity.

If approved, the Program Director will include a written statement of permission in the resident's file and will monitor the effect of the resident's Voluntary Supplemental Clinical Activity. Each resident is responsible for ensuring that his or her Program Director has approved, in writing, the resident's participation in Voluntary Supplemental Clinical Activity for the program year in which the resident intends to perform Voluntary Supplemental Clinical Activity. Adverse effects on the resident's performance may lead to withdrawal of permission.

The Program Coordinator will email the GME finance team when a resident's Voluntary Supplemental Clinical Activity work has been completed and the GME Office will enter the resident's additional payment for such work into DASH. Entry after the 15th of the month will be on the resident's following month's University paycheck.