



FAQS FOR RESIDENT ON-CALL STIPENDS

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SECTION 1: GENERAL QUESTIONS

Q: What is the Resident On-Call Stipend system?

A: The University of Toronto uses an online system for PGY residents to submit their call directly into POWER for payment of On-Call dates worked in the evening, night and on weekends.

Q: What browser versions are accessible, and can I use my mobile device to log calls?

A: Call Stipend submission is compatible with Chrome and Firefox while Safari functionality is not guaranteed. Mobile devices are not currently recommended for data input and may result in a loss of data and no payment.

Q: What if I am a fellow or sponsored resident?

A: The Ministry does not compensate fellows, so no recording of call is necessary. All others, including those sponsored by governments and external sources, should enter their calls in the online system. If required by the sponsor, the call record will be forwarded for payment on a quarterly schedule.

Q: Do UofT residents doing electives at hospitals outside of Ontario submit call?

A: Yes, enter your call in the online system but edit the *On-Call Hospital* or the *Service* column on the far right of your screen by hovering your cursor over the area and keying in 3 letters to edit/update these fields. If your rotation is missing, select the “*click here to add another scheduled rotation*”.

Q: Do I enter call if I am a visiting resident on elective at the University of Toronto?

A: No, even though you are completing call at the University, you report your call to your home hospital, as they are responsible for payment. They may require your call schedule for verification.

Q: How do I enter my call when I am on a 13-block schedule?

A: Residents enter all calls for the *entire* month regardless of the number of blocks within that month. Click on the *Add Date* icon for each rotation or block and enter dates. If your rotation continues to the next month, use the next month’s calendar. (See Section 7 to find out how this affects maximum calls for blocks vs months).

Q: Is a call stipend the same as working late?

A: No. To claim a stipend, you must be included in the On-Call schedule. Working late hours on your regular rotation is a program-related issue and covered by your salary. Similarly, you do not record a call for academic activities, weeknight clinics, or volunteer call.

SECTION 2: ENTERING CALL STIPENDS IN POWER

Q: How exactly do I enter my stipends?

A: See basic instructions below. FAQs with Screenshot instructions are linked to your *Data Entry* module near top right corner. [Instructions with Screenshots can be found here.](#)

In POWER, you will see an On-Call Stipends icon on the left with two options: *Data Entry* and *Call Statement*. Select *Data Entry* and then click on the top bar to begin. Select the *Add Date* button and a calendar will appear. Select your call date from the calendar AND then select 1 of the 6 call categories, repeating this step for each call date. If you had a *Home Call* which was converted, claim a *Converted Call*. Click on the SAVE button on the top right of your screen when you have finished entering all your calls or after each entry. You will receive a prompt stating “Your call(s) have been successfully saved”.

Q: Why are weekend calls recorded separately from weeknight calls?

A: Residents are paid 10% more for calls between Friday evening and Sunday night.

Q: How do we record a Weekend Call?

A: If you were on the call schedule anytime between Friday evening and Sunday night, select *Weekend Hospital/Converted Calls*, or *Weekend Hospital Day/Home/Other*, which covers several categories: Home Calls, Daytime Hospital Calls (9am-6pm, or similar hours on Saturday or Sunday), Back-Up, Weekend Rounding, Weekend Clinics and Qualifying Shifts (for Qualifying Shifts in ER you must have worked at least 1 hour between midnight and 6 a.m.).

Q: What happens if I forget to SAVE my call?

A: It is your responsibility to SAVE your calls each time you use the system. If you forget to click on SAVE, or the system times out, your call disappears, and you will not be paid. If you receive the system prompt “Are you sure you want to leave this page?” it means you need to SAVE your data first.

Q: What if I make a mistake while entering?

A: You can adjust all dates and call categories any time before the monthly deadlines. You can also delete any line by selecting the trash can icon on the right.

Q: If my rotational site is different from my On-Call site, do I edit the On-Call site?

