

MSS Education Committee (EdCom)

Short Term Leave of Absence Policy Feedback

May 10th, 2023





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Introduction

On May 9th 2023, the McGill medical student society (MSS) student leadership was contacted by UGME governance to provide feedback on the [short-term absences policy](#) with the “*possibility of making minor changes to the policy via an e-vote if required*”.

Specific instructions provided are as follows with a request to provide the feedback in three business days:

“I am writing to ask if you have any [policy-specific concerns](#) to report. For example, is there anything in the policy that should be edited, removed, or added that would make things clearer? Or are your concerns more administrative in nature? If you have policy-specific concerns, I kindly ask you to explain what the issue is as well as the page number in question.”

As such, the MSS student leadership and the [student representatives from the MSS Education Committee](#) met on May 10th 2023 to provide specific feedback and recommendations based on the instructions provided.

The feedback provided will be in concordance with the sections of the policy: guiding principles, policy, health-related absences, urgent crises, flex days and personal days and finally other feedback.

Feedback

Guiding Principles

Table 1.0 Feedback on the guiding principles of the short term absences and leaves policy

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
2 of 18	<i>“It is a professional obligation for students in the clinical setting to notify the site director, site administrator, and direct supervisor of their absence as it can affect patient care.”</i>	This may sometimes feel burdensome to some students to notify three people in case of a sickness or urgent crisis within 48 hours, in addition to dealing with the logistics of submitting an absence. The consequences of missing a step in this process are also major on the student side (i.e. the leave is considered “unauthorized” and can be considered a professionalism lapse). In addition, some course directors have expressed to some students that they do not want/need to be notified. We recognize the need to notify appropriate stakeholders. An alternative is to consider notifying the direct supervisor and the site administrators only. If the site director wants or needs to be informed, the site administrator can notify them or document the absence accordingly according to internal site processes.

Policy

Table 2. Feedback on the policy section of the short term absences and leaves policy

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
2 of 11	<i>“Attendance is considered mandatory and is monitored for the following activities: (...) The day before an examination (e.g., if an examination is on a Tuesday, all learning activities on the Monday are considered mandatory)”</i>	<p>It is not made clear to students why they are unable to request time off or take a sick day before an examination. An explanation would be most appreciated to help students understand this policy.</p> <p>It is often a time of high stress, and as such both physical and mental health conditions can be exacerbated. Should a student require a day off before an examination, a medical note is necessary (as per page 6 of 11), akin to missing an examination or missing a 3rd consecutive day of illness. As such, it appears that missing an examination and missing the day prior are put in the same level of severity as per the language in this policy. Students who are sick the day before an examination and that do not have access to a family physician are burdened with trying to find a</p>

