

Postgraduate Medical Education (PGME)

Title:	UBC PGME Leave of Absence Policy	Number:	011
Approved By:	PGME Committee		
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Preamble

Residents are both learners in postgraduate training programs, and employees of the University affiliated Health Authorities (“Employer”) whose terms and conditions of employment are governed by a collective agreement (“Collective Agreement”) between the Employer, and Resident Doctors of British Columbia (“RDBC”).

From time to time a Resident may need to be absent from training. In these circumstances Residents must seek a leave of absence (“LOA”) as set out in this policy. A LOA from training means that the Resident is also on leave from employment. Benefits associated with any LOA from employment are determined by the terms of the Collective Agreement. Residency Programs and/or the Postgraduate Medical Education (“PGME”) Office will communicate with the Employer, or delegate, to ensure the appropriate application of the Collective Agreement.

Policy

1. Sick days or vacation days

- 1.1 Residents must inform the Program Office and their rotation supervisor or supervising staff when taking sick days, vacation or holiday make up days. Residents sick for longer than *5 consecutive days*, must contact their Program Director to discuss their situation and, at the Program Director’s discretion, may be required to follow the procedures for medical leaves (short or long term) set out in this Policy.

2. Requests for Maternity, Paternity, Adoption, Compassionate, and Education Leave of Absence (“LOA”)

- 2.1 Requests for a LOA under the above noted categories must be submitted in writing to the Program Director. Program Directors may grant LOAs under these categories and if granted, any salary or other benefits will be determined by the terms of the Collective Agreement.



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- 2.2 The Program Director or PGME Office may require additional information from the Resident related to the request for LOA. Residents must comply with these requests in a timely manner. A failure to respond to a request for information may result in the LOA being delayed or not being granted.
- 2.3 Once the LOA is granted, the Program Director or Program Office must notify the PGME Office, and the PGME Office will notify the Employer of the type of leave granted, the dates of the leave, and of any subsequent changes, either to those dates or the type of leave.

3. Requests for Leave for Illness/Injury

- 3.1 Residents are registrants of the medical regulatory authority, the College of Physicians and Surgeons of BC (“College”), and are bound by the College’s Bylaws and the *Health Professions Act* (“HPA”). Residents have a professional responsibility to withdraw from patient care when they are impaired by illness, whether due to physical or mental reasons, emotional disturbance, cognitive concerns, or addiction to alcohol or drugs. The *HPA* requires that any health practitioner notify the College regarding a health concern or impairment that may constitute a risk to patients or the public.
- 3.2 Programs and PGME will grant requests for time off for illness/injury in accordance with the terms of this policy.

4. Request for Short Term Leave for Illness/Injury

- 4.1 Requests for leave related to illness or injury expected to result in an absence of more than 5 days but less than 4 weeks (“Short Term Leave”) must be made to the Program Director. Absences that are anticipated to be greater than 4 weeks require a Medical Leave of Absences set out in this policy.
- 4.2 The Resident must notify the Program Director in writing of the request for a Short Term Leave as soon as possible for a scheduled leave. The request must be accompanied by appropriate medical documentation in support of the request for leave including an estimate of the length of leave required. Once the Short Term Leave is approved the Resident must notify the Resident’s rotation supervisor.
- 4.3 In the event of an unanticipated and unscheduled illness or injury requiring an absence of more than 5 days the Resident (or delegate) must contact the Program Director and rotation supervisor or supervising staff on the first day of the absence as required in section 1.1. If the Program Director determines that the Resident must apply for a Short Term Leave the Resident must submit appropriate medical documentation in support of the request for leave in a timely manner. The documentation must include an estimate of the length of leave required. Residents who fail to notify the Program Director or who fail to provide timely medical documentation in support of a Short Term Leave will be considered Absent without Leave.