A: Yes, the system default is the rotational site on left. To change the record to reflect the actual call site, hover your cursor over the hospital in the On-Call Hospital column on right and key in the first three letters to search sites. Select the correct site where the call was completed. If you do not do this, your payment may be delayed as your record will not go to the correct hospital.

Q: What if one of my rotations is incorrect or missing in POWER?

A: If your rotation is incorrect or missing, contact your Program Administrator. This is important as your ITERS are tied to your rotations. For call stipends, however, you can edit an incorrect rotation by hovering your cursor over the “service” column on the right and keying in at least 3 letters to begin searching the field. If you cannot find your exact rotation, select the rotation name that is the closest.

To add a missing rotation, select “*click here to add another scheduled rotation*”. The blank template prompts you to select a rotation and a location. Key in 3 letters to select the closest rotation/location and SAVE after entering your dates. Once you’ve used this option, there is no need to go back and re-enter call.

Q: What if the dates on the calendar are unavailable/greyed out?

A: You cannot select future dates or any dates you have claimed in the previous month/s. Check your *Call Statement* module and click on any month to show all previous claims.

SECTION 3: DEADLINES AND EMAIL REMINDERS

Q: When do I need to enter my call stipends?

A: You will be able to start entering your stipends on the 1st day of each month but only up to the current date. For example, on July 15th, you can enter call up to and including July 15th and any June dates that you missed submitting in your June calendar. Or enter calls at the end of each month. Be sure to enter and SAVE all calls before the deadline; you will not be paid for missed input.

Q: Can I enter late stipends?

A: You can only claim the *previous* month’s call, according to the *PARO OTH Agreement*. Any earlier call is *not* eligible for payment. If you forgot to claim your September dates in your September calendar, you can claim them in your October calendar by clicking the calendar icon back a month. Both Sept and Oct, will be paid together at the end of November. In your *Call Statement* module, your September calendar would remain ‘Not Paid’ and both months would appear in October.

Q: What happens if I forget to enter stipends for 2 consecutive months?

A: This will result in non-payment with no option to submit if you have missed both deadlines.

Q: Are there any reminders to the residents to enter call stipends?

A: Yes, you will receive 3 email reminders per month to your email address on POWER: on the first and last day of each month plus a final reminder on the 6th of the following month. For example, on July 1st, you will get an email saying you can begin entering your July call. On July 30th, you will get another

email saying you have only one week left to enter your July call. On August 6th, you will get a final reminder that you only have one day left, until midnight on August 7th to enter July call and any June call. Anything *before* this is no longer eligible.

Q: What if I cannot enter my stipends at the end of the month due to technical problems, being out of town, or an emergency?

A: You have an extra 30 days, as described above, to enter your call from the previous month.

Q: If I end my residency in June, will I have access to the July calendar to input late call?

A: No, non-returning residents will not be able to access the On-Call Stipend system. Therefore, you will need to enter June call by June 30th or, if exiting earlier, the last day of your final month.

SECTION 4: TYPES OF CALL - 4 MAIN CATEGORIES + 2 WEEKEND CATEGORIES

Q: What are the types of call that residents claim?

A: The 4 main categories are defined below:

1. In-Hospital Call Stipend: A resident is scheduled to begin the In-Hospital call sometime after a regular rotation and the call extends beyond 11 pm on a weekday or weekend. See other examples in Section 5.
2. Home Call/Shortened Hospital Call Stipend: this covers several categories:
 - A resident is scheduled for Home call at home with pager
 - A resident starts the In-Hospital call sometime after the regular rotation but is relieved of duties at or before 11 pm (“shortened call”) and the resident must have been on rotation before the call to qualify
 - A resident is scheduled for Back Up or Weekend Day call. See other examples in Section 6.
3. Converted Call Stipend: A resident is scheduled for Home call (at home) but works more than 4 hours in hospital (during the call period), AND at least 1 hour between midnight and 6 am.
Note: Enter a short note in the pop-up comments box that confirms both conditions above. Working 4 hours during the day on a Monday to Friday does *not* contribute towards converted call hours as salary covers this. If you do *not* confirm both conditions, your payment may be delayed. You do not need to specify any clinical activities or other details.
4. Qualifying Shift Stipend: A resident is on shiftwork and works a night shift (Emergency Department) where 1 full hour occurs between midnight and 6 am on a weeknight or weekend. There is no payment for 12-hour (Emergency) daytime shifts or working up to midnight on weeknights or weekends as regular salaries cover this. **FM residents see Sections 5 + 6.**

NOTE: Weekend call (worked between Friday evening and Sunday night) pay an additional 10%. This refers to residents on call and not to residents working late hours.

