

McMaster Pediatric Residents' Practical Guide to On call and Off call (Call, Vacation, Professional Leave, "Off Call", "Call Free" and Lieu Days)

Not As Simple As You Might Think

VACATION

How much vacation do I get?

Every resident gets 20 working days vacation each year, July 1 to June 30, with no carry over (i.e. you can't save some vacation that you didn't take this year for next year).

Both PAIRO and McMaster postgrad stipulate that vacation should be taken in 1 week blocks minimum (i.e. 5 working days, plus the weekend before or after- residents' choice- as call free). However, in our program we have extended the privilege to our residents of taking single days of vacation (e.g. adding a Friday and/or Monday to make a long weekend). The "unofficial" deal is that we allow residents to "split up" one 5 working day week per year. If you want to guarantee a weekend off (for example to attend your friend's wedding), you may want to take the Friday and Sunday as vacation days (a resident cannot be given call before a vacation day, effectively giving you a three day weekend guaranteed without having to use up a whole 5 day vacation block).

Additionally, for "normal" one week blocks of vacation the chief residents will make every effort to extend the courtesy of making the weekends on both ends of a vacation week call free, not just the one requested. By PAIRO guidelines, resident are entitled to one weekend 'off call' for every 5 working days of vacation requested.

How do I request a vacation?

There are two ways to request a vacation:

- 1) When the program director asks for requests for the upcoming rotation schedule (usually in April), residents may request 2 weeks of vacation as a "block". 3-4 weeks straight is possible too- talk to the program director to discuss which rotation you will be missing. However you will not be permitted to take one 2 week vacation block and spread your other vacation days.
- 2) Request a week of vacation to take place during a clinical rotation. One week is allowed during a 4week rotation, and two weeks are allowed during an 8 week rotation. You must specify which weekend you want to go with the five day work week.

Process for submitting a vacation request during a rotation:

Apply for vacation through Medportal. There is a link on the Postgrad page to apply for vacation. Please ensure on the Workflow sheet that a copy will be sent to the Pediatric Chief residents, the supervising staff/ or administrative assistant, and Shirley Ferguson.

* You get ONE guaranteed weekend that goes with your 5 weekday vacation. Please specify which weekend you want in your vacation request. The chiefs can give you a rough indication of what the chances are, but other weekend is never guaranteed, so if you book a plane ticket banking on a 10 day holiday, you are taking a risk. The chiefs cannot guarantee off call requests for the "other" weekend, and some call months are tight.

****Please note:** there is a PAIRO and hospital deadline for vacation requests for the year, usually March 1st.

“CALL FREE” TIME

What are “Call Free” blocks?

Call free blocks are 4 week rotations during which time the resident will not do call within our program. Usually, call free blocks = elective blocks. Each resident from PGY2-4 gets 2 call free (usually = elective) 4 week blocks each year July 1 to June 30 with no carryover. These blocks are electives that allow residents to do international rotations, try out other departments across the country to get some ideas for fellowship or future work, etc. You can request to do call at McMaster during an elective and have another block be designated as call free- discuss this with the program director.

Even if a resident does call at another institution during an elective, that block is still considered “call free” because the resident is not doing call within our program. Note that the “Community” block is not call free (you do call in the community, which is considered part of our program). If you have a special request with respect to call free rotations that you’re not sure about, speak with your program director and make sure the chief residents get written documentation of any special permission you obtain regarding your electives/call free time. The chiefs must know exactly when you are not available for the call schedule.

PROFESSIONAL LEAVE

What is professional leave?

Professional leave, quite properly described by the PAIRO and McMaster Postgrad website, is as follows:

In addition to vacation entitlement, interns and residents shall be granted additional paid leave to attend educational events such as medical conferences which are approved by the appropriate program director or department head (and chief residents). Such conference leave, up to a maximum of seven (7) working days per annum, shall be consecutive if requested by the interne or resident, and shall not be deducted from regular vacation entitlement. Such leave may be taken by house staff at any time, provided only that professional and patient responsibilities are met to the satisfaction of the hospital department head.

