

LEAVE POLICY FOR RESIDENTS & FELLOWS Last Revised: October 2024 Next Review: October 2025

Owner: OGME/GMEC Applicability: GME/GPR

Responsibility:

This policy is maintained by the Graduate Medical Education (GME) Department.

Purpose:

To ensure that all of MAHEC's Graduate Medical and Dental Education (GME) programs meet or exceed the Institutional and Common Program (IV.H.1) Requirements of the Accreditation Council for Graduate Medical Education (ACGME), the Commission on Dental Accreditation (CODA), the ACGME Institutional and Residency Review Committees (IRC and RRC), and the American Society of Health System Pharmacists (ASHP) regarding absences for all residents/fellows.

The policy also includes adherence to MAHEC's employment policies and benefits and the policies set forth by the American Boards of each Residency and Fellowship Program MAHEC sponsors.

Policy:

Residents or Fellows within GME Residency and Fellowship programs at MAHEC have a different paid leave policy than MAHEC's Paid Time Off (PTO) policy, this policy provides GME Residents or Fellows with unique and comprehensive leave(s). All leaves outlined in this policy are annual, do not accrue, and are not eligible for payout at the end of the year or the end of residency. This policy applies to all contracted residents and fellows employed by MAHEC in an ACGME, CODA or ASHP accredited program. This policy will be available at all times on the MAHEC GME SharePoint.

Every absence must be approved and reviewed by the Program Director or its designee. Every absence from the program will be documented via New Innovations and Workday, and the programs will monitor the totals to determine if there is a need to extend a resident's/fellow's contract date in order to maintain their board eligibility (board eligibility specialty links below).

Outlined below are the leaves of absence or time away from the program allowed by MAHEC. However, time away from the residency or fellowship program in accordance with these policies may exceed the guidelines set out by each specialty's certifying board. This will result in the need to extend the length of the residency program in order to qualify for specialty or sub-specialty board certification. Consultation with the Program Director and the GME Office is required prior to all residents/fellows taking extended periods of leave.

Specialty Board Certification Websites:

- American Board of <u>Family Medicine</u>
 - o Family Medicine
 - o Sports Medicine Requirements
- American Academy of Hospice and Palliative Medicine
- American Board of General Dentistry

- American Board of Internal Medicine
- American Board of <u>Obstetrics and Gynecology</u>
 - Obstetrics and Gynecology Requirements
 - o Maternal Fetal Medicine Requirements
- American Board of Pharmacy Specialties
 - o **Ambulatory Care Pharmacy**
 - o Geriatric Pharmacy
- American Board of Preventative Medicine
 - Addiction Medicine
- American Board of <u>Psychiatry and Neurology</u>
 - o **Psychiatry**
 - o Child and Adolescent Psychiatry
 - o Addiction Psychiatry
 - o Consultation-Liaison Psychiatry
- American Board of <u>Surgery</u>
 - Surgery
 - o Surgical Critical Care Requirements

General Requirements:

- All types of leave must be used in half-day or full-day increments.
- Travel arrangements should not be made before the request is approved by the Program Director.
- Leave must be taken during the contract year.
- No two leave periods may be concurrent (e.g., last month of the PGY-2 year and first month of the PGY-3 year in sequence) with the exception of FMLA.
- Leave cannot be used to reduce the length of the residency/fellowship program.
- The resident/fellow is responsible for requesting time off at least 30 days in advance. Requests to have the leave extended into the preceding or consecutive weekend must be submitted to the Chief Resident(s), Program Administrator and the Program Director. Program Administrators are responsible for documenting this time via Workday. Due to staffing constraints, leave requests may be denied on certain rotations. These rotations may vary from year to year, program to program. The Program Administrator can provide this information to the resident/fellow.
- Approval for leave use requests is generally awarded on a seniority basis based on PGY year and the constraints of staffing on services is a factor taken into consideration. However, every effort will be made to honor as many specific requests as possible.
- Senior residents planning to use Educational Leave to attend a meeting (i.e. a conference or research presentation), should request this time off as far in advance as possible to avoid having more than one resident away while on the same service rotation.
- If requests for Educational Leave are not received and built into the schedule at the time leave requests are made, it may not be possible to grant the time away due to scheduling conflicts or constraints.
- The Program Director may take into consideration aspects of a resident's or fellow's
 professionalism and or current standing when making decisions concerning leave requests,
 particularly when a conflict between requests arises. Such considerations include, but not
 limited to, duty hour logging compliance, case logging compliance, conference attendance
 and preparation, and program performance.

- Residents or Fellows are prohibited from moonlighting while on any type of Leave.
- Residents or Fellows on Leave are responsible for completing annual (re)credentialing
 requirements (including LMS training modules) and for being compliant with institutional
 policies regarding immunization(s) of healthcare personnel (e.g. influenza, COVID, etc.) prior
 going on a foreseeable Leave or within 30 days of returning from any Leave, if relevant (for
 example, the influenza virus season is determined by ongoing transmission of influenza in
 the community, which is typically until late April/May).

