

General Cardiology Fellowship Parental Leave Policy

National survey data indicate that a majority of medical trainees across specialties do not take the maximal parental leave time allowed. One barrier to adequate parental leave is the requirement of fellows to cover for their colleagues, which creates pressure for new parents to "make up" or "pay back" shifts for fear of discrimination or guilt related to missing work. The need for fellows to reciprocate shifts following parental leave can also reduce time designated for other career advancement opportunities, such as research or clinical electives. In alignment with our division's commitment to equity, we designed a parental leave structure in which financial stipends are provided to fellows who cover clinical duties for colleagues on parental leave. By introducing paid coverage for parental leave, our hope is that both men and women will be encouraged to have meaningful time with their growing families while pursuing illustrious careers in cardiology.

- Beginning July 2021, expecting male and female general cardiology fellows will be provided with 8 weeks of parental leave comprised of vacation, elective, and other rotations where fellows are considered non-essential and therefore no coverage is required. For 1st year/early 2nd year fellows assigned to overnight call, each fellow on leave will miss 8 calls (assuming 1 call/week). Four of these calls will be transitioned to other fellows who will receive a stipend of \$500/call. The other 4 calls will remain assigned to the fellow on leave but will be traded for other, more convenient times in the year.
- All general cardiology fellows are eligible to take parental leave. There is no minimum amount of time required to work at BIDMC prior to being eligible.
- While on parental leave, it is assumed that fellows are fully away from the
 hospital and all hospital related activities. If fellows elect to participate in
 educational or research activities for their own career development, they should
 send an email statement to the Fellowship Director noting this in writing.

Ultimately, this policy seeks to promote a more equitable environment for both men and women within cardiology and to create a structure that supports new parents during their medical training.