

**MARSHALL UNIVERSITY
JOAN C. EDWARDS SCHOOL OF MEDICINE
GRADUATE MEDICAL EDUCATION**

**POLICY ON COMPENSATED AND UNCOMPENSATED LEAVE,
INCLUDING MEDICAL, PARENTAL, AND CAREGIVER LEAVE**

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SECTION 1. STATEMENT AND SCOPE OF POLICY

This policy is to comply with the Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirement that the Sponsoring Institution has a policy for annual and sick leaves of absence, including provisions for medical, parental, and caregiver leave that are consistent with applicable laws.

This policy sets overall general requirements to frame program-specific policy on annual, sick, medical, parental, and caregiver leave requirements. Each program policy must provide trainees with the impact of an extended leave of absence upon the 1) criteria for satisfactory completion of the program and 2) upon a trainee's eligibility to participate in examinations by the relevant certifying boards.

SECTION 2. TYPES OF LEAVE

- 2.1. Each training program must have a written policy regarding
 - 2.1.1. Annual Leave
 - 2.1.2. Sick Leave
 - 2.1.3. Bereavement (Funeral) Leave
 - 2.1.3 Medical, parental, or caregiver leave(s) of absence
 - 2.1.4. Military Leave
 - 2.1.5. Educational Leave and Educational Funds
 - 2.1.6. Uncompensated Leave of Absence
- 2.2. The program policy must comply with this Institutional Policy, the recommendations of specialty organization, ACGME Institutional Requirements, and any applicable individual ACGME Residency Review Committee (RRC) program requirements.
- 2.3. Program policies must be readily available for trainee review. Programs may post policies on New Innovations, program websites, etc., and/or provide hard copies to comply with this availability requirement.

- 2.4. Neither annual nor sick leave may be advanced from one training year to another in the event the trainee leave requests exceed the current amount of leave remaining.

SECTION 3. ANNUAL LEAVE

- 3.1. Each trainee is provided with three weeks, non-accrual annual leave within the contract year.
- 3.2. Request for annual leave time is to be submitted to and approved in advance by the Program Director.
- 3.3. Annual leave does not accumulate from year to year as the trainee advances through the program, nor can it be advanced from one year to another to compensate for leave requests exceeding the current annual time accumulated.
- 3.4. There is no remuneration for unused annual leave.
- 3.5. Trainees shall not be compensated for unused annual leave balances upon voluntary or involuntary removal from the program, either during a contract period or at the end of the contract period.

SECTION 4. SICK LEAVE

- 4.1. Trainees accumulate 15 days of sick leave annually (1.25 days each month).
- 4.2. Sick leave does carry over from one contract year to the next and will continue to accrue until the trainee completes or leaves the program.
- 4.3. There is no remuneration for unused accumulated sick leave.
- 4.4. Trainees shall not be compensated for unused sick leave balances upon voluntary or involuntary removal from the program, either during a contract period or at the end of the contract period.
- 4.5. Trainees should immediately contact the Program Director, Program Coordinator, or the attending physician if they are unable to report to work because of illness.
- 4.6. Sick Leave cannot be advanced from one year to another to compensate for leave requests exceeding the current annual time accumulated.

SECTION 5. BEREAVEMENT (FUNERAL) LEAVE

- 5.1. Upon approval by the Program Director, trainees are eligible for bereavement leave for travel, funeral, and bereavement, upon the death of a trainee's immediate family or certain other relatives upon approval of the Program Director.
- 5.2. A biological or legal relationship is not necessary to be granted funeral leave.
- 5.3. In cases requiring extensive travel time (greater than one hundred miles each way), additional days off with pay may be granted - not to exceed seven (7) working days. Trainees may use accrued annual or sick leave if additional days are needed.
- 5.4. When bereavement leave is taken, the impact of the leave upon specialty board requirements and on-time completion requirements must be discussed with the trainee.
- 5.5. Bereavement leave requests must be submitted and approved through appropriate program channels in advance of the leave to the degree possible, given each situation necessitating funeral leave use.

