

Graduate Medical Education Leave Policy

General Note

Since each resident must meet certain education requirements as defined by the program, ACGME, the resident may be required by his/her department chair or residency program director to make up missed time upon returning from any leave prior to advancing to the next level of training and/or prior to completion of the residency program. In such cases restoration of the resident's previous position beyond the term of the original appointment and provision of salary during the "make up" period are at the discretion of the department chair and program director; the Hospital is not required to extend the period of training to accommodate this.

Whenever the need for leave is foreseeable, the resident will make a reasonable effort to schedule the leave so as not to unduly burden the program, and give notice no fewer than thirty (30) days before the leave is to begin. If the nature of the leave requires that the leave begin in fewer than thirty days, the resident will give notice as soon as is practicable. A resident should give the residency program director notice as far in advance as possible regarding planned parental leave or family medical leave; six months (confidential) notice is requested for planned leave after the birth of a child, in order to facilitate appropriate scheduling.

Appropriate medical documentation and clearance must be provided to the department chair and program director upon reasonable request.

I. Vacation Time

Residents are entitled to four weeks' vacation during each year to be taken as determined by the Program Director and the GME office at the beginning of the academic year. No vacation should be taken the first and/or last two weeks from the start and end of the academic year.

Residents should complete a leave request form, devised by the GME office, which should be approved by the program director before submitting it to the GME office.

II. Sick Time

It is the resident's responsibility to notify the department if he/she is going to be out sick. The following is required.

- Call the administrative chief resident so coverage can be arranged.
- Sick days must be submitted to the GME office through completing the leave request form.

In the event of illness, the affected resident/fellow is personally responsible for notifying the faculty member of the affected clinic(s)/service(s) and the program director as soon as the resident knows that the illness will cause an absence from clinical responsibilities. Sick leave will be approved only for legitimate illness. A physician's note may be requested to support the resident request for sick leave. If the above policy is not followed, the absence will be counted as vacation time. It is the responsibility of the resident and the program director to ensure that Board eligibility requirements are met within the original residency period or alternative arrangements are made. Residents are granted up to 15 calendar days per year in sick leave. It cannot be carried over. Extra compensation is not allowed in lieu of sick leave. Any documented leave and/or vacation that results in more than six weeks off must be made up before you can be advanced to the next level of training.

III. Parental, maternity Leave and Adoption Leave

Up to one week of paid leave will be granted following the birth or adoption of a child. Residents who plan to utilize parental leave are expected to notify their Program Director. Female residents will be entitled to nine weeks; with full pay and benefits for an aggregate period preceding and immediately following delivery; however this will result in delaying the resident's graduation to compensate for

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her lost training time. In no case will such a resident be allowed to resume her work before five weeks from the date of delivery.

IV. Additional Provisions Relating to Family and Medical Leave

Upon return from an approved family or medical leave of absence, the resident will be restored to the position left.

- a. If enrolled at the time of commencement of an approved family leave, the Hospital will maintain the resident's health and other insurance coverage at the same levels and cost to the individual during the period of leave.
- b. If an intermittent or partial leave (i.e. a reduced work schedule) is requested, the department chair and/or residency program director may alter the resident's work schedule in order to accommodate the leave.

V. Salary Continuance

Salary will be continued as follows:

- a. Family medical leave: Residents may use vacation time, but *not* accrued sick time, for family medical leave.
- b. Parental leave: Resident who have delivered a child are eligible for salary continuance for a period of up to 9 weeks following childbirth, and are not required to use any accrued sick or vacation time during the leave. For any parental leave, vacation time may be used to provide or extend a period of paid leave up to a maximum of twelve weeks.
- c. Compassionate leave: Residents are entitled up to 3 days of leave in case of loss of any close family member including parents, in-laws and grandparents.
- d. Leave for Conferences: Residents are entitled to 3 days of leave of absence for conference attendance.
- e. Personal leaves of absence: Residents may use vacation time, but *not* accrued sick time, for personal leave. Salary will be continued only in *exceptional* circumstances, at the discretion of the department Chair and the assistant Dean of GME.

VI. Unexcused Absence

If a resident does not show up for assigned hours, including night call, without notifying the Chief Resident or Program Director, the absence will be considered unexcused. Unexcused time will be taken as leave from the resident's leave entitlement. If the unexcused absence is repeated, disciplinary action may be taken by the Program Director depending upon the severity and frequency of the infraction. Arrangements for "payback" to other residents who may be assigned to cover night call or assigned hours will be made at the discretion of the Program Director.