Each interne and resident shall be entitled to paid leave for the purpose of taking any Canadian or American professional certification examination, or CaRMs fellowship interviews: for example, Royal College examinations, LMCC, ECFMG, CFPC. This leave shall be in addition to other vacation or leave. (The resident should inform the service in advance of this leave and get approval. Only a reasonable amount of time should be requested.)

The same process applies for approval of ‘professional leave’ as that of vacation – see process above (i.e. Through Medportal).

LIEU DAYS

What is a lieu day?

A lieu day is a day off “instead” of a stat holiday. If you are on call on a stat holiday (this includes if you are on-call on the Sunday and work from midnight to 8am on the holiday Monday etc.), you get to take another day off in its place (of your choice with approval from your rotation supervisor). As such, being on call on a long weekend is not so bad because you have the opportunity of making your own long weekend, perhaps when the traffic is not so bad!

Again, from PAIRO and McMaster Postgrad website:

If an interne or resident is scheduled to work on a recognized holiday (i.e. New Year's Day, Labour Day, Easter Friday, Thanksgiving Day, Victoria Day, Christmas Day, Dominion Day, Boxing Day, August Civic Holiday) he/she shall be entitled to a paid day off in lieu of the holiday to be taken at a time mutually convenient **within ninety days** of the holiday worked.

This applies to any resident who works ANY part of a recognized holiday (e.g. Sunday 24hr call of Labour Day long-weekend qualifies for a lieu day since the resident worked from midnight to 9am on 'Labour Day' Monday).

Your supervisor must be aware that you will be taking a lieu day during their rotation, and a form submitted to the chief residents as well, who grant approval based on the call schedule.

OFF CALL REQUESTS

What is an "off call request"?

Before putting together a call schedule, the chiefs will email the residents for "off call requests". These are preferences for days that you prefer not to be on call. They are never guaranteed, but the chiefs will try to accommodate these requests as best as possible. If you really need time off for something or need a particular date guaranteed off-call more than two weeks in advance, request it as vacation.

To reiterate, an "off call request" weekend is never secure unless you take it as vacation; if other people take vacation over that weekend, vacation takes precedence over an off-call request, which may be ultimately denied. It is impossible for the chief residents to keep everyone with an important off call request informed of everyone else's vacation status (i.e. advising them of when they need to take vacation and not just an off call request) so please don't ask them to tell you if you should take vacation or request off call to secure a specific weekend.

Please try to keep your off call requests to a minimum- the chiefs will prioritize people with fewer off call requests. As well, off call requests will be processed on a first come, first-serve basis.

CALL

Where and when do I show up for call?

At MUMC, junior residents on the general peds ward (teams 1, 2 and 3) meet in the room specified on the teaching schedule at 4:30pm on Monday to Friday, 8:30am on Saturday, Sunday and any statutory/hospital holidays. The same applies to senior residents, with the exception of meeting the on-coming senior resident at 8:00 am on weekends to give a more tailored handover, after which point the post-call senior is free to go home.

At St. Joseph's hospital, junior residents meet in the 3 OBS conference room (across from the NICU on the 3rd floor, obstetrics ward) at 5:00pm on weekdays and 8:30am on weekends and holidays.

What if I'm sick or have a personal emergency that arises and I can't do call?

In the case of not being able to do a call shift:

1. The resident who cannot make their shift must phone or page all the possible residents who might be able to switch a call with you. A list of all pediatric residents' home phone numbers will be circulated early in the year. This document as well is posted on Medportal for all pediatric residents to access. Paging (extension 76443) will be able to page the family medicine and BCT residents for you. Please do not email- this is too slow.

2. If, after exhausting all the options for potential switches, you still cannot find a replacement, call or page the senior resident on call at that time. Off service residents are to call the SPR first, who will activate the back up resident on their behalf, or forward them the contact list.
3. If you are being taken to the hospital because you are sick or are getting on a plane within the hour to attend to a family emergency, by all means phone or page the senior resident on call and they will activate the back up float (this list again is posted on Medportal for all to have access to).
4. The senior resident on call will forward you the pediatric contact list, if you have not yet phoned down the list, or if you are unable to do so, will give you the back up alternative number so they can phone down the list.
5. Please also page the staff on call to let them know you are unwell and will be unable to attend call that day
6. For extreme and unforeseen reasons of missing a shift (i.e. unexpected illness), it becomes the back up call person's responsibility to either take the call or find someone else who can. If they are unsuccessful at filling the call they are to call back the staff on call and the senior resident to make them aware that they were unable to get anyone to come in for call. This means, the back-up residents may be required to call down the list multiple times in one week (although should be in extremely rare circumstances).
7. During weekday day shifts, residents rotate through mandatory core rotations. As a result, we will be unable to find any daytime resident coverage should a resident call in sick. The service the sick resident is on will need to find additional coverage, or manage without the resident for that day.

