Resident Leave Policy

## I. PURPOSE:

The purpose of this policy is to ensure that the quality of Graduate Medical Education programs at Morehouse School of Medicine (MSM) meets the standards outlined in the **Graduate Medical Education Directory**: "Essentials of Accredited Residencies in Graduate Medical Education" (AMA-current edition). MSM Residents will be afforded the opportunity to provide for personal and/or family welfare through this defined leave policy.

## II. SCOPE:

All MSM administrators, faculty, staff, Residents, and administrators at participating training affiliates shall understand and support these and all other policies and procedures that govern both Graduate Medical Education programs and Resident appointments at MSM.

## III. POLICY:

**3.1.** MSM will provide Residents with the opportunity to take personal and family leave as needed during a Post-Graduate Year (PGY).

**3.2.** Leave accounting is the responsibility of the Residency Program Director in coordination with the Office of Graduate Medical Education (GME) and Human Resources Department.

**3.3.** Federal law, Accreditation Council for Graduate Medical Education (ACGME) "program requirements" and medical specialty board requirements shall apply as applicable.

## IV. COMPENSATED LEAVE TYPES:

**4.1.** **Resident Vacation Leave**: Residents are allotted 15 days compensated Vacation Leave per academic year (from July 1 through June 30).

**4.1.1.** Vacation Leave may not be carried forward from year-to-year (accrued).

**4.1.2.** Vacation leave shall not be subject to an accumulated "pay out" upon the completion of the program, transfer from the program, or upon a Resident's involuntary termination from the program.

**4.2. Sick Leave**: Compensated Sick Leave is 15 days per year. This time can be taken for illness for the Resident or for the care of an "immediate" family member.

**4.2.1.** Sick leave is not accrued from year to year.

**4.2.2.** Available sick leave, 15 days maximum, and/or available vacation leave, 15 days maximum, may be used to provide paid leave in situations requiring time off for the purpose of caring for oneself or an immediate family member due to serious health conditions.

**4.3. Administrative Leave**: granted at the discretion of the Program Director, may not exceed ten (10) days per twelve-month period. Residents should be advised that some Medical Boards count educational leave as time away from training and may require an extension of their training dates.

**4.4. Holiday Leave**: time off for a holiday is based on a Resident's rotation assignment. When rotating on a clinic or service that closes due to a holiday, the Resident may take that time off as paid holiday leave with approval of the Program Director.

**4.5. Family and Medical Leave**: MSM provides job-protected family and medical leave to eligible Residents for up to 12 workweeks of unpaid leave during a 12-month period based on the following qualifying events:

d) For incapacity due to pregnancy, prenatal medical care or child birth;

e) To care for the employee's child after birth, or placement for adoption or foster care;

f) To care for the employee's spouse, son, daughter, or parent, who has a serious health condition; or

g) For a serious health condition that makes the employee unable to perform the employee's job.

**4.5.1.** Eligible Residents who care for covered service members may also be eligible for up to 26 workweeks of unpaid leave in a single 12-month period.

**4.5.2.** Residents are eligible for FMLA leave if they have worked for MSM for at least one year, have worked 1,250 hours over the previous 12 months, and have a qualifying event as outlined above. Direct all questions about FMLA leave to the Human Resources Department.

## V. <u>LEAVE OF ABSENCE WITHOUT PAY</u>:

**5.1.** Leave required beyond available compensated sick and/or vacation leave will be uncompensated Leave without Pay (LWOP). Requests for LWOP shall be submitted in writing to the Residency Program Director and reviewed by the Human Resources Department for disposition and approval no less than 30 days in advance of the start of any planned leave. The request shall identify the reason for the leave and the duration.

**5.2.** LWOP, when approved, shall not exceed six (6) months in duration.

**5.2.1.** If LWOP does extend beyond six (6) months in duration, the Resident must reapply to the residency program.

**5.2.2.** MSM's Human Resources Department shall advise both the Resident and the Residency Program Director on applicable policies and procedures.

**5.3.** All applicable categories of compensated leave must be exhausted prior to a Resident being granted LWOP. Residents shall consult with the HR Manager for Leave Management prior to taking LWOP.

## VI. OTHER LEAVE TYPES:

All other leave types (e.g., military, bereavement, jury duty, etc) are explained in detail in MSM's Policy Manual which is available on the Human Resources Department Intranet webpage.

## VII. RETURN TO DUTY:

**7.1.** For leave due to parental or serious health conditions of the Resident or a family member, a physician's written "Release to Return to Duty" or equivalent is required with the date the Resident is expected to return to resume his or her residency. This information is submitted to the Human Resources Department (HRD).

**7.2.** When applicable, the Residency Program Director will record in writing the adjusted date required for completion of the PGY or the program because of Extended Resident Leave. One copy is placed in the Resident's educational file and a copy is submitted to the Office of Graduate Medical Education (GME) to process the appropriate Personnel Action.

## VIII. PROGRAM LEAVE LIMITATIONS:

**8.1.** Leave away from the residency program includes the total of all leave categories taken within an academic year. This includes uncompensated Federal Family and Medical Leave or other Leave without Pay (LWOP).

**8.2.** All leave is subject to the requirements of the individual medical specialty boards and the ACGME-RRC regarding the completion of the program. It is the responsibility of each Residency Program Director to determine the effect of absence from training for any reason on the individual's educational program and, if necessary, to establish make-up requirements that meet the Board requirements for the specialty. Always review the current certification application eligibility requirements at the specialty board website.