

# VCU Health System

## Graduate Medical Education Guideline

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### HOUSESTAFF FAMILY AND MEDICAL LEAVE GUIDELINES

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#### I. Guidelines

VCUHS Graduate Medical Education programs provide eligible house officers with up to 12 weeks (480 hours) of paid or unpaid family and medical leave because of the birth of a child or the placement of a child with the house officer for adoption or foster care; because the house officer is needed to care for a family member (spouse, child, parent) with a serious health condition; or because the house officer's own serious health condition makes him/her unable to do his/her job. This is applicable to all eligible housestaff regardless of funding source. These guidelines supersede any previous maternity leave policy.

Graduate Medical Education emphasizes continuous training with progressive increases in skills and responsibilities. Therefore, house officers must be aware that frequent and/or prolonged absences may adversely affect their educational experiences and those of their fellow house staff. These absences may also impose additional work obligations on their colleagues. The cumulative effect of the absences of many house staff from a program may also impact the accreditation status of that program.

Graduate Medical Education programs follow the VCUHS Family Medical Leave Act policy #2176.00 with these additional caveats. For the purpose of this policy, the house officer's supervisor is their Program Director. The Program Director is responsible for ensuring that any leave granted house officers is in compliance with the rules and regulations of their specialty certifying board and the appropriate Residency Review Committee (RRC). Therefore, certifying board and RRC rules and regulations may supersede this policy. The Program Director is responsible for assessing the impact a house officer's leave has on the education of the house officer and, if necessary, devising an appropriate make-up plan to address educational requirements lost as a result. The Program Director is responsible for developing plans to insure that the effect of leaves taken by one or more house staff does not negatively impact the education of other house staff. These absences must also be assessed regarding their impact on ACGME regulations regarding duty hours. Finally, the Program Director is responsible for notifying the appropriate agencies should prolonged leave necessitate additional training

time for the house officer or a change in the resident complement during this make-up period. House officers have the right to appeal to the Associate Dean and then, if not satisfied, to the Executive Committee of the Graduate Medical Education decisions made by the Program Director regarding implementation of this policy.

It is also recognized that residents do not have PTO but rather 3 weeks of vacation and 30 calendar days of sick leave for each year of post-graduate education. The usual post-graduate year is July 1 to June 30.

## II. Application of Guidelines

- A. Time frames: Eligible house officers may take up to 12 weeks of family and medical leave in a 365-consecutive day period which begins on the first day the person needs to use the leave. When family and medical leave is taken for the birth of a child, the leave may be taken before and/or after the birth, but is not to exceed a total of 12 weeks and must be taken within 12 months of the birth of the child. When leave is taken for the placement of a child with the house officer for adoption or foster care, it must be taken within 12 months of the date of placement.

Each House officer's FMLA request is broken into 3 parts:

1. Individual's preference
2. Employment rules concerning pay
3. Specialty Board requirements

At each step the individual making the request to use FMLA needs to decide what is best for them in their situation.

- B. Eligibility: To be eligible for guaranteed family and medical leave, a house officer must satisfy the following: 1) have been employed by the Virginia Commonwealth University Health System for at least 12 months; and 2) have worked at least 1,250 hours during the 12 month period prior to the start of the leave. (NOTE: neither the 12 months nor the required 1,250 hours have to be worked during consecutive months).

PGY-1 and newly employed house officers are **not** eligible for family and medical leave unless they were previously employed for twelve months and have worked at least 1,250 hours since becoming re-employed. PGY-1 and newly employed house officers are only eligible for sick leave (as medically dictated) up to 30 calendar days. A house officer may use any unused vacation time (up to 14 calendar days)