What if I have a personal issue (e.g. chronic medical condition) that prevents me from doing the standard call requirements?

If a resident has a personal issue that may affect his or her call capabilities, this needs to be addressed with the program director. The program director may then instruct the chief residents regarding call limitations for the resident. Unless indicated by the program director, all residents are considered equal with respect to call responsibilities. Chief residents are not in an appropriate position to make judgments about special call considerations.

What if I don't think my call schedule is fair?

Don't hesitate to bring it to the chiefs' attention if you think there is an oversight in your call schedule (e.g. too many days on call, forgotten off call request). Mistakes do happen. We will be able to verify any inequities by referring to PAIRO guidelines and/or the call schedule tally.

PAIRO also receives a copy of all resident call schedules, and reviews these to ensure that they generally do not exceed the contract requirements. The chiefs are able to resolve the large majority of call scheduling issues, but your PAIRO representative would be happy to discuss things further if you feel that your schedule exceeds the contract requirements (i.e. Maximum 1 in 4 in-hospital call, averaged over maximum of 3 months)

What if I don't think someone else's call schedule is fair?

Please do not be concerned with others' call schedules- leave that between the other resident and the chiefs. There is a lot that goes into making the schedule, making it impossible to judge without knowing all the details. Trust us, we put a lot of time into making sure the call schedule is fair.

What are my responsibilities when I'm on junior call at MUMC?

On weekdays:

1. Take handover from the day residents at 4:30 in the handover room and follow-up on any outstanding issues for these patients overnight.
2. Take calls from RNs looking after the patients on your team, review any concerns or very sick children with the senior resident.
3. See consults from the emergency room as indicated by the Senior Pediatric Resident.
4. Update and print the electronic handover lists for the next team before morning handover.

On weekends:

1. Take handover from the previous residents (8:30am for junior residents, 8:00 for senior residents).
2. Round on patients on your team and review with staff and/or the senior resident.
3. Write a daily progress note, including an updated problem list. These issues will be reviewed at rounds with your SPR or staff, but please bring any urgent issues to their attention earlier.
4. Take calls from RNs looking after your team.
5. See consults from the ER as indicated by the senior, review with senior resident or staff.
6. Update and print the electronic handover lists for the next team before morning handover.

Anytime:

-ER consults (whether admitted or discharged home) need a full admission note and dictated note (it's fast and easy to read from your written note) once the case is reviewed with your senior resident/staff.

-If your attending pediatrician on call asks you to consult a pediatric subspecialty (e.g. nephrology), fill out a green consult form and page the resident (or staff if no resident) on that service to inform them of the consult.

-When discharging a patient, fill out the "face sheet" in the chart and dictate a discharge summary (if an admission note was dictated- as it should be- you don't have to repeat the admission information, just course in hospital, discharge meds, follow up issues, etc.)

What if I am carrying 5304?

5304 is the heme/onc pager. You will only carry the heme/onc pager if you have already completed your heme/onc rotation.

For Weekdays (Monday-Friday):

- The day-time **ward resident** must provide a **verbal handover, patient list and physical handover of pager 5304** to the resident covering Heme-Onc nights at **16:30**.
- If there is no resident available, then the **Heme-Onc fellow, ACNP or Staff** on service will carry pager 5304 and be responsible for handover at **16:30**. It is not reasonable to take the pager before this time as it may interfere with your other responsibilities.
- The resident on call for Heme-Onc over-night should come to 3B at **16:30** to get a quick handover **BEFORE CTU handover**.
- The following morning, the Heme-Onc ward resident, fellow, ACNP or Staff (in that order of availability) will contact the night resident at **7:50am** to do a verbal & physical pager handover; please be timely about this as the night resident needs to go to their mandatory teaching at 8am.