Page	Excerpt	Comments
		<p>medical note in times of high stress, often waiting hours in walk-ins, paying out-of-pocket fees for private clinics or even attending the emergency room for a letter (and not necessarily medical care). The wellness hub is not a resource that is available for those students, even if calling first at 8am, there are no appointments due to chronic understaffing that is not being resolved due to provincial hiring regulations. See more details here.</p>
<p>2 of 11</p> <p>and</p> <p>3 of 11</p>	<p><u>Point 1 (page 2 of 11)</u> <i>"If the absence leads to an incomplete course or incomplete course requirement and assessment, there will be a make-up activity required."</i></p> <p><u>Point 6 (page 3 of 11)</u> "Absences that render a course incomplete, including missing more than 25% of any course requirement"</p>	<p>As stated in the promotions regulation policy, students are allowed to miss up to 25% of any course requirement. However, there is a lot of uncertainty for students on what constitutes a course requirement. MSS student leaders often receive questions from their peers regarding this. It would be most appreciated if this would be clarified in this policy or directly on the MyCourses learning assessment section.</p> <p>For example, in the FMED 301 course, it is unclear if the course requirements are the large sub-groups (clinical sessions) or the smaller subsets of requirements embedded within. It is also unclear to students if sessions are counted in blocks of learning activity or by 1-h lecture equivalents. For example, some lectures are 2h while others are 1h. Is missing a 1h lecture equivalent to missing a 2h lecture?</p> <p>See below a schematic representation of this concept. The correct interpretation is version A according to the course administrators.</p> <p>Mandatory Attendance is required for the following learning sessions per each course requirement:</p> <p>Version A</p> <pre> graph LR subgraph "Course requirements" C1[1. Clinical Sessions] C2[2. Teaching sessions] C3[3. Pelvic exam teaching] end C1 --- B1[25%] C2 --- B2[25%] C3 --- B3[+ Table of course requirement/submissions] B1 --- B2 B2 --- B3 </pre> <ul style="list-style-type: none"> 1. Clinical Sessions: <ul style="list-style-type: none"> ◦ Supervised Clinical Session ◦ Overview of Long Term Care Systems ◦ Large Group Discussion 2. Teaching sessions: <ul style="list-style-type: none"> ◦ Small Group Discussions ◦ Lectures ◦ Introduction to Obstetrics Care in Family Medicine ◦ Indigenous Health Sessions ◦ Practical Approaches to Sexuality and Gender – SIM Activity 3. Pelvic exam teaching <p>+ Table of course requirement/submissions</p>

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
		<p>Mandatory Attendance is required for the following learning sessions per each course requirement:</p> <p>Version B</p> <p>Course requirements</p> <p>1. Clinical Sessions:</p> <ul style="list-style-type: none"> Supervised Clinical Session 25% Overview of Long Term Care Systems 25% Large Group Discussion 25% <p>2. Teaching sessions:</p> <ul style="list-style-type: none"> Small Group Discussions 25% Lectures 25% Introduction to Obstetrics Care in Family Medicine 25% Indigenous Health Sessions 25% Practical Approaches to Sexuality and Gender – SIM Activity 25% <p>3. Pelvic exam teaching</p> <p>+ Table of course requirement/submissions</p>
Page 3 of 11	<p><i>“Students no longer requiring a previously approved absence must submit a request by email to have the absence withdrawn no later than 7 days after the absence. Requests for absence withdrawal after this timeline will not be considered and the absence will be deducted from the student’s allotted days off.”</i></p>	<p>Students understand through this policy how to create (e.g. 30 days before for flex day) or cancel a submission (7 days after the absence). However, it is not clear what are the policies in submitting a <i>modification</i> (i.e. change in the date) to a pre-existing approved leave.</p> <p>For example, if a student requested May 1st as a personal day to attend a family gathering, but the family decided to reschedule to May 5th, where does the policy stand? How many days before the event are students allowed to make modifications to the date - if any? If a student submits another personal day, it would be refused as it would not meet the 30-day requirement.</p>

Health-related absences

Table 3. Feedback on health-related absences in the short term absences and leaves policy

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
Page 6 of 11	<p><i>“Health care appointment → Justification and requirements → N/A”</i></p>	<p>When looking at the policy, in the justification and requirement, it says “N/A”. It comes to a surprise sometimes that the administrator would ask for proof of an appointment as this is not indicated on this policy. If a proof is indeed necessary, it should be included in this table so that students can arrange for proper documentation at the time of booking appointment.</p> <p>This same logic regarding “N/A” language would be helpful to clarify for urgent crises (page 7 of 11), Acute Loss (page 9 of 11), and financial Appointment (page 10</p>

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
		of 11)
Page 6 of 11	<i>"A student with recurrent absences due to acute illness, chronic illness, acute illness in a dependent or who has already used their allotted absences for the academic year may be required to meet with the Assistant Dean Student Affairs (through the WELL Office) to discuss student wellness."</i>	<p>We have a total of 14 days in the "health care related absence" section as per table on page page 5 of 11. However, they are mutually exclusive to 10 sick days and 4 health care related appointments.</p> <p>It would be greatly appreciated if students who have run out of health care appointment days can use their sick days if they have any remaining. For example, students with chronic illness may require more than 4 days a year for appointments. However, if they have sick days left, then it would be helpful to use the latter as credits.</p>

