

<b>Purpose:</b>	To clarify accountabilities and ensure clear, transparent, and consistent processes for Leave of Absences (LOAs).
<b>Policy, Rules and Bylaws:</b>	This process is consistent with the Medical Staff Bylaws and Rules, specifically: <ul style="list-style-type: none"> <li>• <a href="#">Medical Staff Bylaws</a>: Articles 4.6.2, 4.7.1 and</li> <li>• <a href="#">Medical Staff Rules</a>: Sections 1.5.13.1, 1.5.13.2, 1.5.13.3</li> <li>• <a href="#">Medical Staff Definition of Leave of Absence Policy</a></li> </ul>
<b>Outcomes:</b>	<ul style="list-style-type: none"> <li>• Ensures that departments have the necessary information to evaluate requests for a Leave of Absence (LOA) in a consistent manner in alignment with the Medical Staff Rules and Bylaws</li> <li>• Provides a framework to support a thorough and timely procedure for processing, documenting and reporting on routine departmental recommendations for LOAs</li> <li>• Provides direction on process for Non-Routine or Extended LOAs</li> <li>• Outlines the process for returning to work following an LOA</li> </ul>

## 1.0 Requirements

Medical staff members may require a Leave of Absence (LOA) for a variety of important reasons. Island Health has a responsibility to support the process for medical staff members to take LOAs in accordance with Medical Staff Bylaws and Rules and while also taking into the account the needs of departments.

### As per the Medical Staff Rules:

*1.5.13.1: An absence from Medical Staff practice for a period between eight (8) weeks and twelve (12) months is considered a Leave of Absence (LOA). Each LOA requires approval by the Board as outlined in Article 4.7.1 of the Bylaws. Maternity or paternity leave requires notification to the Board.*

*1.5.13.2: Requests for medical leave need to be supported by the relevant medical documentation.*

*1.5.13.3: Where the LOA was granted for medical reasons or because a Practitioner’s registration status has been changed to temporarily inactive by the applicable college, the CME must receive acceptable supporting documentation that the Practitioner is fit to resume Privileges to practice in Island Health. This may require a report from an independent medical Practitioner. The documentation will include what restrictions, if any, apply to the resumption of Privileges. The Practitioner has the right to appeal the CME’s decision to reject a request through the HAMAC to the Board.*

### As per the Medical Staff Bylaws:

*4.6.2: In the event that a member wishes to resign from the medical staff, change membership status, or substantially reduce the scope of his/her practice within the facilities/programs operated by the Vancouver Island Health Authority, the member must provide 60 days prior written notice to the Vancouver Island Health Authority.*

### As per the Medical Staff Definition of Leave of Absence Policy:

*Section 3.1: Medical staff members, in collaboration with their medical leader are responsible for securing appropriate coverage for any expected absence.*

**2.0 Use of Leave of Absence**

The following should be noted in the consideration and management of LOAs:

- All medical staff in Associate, Consulting, Provisional, Active medical staff categories are eligible to apply for an LOA.
- Locum and Temporary medical staff appointments are eligible for an LOA, when the expiry date of these time-limited Privileges exceed the approved end date of the LOA.
- Locum and Temporary medical staff appointments are not eligible for an LOA, when the expiry date of these time-limited Privileges is before the approved end date of the LOA and will expire on the start date of the LOA.
- The expectation is that when a provider takes an LOA, this applies to all of their medical staff appointments.
- In rare circumstances, where a department wants to make an exception and recommend an LOA on certain Privileges and not others, the Department Head may do so in consultation with the C&P Medical Director.
- When a provider is taking a Health LOA and has been deemed unfit to practice, the LOA applies to all their appointments.