*(If no one is available for handover at 8am, the night resident should page the attending heme/onc staff to give a verbal handover then attend teaching and handover directly at 9am. Obviously patient care takes priority, and thus, if there is a sick child, appropriate handover and care of the child should occur between 8 and 9am, if necessary).

Please note:

- The Heme-Onc dedicated *clinic* resident **IS NOT** to handover patients on the ward to the night-resident while they are not doing ward service due to issues with handover quality and patient safety.
- To identify the appropriate Night resident for handover, refer to the Resident On-Call schedule (there is a separate column for Heme-Onc Nights) or on Medportal.ca under the "peds downloads" section.
- If there is discrepancy about who is to take the pager at any time, the **SPR carrying 1645** is responsible to get handover. They are responsible for distributing the pager accordingly.

For Weekends (Saturday & Sunday) and STAT holidays (including the Christmas/New Year's Holiday period):

Morning Handover:

- On Saturday, Sunday & Holidays during General Pediatrics handover at 8:30 am, the outgoing Night resident covering Heme-Onc will brief the incoming resident on *critical issues only* + give them pager 5304 and a patient list.
- The outgoing Night resident is responsible for paging the On-call Heme-Onc Staff after 8:30 to inform them of any night-issues.

Daytime Coverage:

- **From 9 am – 3 pm the on-call Heme-Onc staff or fellow is responsible for all patient issues, including consults. Any pages to 5304 during this time period should be re-directed to the aforementioned parties.**
- **If the staff is not in-house and a patient needs urgent assistance between 9am and 3pm, the resident carrying 5304 should assess the patient while the staff is en-route, and PACE should be involved as necessary.**
- If the on-call staff leaves before 3pm, they will call the 5304 resident to notify them, and provide a **BRIEF** handover of any acutely ill children that may require attention. However, all consults remain the responsibility of the staff or fellow before this time.
- At 3pm, a formal handover should occur (or sooner if the CTU resident is available).

Daytime Consults:

- On-call residents are dedicated to the general pediatric service until 3pm, and thus will not be available to do consultations until this time.
- If a patient is admitted before that time and the staff is not in-house, the resident will NOT be available to do the consult until this time.

****Please note:** All ill patients should be coming through the ED, and stabilized before they arrive on the pediatric ward.

PICU Buddy Coverage:

- If there is a junior-buddy on call with a senior resident in the PCCU, then the PCCU senior-buddy may carry the Heme-Onc pager.

****Please note:** PCCU patients take priority, and if there are critical patients in the unit, then one of the general pediatric on-call residents should carry the pager.

Who can I call for help with patients when on call?

Page the senior pediatric resident “SPR” (pager 1645) or your staff pediatrician with anything you are unsure about. If there is a patient deteriorating, don’t hesitate to page PICU resident through activating PACE or call a code blue (it doesn’t have to be an actual arrest to call a code blue, but is OK for patients looking like they may arrest at any time).

What if I want to switch a call shift with another resident?

For call switches agreed upon by both residents, notify paging (ext. 76443) and email the chief residents with the details of the switch.

Call Stipends

How do I get my call stipend?

Residents get extra pay for call, \$100 for in hospital overnight call and \$50 for “qualifying shifts” including ER shifts at night and night float (SPR and PICU). For every call you do, visit the Postgrad page on Medportal and go through the link for on-call stipends. Try to submit all your call stipends as early as possible, as the strict deadline is 30 days after the end of the month. For example, all July calls need to be submitted by August 30. Check out the FAQ link on the website for instructions. The call stipend gets added to your pay every three months.

PAIRO (Professional Association of Interns and Residents of Ontario) works on behalf of residents to protect your interests, rights and well-being as well as advocating for residents' roles as learners, employees and teachers in the health care system. They can assist in discussing disputes between residents and their program representatives, but encourage you to TALK TO YOUR CHIEF RESIDENTS FIRST if you have any questions or concerns about call responsibilities!

