

Title	
ABSENCES FROM RESIDENCY TRAINING	
Portfolio	Version
Physician Services – Medical Education Office	26 Apr 2018

PURPOSE

This document is intended to provide an understanding of the processes and considerations for navigating absences from residency training. Recognizing that leaves are often unique, this document provides a broad overview and references to the key principles in facilitating leaves for Residents.

For the purpose of this document, Residents are trainees registered with the Postgraduate Medical Education Office, members of the Professional Association of Resident Physicians of Alberta (PARA), and workers (in most cases recipients of a salary and benefits) of Alberta Health Services (AHS). As such they are bound by:

1. University of Calgary policies and procedures, which also includes considerations regarding accreditation and the fulfillment of their training curriculum;
2. AHS policies and procedures; and
3. the terms and conditions of the Resident Physician Agreement (also known as the PARA Contract) as negotiated by AHS, PARA, the University of Alberta, and the University of Calgary.

ROLES AND RESPONSIBILITIES

- The **Medical Education Office (MEO)**, Alberta Health Services has an obligation under the restricted grant provided by Alberta Health to ensure Resident Physicians are appropriately compensated per the PARA Contract. The MOE is also responsible for facilitating Human Resources transactions and clinical access.
- The **Postgraduate Medical Education (PGME) Office, University of Calgary** is a participant in the maintenance of the Resident Physician placements within AHS. The Associate Dean, PGME has the authority of to review and approve or deny leave requests in the context of the academic requirements.
- **Residents** are responsible for providing advanced written notice or request for leave and **must include necessary documentation** (e.g. medical notes) when required. Residents are not to exercise any clinical access granted for their residency (e.g. Netcare or Sunrise Clinical Manager) while on extended leaves.
 - *NOTE: if the Resident is continuing research or other roles that require access while on leave, the provisioning of the access shall not be through the channels of residency.*
 Prior to returning from extended leave, Residents are to provide confirmation to their Program, the PGME, and Medical Affairs.
- The **Residency Training Programs** shall facilitate the leave process, track all Resident absences and allowances, and provide reporting required by the PGME and Medical Affairs. The **Residency Training Program** shall be first reviewer and approver of leave requests and will facilitate submission when necessary to PGME and Medical Affairs.

Note:

- Leaves of absence will not be granted for the purpose of earning income. Salary continuation during the leave is determined by the Resident Physician Agreement.
- Please refer to the PGME Leave of Absence Policy for additional requirements regarding performance, extension of training, and waiver of training:
<http://cumming.ucalgary.ca/pgme/files/pgme/uofcpgmeloapprovedapril-2008revisionmay2009.pdf>

ABSENCE PROVISIONS OF THE RESIDENT PHYSICIAN AGREEMENT

The following table provides a summary of the eligible absences for Residents. The full context of each article of the Resident Physician Agreement must be taken into account for the process and requirements of each type of absence. For the purposes of this document the Appointment Year refers to the time period each Resident spends at each postgraduate level.