Hospital Calls	Home Calls / Shortened Calls	Qualifying Shifts	Converted Calls	Weekend Hospital/Converted	Weekend Hospital-Day-Call / Home / Other
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5. WEEKEND In-Hospital/Converted between Friday evening and Sunday night:
 - In-Hospital call after regular rotation where the call extends beyond 11 pm
 - In-Hospital call on Saturday or Sunday (12 hours or more - not incl split weekend call)
 - Converted call where a resident works at least 4 hours in hospital during the call period with at least 1 hour beyond midnight
6. WEEKEND Hospital Day/Home/Other between Friday evening and Sunday night:
 - Home call (at home); or Back Up call; or Buddy call
 - In-Hospital Day call ending at or before 11 pm (8am-6pm, for example)
 - Weekend Rounding on Saturday/Sunday when a resident is not scheduled for call but attends in hospital
 - Weekend clinic
 - Qualifying Shift (Emergency rotations) which extend 1 hour beyond midnight (all other qualifying shifts are covered by salaries)

SECTION 5: IN-HOSPITAL CALL – OTHER EXAMPLES

Below are types of general call or within specific departments and are considered In-hospital calls. If completed on a Friday evening to Sunday night, these are Weekend Hospital/Converted calls:

Weekend Hospital Call: Saturday or Sunday where resident is scheduled beyond 11 pm or works 12 hours or more, for example, 8 am to 9 pm, and it is not a split weekend call (i.e., no resident to cover after 9 pm). See next category below for 8 am to 6 pm or similar hours on a Sat/Sunday,

Split Call: (Psychiatry/12 hour shifts) Where 24-hour weekend In-Hospital call (or 24-hour statutory holiday call) is split into 2 shifts, only the resident who works the night call shift will receive the In-Hospital call stipend, unless it has been determined that each resident receives the Home Call stipend.

Half-Day Clinic + ER Shift: When a resident is required to work a half-day clinic or other formally scheduled duties, followed by working a regularly scheduled shift on the same day where that shift extends *beyond* 11 pm.

Clinical Duties + ER Shift: When a resident works a normal 5-day week of clinical duties AND then works a shift on a weekday or weekend, which extends beyond 11 pm.

*When a resident does NOT work a full 5-day week of clinical duties and works an ER shift only INCLUDING 1 full hour between midnight and 6 am AND no other clinical responsibilities that day, a **Qualifying shift** can be claimed weekdays or weekends as this relates to sleep disruption.

*When a resident does NOT work a full 5-day week of clinical duties and works an ER shift only but NOT one full hour between midnight and 6 am, (for example, from 4 pm-12 pm), during the week or on a weekend, **no stipend will be paid** as salary covers these hours.

SECTION 6: HOME CALL – OTHER EXAMPLES

If completed on a Friday evening to Sunday night, these are Weekend Hospital Day/Home/Other calls.

Weekend Hospital Day Only: If you work from 8 am to 6 pm or similar hours - you are *not* scheduled beyond 11 pm and it's under 12 hours.

Weekend Rounds: Resident is not on call but is required to round on weekends and attend in hospital. Rounds are included in the maximums set out in the Agreement.

Back-Up Call or Home Call over a full weekend: Back-Up calls are considered Home Calls unless they are converted (based on the conditions in Section 4). Residents can claim 3 Home Calls over a full weekend (Friday to Monday morning) or 3 consecutive 24-hour calls. Residents can claim up to a full week of Home Call without exceeding the maximum (9 Home Calls per 28-day block or 10 per month).

