SWIU Sample Parental Leave Policy

Prenatal

1. The surgeon will inform the department chair or senior partner of pregnancy as soon as the surgeon is comfortable in order to facilitate planning. The department chair/senior partner will be sensitive to the confidential nature of this information during the early part of pregnancy.

2. The pregnant and postpartum surgeon will make all reasonable attempts to schedule elective appointments and tests outside of regular working hours and call days. In no case will a surgeon be told that a medically necessary test or appointment must be canceled because it occurs during the normal working day.

Postpartum

3. A period of not less than 12 weeks maternity leave should be provided based on the needs of the expectant surgeon, separate from vacation time. Accrued vacation time and sick leave may be added to this period.

4. For a maternity leave of not less than 12 weeks after vaginal delivery, cesarean section, or adoption, the surgeon should receive full benefits and pay without having to make up missed call. Should maternity leave extend beyond this time for medical reasons, the surgeon’s disability insurance can be used for salary compensation and COBRA for continuation of benefits. This will be available for all surgeons regardless of time of employment.

5. The surgeon’s obstetrician will determine the date of ability to return to duty. If the surgeon requires extended maternity leave because of a complication of pregnancy, or the surgeon’s physician deems her unable to work, the absence will be treated the same as any absence due to illness. The department chair or senior partner will be entitled to a full report from the surgeon’s physician documenting the need for extended leave.

6. The surgeon may choose to take full benefit of the Family Medical Leave Act of 1993 in addition to her maternity leave, which states that an employee has up to 12 weeks of job-protected leave without pay during any 12-month period if the employee is eligible.

7. The surgeon should be able to return to regular practice after maternity leave if the surgeon chooses. Consideration for allowing the surgeon to return to work part-time should be negotiated prior to maternity leave. Additionally, the surgeon should not be penalized for the choice of slowing down practice prior to delivery and the pace at which the surgeon returns to normal work volume.
8. Loss of time from practice for a maternity leave either in the prenatal or postpartum period will not be reason for termination from employment nor should it be held against the surgeon in evaluation for promotion.

9. The surgeon will be given easily accessible, appropriate and adequate accommodations without penalty in order to express breast milk as needed for up to one year after the birth of the child.

**Partners and General Paid Parental Leave**

10. Partners of new mothers will be given up to 6 weeks of paid parental leave. In order to assist and support new parents with balancing work and family, the employer will provide 100% of base pay following the birth, adoption or foster care placement of a child.

11. Paid parental leave must be taken within the first twelve (12) months after the birth, adoption or placement of a child(ren).

12. A partner must provide his/her leader with notice of the request for parental leave at least 30 days prior to the proposed start date of the leave (or if the leave was not foreseeable, as soon as possible).