Article	Type	General Provisions
8	PARA Business	Time off with pay shall be granted to represent PARA. Residents must continue to meet the expectations of their residency and the time off shall not seriously interfere with their training requirements.
11	Maternity	17 weeks may commence up to 8 weeks prior to the predicted date of birth. Eligible Residents receive a top-up to 90% of salary inclusive of employment insurance which is typically paid as a lump sum at the end of the 17 weeks. Typically following the maternity period, Residents will commence an unpaid Parental Leave. Residents may combine Sick Leave the period before and immediately following the maternity leave.
11	Parental	Up to 52 weeks (<i>including any time taken as maternity</i>). In the event of the birth or adoption of a child, where a Resident has not been granted maternity leave, a Resident shall be granted 2 weeks paid leave.
12	Educational – short term	Up to 14 days with pay for educational events and conferences relevant to the residency at the approval of the Program Director.
12	Educational – long term	Unpaid leave for educational activities not contributing to the residency or for periods longer than 14 days at the approval of the Program Director. Please also refer to policies and processes regarding resident travel.
13	Exam Leave – Canadian	Up to 5 days with pay for preparation, travel, and to write each component of the Canadian qualifying and licensing exams. Must be requested from the Program Director 28 days in advance.
13	Exam Leave – USMLE	Up to 10 days without pay for USMLE on request from the Program Director 28 days in advance.
14	Special Leave	Up to 5 days paid leave within each Appointment Year for reasonable, unanticipated circumstances (e.g. illness of an immediate family member).
15	Compassionate	Up to 5 days of paid leave for compassionate reasons. In extenuating circumstances the Associate Dean may approve up to 5 additional paid days.
16	Bereavement	Up to 5 days of paid leave for the death of a relative. In extenuating circumstances the Associate Dean may approve up to 5 additional paid days.
17	Sick Leave – Short Term	Up to 90 days paid leave within each Appointment Year for illness or non-occupational injury. Any absences greater than 1 week are to be reported to the MEO and accompanied by a medical note and medical clearance is also required to return from leave.
17	Sick Leave – Long Term	After exhausting 90 days paid sick leave, leave becomes unpaid and the Resident should contact PARA for the Long Term Disability benefit (Adium).
18	Unpaid General Leave	Subject to the approval by the Program Director and Associate Dean.
20	Vacation	20 days per Appointment Year (prorated in circumstances where the Resident fails to complete the Appointment Year).
21	Named Holidays	9 days per year excluding Christmas, New Year's Day, and Boxing Day.
21.03	Winter Break	6 consecutive days off with pay in either the period spanning Christmas and Boxing Day, the period spanning New Year's Day, or some other period to recognize an alternate religious holiday. The Program will determine the specific dates depending on clinical service needs.
22	Flex Days	3 days with pay within each Appointment Year.

NOTE: under AHS's group benefits plan with Alberta Blue Cross, Residents are benefits eligible for the first 12 months of unpaid leave. The benefits costing process provides Residents with the opportunity to purchase a continuance of their extended medical and dental benefits for this period, but it cannot be extended.

Administrative Leave

In the event of a critical or workplace incident that requires the Resident to be removed from service pending an investigation or if the Training Program needs time to plan resources for a remediation or probation process, the Resident's clinical access may be suspended and the Resident Physician placed on a paid leave.

NEW LEGISLATION

Effective January 1, 2018, the Government of Alberta introduced new Employment Standards Code provisions that impact how leaves of absence provisions in the Resident Physician Agreement are administered. The changes are summarized below:

1. **Maternity Leave** – No change as the Agreement already exceeds the legislated provisions. However, the legislation clarifies that a pregnant Resident Physician whose pregnancy ends other than as a result of a live birth within sixteen (16) weeks of the estimated due date is entitled to maternity leave.
2. **Parental Leave** – No change to the two weeks of paid parental leave. However, the unpaid portion of parental leave can now be for a period of up to 61 weeks for birth mothers and 62 weeks for non-birth parents and adoptive parents.
3. **Other Agreement Leaves of Absence** - Educational Leave, Exam Leave, Special Leave, General Compassionate Leave, Bereavement Leave, and Sick Leave are not affected by the new legislation.
4. **New Unpaid Leaves of Absence** – The legislation provides for new, unpaid leaves of absence which AHS and the Universities will now be required to approve (subject to the provision of verifying documentation). These new, unpaid leaves of absence are:
 - **Compassionate/Terminal Care Leave** for up to 27 weeks to care for a qualified relative with a serious medical condition with a significant risk of death within twenty six (26) weeks from the commencement of the leave.
 - **Critical Illness of a Child Leave** – A parent of a critically ill or injured child shall be entitled to up to 36 weeks to care for their critically ill child.
 - **Disappearance of a Child Leave** – A parent of a child who has disappeared where it is probable that the child disappeared as a result of a crime, shall be entitled to a leave of absence for a period of up to 52 weeks.
 - **Death of a Child Leave** – A parent of a child who has died where it is probable that the child died as a result of a crime, shall be entitled to a leave of absence for a period of up to 104 weeks.
 - **Domestic Violence Leave** – A Resident who has been subjected to domestic violence may require time off from work to address the situation and shall be entitled to leave of absence for a period of up to 10 days in a calendar year.
 - **Citizenship Ceremony Leave** of ½ day to attend a citizenship ceremony to receive a certificate of citizenship, as provided for under the Citizenship Act (Canada).