Urgent Crises

Table 4. Feedback on urgent crises in the short term absences and leaves policy

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
Page 7 of 11	<i>"Urgent crises → Justification and requirements → N/A"</i>	It is not clear from the policy if students need to provide proof of crisis (e.g. robbery → police report). It says "N/A" which could mean that no proof is necessary or that there are no specifications about the type of proof to provide. This comment is similar to the N/A found in the "health care appointment" section of table 3.0 above.

Flex Days

Table 5. Feedback on flex days in the short term absences and leaves policy

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
Page 7 of 11	<i>"Representing the Faculty of Medicine in a Medical Student Society (MSS) or in a UGME Program designated or approved role → Participating in UGME Committees"</i>	Student representatives often hesitate in using flex days to participate in UGME committees as this means they would be using flex days that could have been used for other means, like conferences. As such, students voluntarily participating in UGME activities, such as the 65 student representatives on the MSS Education Committee, have less incentive in being

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
		present if the meetings are at the same time as teaching or clinical activities. Many, if not most meetings, occur during working hours. If UGME committee attendance could be credited as “zero” in the flex day section for student representatives, this would be appreciated and would foster more student engagement within UGME.
Page 7 of 11	<i>“Flex Days → Deadline to make request in absence & leaves system” (i.e. 30 days notice for flex days)</i>	<p>For other universities such as University of Saskatchewan, there is no deadline for pre-clerks to submit their flex days. For clerks, they must submit it three days in advance. For Northern Ontario School of Medicine University, students need to submit it 14 days in advance for a flex day. Knowing that other universities are able to implement shorter flex-day processing times, it would be really appreciated by the student body if this 30 days notice can be decreased to match or lean towards other school’s standards and not disadvantage McGill students on the national scale.</p> <p>The student body would be very grateful and receptive to <i>any</i> decrease in timeline. This is a concept that is always brought up to student representatives, and is highlighted in the various accreditation surveys (ISA, MEE). Decreasing this timeline would help show that the students’ concerns are being validated and heard, and foster a better culture amongst students and the school of medicine.</p>
Page 8 of 11	<p><i>“Official religious holiday → Note for Eid ul-Fitr:</i></p> <p><i>An absence for the dates listed in the University calendar of Holy Days should be requested 30 days in advance. The student must then inform the UGME Office as soon as the exact date is known, and should cancel any unnecessary absence requests in the online system within 7 calendar days.”</i></p>	<p>This part of the policy is confusing for students, as it does not explain the process of “date modification” of a submitted absence and leaving request. The McGill calendar proposes an exact date for all holy days.</p> <p>From the language on the policy, it can be interpreted as it is expected that students submit several flex days as possible dates for Eid ul-Fitr and then cancel the ones which end up not being the correct ones as per lunar visualization. It can also be interpreted as students being required to submit only one leave of absence and make a “modification” to their approved leave at a later time. If the exact process can be clarified, it would help students plan ahead.</p>
Page 10 of 11	<i>“A student may be absent for five days on the occasion of</i>	This policy enforces a stance that the loss of a nuclear family member (child, spouse, father, mother, brother

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
	<p><i>the death or the funeral of their spouse or child or of the child of their spouse, or of their father, mother, brother or sister.</i></p> <p><i>For anyone not listed above, a student may be absent from their course for one day on the occasion of the death or funeral."</i></p>	<p>and sister) are more important than any other acute loss as it is granted more days off.</p> <p>A common acute loss that medical students experience is the loss of grand-parents. Each person has a unique relationship with their grand-parents, and some students in certain cultures experience this relationship differently. Some people were raised by their grandparents. Students can feel their grief disenfranchised by having less time to grief.</p> <p>Additionally, some students have to commute by plane to get to a funeral. Doing the back and forth commute by plane (e.g. British Columbia) in one day while experiencing grief, and being expected to return to duty fully in one day can be difficult and cause undue stress.</p> <p>If grandparents can be added to the five-day definition, it would be most appreciated. Students can then make the decision of how many days they need to process the situation.</p>

