Duke University Hospital Graduate Medical Education Leave of Absence and Vacation Policy

<u>Applicable to</u>: All residents and fellows who are enrolled as trainees in any Duke Graduate Medical Education (GME) program, whether ACGME-accredited or internally sponsored.

<u>Effective Date of Benefit</u>: Day of hire, defined as the first day after institutional orientation. Trainees must complete all onboarding requirements, including attending live orientation, prior to receiving this or any other benefit. Trainees who are unable to comply with this requirement may defer their program start dates until they are able to meet this requirement.

<u>Eligibility Considerations</u>: As all GME residents and fellows are Duke University Hospital (DUH) employees, this policy will apply effective July 1, 2022, to any trainee hired prior to July 1, 2022 whose program does not already provide vacation and leave benefits consistent with this policy, and to all Duke trainees hired on or after July 1, 2022. Trainees who were recruited and hired prior to July 1, 2022, with an expectation of a more generous benefit provided by their department will maintain that benefit during their training (paid by the department), but all programs will be expected to advertise and comply with this policy for all recruitments effective July 1, 2022.

Exclusions: Each program is responsible for determining its own program-specific policies regarding outside professional conference attendance (funding and amount time allowed), and time away for job or fellowship interviews. In general, time away for conferences should be considered work, and should be limited to the days required to complete the agreed upon activity. Programs may define their own policies for payment of specialty board certification application fees on behalf of their trainees, and the provision of specialty-specific equipment required for trainees' function in their specialty-specific roles (e.g., surgical loupes, lead aprons). Programs are responsible for communication of these policies to their trainees. All program and departmental policies must comply with the respective medical specialty board requirements regarding absences from training.

POLICY:

1. Vacation Time and Personal Days:

Each trainee will be provided with twenty (20) weekdays of paid time off to be used for vacation, per academic year. Each program is responsible for establishing processes for requesting and scheduling of vacation time and personal days. In general, vacation should be scheduled as a week with the weekend prior to or after included. Salary and benefit support for any paid vacation time will come from DUH with the exception of federally funded trainees as in Section 6.

Each trainee will be able to access an additional eight (8) days of personal paid time off per academic year, for unexpected absences such as bereavement, brief acute illness of the trainee or family member, or personal or childcare emergencies. Salary and benefit support for these eight personal days will come from DUH.

Additionally, two (2) personal days of paid time off will be provided for trainees to use for elective appointments with health care providers, which should be scheduled typically as half days with advance approval from the program. None of these ten total personal paid time off days can be used as part of a

leave of absence (See Section 2). These personal time off days are provided for unexpected/emergency needs or health care appointments only and are not to be used for additional scheduled vacation time.

Trainees with a 12-month agreement of appointment that does not run the same as the academic year shall have the same allotment of vacation and personal paid time off that may be used during the applicable 12-month term of their agreement. For trainees with an agreement of appointment that is for a term less 12 months, all vacation and personal paid time off days shall be prorated.

All vacation and personal paid time off must be used within the term of the applicable agreement of appointment and unused days off cannot be forwarded into subsequent training years.

2. Leave of Absence:

Medical/Caregiver Leave

Each trainee is entitled to one paid leave of up to six weeks during a single training program for their own serious health condition or to care for a qualifying family member who has a serious health condition. The qualifying reason for this leave will be evaluated and confirmed by Employee Occupational Health and Wellness (EOHW) using the same process and criteria that apply to approval determination for Duke Family and Medical Leave. Individuals who train in more than one program at Duke will be entitled to one six-week period of paid medical/caregiver leave per program. This leave can be taken continuously or as intermittent leave. Salary at the appropriate PGY-level will be continued and will be the responsibility of DUH during this medical/caregiver leave time, and the trainee (and covered eligible dependents) will be provided continuation of health and disability insurance during the approved leave of absence at the applicable GME premium contribution rates. Up to two weeks (10 days) of vacation time (to the extent vacation time is remaining at the time the need for leave is identified) will be applied to the leave of absence, and the remaining 4 weeks of leave will be paid by DUH. One week of the above-mentioned vacation time (Section 1) must be reserved outside of the medical/caregiver leave. This reserved vacation week must be used within the appointment year that the leave takes place. This reserved week can precede or follow the LOA. The reserved week of vacation cannot be forwarded into subsequent training years. If a trainee has used all of their vacation time for the year prior identifying the need for the LOA, the trainee is still entitled to 6 weeks of leave paid by DUH. If a trainee needs a medical/caregiver leave longer than six weeks, the trainee may apply any remaining vacation time as long as one week is reserved either before or after the LOA. The intention of the reserved week of vacation is to promote trainee well-being and to mitigate the impact of extended periods of time without vacation. Additional unpaid leave may be available under Duke's Family and Medical Leave Policy once paid leave options have been exhausted.

Should a leave of absence cross academic years within the duration of a single training program, the LOA will count as the required period of paid leave. Should a leave of absence cross academic years when a trainee is switching programs at Duke (e.g., preliminary year to residency, or residency to fellowship), the trainee will be entitled to as many additional paid weeks of approved leave as required to constitute six weeks' paid leave in the second program. The same rules as above regarding use of vacation time for medical and caregiver leave will apply, but each trainee will have twenty days of vacation time within

each year of the programs pre-and post-transition of program, two weeks of which will be used for salary support during the LOA if the reason is for medical or caregiver leave.