Note:

- The requirement to grant a leave of absence for the legislated time period means that the Resident's residency spot will be retained for them upon return from leave. As with any absence, the length of the residency may need to be extended to ensure that residency requirements are met.
- While, these leaves are required to be approved, the Program Director may request written documentation to demonstrate the need for the leave.
- These leaves are without pay. For leaves of greater than 30 days, arrangements can be made to prepay benefits.

PAYROLL AND ACCOUNTING

Unlike other employees, Residents don't accrue leave allowances/banks within the payroll system (ePeople). Each Residency Training Program is responsible for Resident schedules which includes tracking when, why, and how much each Resident is absent from their program.

Approval and Reporting

Vacation, winter break, PARA business, short-term educational leave, named holidays, flex days, and other episodic absences (e.g. 1-2 sick days) typically do not affect a resident's progression within their residency training program and are accounted within the Residency Training Program. All other leaves must be reported to both the PGME and MEO as they may affect clinical access, salaries and benefits, resident progression, and may require additional documentation and approval.

- Where the leave affects the functions of another program/service the Program Directors shall be collaborative.

Carry Forward and Payout

Vacation is the only type of leave for which an unused portion may be eligible for carry forward or payout. Yet, vacation highly important to maintain physical, mental and emotional wellbeing and carry forward and payout requests are strictly scrutinized to determine the issues present in the program that prohibited the vacation from being used within the Appointment Year in which it was earned. Only unused vacation due to service commitments is eligible for carry forward and payout.

- Application for vacation must be made 8 weeks in advance and approval/denial shall be provided by the Program Director at least 2 weeks in advance before the planned vacation.
- Vacation banks are tracked by the Residency Training Program and all reasonable efforts to schedule and accommodate vacation requests should be made.
- If a mutually agreed time for the resident to taken vacation cannot be identified, the Program Director shall schedule the vacation period.
- Subject to the Resident Physician Agreement, vacation carry forward must be approved by the Program Director and Associate Dean. Vacation payout must be approved by the Associate Dean and the Medical Education Office. Please refer to the PGME Resident Vacation Policy for specific process requirements on carry forward and payout (<https://wcm.ucalgary.ca/pgme/files/pgme/resident-vacation.pdf>).

PROCESS

The following process applies to all unpaid absences (maternity, parental, long-term educational, exam leave for the USMLE, long term disability, and general unpaid leave) and absences that require additional documentation or approval of the Associate Dean or MEO (special leave, compassionate, bereavement, sick leave exceeding 5 days). Other absences (Vacation, winter break, PARA business, short-term educational leave, named holidays, and flex days, and other episodic absences) are reported and tracked through the Residency Training Program (e.g. One45) and not detailed in this process.

- An unpaid leave of more than 2 week's duration may result in extension of the residency program at the discretion of the Program Director (PD) and Residency Program Committee (RPC) and accreditation standards.
- Any leave of more than 1 year's duration may require that the Resident be reassessed for training level at re-entry at the discretion of the PD and RPC.
- Residents are benefits eligible (though are responsible for the payment of the extended health benefit premiums) for the first year of unpaid leave.
- Any extended leave of greater than 2 years must be reviewed jointly by the PD, the RPC, the Associate Dean, and the Medical Education Office to assess ongoing availability of training and/or termination of the residency position.
- When the Resident is taking unpaid leave or maternity/parental leave, upon notification, the MEO will prepare the documentation required by AHS Human Resources in order to trigger the benefits costing and record of employment. If the Resident does not receive this information from Human Resources within 1 week of commencing their leave, they are asked to contact the MEO directly.