SECTION 6. MEDICAL, PARENTAL, AND CAREGIVER LEAVE

- 6.1. In accordance with the ACGME Institutional Requirements, all trainees will have a one-time allotment of 30 days (6 work weeks) of paid leave per training program for an approved, qualified Medical/ Parental/ Caregiver Leave (MPCL) qualifying event.
- 6.2. This leave time, referred to as "Medical/Parental/Caregiver Leave of Absence," is:
 - 6.2.1. In addition to other paid annual or sick leave;
 - 6.2.2. Available to any trainee with an approved, qualified MPCL event at anytime during a training program;
 - 6.2.3. Available the first day the resident/fellow is required to report for training for the program;
 - 6.2.4. Available once - and only once - per person per training program; and,
 - 6.2.5. May be taken intermittently, in blocks, or continuously.
- 6.5. During Medical/Parental/Caregiver Leave, the status of a trainee's benefits are as follows:
 - 6.5.1. The Sponsoring Institution shall continue the trainee's salary and benefits, of the trainee and their eligible dependents, at the same level and conditions of coverage as if the trainee has been in the residency/fellowship continuously for the leave time.
 - 6.5.2. The Sponsoring Institution shall continue the trainee's health plan, as well as of their eligible dependents, at the same level and conditions of coverage as if the trainee had been in residency/fellowship continuously for the duration of the leave.

- 6.5.3. The Sponsoring Institution shall continue to cover the cost of the trainee's credit portion toward the trainee's health insurance plan as well as their eligible dependents.
- 6.5.4. The Sponsoring Institution shall continue to cover the trainee's basic life insurance cost.
- 6.5.5. The Sponsoring Institution shall continue to cover the cost of the trainee's enrollment in the long-term disability plan.
- 6.5.6 The Sponsoring Institution will shall 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.

SECTION 7. QUALIFYING EVENTS

- 7.1. A one-time paid Medical, Parental, and Caregiver Leave of up to six weeks will be provided to trainees with an approved, qualified event. For the purpose of this policy, a qualifying event will include a serious health condition involving the trainee or a qualified family member for any or all of the following reasons:
 - 7.1.1. The birth of a child of the trainee and in order to care for that child;
 - 7.1.2. The placement of a child with the trainee for adoption or foster care;
 - 7.1.3. To care for a spouse, sponsored adult dependent, child, sponsored child dependent, or parent of the trainee who has a serious health condition;
 - 7.1.4. A serious health condition that makes the trainee unable to perform the functions and responsibilities associated with a training program; or
 - 7.1.5. A qualifying exigency associated with the trainee's spouse, sponsored adult dependent, son, daughter, sponsored child dependent, or parent is a military member on covered active duty in the Armed Forces.
 - 7.1.6. To care for a covered military service member with a serious injury or illness if the eligible trainee is the service member's spouse, sponsored adult dependent, son, daughter, sponsored child dependent, parent, or next of kin.
- 7.2. All serious health conditions must be verified by an authorized treating health care provider pertaining to an illness, injury, impairment, or physical or mental condition and involves one or more of the following:
 - 7.2.1. Inpatient care in a hospital, hospice, or residential medical facility.
 - 7.2.2. Continuing treatment by a health care provider that includes any one or more of the following:
 - 7.2.2.a. A period of incapacity for more than three consecutive calendar days and treatment that involves:
 - Treatment two or more times by a health care provider within the first 30 days, the first visit occurring within the first seven days; or,
 - Treatment by a health care provider on at least one occasion, which results in a regiment of continuing treatment.
 - 7.2.3. A period of incapacity due to pregnancy or for prenatal care.

- 7.2.4. A period of incapacity or treatment due to a chronic serious health condition, which:
 - Requires periodic visits (defined as at least twice a year) for treatment by a healthcare provider
 - Continues over an extended period, and
 - May cause episodic rather than continuing periods of incapacity.
 - 7.2.5. A period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective.
 - 7.2.6. A period of absence to receive multiple treatments by a healthcare provider or by the provider of healthcare services under orders of or on referral by a healthcare provider, either for restorative surgery after an accident or injury or for a condition that would likely result in a period of incapacity for more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer, severe arthritis or kidney disease.
- 7.3. This policy defines a health care provider as the following licensed practitioners authorized by the state in which they practice:
- 7.3.1. Doctor of medicine or osteopathy
 - 7.3.2. Podiatrist
 - 7.3.3. Dentist
 - 7.3.4. Clinical psychologist
 - 7.3.5. Optometrist
 - 7.3.6. Chiropractor (limited to treatment consisting of manual manipulation of the spine to correct a subluxation as demonstrated by X-ray to exist)
 - 7.3.7. Nurse practitioner, nurse midwife, or physician assistant
 - 7.3.8. Christian Scientist practitioner
 - 7.3.9. Clinical social worker, or
 - 7.3.10. Other persons determined by the United States Secretary of Labor to be capable of providing health care services

SECTION 8 REQUEST FOR ADDITIONAL MEDICAL/PARENTAL/CAREGIVER LEAVE

- 8.1. In the event the trainee should request additional leave after the initial period of the six-week Medical/Parental/Caregiver Leave, any accrued Annual and/or Sick Leave time will be applied to subsequently approved MPCL unless the trainee requests that it be used later in the contract year.
- 8.2. Should the trainee request later usage of accumulated Annual and/or Sick Leave or if all accrued leave time has been exhausted, any subsequent time off after the MPC Leave will result in leave without pay status.