Types of Time Away from Training:

Paid Time Off:

PGY-1 - PGY-8 ACGME and ASHP Medical and Pharmacology Residents and Fellows will receive 15 days of paid leave.

PGY-1 Dental Residents will receive 10 days of paid leave.

Holiday block:

The program will provide each Resident and Fellow 5 consecutive days of leave between November 1st to January 31st in addition to their 15 days of leave.

Extended Leave:

Extended Leave is time taken away from resident/fellow training beyond thirty (30) days of leave per year. The minimum amount of training time during the contract year is defined for residencies and fellowships by the Accreditation Council on Graduate Medical Education (ACGME), the Commission on Dental Accreditation (CODA), the ACGME Institutional and Residency Review Committees (IRC and RRC), the American Society of Health System Pharmacists (ASHP) and each individual Specialty Board requirements. In the case where any such requirements relative to a particular MAHEC residency or fellowship program are not specific, the allowable combined total leave taken during the contract year shall be 1 month (30 days).

Educational Leave:

Residents/fellows can take approved leave to engage in educational activities. This leave does not count against other leave balances. The minimum amount of time is two days per academic year. The GME Office recognizes that travel related to interviews for Fellowships or post-Residency employment is necessary. This type of travel will result in absences from clinical duties which impact the entire residency. All Educational leave must be approval by the Program director or its designee.

The following conditions must be met before such travel will be approved.

- Time away from clinical duties will be minimized.
- Total time spent on interviews or for professional development (meetings, other presentations) is considered educational and not paid leave time.

Types of educational leave, including but not limited to:

- Conferences
- Board Certification Exams
- Interviews for jobs
- Personal development opportunities
- Career development opportunities

Sick Leave:

Ten days (defined as 10 scheduled working days' worth) of paid Sick Time is provided annually. Sick Time is intended to be used to preserve and promote trainee health and wellbeing and will be approved at the Program Director's discretion. It is the responsibility of the Program Director or their designee, not the trainee, to make arrangements for coverage of the trainee's clinical responsibilities.

Bereavement Leave:

This policy establishes uniform guidelines employees seeking to take Bereavement Leave for absences related to the death of family members, including the employee's spouse, domestic. partner, child (including pregnancy loss), stepchild, parent, stepparent, father-in-law, mother, mother-in-law, son-in-law, daughter-in-law, brother, sister, stepbrother, stepsister, brother-in-law, sister-in-law, aunt, uncle, grandparent, grandchild or spouse's grandparent, or an adult who stood in loco parentis to the employee during childhood.

All residents and fellows shall receive 3 days of paid bereavement leave in an academic year.

- Unused bereavement leave will not roll over to the next calendar year.
- Unused bereavement leave time will not be paid out upon separation of employment.
- An employee who wishes to take time off due to the death of a family member should notify their Program Director or designee as soon as possible.
- In addition to bereavement leave, an employee may, with his or her supervisor's approval, use any available paid leave for additional approved time as necessary. Employees under corrective action for attendance issues may be required to provide documentation with regard to their bereavement.

GME Supplemental Paid Leave:

Residents or Fellows are eligible to receive a minimum of six (6) weeks of GME Supplemental Paid Leave for qualifying reasons that are consistent with applicable laws once and at any time during an ACGME, CODA, or ASHP accredited program starting the day the resident/fellow is required to report to duty. GME Supplemental Paid Leave is contingent upon and concurrent with an approved Family Medical Leave (FMLA) approval. A trainee is only eligible for GME Supplemental Paid Leave concurrent with approved FMLA.

MAHEC will provide Residents or Fellows in ACGME, CODA, or ASHP accredited programs the following in relationship to GME Supplemental Paid Leave:

- 100 percent of their salary for the first six weeks of the first approved medical, parental, or caregiver leave(s) of absence taken.
- One week of paid time off reserved for use outside of the first six weeks of the first approved medical, parental, or caregiver leave(s) of absence taken.
- Ensure the continuation of health and disability insurance benefits for residents or fellows and their eligible dependents during any approved medical, parent, or caregiver leave(s) of absence.
- Supplemental Leave is available after paid leave is exhausted, for a total of six weeks of paid leave. There will also be one week of protected paid leave in addition to the six weeks of FMLA associated leave.

Leave For Parent Involvement in School:

In accordance with North Carolina state guidelines, one half day of unpaid Parental Involvement Leave per calendar year will be granted (no waiting period) for a parent, guardian, or person standing in lieu of parent in raising a school age (grade school, preschool, or child day care) child so that the trainee can become involved in school activities.

The Leave for Parent Involvement in Schools is for a maximum of one-half day per calendar year (Jan-Dec), no matter how many children may be in the family. The leave must be scheduled for a time that is mutually agreeable to the department and the trainee, and approval for the absence must be requested at least 48 hours in advance of the event/appointment. The program may require written verification from the child's school that the trainee attended or was involved in school activities during the time of the leave. At the trainee's discretion, this leave may be taken using available PTO Time.