Half-Day Clinic + ER Shift: When a resident is required to work a half-day clinic or other formally scheduled duties, followed by working a regularly scheduled shift on the same day, where that shift ends *at or before* 11 pm, for example, a clinic from 8 am to 1 pm and an ER shift from 4 pm to 11 pm.

Clinical duties + ER Shift: When a resident works a normal 5-day week of clinical duties AND then works a shift on a weekday or weekend, which *does not* extend beyond 11 pm.

*When a resident does NOT work a full 5-day week of clinical duties and works an ER shift only INCLUDING 1 full hour between midnight and 6 am AND no other clinical responsibilities that day, a **Qualifying shift** can be claimed weekdays or weekends as this relates to sleep disruption.

*When a resident does NOT work a full 5-day week of clinical duties and works an ER shift only but NOT one full hour between midnight and 6 am, (for example, from 4pm-12pm), during the week or on a weekend, **no stipend will be paid** as salary covers these hours.

Buddy Call: (Radiology and Psychiatry) Junior Resident (PGY1) accompanies Senior Resident on In-Hospital call schedule for a portion of the call period.

OB Family Medicine Call: Resident carries a pager for obstetrics call and is required to respond to the page by providing medical care or attendance – before 11 pm; or resident is on a Research Day or half

day and is off site and still carrying the pager and expected to respond. The postpartum check-up is considered part of weekend rounds to check on the patient.

Family Medicine Saturday Half-Day Clinics: (twice a month) are eligible when on FM block. You do *not* receive a stipend for weeknight evening clinics unless authorized in advance.

SECTION 7: MAXIMUM CALL, EXCEEDING MAXIMUMS AND BLENDED CALL

Q: What are the Block and Monthly maximums defined in the *PARO OTH Agreement*?

A: The maximum for each type of call is listed below. However, many residents do a combination of Home/Hospital call (Blended Call), and the formula for maximums is listed further below. Those doing electives or self-scheduling must adhere to all maximums, regardless of On-Call sites and rotations.

In-Hospital call is **1 in 4 days**, not more. Since most blocks are between 27 and 29 days, the maximum for this category is 7. Other maximums are:

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

Home Call is **1 in 3 days**, not more, which means 9 calls per 28-Day blocks or 10 per 30 days and *cannot* be averaged over multiple months. *Non-traditional* call models are the exception. A resident cannot be on Home Call 2 consecutive weekends. *Weekend rounding* contributes towards total Home Call.

17-19 Days=6 calls	26-28 Days=9 calls
20-22 Days=7 calls	29-30 Days=10 calls
23-25 Days=8 calls	31 Days=11 calls

Converted Call: Since a converted call begins as a Home Call, the maximum for both Home and Converted calls combined remains at **1 in 3 days** or 9 calls per 28-day block or 10 per 30 days.

Qualifying Shifts: The guideline for determining Maximum Duty Hours of work is a sixty (60) hour week including other scheduled responsibilities such as academic half days *or alternately* five (5) shifts of twelve (12) hours each.

Blended Call: This refers to the combination of In-Hospital and Home Calls and uses the following formula: Number of Home Call **x 3 PLUS** Number of In-House **x 4** = NOT MORE than 30 calls over a 28-day block, for example: 4 Home Calls (x3) PLUS 4 Hospital Calls (x4) = 28 calls

Q: Won't I exceed the maximum if I have 2 blocks occurring in the same month?

A: You are still permitted the usual per-block maximums, (for example, 9 Home Calls), even when two blocks occur in the same month. Chief Residents are well aware of the block and monthly maximums. If you are scheduled beyond the maximum, however, alert your Chief Resident or your Preceptor before you complete the call. For the few residents who self-schedule, you must be sure not to exceed the maximums. Also, certain programs have *non-traditional* schedules where call averaging over several months is approved in advance by PARO and the Program Director. Residents should use the comments box to explain any overages.

Q: What if I am asked to cover for another resident due to illness or absence?

A: This is acceptable, and you would enter a note in the comments field. Every effort is made, however, by your Chiefs not to exceed maximums.

