

Cornerstone Care	
<b>Policy &amp; Procedure</b>	
<b>Title: Addendum to Personnel Policies Regarding Residency Program Vacation and Leave of Absence</b>	<b>Review: Every 3 Years by Cornerstone Care Board of Directors</b>
<b>Approval Date: 3/27/2023</b>	
<b>Policy Owner: Director of Human Resources</b>	
<b>Effective Date: 7/1/2020</b>	

**PURPOSE:** Compliance with the Accreditation Council for Graduate Medical Education (ACGME) requirements and American Board of Family Medicine (ABFM) guidelines regarding resident leave.

**POLICY:**

It is Cornerstone Care's policy to comply with the Accreditation Council for Graduate Medical Education (ACGME) requirements and American Board of Family Medicine (ABFM) guidelines regarding resident leave.

**Resident Paid Time Off (PTO)**

An annual Paid Time Off (PTO) of twenty (20) days per contract year is provided to each resident. Days may not be carried over. PTO includes but is not limited to vacation, sick days, Continuing Medical Education (CME), or personal time off. PTO may be taken at any time during the year with the approval of the Family Medicine Program Director. ALL required documentation in New Innovations (Duty Hours, Evaluations, Procedures, etc.) must be complete and up to date prior to leave being approved.

A resident may not miss 50% or more of any rotation (excluding continuity of clinic time). PTO should not be requested while on the Internal Medicine Hospitalist, Obstetrics (OB), Inpatient Pediatrics, Intensive Care Unit (ICU), Emergency Room (ER) or any two (2) week rotation. If more than 50% of a rotation is missed, then the resident will receive an incomplete for that rotation. All rotations must be completed in order to progress to the next academic year or to graduate. Elective rotations are not permitted to be used to remediate or make up for rotations that are not passed or incomplete.

Residents must submit a Leave Request Form in the electronic human resources system. Final approval will be granted at the Program Director's discretion following a review of documentation. It is the **Resident's responsibility** to notify the respective service and/or Cornerstone Care office of scheduled leave. PTO is not cumulative from contract year to contract year. Cornerstone Care shall not pay the Resident for any unused PTO days. All PTO must be submitted at least two (2) months in advance; however, there will be exceptions in the case of emergencies or illnesses.

Cornerstone Care will provide six (6) paid holidays. This is in addition to the twenty (20) annual PTO days. The holidays include: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day. Residents assigned to hospital duties on any of the above holidays

should provide written notification to the Residency Coordinator. Upon receipt of the notification, the resident may be permitted to use their holiday at another mutually-agreed-upon time.

Unscheduled leave, for any reason, must be approved by the **Program Director**. It is the resident's responsibility to notify the assigned service of the intended absence. Residents must submit a Leave Request Form in the electronic human resources system. Residents who excessively request unscheduled leave may be subject to disciplinary action.

Absence from training, which does not meet the qualifying reasons below, and is in excess of one month, for personal leave and/or interruptions from a residency (e.g., prolonged vacation/travel, unaccredited research experience, unaccredited clinical experience, military, or government assignment outside the scope of the specialty, etc.) within the academic year must be made up before the resident advances to the next training level, and the time must be added to the projected date of completion. Absence from the residency may interrupt continuity of patient care for a maximum of three (3) months in each of the years of training.

In the event of termination or any failure on the part of the Resident to complete the terms of this contract:

- Expenses advanced for costs, which have not been fully used shall be refunded to Employer on a prorated basis on the amount of year elapsed.
- When the Resident has used all PTO for vacation, personal or sick leave and/or CME, the Federally Qualified Health Center shall be reimbursed for these benefits on a prorated basis on the amount of year elapsed.

#### **Resident Parental, Medical, and Caretaker Leave Policy**

**In accordance with the Accreditation Council for Graduate Medical Education Institutional Requirements,** Cornerstone Care Teaching Health Center, the sponsoring institution for the Family Medicine Residency program has implemented a Resident Parental, Medical, and Caretaker Leave Policy that may extend provisions outlined in the Family Medical Leave Act (FMLA) such as length of service and paid time off requirements as delineated in this policy.

The Resident Parental, Medical, and Caretaker Leave Policy (hereto referred to as leave policy) of the Family Medicine Residency program will be provided to all residents of the program.

The resident annual agreement will contain or refer to the program's leave policy.

A resident is entitled to a maximum of six (6) weeks of approved paid leave taken for qualifying reasons that are consistent with applicable Pennsylvania law at any time during the 36-month program beginning the first day the resident is required to report to the program. Any annual PTO that is used will be included in this six (6) week period.

