

Postgraduate Medical Education Policy
Moonlighting Policy for Postgraduate Trainees

Approved PGEC: February 2021
Next scheduled Review: February 2024



Table of contents

Section A: Introduction	2
A1: Restricted Registration as Applicable to Residents	2
Section B: Scope	2
Section C: General Principles	3
C1: Principles Specific to RR License	3
C2: Scheduling Principles	4
Section D: Roles and Responsibilities	4
D1: The Trainee	4
D2: The Program Director	5
D3: The Associate Dean, PGME.....	5
D4: The Employer	6
Section E: Resources	6

Section A: Introduction

“Moonlighting” refers to the extracurricular provision of clinical services by residents and fellows performed outside the requirements of the training program for remuneration. Postgraduate trainees must have either an independent or restricted registration (RR) licence from the College of Physicians and Surgeons of Ontario (CPSO) to participate in moonlighting activities. Although the priority for McMaster Postgraduate Medical Education (PGME) is the successful completion of postgraduate training, it is recognized that moonlighting can provide valuable service to patients and additional clinical exposure during training.

This policy serves to outline expectations of postgraduate trainees and program directors for moonlighting during residency or fellowship, processes for applications for restricted registration, and guidelines for program directors when considering requests from residents to moonlight with a RR licence. This policy is informed by CPSO Restricted Registration (RR) guidelines, PGME Supervision Policy, PGME Assessment Policy, and [PARO-OTH Collective Agreement](#).

A comprehensive list of definitions can be found in the [PGME Glossary of Definitions and Terms](#).

A1: Restricted Registration as Applicable to Residents

A resident who does not yet have an independent license to practice can moonlight through the restricted registration (RR) license. “Restricted Registration” is a certificate subject to annual renewal offered by the College of Physicians and Surgeons of Ontario (CPSO) to residents who meet agreed upon criteria. As part of this process, residents must receive permission from the program director and the Postgraduate Dean to obtain this certification. The program director can rescind permission for restricted registration with appropriate justification.

For details on the Restricted Registration program administered through PARO, please refer to the website: <https://restrictedregistrationontario.ca>

Section B: Scope

1. This policy applies to all residents and clinical fellows registered with the PGME Office at McMaster University. This policy specifically addresses moonlighting activities that are performed with an independent or restricted licenses.
2. The trainee must discuss with the program director if they wish to work outside of training in another setting that does not require a CPSO license (e.g., pharmacy, research assistant etc.), general principles will still apply regardless of type of activity. The trainee must ensure that they have the necessary credentialing/ license as appropriate and there is no conflict of interest with their role as a resident.
3. The PGME office abides by all restrictions outlined in the sponsorship contract for externally sponsored trainees with regard to licensing and moonlighting. Externally sponsored trainees and program directors must review the process and the restrictions with the PGME office prior to approval for applications for restricted licensure.

For the purposes of this document residents and clinical fellows are referred to as “trainees”. However, some sections will only be applicable to those individuals registered at PGME as residents and/or those who hold restricted registration rather than an independent license.

Section C: General Principles

4. Moonlighting must not interfere with the trainee’s ability to achieve the educational goals and objectives of the training program.
5. Moonlighting must not interfere with the trainee’s ability to provide safe and competent patient care in clinical activities within the training program.
6. Trainees should strive to maintain a positive work-life balance and must consider their physical, and mental well-being in their decision to moonlight.
7. Moonlighting must not lead to confusion of the trainee’s role, i.e., as a postgraduate trainee engaged in clinical activities which are part of the program (and assessed) versus moonlighting.
8. Moonlighting activities must not be scheduled at the same site and time as trainees are providing the same service as part of their educational program.
9. It is the responsibility of the site offering moonlighting opportunities to clearly define the skills and prior experience required of trainees to moonlight at that site.
10. Moonlighting does not accumulate educational credits or competencies leading to certification with the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC).
11. Trainees in difficulty, as defined by the [PGME Assessment of Trainees policy](#), are not permitted to moonlight.

C1: Principles Specific to RR License

12. Residents must have approval from their program director for their RR license application.
13. Program directors must ensure that all residents deemed eligible for restricted registration have demonstrated the level of ability and seniority commensurate with the additional clinical responsibility for patient care and the specific clinical activity.
14. Supervision under the RR license must be at the level of the resident and the assigned clinical responsibilities. RR clinical activities must offer the same level of supervision, with the same responsibilities of resident and supervisor, as defined by the [Supervision of Clinical Activities of PGME Trainees policy](#).