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- 4.4 In all circumstances in which the Program grants a Short Term Leave the dates of the Short Term Leave and of any subsequent changes to these dates will be communicated to the Employer, or delegate, by the Program Director or the PGME Office to ensure appropriate tracking of sick days and application of Collective Agreement benefits.
- 4.5 Residents must notify the Program Director and their supervising staff of their anticipated date of return at the earliest opportunity to allow time to prepare for re-entry into the Program. The Resident must provide medical documentation to the Centre for Accessibility (“CA”) confirming the Resident’s fitness to return and to resume training.
- 4.6 A Resident who requires accommodation to resume training must notify the Program Director at the earliest opportunity. The Resident will be referred to the CA for assessment of the accommodation request. The request for accommodation will be managed in accordance with the Accommodation Policy.
- 4.7 If the Resident’s illness or injury is of a chronic or relapsing nature, or if the Resident requires accommodations, the Resident is urged to notify the College.

5. Request for Medical Leave of Absence (Illness/Injury)

- 5.1 Residents who anticipate they will be absent for more than four (4) weeks must request a Medical Leave of Absence (“Medical Leave”). The request must be in writing and submitted to the Program Director who will forward the request to the PGME Deans.
- 5.2 A Resident whose Short Term Leave will extend beyond four (4) weeks must notify the Program Director and, in the Program Director’s discretion, may be required to request a Medical Leave under this section. The Program Director will notify the PGME Office of the change in leave requirements.
- 5.3 Requests for Medical Leave will be referred by PGME Office to the CA for assessment and recommendations. The Resident is responsible for contacting a disability advisor in CA, and for providing any medical documentation requested by the CA to complete the assessment of the request for Medical Leave.
- 5.4 The CA will contact the Program Director and PGME Office as needed to obtain background information and to discuss the impact of the leave on the Resident’s training. Neither the Program Director nor the PGME Office will be provided with copies of any medical documentation submitted by the Resident to the CA in support of the request for Medical Leave.

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- 5.5 The CA will provide a written recommendation to the PGME Office regarding the Medical Leave and any recommended terms upon which the Medical Leave should be granted. The PGME Office will discuss the recommendations with the Program Director.
- 5.6 The PGME Deans may grant the Medical Leave and may incorporate the terms recommended by the CA into the Medical Leave.
- 5.7 The CA may require a Resident to submit status reports from the treating physician or primary care provider, including an updated prognosis, (“Status Report”) at any time, and no longer than at six month intervals, during the Medical Leave. If the Resident fails to provide a Status Report as required, the CA will notify the PGME Office who will follow-up directly with the Resident.
- 5.8 In addition to any additional requirements imposed by the PGME Deans, a Resident who is granted a Medical Leave must meet the following requirements:
- 5.8.1 The Resident is expected to be under the treatment of a physician or other appropriate care provider during the Medical Leave and to continue with treatment as recommended by the Resident’s treating physician or care provider throughout the Medical Leave.
 - 5.8.2 The Resident, or in appropriate circumstances the Resident’s delegate, is responsible for maintaining regular contact with the Program Director and for advising the Program Director of any changes in the anticipated length of the Medical Leave. The Program Director will notify the PGME Office of any reported changes.
 - 5.8.3 The Resident must submit Status Reports or additional medical documentation to the CA as requested.
 - 5.8.4 The Resident must respond promptly to requests from the CA, Program, or PGME Office related to the Medical leave.

Failure to meet the above listed requirements will constitute a breach of the terms of the Medical Leave and the Resident will no longer be on an approved leave. A Resident who is absent and not on an approved leave is absent without leave and may be dismissed from the Program.

- 5.9 The PGME Office will communicate the start and end dates of the Medical Leave and of any subsequent changes to these dates to the Employer, or delegate, and to the College.
- 5.10A Resident who wishes to extend a Medical Leave must advise the Program and PGME Office and must provide the CA with medical documentation in support of the requested extension. The CA will assess the request and provide a recommendation to the PGME Office. The PGME Deans will consider the recommendation, consult with the Program Director, and in appropriate circumstances grant the extension.

