

## **Guidelines for Residency Leaves of Absence and Training Waivers**

### **1. BACKGROUND**

The training requirements of residency programs define specific time requirements. While these requirements are generally completed in sequence, it is recognized that a resident may need to interrupt training for a number of reasons. Such interruptions are referred to as leaves of absence. This guideline is intended to provide guidance to program directors on a range of issues relating to leaves of absence taken during residency training including the granting of leaves, salary level implications, and impact on certification exam eligibility.

#### **Related documents:**

A number of important documents govern leaves and their impact on certification exam eligibility. This guideline is not intended to supersede these documents, but will serve to assist Program Directors in their interpretation and application.

- **PARO-CAHO Collective Agreement.** The PARO-CAHO agreement outlines the employment relationship between residents and the Ontario teaching hospitals. This agreement establishes entitlements relating to pregnancy and parental leaves, sick leave, vacation, and professional leave. This agreement can be obtained at <http://www.myparo.ca>
- **Council of Ontario Faculties of Medicine (COFM) *Leaves from Ontario Postgraduate Residency Programs, October 2009.*** The COFM leaves policy provides direction on a number of issues including return to the program after training and granting of unpaid leaves. This policy can be obtained at <http://www.pgme.utoronto.ca/content/policies-guidelines>
- **Royal College of Physicians and Surgeons of Canada (RCPSC) and the College des medecins du Quebec (CMQ) Joint Policy on Waiver of Training After a Leave of Absence from Residency.** The RCPSC policy on waivers following a leave of absence states that:

The postgraduate office may allow a waiver of training following a leave of absence, in accordance with university policy and within the maximum time for a waiver determined by the Royal College and the CMQ. A decision to grant a waiver of training can only be taken in the final year of the program but cannot be

granted after the resident has taken the certification examinations. Each university will develop its own policy on whether or not it is willing to grant a waiver of training for time taken as a leave of absence; however, in the case where waivers of training are acceptable to the university, they must be within the acceptable times listed below. In addition, regardless of any waived blocks of training, the decision to grant a waiver of training must be based on the assumptions that the resident will have achieved the required level of competence by the end of the final year of training.

This policy can be reviewed at Section 4.3.2 at the following weblink:  
[RCPSC Policies and Procedures for Certification and Fellowship, October 2020](#)

- **The College of Family Physicians of Canada (CFPC)** states that Family Medicine residents must complete 24 months of training to be eligible for the Family Medicine certification exam. Waivers of training of a maximum of 4 weeks may be granted at the discretion of the Program Director. This policy can be reviewed at <http://www.cfpc.ca/LeavesAbsenceWaivers/>

## **2. DEFINITIONS:**

**A leave of absence is defined as an approved interruption of training for any reason. Leaves may be taken for a variety of reasons, but are generally categorized into leaves with pay and leaves without pay.**

In all cases, the Program Director, in discussion with the returning resident, should determine:

- the training level to which the resident will return following the leave; and
- the necessary educational experiences required for the resident to complete the residency requirements and goals and objectives of the training program.

Unless required by the Program Director or for purposes of the Record of Employment, leaves of one week or less are not required to be submitted to the central Postgraduate Medical Education Office.

### **Paid Leave**

#### **a) Pregnancy and Parental Leave:**

Entitlement to pregnancy and parental leave is addressed in Section 15 of the PARO-CAHO Agreement.

**b) Medical/Sick Leave:**

Residents are entitled to 6 months of paid sick leave. Further details on Long Term Disability and other entitlements regarding illness or injury are addressed in Section 14 of the PARO-CAHO Agreement.

**c) Professional Leave:**

The PARO-CAHO Agreement describes Professional Leave as 7 days per year in Section 12, as well as time to take Canadian or American certification examinations. This time will not be considered to be a leave for the purposes of this guideline or reporting to the College of Physicians and Surgeons of Ontario (CPSO), or granting of waivers of training.

**d) Vacation:**

Residents are entitled to 4 weeks of paid vacation per year. Vacation entitlement accrues while on maternity/parental leave such that a resident returning from a one-year maternity/parental leave is entitled to 4 weeks of paid vacation in addition to the regular 4-week allotment.

The 4 weeks vacation time must be taken within the academic session and cannot be rolled over or “stockpiled” to the next year, or counted towards waived training time. In addition, vacation time should not be carried over when the resident enters a sub-specialty program.

Hospitals may not restrict the amount of vacation a resident can take in a rotation, but do have the right to delay a vacation request with regard to professional and patient care responsibilities.

**e) Emergency, Family, Bereavement Leave**

A resident may request a leave due to a death in the immediate family or a person with whom the resident had a close relationship. A leave may also be requested due to family illness, injury, medical emergency, or other urgent family matters to which the resident must attend. Five consecutive working days may be granted by the Program Director for this paid leave. This guideline should be interpreted with proper sensitivity.<sup>1</sup>

**Unpaid leave**

**a) Educational Leave:**

A resident may request an unpaid educational leave on the basis that the time away from the residency program is relevant to his/her current program. This must have the support of the resident’s Program Director, and the approval of the Postgraduate Dean or designate.

The maximum educational leave period is usually one year. Leaves beyond one year will be assessed by the Residency Program Committee, Program Director and the Postgraduate Dean or designate.

