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## NATIONAL CAPITAL CONSORTIUM LEAVE POLICY

ACGME Institution Requirement: IV.H.1; IV.H.1. (a-g).

The NCC provides the following guidelines for development of GME training program-specific policies to aid trainees who become pregnant, adopt a child, or wish to take paternity leave during residency, or must take leave to be a caregiver. These guidelines are based on existing DoD/DHA Maternity, Parental and Caregiver Leave Instructions, ACGME requirements, and recommendations of the American Board of Medical Specialties. Trainees are eligible to use these types of leave starting the first day they enter the training program. Residents/fellows who are Active Duty Service Members are provided with full salary and full medical benefits while on any type of leave of absence.

### PARENTAL and CAREGIVER LEAVE (non-medical):

1. Parental leave for the birth parent can be up to 12 weeks, after 6–8 weeks of convalescent (medical) leave; for a total of 18 to 20 weeks total postpartum.
2. The non-birth parent and adoptive parent are authorized 12 weeks of parental leave.
3. Parents may take this leave in blocks no shorter than one week (7 consecutive days). It can be added to ordinary leave, but the trainee must utilize the 12 weeks within one year.
4. Caveats: Unit Commanders must balance the needs of the unit with the needs of the member to maximize opportunity to use parental leave.
5. Residents/fellows must be provided with a minimum of one week of paid time off reserved for use outside of the first six weeks of the first approved medical, parental, or caregiver leave(s) of absence taken.
6. Programs must have a leave policy which is available for review by residents/fellows at all times; and,
7. Programs must provide its residents/fellows with accurate information regarding the impact of an extended leave of absence upon the criteria for satisfactory completion of the program and upon a resident's/fellow's eligibility to participate in examinations by the relevant certifying board(s).
8. At a minimum, parents will be allowed to take the required amount spelled out by the ACGME Institutional requirements. These requirements specifically require that the Sponsoring Institution must:

- a. Provide residents/fellows with a minimum of one week of paid time off reserved for use outside of the first six weeks of the first approved medical, parental, or caregiver leave(s) of absence taken;
- b. Ensure the continuation of health and disability insurance benefits for residents/fellows and their eligible dependents during any approved medical, parental, or caregiver leave(s) of absence;
- c. Describe the process for submitting and approving requests for leaves of absence;
- d. Be available for review by residents/fellows at all times; and,
- e. Ensure that each of its ACGME-accredited programs provides its residents/fellows with accurate information regarding the impact of an extended leave of absence upon the criteria for satisfactory completion of the program and upon a resident's/fellow's eligibility to participate in examinations by the relevant certifying board(s).

#### SICK LEAVE/MEDICAL LEAVE OF ABSENCE:

1. Paid sick leave in the Uniformed Services is not limited; however, disability may lead to administrative procedures resulting in termination of military service with or without disability payments. Excess time lost because of illness may result in a modification of training dates. Adjustments of training schedules because of illness are managed on an individual basis by Program Directors in accordance with the regulations of individual Uniformed Services.
2. The NCC provides a medical leave of absence form, located in MedHub, for trainees to provide to their primary care physician (PCP). The PCP should complete the form, taking special care to not include any PII or HIPAA information, and to provide dates for the leave of absence. Once completed the form should be provided to the Program Director who in turn will submit to the NCC upon the start of the leave of absence. The NCC will track this absence and check in with the Program Director near the anticipated return to training date to confirm the return of the trainee and to check if a modification of training dates is required.
  - a. If the trainee, while on a medical leave of absence, requires clearance to return earlier than anticipated, or needs to extend the leave of absence, the form should be provided to the PCP for modification and should again be provided to the Program Director who will send it to the NCC.