Personal Days

Table 6. Feedback on personal days in the short term absences and leaves policy

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
Page 11 of 11	<i>"Personal day → Deadline to make request in absence and leaves system"</i>	<p>Personal days are greatly valued by the student body. With mental health being a concern amongst medical students across the country, and with the recent loss of Justine Renaud from the Class of 2022, and our colleagues from other institutions such as uLaval. It can seem to students that there is inaction from educational institutions to address these concerns. One way to act is to allow students more liberty and autonomy when having their personal days. As such, we urge and strongly recommend decreasing the 30-day requirement for personal days. This would allow students to better plan ahead their wellness days and have something to look forward to. This is especially true to students in the clinical spheres, where schedules are often given to them too late to</p>

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
		apply to the 30-day rule.

Other Feedback

<u>Page</u>	<u>Excerpt</u>	<u>Comments</u>
No page associated	Absence and Leaves processing times. No excerpt.	It would be appreciated by students to have an approximate time frame in which they should expect a response from the administration in regards to their submitted leaves. Some course component administrators are very effective and provide you with an answer within 48 hours. For other course components, it may take up to one week. Since students are expected to perform within strict timelines (e.g. 48 hours to notify, etc.), it would be appreciated if a similar expectation is shared in the processing and logistics of absences and leaves.
No page associated	Absence and Leaves Policy Software. No excerpt.	It would be appreciated if the absence and leaves policy can be modified from a systems perspective to allow students to cancel any submissions they have done previously without going through the administrators. This would diminish a lot of back and forth via email, and therefore contribute to diminished administrative burden on both students and the course administrators.
No page associated.	Schedule release and important dates. No excerpt.	It would be appreciated by the student body if important dates of mandatory components could be released ahead of time as soon as they are booked (eg. examination, OSCE's, SIM labs, mandatory small groups, etc.). In FMD, students had access to a "Word-Online" document via MyCourses (see here) with mandatory dates. This document was updated regularly as the schedule was being worked upon for those important dates. It would be most appreciated, specifically for TTR and PIAT, if the mandatory dates can be indicated in a similar document and shared ahead of time. This would allow students to not schedule their LMCC examinations during mandatory activities.

Conclusions

In brief, we hope that this overview of the feedback on the short term absence and leaves policy can help provide valuable insight from the lens of medical students in all four years of their training. In resume, the major minor changes that would be amenable to an e-Vote as per the initial instructions provided by email would be:

1. Decreasing the triple notification to stakeholders in the event of an absence to a double-notification (Table 1).
2. Defining a course requirement in the absence and leave policy (or on MyCourses) to help students understand the 25% rule (Table 2).
3. Adding further clarification to the “N/A” wording in the policy. (Table 3 and Table 4).
4. The clarification of the procedure for “modifying” an approved absence and leave policy (table 2 and table 4).
5. Including grand-parents or other family members into the five-day grieving period allotted to nuclear family members. (Table 5)
6. Finally, decreasing in any capacity the 30-day rule to allow more flexibility and autonomy to the students scheduling personal and flex days. (Table 2 and Table 6)

The absence and leave policy is a recurring theme in both student lead surveys (such as the independent student assessment (ISA)) as well as MEE accreditation survey. We appreciate the opportunity to be able to share our feedback and comments on such a crucial part of our student experience. We stay available to provide more details or clarifications as needed.

Thank you for your collaboration,

Yours truly,

MSS Education Committee (EdCom)



Contact Information

For any comments or questions, please contact the McGill Medical Student Society VP Medical Education:

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