Institutional Action Project Abstract
Dawn Kleindorfer, MD
University of Cincinnati College of Medicine

Category: Administration  Project Title: Universal Paid Parental Leave for Clinical Faculty at University of Cincinnati College of Medicine

Mentors: Dean William Ball MD; Senior Associate Dean of Faculty Affairs Alex Lentsch, PhD, Senior Associate Dean of Finance Lori Mackey.

Collaborators: Women in Medicine and Science (WIMS) members, Human Resources staff, all clinical department chairs, UC legal

Background/Significance: Clinical faculty at the University of Cincinnati College of Medicine (UCCOM) have no parental leave policy (other than short-term disability insurance), and must exhaust their sick time to have a child. Additionally, there are no benefits for male parental leave or adoption. Paid parental leave policies have been shown in the literature to improve: faculty overall job satisfaction; retention within the system of all faculty, but especially female faculty; female faculty productivity and overall salary; childhood health in the children of our faculty, including premature birth, infant mortality, and breastfeeding success rates; and overall workplace environment and culture.

Purpose/Objectives: To create a financially-feasible paid parental leave policy for clinical faculty and staff providers at UCCOM. The hoped-for components of such a program are: coverage for all types of parental leave, including birth, adoption, and fostering; coverage for both men and women; paid parental leave benefit in addition to accrued sick and vacation time; and paid parental leave for up to 12 weeks.

Methods/Approach/Evaluation Strategy: 1) Literature searches to critically evaluate the data behind the benefits of paid parental leave; 2) Collaboration with multiple groups within and outside the COM, including financial and HR managers and deans, UC legal, clinical department chairs and business managers, and UC Health (hospital system) executives; 3) Extensive financial modeling completed in tandem with finance office; 4) Educational campaign blitz, partnered with public relations office; and 5) Metrics of success include utilization pre- and post-policy change, and faculty satisfaction related to PPL on the AAMC survey.

Outcomes/Results: After working on this project for 2 years, we have a new parental leave policy for all clinical faculty and staff providers at UC effective January 1st, 2018! The exploration of this issue exposed several issues broader than parental leave, including how clinicians are paid for sick time, and our short-term disability insurance policies. The new policy includes: short-term disability policy expanded to all faculty, not just those within 2 years of start date; sick pay calculation standardized, so that clinical faculty that are highly productivity-based still receive pay while out; increased cap on the maximum salary of short-term disability policy to be more in line with clinical salaries; and 2 weeks of paid time granted to any parent giving birth or adopting, for primary caregivers, men or women. For most women, this would mean 12 weeks paid time off.

Impact: This project allowed me to make a significant impact by creating a parental leave policy for the college of medicine. The policy itself is quite complicated with varying funding sources, and vigilance will be needed to ensure the policy is consistently applied. Future plans include an analysis of utilization and costs incurred.