#### RELIGIOUS LEAVE:

1. Objective: Provide basic guideline for provision of religious observance by trainees.
2. Timing: This policy will be applicable to all levels of training.
3. Training: These guidelines do not change the basic structure of the GME Program.
4. Provision of Leave: The amount of time allowed off-duty will coincide with that required by the tenets of the trainee's religious obligations including travel time. The actual administrative tool used to grant the time off can be any of the several provided by military regulations (passes, compensatory time, leaves, etc.). The immediate supervisor responsible for the trainee at the time of leave may choose any of these, subject to approval of the

Program Director and the Department Chief. If the religious obligation requires the trainee to leave the local area, he/she is required to request ordinary leave.

5. Modification of Training dates: The Program Director will determine, by consultation with competent authority, if a modification of training dates will be required as a result of religious leave.
6. Schedule Accommodations: It is the trainee's responsibility to arrange coverage to provide for patient care during absences for religious observances.

#### ANNUAL LEAVE/VACATION:

1. Accrual of annual leave is fixed by Uniformed Service regulations and excess accrual may result in loss of leave. The following policies for trainees hold unless in conflict with the program requirements:
  - a. PGY-1: During the first year, a trainee may be granted up to 21 days of leave.
  - b. PGY-2 and beyond: During the second and subsequent years, a trainee may be granted up to 30 days of annual leave.
2. Although your Service Branch may allow the amount of leave referenced above, a trainee must assure that they are following their GME training program's leave policy. Training programs work in conjunction with the appropriate guidelines set by their respective ABMS boards to assure trainees can take leave during training and still remain board eligible. Using more than the allowed number of days per academic year will lead to a modification of training dates and the trainee may be delayed in board eligibility.
3. Procedure: Leaves should be planned well-ahead of time, and must have the approval of the Service Chief, Program Director or other authorized personnel for whom the trainee will be working at the time of leave. A limited number of trainees will be allowed to be on leave at any one time, so it is wise for the trainee to discuss leave plans with fellow trainees to avoid conflicts. The Program Director signs the form authorizing the leave after the physician signs the form. The form is submitted for final approval to the Military Personnel Office of the trainee's parent MTF. The trainee must obtain a copy of the approved form before he/she goes on leave, and follow required check-out and check-in procedures.

EMERGENCY LEAVE: For emergency leave during clinical and educational work hours, follow the same procedures as for regular leave. In case of emergencies after clinical and educational work hours, the trainee should contact the on-call staff for instructions.

ADMINISTRATIVE LEAVE: This leave is typically assigned by the Director of Medical Education at any NCC military treatment facility and is granted in conjunction with a trainee who has failed to meet a military-specific requirement in order to continue further in GME training and/or promotion to the next PGY-level. Any other use of administrative leave must be discussed by the Program Director with the DIO who will determine if this is the appropriate type of leave and grant approval.

FOR TRAINEES: Trainees should be aware that all types of leave, if for an extended period of time or if taken several times during an academic year or across several academic years, could

impact the criteria for satisfactory completion of the program and upon a resident's/fellow's eligibility to participate in examinations by the relevant certifying board(s). A modification of training dates may be necessary to assure the trainee meets ACGME requirements and is board eligible. Trainees should also note that any type of leave of absence, whether training dates are modified or not, will be appropriately reported to any agency, facility or State during the verification process.

FOR TRAINING PROGRAMS:

Each ABMS has their own rules regarding the use of leave and/or medical leave. It is important that programs petition their own ABMS regarding the amount of leave used by a trainee and whether that can/cannot be waived or requires the trainee to “make up” any portion of the time missed from training. The program's request to and the response from the appropriate Board must be provided to the NCC as documentation that the leave will/will not require a modification in training dates.

The NCC Medical Leave of Absence form is required for any medical absence by a trainee, regardless of what the outcome of the Board is, as absences must be reported when a trainee requests an unrestricted medical license. The NCC Medical Leave of Absence form is posted in MedHub and is accessible to trainees, PDs and program administrators.

*Updated per ACGME Institutional Requirements, effective 1 July 2022.*

*Approved at the 2 August 2023 GMEC meeting.*