C2: Scheduling Principles

15. All scheduling for residents (regardless of type of license) must follow the [PARO-OTH Collective Agreement](#), with respect to maximum duty hours and time off between clinical duties and must include both moonlighting hours as well as duty hours required by the program.
16. Any performance, safety or professionalism incidents during RR activities must be communicated to the program director.
17. Moonlighting activities must not interfere with program mandated clinical or academic activities.

Section D: Roles and Responsibilities

D1: The Trainee

18. Trainees are responsible for ensuring compliance with appropriate hospital credentialing processes that are distinct from the postgraduate trainee process.
19. Trainees registered as residents must abide by the rules of the PARO-OTH Collective Agreement when scheduling moonlighting activities regardless of type of license (i.e., independent versus restricted). In particular:
 - Cannot exceed duty hour maximums as stipulated in the PARO-OTH Collective Agreement.
 - Must abide by the rules regarding post-call days.
20. Trainees who moonlight with independent licenses must be aware that they do not have access to postgraduate or university resources (e.g., legal assistance) if they are named in CPSO complaints and/or legal action because of moonlighting with an independent practice license.
21. Residents with independent licenses must discuss their intention to moonlight with their program director.
22. It is highly recommended that clinical fellows with an independent license discuss their intention to moonlight with their fellowship director.
23. Trainees must ensure that moonlighting does not interfere with their ability to meet program objectives and/or competencies, including attendance at all mandated academic activities.
24. Trainees must ensure that they are able to provide safe and competent health care in clinical settings within the program and during moonlighting.
25. Trainees must ensure appropriate liability insurance that considers moonlighting activities:
 - Change CMPA coverage to TOW Code 14 if doing RR Work under a PG License
 - Change to appropriate code if working under independent practice licence

D2: The Program Director

26. Will determine with the guidance of the Residency Program Committee if moonlighting with an RR licence will be permitted for their residents through the restricted registration program.
27. Must ensure that the specific moonlighting RR activity and clinical site is appropriate for trainees in the discipline and level of training.
28. Must determine eligibility criteria for residents to participate in moonlighting, with a RR license; can consider the following:
 - Level of training
 - Demonstration of competence and prior experience in clinical area of moonlighting
 - Good academic standing and progressing as expected in the training program, including participation/completion of mandated scholarly projects.
 - Attendance at academic sessions
29. Should determine eligibility criteria for residents and fellows to participate in moonlighting with an independent license, including but not limited to:
 - Good academic standing and progressing as expected in the training program, including participation/completion of mandated scholarly projects.
 - Attendance at academic sessions.
30. Must recognize that trainees with independent licenses do have the right to work for extra pay outside their program, providing they fulfill the training requirements of the program and can provide safe competent care.
31. Must discuss any performance changes with the trainee and determine the impact of moonlighting.
32. Should discuss with trainee if the trainee expresses concerns regarding wellness and appropriate work-life balance.
33. Must outline to trainees the factors considered for approval for restricted registration and when privileges may be rescinded:
 - Concerns about academic performance.
 - Remediation, probation, suspension.
 - Persistent failure to abide by the PARO-OTH Collective Agreement (e.g., exceeding [maximum duty hours](#) or failure to take post-call days).
 - Concerns raised during moonlighting by supervisors.

It is recognized that residents with an independent license may work outside their training program without the oversight required of an RR License. Failure to abide by the above principles may be viewed as a professionalism lapse by the training program.

D3: The Associate Dean, PGME

34. Must disseminate PGME Moonlighting Policy and review and update, as necessary.

35. Ensure compliance with the PGME Assessment and Supervision policies for moonlighting RR activities.
36. Approve applications for restricted registration licenses after approvals obtained from trainee, program director and employer.

D4: The Employer

37. Must confirm licensing, credentialing, and appropriate liability coverage with the trainee.
38. Must ensure that appropriate supervision is available for trainees, according to the type of license, level of trainee and clinical activity.
39. Must ensure that trainees have appropriate support if CPSO complaint and/or legal action initiated during moonlighting clinical activities.
40. Must notify the program director if significant performance concerns for trainees on restricted registration licenses.

Section E: Resources

1. [COFM Restricted Registration Policy 2018](#)
2. [PGME Supervision of Clinical Activities of Trainees policy](#)
3. [PGME Assessment of Trainees policy](#)
4. [PARO-OTH Collective Agreement](#)
5. [FAQ](#)
6. [RR information for Supervising Physicians and Healthcare Organisations](#)