**b) Personal/Compassionate Leave**

A resident may request a unpaid leave of absence due to a personal situation or career uncertainty. These leaves will be considered on an individual basis by the Program Director in consultation with the Postgraduate Dean or designate.

The maximum leave period in this category is normally 6 months.<sup>2</sup>

**3. SALARY CLASSIFICATION:**

Residents will normally advance to the next pay level at the successful completion of 12 months of training. Residents who have taken a leave of absence of more than one month during the training year, will proceed to the next level only at the discretion of the Program Director.

Factors to be considered in promotion to the next level will include the resident's full completion of the goals and objectives of the training year as measured by ITERs, and all other evaluation tools such as in-training exams, case logs, and completion of academic projects.

Program Directors may also decide to re-appoint residents to the next pay level at the beginning of an academic session to allow them to stay with their cohort, and require them to make up the leave in their final year of training.

**4. RETURN TO TRAINING:**

Residents returning to training after a prolonged non-parental absence may need to return to an earlier level of training and/or require a modified educational program. For specialty residents, no assurance can be given that all training taken prior to the interruption will still be acceptable, even though previously recognized by the RCPSC.<sup>3</sup>

In order to decide on the appropriate training level and program structure, residents may be assigned a 4-12 week period of assessment, similar to the Assessment Verification Program (AVP), structured and organized by the Program Director in consultation with the Residency Program Committee and educational programming resources.

The Program Director, in consultation with the Residency Program Committee, will review the results of the assessment program and submit a recommendation to the Vice Dean or designate regarding the resident's re-entry to training. If approved, the Program Director will discuss with the resident the modified program structure, training level, the evaluation process, and expected outcomes.

Residents returning after medical leave will provide a written medical certificate from their treating physician indicating the resident's capability and fitness to return to the program. The Program Director or the Vice Dean or designate may request an additional independent medical opinion to ensure the resident's capability to resume his/her residency program. The Vice Dean or designate will communicate with the resident when a Residency Program Committee decides against a resident's re-entry to the training program. The case may be referred to the Faculty of Medicine's Board of Examiners-PG or the Board of Medical Assessors. Any appeals would follow the normal Faculty and University Appeals process.

## 5. WAIVER OF TRAINING

Both the RCPSC and CFPC state that residents must complete all of a program's training requirements including duration and competence. However, the University is free to set policies regarding granting leaves of absence and the criteria by which waivers of training time (if any) may be granted.

To meet the CFPC certification exam eligibility requirements, Family Medicine residents must make up any leaves of absence to ensure the full duration of 24 months training is completed. Waivers of training of 4 weeks may be granted at the discretion of the Program Director. Only by exception and under unusual circumstances will the University's Department of Family and Community Medicine agree to review or grant a shortened program. The CFPC must be notified of the waiver prior to submission of the completion of training notice to the College.

Where a resident in a RCPSC program will have achieved the required level of competence by the end of the final year of training, a waiver of 4-12 weeks may be granted at the Program Director's discretion, referring to the maximum allowable time for waivers outlined in section 4.3.2 in the [RCPSC Policies and Procedures for Certification and Fellowship, August 2014](#)

In Internal Medicine and Pediatrics, where residents are undertaking 3 core years and 2 subspecialty years, a maximum of 6 weeks may be waived in the first three core years and a maximum of 6 weeks in the final two subspecialty years. The first 3 core years are to be treated separately for the purpose of considering a training waiver. All core requirements are to be completed before a resident will be released to pursue his/her subspecialty training program.

Completion of training includes not only meeting all specialty training requirements of the RCPSC, but also all of the program's required rotations and items such as in-training examinations, research and/or quality improvement projects, case logs, portfolios and other assessments.

Each program is expected to establish the criteria by which they will allow waivers. Such criteria should be made available to residents, preferably on the program's portal or website.

To reconcile the need for residents who must make up leave time and the annual exam schedule, the RCPSC allows residents to write the Spring exam and complete their residency training requirements by December 31 of that year, or February 28<sup>th</sup> for the Fall exams.

## **6. REPORTING:**

The Postgraduate Medical Education Office will notify the College of Physicians and Surgeons of Ontario (CPSO) of all interruptions in training greater than one week, as reported by the Program Director.

Residents must be aware of their professional obligations to report leaves to the CPSO when applying for or renewing licenses. Failure to disclose leaves from the training program may result in delays in license renewal as a result of investigation and/or disciplinary action.

---

<sup>1</sup> see Employment Standards Act, 2000. Section XIV refers to unpaid leaves of absence entitlement at [http://www.e-laws.gov.on.ca/html/statutes/english/elaws\\_statutes\\_00e41\\_e.htm#BK68](http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_00e41_e.htm#BK68) .

Also, see Canadian Labour Code, Section 200, reference to 3 consecutive days of paid bereavement leave for federal employees <http://laws.justice.gc.ca/en/L-2/>

<sup>2</sup> from the Council of Ontario Faculties of Medicine (COFM) document, *Leaves from Ontario Postgraduate Residency Programs, October 2009*. See section on Compassionate Leave.

<sup>3</sup> RCPSC Policy and Procedures for Certification and Fellowship, August 2014. See Section 4.2.1.

Approved: PGMEAC, HUEC - April 2009  
rev. Approved PGMEAC February 27, 2015