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- 5.11 During a Medical Leave Residents can obtain support through the Employee and Family Assistance Program (<http://www.efap.ca>) and through the Physician Health Program (<https://www.physicianhealth.com>) and UBC Resident Wellness Office. (<http://postgrad.med.ubc.ca/resident-wellness>)

6. Return to Training Following a Medical Leave

- 6.1 The PGME Office will work with the Program, the CA, the Resident, the Resident's treating physician, and the College to ensure a smooth transition back to training.
- 6.2 The Resident must advise the CA and the Program promptly when the Resident's treating physician recommends a return to training. This will allow the Program time to set up a return rotation and/or any transition period that may be required. The Program will notify the PGME Deans who will notify the College.
- 6.3 PGME or the Program may ask the CA to obtain additional medical documentation relevant to the return to training. A delay in providing the requested medical documentation will result in a delay a delay in the Resident's return to training. A failure to provide required information may prevent the Resident's return to the Program.
- 6.4 The Resident's return to training date will be determined based on a number of factors including reactivation of College registration and licensure, availability of appropriate rotations, the need for academic and/or clinical skills assessment, the need for remediation, and the ability of the Resident to meet the requirements of the training, with or without accommodation, and the implementation of any approved accommodation requests.
- 6.5 To ensure patient safety and optimum learning, the Program will determine whether the Resident will require a transition period to assess competence to resume clinical duties ("Assessment Period"). The Program Director will meet with the Resident to discuss the terms and goals of the Assessment Period which will be set out in writing. An Assessment Period will not be counted as a regular rotation to meet the requirements of the Royal College of Physicians and Surgeons of Canada ("RCPSC") or the College of Family Physicians of Canada ("CFPC").
- 6.6 The Program will notify the PGME Office when a Resident is scheduled to return to training, and will advise of any Assessment Period or accommodations to be provided. The PGME Office will notify the Employer, or delegate, of the return date and of any academic accommodations that may have an impact in the clinical setting.
- 6.7 If the Resident requires accommodation to return to training the request for accommodation will be managed in accordance with the PGME Accommodation for Residents with Disabilities Policy.

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7. Residents Receiving LTD Benefits During Medical Leave

- 7.1 The Collective Agreement provides a Long Term Disability Plan (“LTD”) for eligible Residents on Medical Leave. The LTD Plan is administered by a Great West Life (“GWL”) on behalf of the Employer. GWL will adjudicate claims for LTD under the terms of the LTD Plan.
- 7.2 PGME will notify the Employer and payroll, when a Resident is granted a Medical Leave.
- 7.3 To minimize disruption and duplication a Resident is encouraged to submit the same medical documentation provided in support of the Medical Leave to the CA and GWL. With the Resident’s consent the CA will provide copies of the medical documentation submitted by the Resident, to GWL, for the purpose of adjudication of the claim under the LTD benefit plan.
- 7.4 The Resident is encouraged to provide consent to GWL to share documentation, including medical documentation, provided directly to GWL with the CA to assist in planning a return to training.
- 7.5 A Resident in receipt of LTD benefits must submit Status Reports to the CA as required under this Policy and is responsible for responding to any additional requests from the CA for medical documentation.
- 7.6 A Resident in receipt of LTD benefits who wishes to extend a Medical Leave must, in addition to meeting the requirements of the LTD plan, provide, or authorize GWL to provide, the CA with medical documentation in support of the requested extension. The CA will assess the request and provide a recommendation to the PGME Office. The PGME Deans will consider the recommendation and, in appropriate circumstances, grant the extension and will notify the Employer and GWL if the leave is not extended.
- 7.7 Medical documentation received by the CA, either directly from the Resident, or through GWL, will not be provided to the Program or the PGME Office.

8. Return to Training for Residents on LTD

- 8.1 When GWL advises the PGME Office that medical documentation from the Resident’s treating physician confirms the Resident’s fitness to participate in a rehabilitation program or to return to work, GWL will consult with PGME and the Program to develop a rehabilitation or return to work plan that aligns with a return to training.
- 8.2 GWL, the PGME Office, and the Program will share information, including, with the Resident’s consent, medical information to effectively collaborate on a rehabilitation or return to

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work/return to training plan. PGME may request that the Resident directly, or through GWL, provide the CA with additional medical documentation relevant to the return to training. A delay in providing the requested medical documentation will result in a delay in the Resident's return to training. A failure to provide required information may prevent the Resident's return to the Program.

