

Original Approval Date: March 1, 2021

Effective Date: March 2, 2021

Editorial Revision: November 1, 2024 Approximate Review Date: March 2025

Parent Policy: PGME Leave of Absence Policy

PGME Leave of Absence Procedure

Office of Accountability:	Faculty of Medicine & Dentistry (FoMD)
Office of Administrative Responsibility:	Postgraduate Medical Education (PGME)
Approver:	Postgraduate Medical Education Committee (PGMEC)
Classification:	Governance and Administration
Scope:	Residency Programs

Overview

During residency training, residents may need to take leave of absence of variable duration from the program. The types and specifics of the different types of leaves are detailed in the Resident Physician Agreement.

Purpose

This document provides guidance and specific procedures relating to managing leaves of absence in postgraduate medical education at the Faculty of Medicine & Dentistry at the University of Alberta.

PROCEDURE

1. PROCEDURE FOR REQUESTING A LEAVE OF ABSENCE

- a. The timeline for request submission of planned leaves are specified in the relevant Articles of the Resident Physician Agreement.
 - i. Leaves typically cannot be requested retroactively.
 - ii. Medical (sick) leaves that are less than one (1) week in duration do not typically need to be submitted to the PGME office, unless they require extension beyond one week.
 - iii. Maternity leaves must be submitted a minimum of three (3) months prior to the leave start date.
- b. Planned leave must be submitted in writing with the needed signatures (of the resident and the program director) to the PGME office using the standard Request for Leave of Absence (LOA) Form that can be accessed on the PGME website.
- c. Notification of Alberta Health Services (AHS) will be handled by the PGME Office.

2. PROCEDURE FOR RETURN FROM A LEAVE OF ABSENCE

a. If the resident's return date is different from the planned date of return indicated on the leave application, the resident must contact the Program Director at least two (2) weeks before the

1



- planned date of return or the revised date of return (whichever is earlier) to minimize impact on scheduling and to maintain safe patient care.
- b. In the event of a revised date of return, the program may not be able to schedule clinical placement for the resident on the exact revised date of return.
- c. Consecutive or cumulative leaves of absence greater than four (4) weeks (i.e. twenty working days) will automatically extend training by the corresponding amount of time per appointment year. If a resident wishes to request a waiver of this extension, they must abide by the PGME Waiver of Training Policy and Procedure.
 - i. In the scenario where a leave longer than four (4) weeks in duration begins in one appointment year and continues into the next appointment year, the training will be automatically extended by the corresponding amount of time.
- d. Following the return from a medical leave of absence and with approval by the PGME Associate Dean, a program may accommodate a gradual return to work at a reduced FTE up to a maximum of two (2) weeks.
 - i. A gradual return to work will not typically result in an extension of training.
 - ii. Should a resident request a reduced FTE following the maximum gradual return to work period, they would then need to request fractional training (i.e. less than a 1.0 FTE, or "part-time" training).

3. PROCEDURE FOR THE EXTENSION OF A LEAVE OF ABSENCE

- a. Leave of absence extension is permitted, as detailed in the relevant Articles of the Resident Physician Agreement, subject to approval by the Associate Dean, PGME.
- b. The resident must contact the Program Director at least two (2) weeks before the original planned date of return to request an extension of the leave.
- c. A new LOA Form must be submitted for leave extension.
- d. The type of leave of absence, and associated benefits and remuneration, will be changed if the maximum allowed duration of the originally requested type of leave has been reached.

4. PROLONGED LEAVE OF ABSENCE (> 12 MONTHS)

- a. Maintenance of a residency position during extended absences are detailed in the relevant Article of the Resident Physician Agreement.
- b. It is expected that the program will contact residents who are on leave at least once per year to confirm their current status.
- c. A residency position may be terminated in any of the following scenarios:
 - i. Conditions listed in the relevant Article of the Resident Physician Agreement
 - ii. If the resident has been away for twelve (12) months, and eligibility for CPSA registration for supervised practice is lost
 - iii. Conditions for a practicum intervention are not met within eight (8) months
 - iv. If the resident has been away for twenty-four (24) months and there is no confirmed return date
 - v. A criminal conviction has occurred requiring incarceration

5. PROCEDURE OF RETURN AFTER A PROLONGED LEAVE OF ABSENCE

a. A prolonged leave of absence has been defined for this document as greater than twelve (12) months regardless of the type of leave.