PAIRO Quick Facts - Top "10" Things You Should Know About the Contract

Call and Other Work Hour Rules

1. **Call Schedules** must be distributed at least 2 weeks in advance of the effective date.
2. **Call Maximums** are based on the total days ON Service (vacation and other time away are deducted from the total prior to calculating maximum call).

Residents cannot be scheduled to work two or more consecutive calls unless agreed upon by the residents, the Program Director and PAIRO.

Residents cannot be required to round (or perform other clinical duties) on weekends when not on call.

In House Call: The in-house maximum is 1 in 4. For a "one month" rotation these maximums are:

- 19-22 Days = 5 calls
- 23-26 Days = 6 calls
- 27-29 Days = 7 calls
- 30-34 Days = 8 calls
- 35-38 Days = 9 calls

In hospital call maximums for rotations >1 month can be averaged over the length of the rotation (maximum averaging length is 3 months) with a maximum of 9 calls in any given month. The total number of calls on a rotation longer than one month can be calculated by taking the total of number of days ON service, divided by 4 and rounded to the nearest whole number (.5 rounds up).

Each Resident must have 2 COMPLETE weekends off per 28 days. This includes Friday night/Saturday morning as well as Saturday & Sunday.

Home Call: Home Call Max is 1 in 3, or 10 per 30.

A resident cannot be on home call on 2 consecutive weekends

3. **Shift work**
 - On rotations where residents are scheduled in shifts, e.g. Emergency Medicine or Intensive care: Max hours = 60 hours/week, including other scheduled responsibilities (including academic half days).
 - There must be a minimum of 12 hours off between shifts
 - Residents doing shift work must have 2 COMPLETE weekends off per month. A weekend starts at midnight Friday.
4. **Post Call**
 - Home 1 hr after handover for all in house call
 - For Home Call
 - Home by noon if called in after midnight or in hospital for 4 consecutive hours with 1 past midnight.

5. Residents not on call/scheduled to work cannot be expected or compelled to be available on pagers or to come in for any reason.

Vacation and Professional Leave

6. **Vacation**
 - 4 weeks (a week is 7 days which includes 5 working days and 2 weekend days) of paid vacation per year (no carryover).
 - Requests must be made in writing at least 4 weeks in advance of the requested start day of the vacation (recommend at least 6 wks), and they are to be submitted no later than March 1st. (if you wish to take 1 of the 4 weeks of vacation for an RCPSC or CFPC certification exam in the spring, you have up until 1 month in advance to submit your request)
 - All requests must be confirmed or alternate times agreed to within 2 weeks of the request.
 - Denials must be in writing with the reason for denial.
 - There can be no blanket policies restricting the amount of vacation in any rotation.
7. **Professional Leave**
 - Maximum of 7 working days per year (Note: weekends are not considered “working days” for this purpose.)
 - You DO NOT need to be attending a Seminar or Course to take them
 - Can be used as reading days, you can take leave for any Canadian or American professional certification exam. This leave includes the day(s) of the exam and reasonable travel time to and from the exam site. This time is in addition to other vacation or leave.

Holidays and Lieu Days

8. All House staff are entitled to the following recognized holidays:
 - New Year’s Day
 - Easter Friday
 - Victoria Day
 - Dominion Day
 - August Civic Holiday
 - Labor Day
 - Thanksgiving Day
 - Christmas Day
 - Boxing Day
 - Family Day
 - One Floating Holidays

All house staff are entitled to 5 consecutive days off during the 12 day period encompassing Christmas Day and New Year’s Day. These 5 days account for Christmas Day, New Year’s Day, Boxing Day and two weekend days. Each resident must get either Christmas or New Year’s Day off.

9. **Lieu Days**
 - Lieu days are granted for residents who are scheduled to work on any recognized stat holiday (or any part thereof, including being on call the day before).
 - Must be taken at a mutually agreeable time within 90 days of the holiday worked.
 - No lieu days for Christmas Day, New Year’s Day & Boxing Day (this is included in the 5 days off over the holiday period).

Problems:

10. Questions or Problems regarding the Contract

Call the PAIRO Office at 1-877 979-1183 or look for details at www.pairo.org.