1. REQUEST/NOTIFICATION must be made by the Resident in writing to their PD at least 4 weeks in advance for many types of leave.
<http://wcm.ucalgary.ca/pgme/files/pgme/form-Resident-leave-request-calgary-zone.pdf>
2. ACKNOWLEDGEMENT/APPROVAL is provided to the Resident by their PD as early as possible with copy to the PGME and MEO.
 - All requests for compassionate or bereavement leave exceeding 5 days, and all general unpaid leaves are subject to approval by the Associate Dean with consultation of the MEO.
 - Absence notices for sick leave exceeding 5 days must be accompanied with a medical note. Medical clearance will also be required for the Resident to return from an extended sick leave.
 - The Residency Training Program must track all illness related absences. If it appears the Resident may exhaust their paid sick allowance (90 days per Appointment Year) they should contact PARA to initiate a Long Term Disability claim.

Application for LTD Benefits (ADIUM Insurance Services Inc.)

Residents are not automatically eligible for Long Term Disability and must apply through a claims process. Only ADIUM can determine eligibility, so all Residents are recommended to contact PARA to initiate and be guided through the claims process.

<http://para-ab.ca/life-and-disability-insurance/>

The Resident must have accumulated 90 sick days over a 6 month period, but there is no harm in beginning a claim even if it's never finalized; so claims should be initiated as soon as the Resident believes they may need it. As well, the Resident should be aware that the details of any claim are kept confidential – AHS, PGME, and PARA are only informed that a claim is being made.

3. DURING THE ABSENCE
During extended leaves, it's important to maintain regular dialogue between the Resident and the Residency Training Program. Any time an absence needs to be extended or there is a change to the nature or circumstances for the absence, notice shall be submitted to the Residency Training Program immediately and are subject to the process described in steps 1 and 2.
4. RETURNING FROM AN ABSENCE
It's important for a formal return date to be determined in advance by the Resident Physician, their treating physician (in the case of sick leave), and the Residency Training Program (in order to organize schedules, assessment, and any accommodation provisions including part time training). Once the return date has been confirmed, the Residency Training Program shall notify the PGME and MEO.
 - If the leave was due to illness, a medical note providing clearance to return to work must be submitted to the PGME and MEO.

Reactivating Clinical Access After Extended Absences

Once a return date has been confirmed, the MEO will distribute a Recognition Memo.

- SCM, Impax, eCritical, and Card Access should be reactivated automatically with the Recognition Memo, but if escalation is required the Resident may contact the IT Access Office (310-3111 option 1) and Card Access Office (Card.Access@ahs.ca) directly.
- As parking is not administered by the MEO, the Resident will need to contact the Parking Office directly. Similarly, some clinical applications unique to programs/services may need to be restored by the Residency Training Program (e.g. Aria).
- If experiencing difficulties with AHS network access, Alberta Netcare Portal, or remote access please email CAL.MedicalEducationOffice@ahs.ca.

To request any workplace accommodations (including medical) based upon restricted grounds as per Human Rights legislation the Resident should complete the Employee Request for Accommodation form <http://insite.albertahealthservices.ca/frm-19566.pdf>.

NOTE: Residents employed by AHS should pay close attention to pay advices while on leave, and for a brief period after returning. On occasion, errors can occur with the payroll process. This can cause situations of overpayment or underpayment. Any errors in pay should be reported to Medical Affairs as soon as possible.

CONTACTS

Professional Association of Resident Physicians of Alberta (PARA)

para@para-ab.ca

Edmonton: (780) 432-1749

Calgary: (403) 236-4841

Toll Free: 1-877-375-PARA (7272)

Postgraduate Medical Education Office, University of Calgary

pgmeregistration@ucalgary.ca

403-220-7368

Medical Education Office, Alberta Health Services

CAL.MedicalEducationOffice@albertahealthservices.ca

403-943-1245

Human Resources Contact Centre, Alberta Health Services

hrcontactcentre@albertahealthservices.ca

1-877-511-4455