SECTION 9. MEDICAL/PARENTAL/CAREGIVER LEAVE LONGER THAN 12 WEEKS

- 9.1. The Sponsoring Institution recognizes that a trainee may face an extenuating circumstance that involves their own or a qualified family member's serious health condition that will last longer than 12 weeks. It is also in the interest of the trainee and their GME training program to support the trainee's successful completion of the training program, even if an extension of training is required.
- 9.2. Should a trainee request to continue leave past twelve weeks, the Program Director shall consult with the DIO regarding whether supporting additional leave time is feasible for the training program. In most cases, specialty board requirements necessitate the trainee extending their training time for part or all the leave time taken to ensure successful completion of the program/attainment of eligibility for specialty board certification. The Program Director and DIO must also take into consideration the following:
 - 9.2.1. Whether continuation of leave might result in an adverse educational impact on other trainees in the program (e.g., necessitate an overhaul of the call schedule or rotation structure)
 - 9.2.2. Whether the additional leave will result in decreased clinical case exposure across the program) during or after the extended leave.
- 9.3. The Program Director and DIO will jointly counsel the trainee regarding the risks and benefits of continued leave.
- 9.4. Should the Program Director and DIO determine that the program is unable to support additional leave past 12 weeks, the Program Director and DIO will provide the trainee with written documentation outlining the following:
 - 9.4.1. The concerns regarding continued absence from the program;
 - 9.4.2. The date the program expects the trainee to return to training; and,
 - 9.4.3. The consequences of the trainee's failure to return, including but not limited to:
 - 9.4.3.a. The risk of nonrenewal of contract, or,
 - 9.4.3.b. Immediate termination of the contract.
- 9.5. Should the trainee decline to return to the program by the specified date, the Program Director and DIO will make every attempt to counsel and support the trainee to allow the continuation of training.
- 9.6. If the trainee is unable to, or declines to return to training, the Program Director and DIO will:
 - 9.6.1. Offer the trainee the opportunity to resign;
 - 9.6.2. Proceed with nonrenewal of the Notice of Appointment; or,
 - 9.6.3. Immediately terminate the trainee.
- 9.7. In situations where a trainee, the Program Director, and the DIO mutually agree on a resignation at the end of the contract year, the Office of Graduate Medical Education will continue to financially support the trainee in a "no pay" status (after leave is exhausted). The "no pay" status will allow the Sponsoring Institution to support the trainee's health, life, etc., benefits through the end of

the contract year. No annual leave or sick leave will accrue during the “no pay” status.

SECTION 10. MEDICAL/PARENTAL/CAREGIVER LEAVE REQUEST PROCESS

10.1 In collaboration with the training programs, the Marshall University School of Medicine Graduate Medical Education Office will oversee all requests associated with the Medical/Parental/Caregiver (MPC) Leave. As such, the following process has been defined:

Step 1. Trainees must contact their Program Director and Program Coordinator to initiate a request for MPC Leave as soon as the trainee becomes aware of a qualifying event as defined in Section 9. All leave requests must be submitted in advance to be approved prior to the situation necessitating leave.

Step 2. In collaboration with the Program Director, the Program Coordinator will notify the GME Director, the Office of Graduate Medical Education Office, or the Director’s designee, of the pending Medical/Parental/Caregiver Leave request. The Program must also provide a record of the trainee’s unused MPC Leave, annual and sick leave to the Graduate Medical Education office on the GME Medical/Parental/Caregiver Leave Request form. The GME Director, or designee, will provide the trainee and/or program with guidance for the completion of all required Medical/Parental/Caregiver Leave forms and required documentation.

Step 3. MPC Leave form submissions will be reviewed by the GME Director or designee and, when necessary, by the DIO to ensure adequate documentation to support the requested leave.

Step 4. Prior to approval, trainees requesting MPC Leave must meet with the Program Director, Program Coordinator and GME Director, or designee, to review GME leave policies, ACGME leave policies (if applicable), individual ABMS board leave requirements, number of paid leave days available prior to and what will be accumulated during MPC Leave, and the potential impact of the leave on training duration. If the trainee cannot meet prior to the first day of leave, the GME Director and the training program will work with the trainee to ensure policies are reviewed and documentation are submitted within a reasonable and appropriate timeframe.