**3.0 Leave of Absence Types**

There are three types of LOAs:

TYPE	DESCRIPTION
<b>Parental</b>	<ul style="list-style-type: none"> <li>• For individuals who are providing care after the birth or adoption of a child</li> <li>• 8 weeks up to 18 months</li> <li>• Requires Board notification</li> </ul>
<b>Health</b>	<ul style="list-style-type: none"> <li>• For individuals who are taking time away from work due to a documented health condition</li> <li>• 8 weeks up to 12 months, may qualify to be an Extended Health LOA (see section 7)</li> <li>• Requires Board approval</li> <li>• Requires relevant medical documentation from the Provider (given that reasons for Health LOA may be sensitive, and occasionally sudden, variations in documentation requirements will be considered)</li> <li>• Notifications from the Health Branch of the BC College of Physicians and Surgeons of a change in status of licensure related to health concerns, this also meets the requirement for the medical documentation</li> <li>• Does not require 60 days notice for unplanned Health LOAs</li> </ul>
<b>Other</b>	<ul style="list-style-type: none"> <li>• For individuals who are taking time away from work due to all other reasons, such as academic, travel, professional development, skills training, education, or personal</li> <li>• 8 weeks up to 12 months</li> <li>• Requires Board approval</li> </ul>

**4.0 Roles and Responsibilities**

<p><b>Medical Staff Member</b></p>	<ul style="list-style-type: none"> <li>• Submits a written request to their Division Head for an LOA including, the reason for the leave, start and expected return dates</li> <li>• Provides at minimum 60 days’ notice in particular for those LOAs where an application for a Locum Tenens requires processing time</li> <li>• Provides any accompanying medical documentation throughout the LOA process, as required</li> <li>• Works with the Division Head to arrange appropriate coverage, if applicable</li> <li>• Ensures that their charts are current prior to taking their LOA</li> </ul>
<p><b>Division Head</b></p>	<ul style="list-style-type: none"> <li>• Receives and reviews the LOA request from the medical staff member</li> <li>• Notifies the Department Head and Credentialing Office of their recommendation</li> <li>• Consults with the Department Head if requires additional support in evaluating the request for an LOA</li> <li>• Works with the medical staff member to secure appropriate coverage, if applicable</li> </ul>
<p><b>Department Head</b></p>	<ul style="list-style-type: none"> <li>• Reviews and considers for approval recommendations from Division Heads for LOAs</li> <li>• Consults the C&amp;P Medical Director for any non-routine and/or complicated requests</li> </ul>
<p><b>C&amp;P Medical Director</b></p>	<ul style="list-style-type: none"> <li>• Operates as a resource/point of contact for Department and Division Heads and provides advice related to LOA processes and requirements</li> <li>• Reviews all LOA requests</li> <li>• Supports the process to assess fitness to return to practice following Extended LOAs</li> </ul>
<p><b>Credentialing Office</b></p>	<ul style="list-style-type: none"> <li>• Processes the requests from the medical staff member and prepares the necessary information for review by the medical leaders</li> <li>• Enters the approved LOA on the <i>Credential Summary Report</i></li> <li>• Notifies the medical staff member of the recommended approval of the LOA</li> <li>• Tracks timelines for anticipated return from the LOA and follow-ups accordingly with the medical staff member</li> <li>• Forwards the request to the departmental leaders for their review and recommendation, when the medical staff member does not plan to return as previously scheduled and approved by the Board</li> <li>• Documents on the <i>Credential Summary Report</i> when a medical staff member returns earlier than the previously approved end date of the LOA, or is approved for an extension to their LOA</li> </ul>
<p><b>Medical Planning and Credentials Committee (MPCC)</b></p>	<ul style="list-style-type: none"> <li>• Considers for endorsement the LOA recommended by medical staff departments and the C&amp;P Medical Director</li> <li>• Provides a venue for a detailed review or deliberation of any non-routine and/or extended LOAs, in order to make a recommendation to HAMAC</li> <li>• Oversees the consistent application of the LOA guideline and process</li> </ul>
<p><b>Health Authority Medical Advisory Committee (HAMAC)</b></p>	<ul style="list-style-type: none"> <li>• Addresses issues and challenges unable to be resolved by medical staff departments and the Medical Planning and Credentials Committee (MPCC)</li> <li>• Supports escalation processes upon request by MPCC</li> </ul>