#### **Qualifying reasons are:**

A. The birth and care of a child or placement of a child with the resident for adoption or foster care. Such leave must be taken within 12 months immediately after birth or within 12 months after placement. Leave may begin prior to birth or placement;

B. Care of a family member with a serious health condition. The resident must be needed to care for basic needs, psychological comfort, filling in for others, or making arrangements for the relative; or

C. A resident's own serious health condition makes the resident unable to do his or her job due to illness, injury, impairment, or physical or mental condition that involves inpatient care or continuing treatments.

Requests for a leave of absence must be submitted in writing and include the reason for the request as well as any supporting documentation, as required. The Human Resources Director in collaboration with the program director, for non-qualified FMLA situations, must determine if the request qualifies for a leave and may grant or deny the request. For emergency situations, retroactive approvals of leaves may be considered. If a request is denied, residents may appeal the decision to a panel of Graduate Medical Education Committee (GMEC) members appointed by the Designated Institutional Officer (DIO).

Residents will be required to use all PTO time available, with the exception of five (5) days, for any leave. Full Salary and benefits will continue through the leave as outlined in the ACGME and FMLA regulations.

Any leave approved by human resources that exceeds six (6) weeks, will be without salary, but benefits may continue based on FMLA and ACGME regulations.

The program administrator or coordinator will keep an accurate record of all paid time off for each resident, including leave and allowable holidays according to the institution and program policy. This record will be reviewed and approved by the program director at least semi-annually. It is the responsibility of the resident to be aware of their leave time utilized.

Nothing contained herein in the program's leave policy shall relieve the program from its obligations in accordance with the Family and Medical Leave Act and this leave policy is intended to work concurrently with the Family and Medical Leave Act Policy, the Military Leave Policy, and Long-Term Disability Policy, as applicable. -

**In accordance with the 2020 ABFM guidelines regarding leave,** the ABFM will allow up to eight (8) weeks of the twelve (12) weeks available under FMLA, in a given academic year without extending residency training. Qualifying reasons for ABFM Family Leave meet the same ACGME and FMLA criteria listed above.

Residents must still achieve 40 weeks of continuity experience in each post-graduate (PG) year, including any academic year in which they take Family Leave. Family Leave and PTO Leave may be combined for up to twelve (12) weeks away from the program in a given year to accommodate parental leave, personal medical leave, or care of immediate family. In addition, the resident must satisfactorily complete all the requirements of the program and be determined by the program director and clinical competency committee to be ready to advance to the next postgraduate (PG) year of training or if in their final year of training be ready to enter unsupervised practice. Any leave of absence that exceeds eight weeks will be added to the required length of training of the program.

Cornerstone Care will follow the ACGME Institutional Requirement and ABFM recommendation to preserve at least five (5) PTO days outside of the Family Leave period for the resident to utilize at another time within that same year unrelated to their Family Leave. The Program Director will maintain full

discretion with regards to the total number of PTO days permitted based upon the remaining number of days in a given contract year.

**Total Time Away Across Training:**

A resident may take up to a maximum of twenty (20) weeks of leave over the three (3) years of residency. This includes Family Leave (up to 8 weeks total) and 12 weeks of PTO (4 weeks/20 days per contract year).

If a resident exceeds twelve (12) weeks away from the program in a contract year, and/or a maximum of twenty (20) weeks total, (e.g. second pregnancy, extended or recurrent personal or family leave) an extension of the resident's training will be necessary to cover the duration of time exceeding these limitations.

The Program Director will make appropriate curricular adjustments as necessary and notify the ABFM of requested extensions. Reports provided to the ABFM will include an explanation for the absence from training, the number of total days missed, and a plan for resuming training as a basis for calculating a new graduation date.

**Additional Considerations:**

ABFM will allow Family Leave to cross over two academic years. In this circumstance, the Program Director and/or Sponsoring Institution will determine when the resident is advanced from one PG year to the next.

**ABFM Certification Timeline in Instances of Extension of Residency Training**

When a resident's training completion date changes, the ABFM will provide opportunities to take their initial certification exam within the year, as described below:

1. If the resident is anticipated to complete training between July 1st and October 31st, they may apply for and take the Certification Examination in April of their PG-3 year, with permission from the program director through the Residency Training Management (RTM) system.
2. If the resident is anticipated to complete their residency between November 1st and December 31st, they will be eligible to take the Certification Examination in November of their graduating year. Residents completing training between January 1 and April 30 of the following year may also apply for the November exam with permission from the program director through the RTM System.

Following a leave of absence of less than three months, the trainee is expected to return to the program and maintain care of their panel of patients for a minimum of two (2) months before any subsequent leave.

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