Parental Leave

In addition, trainees are eligible for up to six weeks of paid continuous leave under DUHS's Paid Parental Leave Policy for each eligible event. Vacation time available under this GME Leave of Absence policy will not be applied to the six-week parental leave. If trainees want a parental leave longer than six weeks, however, they must apply remaining vacation weeks to extend an approved paid parental leave with one week reserved either before or after the LOA. As per institutional policy, parental leave must be taken as consecutive weeks within the first 12 weeks after the birth or placement for adoption of a child. Additional unpaid leave may be available under Duke's Family and Medical Leave Policy once paid leave options have been exhausted.

Duke recognizes that access to vacation time, personal days and medical/parental/caregiver leave are important for trainees' well-being. Trainees may take their full vacation/personal day entitlement and any eligible LOAs without retaliation, and program directors are responsible for creating an environment where trainees are not discouraged from using these benefits.

In general, when a trainee knows about the need for the leave in advance, they should give at least 30 days advance notice if it is possible and practical to do so. If 30 days advance notice is not possible because the need is acute or the trainee does not know exactly when leave will be required, the trainee should provide notice of the need for leave as soon as possible and practical.

3. Impact:

Allowable time away from training and the potential need to extend training time will be determined based on ACGME program requirements and the relevant Specialty Board eligibility requirements. All trainees are responsible for understanding the required training time for their specialty and should consult the ACGME and ABMS websites for specific details.

Trainees must be informed by the program director about the impact of time away from training, including LOA's and vacation time, for both the date of program completion and specialty board eligibility. If implementation of the DUH LOA/Vacation policy creates conflict with a Specialty Board's policy for absences for training, (e.g., the DUH LOA/Vacation policy is more liberal than the Specialty Board's) the program must comply with the Specialty Board's requirements.

It is an expectation that each trainee should meet the requirements to be eligible for ABMS or AOA board certification in their specialty to successfully complete a Duke ACGME program. Programs should assess the number of each trainee's non-work days as part of their Clinical Competency Committee (CCC) processes to determine whether the trainee may be promoted within or complete a program. In general, extension of time in training, if required, that results from leaves of absence should be added to the training level when the leave occurred. Other than adjustments for the required amount of time spent in training, each trainee must achieve all requirements of the training program. These include all mandatory or required rotations, an appropriate amount of night, weekend and call experiences, and availability for backup coverage expected of trainees as a team member, unless otherwise prohibited by

ACGME or ABMS policy. The Program Director, advised by the CCC in ACGME programs, is solely responsible for determining the readiness of any trainee for promotion, program completion and board eligibility. Decisions to delay promotion or extend training to ensure that the trainee has met or will meet all program requirements are permissible, and the program director, advised by the CCC, has the sole responsibility for determining the need for delayed promotion or extensions of training. Delayed promotions and/or extensions of training time that occur as a result of LOAs will not be considered corrective actions subject to Duke's Corrective Action and Hearing Procedures.

4. Coordination with other Absence/Leave Entitlements

This is the sole policy governing paid time off for GME trainees. Other Duke University or Duke University Health System paid time off policies for permanent employees do not apply to GME trainees.

To the extent that any leave of absence provided under this policy would also be covered by any existing Duke policy, all policies will be applied concurrently, and this policy shall not create any further entitlement to additional time off.

To the extent that an LOA under this policy is also subject to Duke's Family and Medical Leave Policy (https://hr.duke.edu/benefits/time-away/leaves-absence/health-system-employeefamily-fmla) and/or the federal Family and Medical Leave Act, these leaves will run concurrently. If a trainee has exhausted the paid leave entitlement provided under this policy and subsequently needs additional leave, eligibility for such additional leave will be evaluated and leave will be provided as required under any other applicable policy or legal obligation.

5. Scheduling of Vacation, Leave of Absence, and Personal Paid Days Off

Trainees must follow all hospital, department, and program procedures regarding vacation and paid time off requests and documentation for any leave of absence or personal days, and, to the extent possible, must work with their program directors and other applicable clinical supervisors to minimize disruption to clinical care from any vacation or non-urgent personal paid time off. Any absence due to illness, personal days or leave of absence, must be recorded appropriately in MedHub.

6. Trainees who are paid by the Federal Government

Trainees who are paid by the federal government (e.g., military, NIH), shall be entitled to all time off as established by this policy, but Duke University Hospital will not be responsible for their pay, insurance and other benefits during the leave of absence/vacations. Any such trainee is responsible for communicating with their military employer regarding any time away from training.

7. No Payout of Paid Time Off

Accrued but unused vacation, personal days, or other paid time off will not be paid out and will be forfeited upon termination of employment at DUH regardless of reason for termination, whether voluntary, involuntary, or at the completion of training.

_	•			
RΔ	tΔr	·Δn	ces	•
116	161	CII	CES	Э.

ACGME Institutional Requirements (version effective July 1, 2022) specifically II.DIV.B3.a). (2), IV.C.2, i), and Section IV.H. www.acgme.org

American Board of Medical Specialties Medical Specialties Certified by ABMS Member Boards

Approvals:

GMEC: June 27, 2022 ECMS: August 3, 2022

Revised: May 31, 2023, approved by GMEC June 5, 2023

December 2, 2024, approved by GMEC December 2, 2024