- b. Prior to returning to the training program in a regular capacity, the program should conduct an assessment of the resident to determine their current level of competence and to facilitate graduated (if needed) return to training.
 - i. The assessment should be at the discretion of the Program Director, and has written terms to specify duration, training experiences, and assessment methods.
 - 1. The duration of the assessment should not exceed eight (8) weeks under usual circumstances.
 - 2. The terms of the assessment should include any approved accommodation conditions.
 - 3. The written terms should be signed by the program and the resident and submitted to the PGME office.
 - ii. The assessment should be overseen by the Program Director or a designate.
- c. Outcomes after Assessment period
 - i. If the resident is assessed to be at the same level of training as before the leave of absence, the resident can be incorporated into the training program at that level.
 - 1. Time spent and competencies demonstrated during the assessment period can count towards training, at the discretion of the residency program.
 - ii. If the resident is assessed to be at a lower level of training as before the leave of absence, the program will develop a reintegration plan to allow the resident to achieve the competencies needed to reach the level of training prior to the leave of absence.
 - 1. The reintegration plan should have written terms to specify duration, training experiences, and assessment methods and must be submitted to the PGME office.
 - If the resident is unable to attain competencies of the required level of training after the reintegration period, formal remediation/major learning plan will be needed.
 - 3. Future elective time can be used to account for time used for the reintegration plan at the discretion of the Program Director to minimize the duration of training prolongation.

6. EXPECTATIONS DURING A LEAVE OF ABSENCE

a. Residents on leave must maintain an appointment with the University of Alberta and PGME. A resident on leave will continue to be registered with the residency program and will therefore be expected to maintain a code of conduct consistent with standards of the residency program, the University of Alberta, and the medical profession.

7. ABSENT WITHOUT AN APPROVED LEAVE

- a. Rarely, there may be times when a Resident is absent without having requested one of the approved leaves listed in the Resident Physician agreement. This may include Residents who are absent without notifying anyone affiliated with the residency program about their absence, Residents who fail to specify what type of leave they are requesting, Residents who request a leave not listed in the Resident Physician agreement, and other similar situations.
- b. In the case of Residents who are absent without notifying anyone affiliated with the residency program about their absence:
 - i. Programs must make a reasonable effort to contact the Resident through the contact information on their file.



- ii. Programs must immediately report this to the PGME Office.
- iii. 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 Helping Individuals At Risk (HIAR) Office and/or the Office of Advocacy and Wellbeing (OAW).
- c. A resident who is absent without one of the approved leaves listed in the Resident Physician agreement will typically not be entitled to receive salary and benefits during their unapproved absence.
- d. A resident who is absent without an approved leave is in breach of their professional obligations and may be required to undergo a Professionalism Minor or Major Learning Plan(s)/Remediation(s) at the discretion of the residency Program Director in consultation with the Associate Dean, PGME. After 30 working days of being absent without an approved leave, the resident may be subject to termination of their residency.
- e. There may be situations when the Associate Dean, PGME, may need to assign the leave that best fits one of the approved leaves listed in the Resident Physician agreement. Before doing this, the Associate Dean, PGME, or designate, will contact PARA.
- f. Notification of Alberta Health Services (AHS) will be handled by the PGME Office.

DEFINITIONS

Definitions are listed in the sequence they occur in the document (i.e. not alphabetical).

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.	
Resident Physician Agreement	Often referred to as the PARA agreement, it is the agreement between the University of Alberta, University of Calgary, the health authority Alberta Health Services, and the Professional Association of Resident Physicians of Alberta. It describes the terms and conditions applicable to Resident Physicians related to provision of health care services within a learning environment.
Professional Association of Resident Physicians of Alberta (PARA)	PARA is the provincial housestaff organization of Alberta which represents resident physicians.