### 5.0 Reporting & Forms

#### Reporting:

- *Monthly Department Reports*: a list of all members including those who are on a LOA, sent to the Department Head.
- *Credentials Summary Report*: contains a summary of Medical Staff LOAs processed within the preceding period.
- *Non-Routine Medical Staff Appointment Report – LOAs*: contains a summary of Non-Routine LOAs.

#### Forms:

- *Department Recommendation Form*: a document used to provide a summarized departmental recommendation to Committees.

### 6.0 Procedure

**Step 1:** The provider submits a written request for an LOA to their Division Head or the Credentialing Office including the reason for the leave, start and expected return dates.

**Step 2:** Credentialing Office collects the necessary information as above. For planned Health LOAs, the Credentialing Office collects the medical documentation.

**Step 3:** Credentialing Office sends the compiled information regarding the request to the Division and Department Head for their review and recommendation and then to the C&P Medical Director for final review.

**Step 4:** Credentialing Office informs the medical staff member of the interim approval of their LOA.

**Step 5:** Credentialing Office enters the LOA into the *Credentialing Summary Report* for consideration for approval by Medical Planning and Credentialing Committee (MPCC), Health Authority Medical Advisory Committee (HAMAC) and the Island Health Board.

**Step 6:** Credentialing Office reaches out to the medical staff member prior to the anticipated end date of the LOA to confirm and process their return.

**Step 7:** The provider may request to lengthen their LOA for up to the maximum of 12 months with the approval of the departmental leaders.

### 7.0 Extended Health Leave of Absence

- Extended LOA is defined as an LOA that exceeds 12 months.
- Health LOAs may qualify to be an Extended LOA.
- Where there is a request for an Extended Health LOA, updated medical documentation may be required as verification that the provider is not yet fit to return to practice, including a projected date for re-assessment and possible return.
- Departmental leaders, in consultation with the C&P Medical Director, will consider the information provided and make a recommendation, and if recommended for approval this Extended Health LOA will be reported in the *Credentialing Summary Report*.
- If the Health LOA is projected to surpass 24 months, the department in collaboration with the C&P Medical Director will present at MPCC for consideration prior to interim approval. An Health LOA exceeding 24 months is deemed a Non-Routine LOA, and is managed accordingly.

### 8.0 Non-Routine Leave of Absence

- There are two types of Non-Routine LOAs:
  1. Extended Health LOAs that exceed 24 months, as per above.
  2. An LOA complicated by factors, such as:
    - Recommendation from a department not to approve the requested LOA
    - A request for an Extended LOA for an indication other than Health
    - A request for an LOA while clinical practice concerns and/or professional conduct are being evaluated
    - An LOA at the request of the VP of Medicine or delegate
- Departmental leaders in consultation with C&P Medical Director presents a completed *Department Recommendation Form* for in camera deliberation and recommendation to HAMAC.
- The *Non-Routine Medical Staff Appointment Report* serves as documentation of any outstanding performance management concerns that were unresolved when the provider went on LOA, and that may warrant reconsideration upon their return.

### 9.0 Return Process for a Leave of Absence

Prior to returning from an LOA, the Credentialing Office will confirm:

- Proof of current liability insurance coverage
- College Licensure

If the provider is returning from a Health LOA:

- A medical note verifying fitness to return to work will be required.

If the provider is returning from an Extended LOA:

- The departmental leaders meet with the medical staff member, to evaluate currency and identify any opportunities to ensure a safe and supported return to practice.
- Should there need to be a period of mentorship, re-training, or supervised practice, *Category 2* conditions may be applied to the reinstatement of Privileges, via the *Non-Routine Application Management* process.