- C. Use of leave: House officers have the option of using paid leave, as appropriate under each particular leave policy, for all or part of the absences covered under family and medical leave. House officers are

strongly encouraged to use only vacation time and sick leave (sick leave can only be used for the period defined as medically disabling) because failure to do so might impair the timely completion of their academic program. When available, house officers are encouraged to use two of their three weeks (14 days) of vacation and 25 of their permitted 30 days of sick leave for family and medical leave. If necessary, available, and not prohibited by specialty board or RRC rules and regulations, up to one week (7 days) of vacation may be taken from the preceding post graduate year and up to 2 weeks (14 days) may be taken from the subsequent post graduate year to be utilized for family and medical leave. House officers with short term disability insurance should contact Human Resources to clarify the proper sequencing of leave in order to insure maximum coverage. If additional time is needed after vacation and sick leave are exhausted, then the house officer will be placed on leave without pay. House officers are responsible for contacting the personnel officer concerning the maintenance of their health care coverage while on leave without pay. The total amount of family and medical leave should not exceed 12 weeks per 365-day period.

**NOTE: Other leave policies have not changed as a result of these guidelines.**

- D. Restricted Use of Leave: When both parents of a child work for VCUHS, the total amount of leave requested by both employees is limited to a combined total of 12 weeks in a 365-day period when the leave is for the birth, adoption or foster care placement of a child with the house officer or for the care of a child. This limitation does not apply if the leave is taken because the house officers' own serious health condition or to care for the other spouse, parent (not in-law) or child with a serious health condition. Family and medical leave may not be used for non-serious personal illnesses or to care for a family member with a non-serious illness (such as colds or flu, etc.).
- E. Intermittent and Reduced Schedule Leaves: These guidelines allow house officers to take intermittent leave or to work a reduced schedule, not to exceed 12 weeks in a 365-day period.
- F. Notification of Use of Family and Medical Leave: House officers should provide at least 30 days advance written notice before family and medical leave is to begin, if the need for leave is foreseeable, such as an expected birth, adoption, or planned medical treatment. If emergencies or unforeseen events preclude such advance notice, the house officer should give notice as soon as practicable under the circumstances. Because some rotations may involve risks for the fetus, pregnant house officers should contact their program directors promptly regarding such risk. The

risk is usually greater in the first weeks of gestation. Therefore, timely pregnancy testing and notification of such is important in reducing or avoiding such risk.

- G. Medical Certification: Medical certification for an employee's own serious health condition or for an immediate family member's serious health condition may be required before family and medical leave is granted.
- H. Bereavement/Family Sickness: All house officers are eligible for three days bereavement leave within each PGY year in instances of a family member's death or for a family member's illness. Any leave after 3 days is to come from vacation or unpaid leave.

### III. Reinstatement to the House Staff Program

Promotion of the house officer to the next level is subject to meeting the existing academic requirements of the program. An appropriate plan to make-up training time lost due to use of family and medical leave will be determined by the Program Director.

Each residency program is held to academic standards from the ACGME or the ADA and their specialty boards. It is the responsibility of the Program Director at the **TIME OF THE FMLA REQUEST** to contact the appropriate board and the RRC for the ruling on make-up time. Promotion of the house officer to the next level is subject to meeting the existing academic requirements of the program. An appropriate plan to make up time lost due to use of family and medical leave will be determined by the Program Director after reviewing the appropriate medical specialty board requirements.

Make-up training that occurs in a fiscal period other than when leave is taken requires that funding for housestaff salary and benefits is carried forward into this next fiscal period. This funding will not be provided by VCUHS unless approved following a request in writing by the Program Director to the Associate Dean for Graduate Medical Education. Funding past the initially scheduled completion date for the post-graduate year will be for a maximum of six (6) weeks. In exceptional cases, funding for housestaff salary and/or benefits for make-up time that extends beyond six weeks may be granted by the Executive Committee of the Graduate Medical Education Committee. The Executive Committee will consider these requests on a case by case basis. It is the responsibility of the Program Director to request this additional paid make-up time at the time of the leave request. Requests for paid make-up time that extends beyond six weeks made after the initial leave request will not be considered.

#### **IV. Authority and Interpretation**

The Graduate Medical Education Office is responsible for official interpretations of these guidelines and reserves the right to revise or eliminate these guidelines as necessary. Questions regarding the application of these guidelines should be directed to the Graduate Medical Education Office.