Step 5. The GME Director will approve or deny the MPC leave request upon consultation with the DIO.

- 10.2. Should the health care provider documentation be inconsistent with the MPC Leave request (e.g., continuous MPC Leave has been requested whereas documentation supports only intermittent MPC Leave), the Graduate Medical Education office will request that trainee resubmit corrected forms and documentation.
- 10.3. Should the duration of MPC Leave extend past the end date on the original documentation, the trainee may be asked to resubmit MPC Leave paperwork to ensure documentation remains and reflects current events.

SECTION 11 MILITARY LEAVE

- 11.1. Trainees who are members of the National Guard or any Reserve Component of the Armed Forces of the United States are entitled to and will receive a leave of absence when called to active duty, required active duty, or inactive duty training.
- 11.2. The duration of paid leave is recommended to be comprised of annual and/or sick leave, which may be up to four (4) calendar weeks per year.
- 11.3. Trainees are required to submit an order or statement in writing from the appropriate military officer in support of the request for such military leave to their department and the Office of Graduate Medical Education.
- 11.4. Additional unpaid leave may be granted as authorized under provisions of federal/state law and as provided by Section 9 below.
- 11.5. The terms of this policy may not supersede provisions of any Selective Training and Service Act or other such act whereby the President of the United States may order into active duty the National Guard and the reserve components of the armed forces of the federal government.

SECTION 12. EDUCATIONAL LEAVE / EDUCATIONAL ALLOWANCE

- 12.1. Each Program must have a written policy regarding Educational Leave and Educational Funds available for its trainees.
- 12.2. The Program policy must be in compliance with this Institutional Policy and the individual Residency Review Committee (RRC) program requirement.
- 12.3. Trainees are to be granted a maximum of five (5) days per year to attend approved professional meetings, conferences, or post-graduate courses.

- 124. Approval to use the Educational Leave must be obtained in writing and in advance by the Program Director.
- 125. Approval of the leave will be at the discretion of the Program Director. The Department Chair shall issue the final decision.
- 126. Any Educational Leave not used by June 30 of the contract year will expire and is not accrued.
- 127. Educational Leave is granted in addition to the three (3) weeks of non-accrued annual leave.
- 128. The School of Medicine shall provide each trainee with the following annual allowance to defray costs for attending professional meetings or courses.
 - 12.8.1. PGY 1 will receive the sum of five hundred dollars (\$500.00)
 - 12.8.2. PGY 2 and above will receive the sum of one thousand dollars (\$1,000.00)
- 129. Should the trainee opt not to use the allowance to attend professional meetings or conferences, the funds may be used to purchase medical textbooks or applications, medical equipment, tablets/computers, or other items **pre-approved** by the Program Director.
 - 12.9.1. Each Program shall determine and set in policy the stipulations for using the Educational Allowance for non-conference attending related items and the process for acquiring those items, i.e., departmental purchase or reimbursement upon presenting a receipt.
 - 12.9.2. The decision for approving such items shall be at the discretion of the Program Director, with the final decision being issued by the Department Chair.
- 1210. Educational Allowance Funds cannot be accrued nor transferred to another trainee. Any unencumbered balance as of June 30 of the contract year will expire and revert to the Sponsoring Institution.

SECTION 13. UNCOMPENSATED LEAVE OF ABSENCE

- 13.1. An unpaid leave of absence may be granted under special circumstances by the Program Director.
- 13.2. Trainees may be required to "make up" the time missed in accordance with the Residency/Fellowship Program and Board Eligibility requirements.

- 13.3. Terms of reinstatement after a Leave of Absence will be developed, written, and approved by the Program Director and the Designated Institutional Official before the trainee is permitted to return to the program.
- 13.4. Health insurance coverage will NOT remain in effect during the unpaid leave. If a trainee wishes to remain covered under health insurance, the trainee must pay a monthly premium.
- 13.5. Liability insurance will not be in effect during a leave of unpaid absence.
- 13.6. Each residency/fellowship program must submit the appropriate paperwork to the Graduate Medical Education Office to temporarily remove the trainee from the payroll and to extend the trainee's Notice of Appointment.
- 13.7. Trainees must meet with a payroll representative to complete the necessary paperwork.

SECTION 14. FINAL DECISION

The decision of the Designated Institutional Official regarding the issuance of any leave is final and may not be appealed.