

Mercy Medical Center Merced Policy and Procedure

SUBJECT: Benefits, Leave, and Time Away (RES-101)

DEPARTMENTS: Graduate Medical Education / Family Medicine Residency Program

POLICY:

Family Medicine Residents are employees of Mercy Medical Center (MMC) and are entitled to medical, dental and other benefits as outlined in the below policy. The Graduate Medical Education (GME) department and Family Medicine Residency Program realize that during the course of residency training there may be periods of time that a resident may need extended time away from the program for various reasons. The below policy also outlines available leaves, time away from training and applicable guidance from accrediting bodies.

GUIDELINES:

A. General, Medical and Other Benefits

1. The Family Medicine Residents are employees of MMC and have available to them the benefits that are given to all employees of MMC.
2. Residents are entitled to group medical, dental, and life insurance as offered by MMC and are eligible the first day of starting their residency program.
 - a. The resident's spouse and eligible dependents may participate in the group medical insurance program
 - b. The employee will be liable for the cost of any optional coverage
3. Residents are provided a meal stipend of \$36 per day while on duty at MMC.
4. Residents are entitled to free parking while on duty at MMC
5. Each resident will be provided a pager free of charge to use while on duty
 - a. Residents are expected to have the pager on and to answer all pages within a reasonable time period (20 minutes) during all working hours 7:00 am to 7:00 pm, and while on call, except when the resident is on an Elective Away, on vacation, leave or ill.

B. Available time away for residents includes the following:

1. At the beginning of each academic year, each resident's TEAM account will be front loaded with 290 hours in their PTO bank.
 - a. These hours are added to ensure continuity of pay for all forms of time off, including paid personal days, vacation time, illness, etc.
 - b. These hours do not accurately reflect the allotted amount of time away permitted or amount of time away remaining for a resident.
 - c. Total time away from training and any remaining balances will be tracked by the residency office due to regulatory requirements.
 - d. Hours in the PTO bank do not carry over year to year nor is the resident paid for any unused hours.

2. Paid Personal Days

- a. Residents receive 22 days of paid time away annually for personal use, including vacation, illness, and job interviews.
- b. When scheduling paid personal days away residents should remain aware of the specialty specific medical board time away requirements for board eligibility, which may limit total vacation and sick time and prohibit carryover of unused paid time off from year to year.
- c. Time away is subject to the approval of the Program Director or his/her designee.

3. Holiday Time Away

- a. Patient care coverage during holidays is an expectation of residency training. Accordingly, compensatory time is not provided for residents who work on holidays.
- b. Resident time off for holidays is subject to patient care needs. Accordingly, as scheduling permits so as to provide for patient care coverage, paid holidays are observed according to Hospital guidelines. These days currently include:
 - i. New Year's Day
 - ii. Martin Luther King Jr. Day
 - iii. President's Day
 - iv. Memorial Day
 - v. Independence Day
 - vi. Labor Day
 - vii. Thanksgiving Day
 - viii. Christmas Day

4. Time Away for Professional Development

- a. In addition to the paid personal days and holiday time away described above, five additional paid days are available to residents to attend approved professional conferences and other professional development activities. Consistent with specialty specific guidelines, these days are for use in the post graduate training year granted, and are not transferable to the subsequent training year.
- b. Examples of appropriate use of professional development time away include, but are not limited to:
 - i. Attendance at professional conferences
 - ii. Preparation/study time for medical board certification examinations for residents in their final year, with approval from the Program Director
 - iii. Required national conferences
- c. Examples of inappropriate use of professional development time away include, but are not limited to:
 - i. Job interviews
 - ii. Extra personal days off for vacation, illness or injury, etc.
- d. Please note that time away for professional development may not reduce the number of hours/days required to be spent on clinical rotations that have specific hourly requirements. Time away may not reduce night call, or interfere with scheduled patient care activities.
- e. Additional specific guidelines and the process of granting of time away for professional development are subject to specific residency program policies and/or approval of the Program Director or his/her designee

5. Time Away for Life Support Courses
 - a. In addition to time away for professional development as described above, time away may also be provided for attending life support courses. Permission to schedule time for these activities outside MMC will generally be granted only for courses not offered by MMC or due to unavoidable scheduling problems. These include the following certification and recertification life support courses:
 - i. Advanced Cardiac Life Support (ACLS)
 - ii. Neonatal Resuscitation Program (NRP)
 - iii. Pediatric Advanced Life Support (PALS)
 - iv. Advanced Life Support in Obstetrics (ALSO)
6. Responsibilities of the Resident and Residency Program Coordinator
 - a. It is the resident's responsibility to perform the following:
 - i. Submit time off requests in a timely manner per program policies.
 - ii. Attempt to make appropriate coverage arrangements including night call and continuity clinics.
 - iii. Find another resident to cover his/her Electronic Health Record (EHR) inbox and clinic mailbox during the requested time off.
 - iv. Complete/assign all open items including charts, dictation, and notes in the EHR (both clinic and inpatient).
 - b. It is the program coordinators responsibility to perform the following:
 - i. Route approved copies of time off requests to the appropriate parties involved.
 - ii. To document and track the amount of time away that a resident has available.