- 8.3 Following notification from GWL of the anticipated date of return, the PGME Deans will notify the Program and the College. The Resident's return to training date will be determined based on a number of factors including reactivation of College registration and licensure, availability of appropriate rotations, the need for academic and/or clinical skills assessment, the need for remediation, and the ability of the Resident to meet the requirements of the training, with or without accommodation, and the implementation of any approved accommodation requests.
- 8.4 The Program will notify the PGME Office when a Resident is scheduled to return to training and will advise of any Assessment Period or accommodations to be provided. The PGME Office will notify GWL and the Employer.
- 8.5 If the Resident requires accommodation to return to training the request for accommodation will be managed in accordance with the PGME Accommodation for Residents with Disabilities Policy.

9. Return to Work and LTD Benefits

- 9.1 Under the terms of the LTD plan GWL will determine whether a Resident continues to meet the definition of disability or whether claim termination is warranted. PGME will work with GWL to coordinate a return to work and a return to training.
- 9.2 While a determination that fitness to return to work will normally indicate fitness to return to training there may be circumstances when a Resident may be deemed fit to return to work but not able to return to training. The PGME Office in consultation with the Program will determine when a Resident can resume training.
- 9.3 If a Resident requires workplace accommodation the request will be managed in accordance with the Employer's applicable policy.

10. Notification to the College of Physicians and Surgeons of BC

- 10.1 The College will be notified in writing by the PGME Office when a Resident is granted an LOA, other than a Compassionate or Educational Leave, and the Resident will typically be asked to voluntarily suspend their license ("Temporarily Inactive- Health Leave"). Information on this process can be found at: <https://www.cpsbc.ca/files/pdf/PSG-Changing-Status-to-TI.pdf>. Residents are not permitted to engage in any clinical aspects of training while on leave.

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- 10.2 The PGME Office will notify the College in writing when the Resident is anticipated to return from leave. The College will contact the Resident, who must complete all College requirements for registration and licensure before the Resident can return to training, including to an Assessment Period.
- 10.3 It is the Resident's responsibility to meet any terms imposed by the College with respect to the Resident's registration and licensure.
- 10.4 The Resident must provide the license verification to the Program Office on the first day of return. Failure to provide verification will result in delay of return to a scheduled rotation, or the start of any Assessment Period.
- 10.5 Depending on the length of the Medical Leave, a Resident may have the training and/or date of completion extended in order to meet the requirements of RCPSC or CFPC.

11. Removal from the Clinical Area

- 11.1 A Resident may be removed from the clinical area and placed on interim leave by the Program Director if the Resident exhibits behaviours or performance issues that pose risk to others or themselves. The removal of a Resident from the clinical area must be reported to PGME and the College promptly. PGME will notify the Employer as appropriate.
- 11.2 The Resident's return to the clinical area may be subject to conditions imposed by the Program, in consultation with the PGME Office, or by the College.

12. Absent Without Leave

- 12.1 If a Resident is absent and has not contacted the Program Director to arrange time off or a leave of absence, the Resident will be considered absent without leave. Programs must immediately report Residents who are absent without leave to the PGME Office who will report to the Employer, or delegate, to ensure appropriate steps, including payroll adjustments, are taken.
- 12.2 The PGME Office will make a reasonable effort to contact the Resident through the contact information on file. If this fails, the PGME Office may utilize resources such as the emergency contacts provided by the Resident.
- 12.3 A Resident who is absent without leave will not be entitled to receive salary and benefits. A Resident who is absent without leave is in breach of his or her professional obligations and may be dismissed from the Program.

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Related Policies and Contacts

[Accommodation Policy](#)

Duty to Report CPSBC

<https://www.cpsbc.ca/files/pdf/PSG-Duty-to-Report.pdf>

<https://www.cpsbc.ca/files/pdf/PSG-Changing-Status-to-TI.pdf>

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College of Physicians and Surgeons of British Columbia: <https://www.cpsbc.ca/for-physicians/health-monitoring>

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Approved	PGME Committee	April 9, 2019	Live
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