C. Leaves of Absence

1. There are times when residents may occasionally need to be away for longer periods of time for reasons such as parental leave, medical conditions, personal/family matters, or extended jury or military duty.
2. Leaves must be arranged in collaboration with the local Program Director or his/her designee and the MMC Human Resources Department through LOA Central
 - a. LOA Central can be accessed through EmployeeCentral or by calling **1 (855) 475-4747** Option 3
 - b. Leaves of absence will be conducted in accordance with the Hospital's policy: Human Resources A-024, Family and Medical Leave
3. Residents who may require more than the available leave time may be granted additional leave without pay, with the understanding that the date of graduation will be extended, or rotations may have to be repeated, in accordance with the policies of the American Board of Family Medicine (ABFM) and Accreditation Council for Graduate Medical Education (ACGME).

D. ACGME and Specialty Medical Board Requirements

1. Please note that ACGME and Specialty Medical Board requirements for time away apply to emergency leave as well as to leave planned in advance, and may extend the resident's training in the program or adversely affect Board eligibility

2. ACGME Institutional Requirements, Section IV.H. - Vacation and Leaves of Absence

- a. *The Sponsoring Institution must have a policy for vacation and leaves of absence, consistent with applicable laws. The policy must:*
- b. *Provide residents/fellows with a minimum of six weeks of approved medical, parental, and caregiver leave(s) of absence for qualifying reasons that are consistent with applicable laws at least once and at any time during an ACGME-accredited program, starting the day the resident/fellow is required to report.*
- c. *Provide residents/fellows with at least the equivalent of 100 percent of their salary for the first six weeks of the first approved medical, parental, or caregiver leave(s) of absence taken.*
- d. *Provide residents/fellows with a minimum of 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.*
- e. *Ensure the continuation of health and disability insurance benefits for residents/fellows and their eligible dependents during any approved medical, parental, or caregiver leave(s) of absence.*
- f. *Describe the process for submitting and approving requests for leaves of absence.*
- g. *Be available for review by residents/fellows at all times; and*
- h. *Ensure that each of its ACGME-accredited programs provides its residents/fellows with accurate information regarding the impact of an extended leave of absence upon the criteria for satisfactory completion of the program and upon a resident's/fellow's eligibility to participate in examinations by the relevant certifying board(s).*

3. American Board of Family Medicine (ABFM) - Family Leave Policy

- a. *ABFM will allow up to twelve (12) weeks away from the training in a given academic year without requiring extension of training, as long as the Program Director and Clinical Competency Committee agree that the resident is ready for advancement to the next level and on track to meeting competencies required for autonomous practice.*
 - i. *These 12 weeks can include up to eight (8) weeks attributable to Family Leave, and up to four (4) weeks or 30 days of Other Leave, as allowed by the program.*
 - ii. *The resident must still have at least 40 weeks of continuity experience in the year in which they take Family Leave.*
- b. *A resident may take up to a maximum of 20 weeks away from training over three years of residency without requiring a training extension.*
 - i. *Generally speaking, 9-12 weeks (3-4 weeks per year) of this leave will be from institutional allowances for time off that applies to all residents.*
- c. *If a resident's leave exceeds either 12 weeks away within a given academic year, and/or 20 weeks total across three years of training, extension of the resident's residency will be necessary to cover the duration of time they were away from the program in excess of 20 weeks.*

- d. Family Leave refers to a Leave of Absence from the residency program to support residents during the following:
 - i. The birth and care of a newborn, adopted, or foster child, including both birth and non-birth parents of a newborn.
 - ii. The care of a family member with a serious health condition, including end of life care.
 - iii. A resident's own serious health condition requiring prolonged evaluation and treatment.
- e. Other Leave refers to time off allotted by programs and their sponsoring institutions for vacation, sick leave, educational leave, or other paid time off.
- f. Residency training requirements for Board certification Eligibility:
 - i. Residents are required to spend their final two years of training in the same residency program's teaching program in order to provide sustained continuity of care to a panel of patients.
 - ii. Each year of residency must include a minimum of 40 weeks of continuity clinic experience.
 - iii. Residents are required to complete a minimum of 1,000 hours of "Caring for one's panel" in the continuity practice site.

REFERENCES:

CommonSpirit Administrative Policies: Human Resources A-024, Family and Medical Leave

The American Board of Family Medicine - Family Leave Policy

Accreditation Council for Graduate Medical Education - Institutional Requirements, Section IV.H. Vacation and Leaves of Absence

APPROVERS and DATE APPROVED:

Policy Designee Reviewer	Designated Institutional Official / GMEC
Summary/Reason for review	Triennial Review
APPROVERS/COMMITTEES	APPROVED DATE
Process Owner	
A-Team	
Governing Board	
Distribution	

EFFECTIVE DATE: (Org. 5/10)

REVIEWED/*REVISED DATES: 5/07, 2/13, 4/13, *3/17, 1/21