Q: If I volunteer to do extra call, not related to covering for another resident, will I be compensated?

A: No. Although residents may wish to optimize their training opportunities, the Ministry's budget restricts payment to scheduled call only.

SECTION 8: AUTHORIZATION/VALIDATION

Q: Do I need to obtain authorization or validation from my Chief Resident or other person?

A: No signature or authorization is required beyond the call schedule. However, this is an honour system, which means you are responsible for submitting all calls honestly and accurately. Your stipends are reviewed and validated by the hospital Medical Education staff and PGME. Discrepancies will be investigated when necessary.

SECTION 9: COMPENSATION AND CALL STATEMENT MODULE

Q: What is the payment for Call Stipends?

A: The amounts listed below are as of July 2021. Note that weekend calls pay 10% more than weeknight calls. For both weeknight and weekend categories there is either a half or a full stipend.

In-Hospital + Converted Calls: \$161.86
Home Call: (Home Call, Shortened Hospital Call, Back-up Call, Buddy Call, Qualifying shifts) \$80.93
Weekend In-Hospital + Converted calls: \$198.49
Weekend Home Call + Other: (all Home Call categories above + Weekend Rounding + Clinics) \$99.24

Q: When do I receive payment for my call?

A: Stipends are paid once a month ONLY on the 2nd pay at the end of the month following call. For example, July calls are paid at the end of August.

Q: Will I see my stipends itemized on my pay slip?

A: Yes, each type of call for the previous month is listed below your regular pay.

Q: Will taxes be deducted for call stipends?

A: Yes, like salaries, call stipends are subject to deductions.

Q: Where can I access all my past Call Stipend data and payments?

A: In the POWER menu, select the *Call Statement* module, below *Data Entry*. Click on any month to open and review call dates and payment. Your status indicates: PAID, PROCESSING FOR PAYMENT (the call will be paid at the end of the month) or NOT PAID (calendar not reviewed yet or no calls recorded).

Q: What if I see “NOT PAID” for a month that I submitted call?

A: You could have submitted call 1 month late. For example, if you input all September dates in your October calendar, these dates will appear in your October calendar and your September calendar will be empty (NOT PAID). To verify, click on any month in your *Call Statement* module to display all dates. If you submitted a date but forgot to select the type of call, the system records 0 calls resulting in no payment for that date. Email callstipends@utoronto.ca directly to remedy this.

Q: What if I notice errors, like choosing the wrong type of call, after I have been paid?

A: Contact callstipends@utoronto.ca immediately to make the adjustments. Once adjusted, you will see PARTIALLY PAID for that month on your *Call Statement* until the call is paid at end of the month.

SECTION 10: STATUTORY HOLIDAYS AND CALL STIPENDS

Q: When I work a Statutory Holiday can I claim a Weekend Call stipend?

A: If the statutory holiday falls on a weekday, and you completed call in the evening or night, claim the appropriate weeknight stipend. However, if you work regular daytime hours *only* and are not scheduled for call in the evening or night (even though it is staffed as a weekend), you do *not* get a stipend as your salary covers daytime hours. You are, however, automatically entitled to a lieu day.

If the statutory holiday falls on a weekend, you receive the normal stipend and the lieu day. If you are the “rounding resident” or if you work during the day, for example, 8 am to 6 pm, claim the Weekend Hospital Day/Home/Other stipend. For more details, please contact callstipends@utoronto.ca.

Q: Will I receive a stipend if I am scheduled for call over Christmas and New Year's?

A: Yes, if you are scheduled for call, you receive the appropriate stipend but not a lieu day. The *Agreement* states that: "all house staff shall be entitled to at least five (5) consecutive days off during a twelve (12) day period that encompasses Christmas Day, New Year's Day and two (2) full weekends. These five (5) days off are to account for the three (3) statutory holidays (Christmas Day, Boxing Day, New Year's Day), and two (2) weekend days. If a resident is scheduled to work on a recognized 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 (90) days of the holiday worked."

NOTE: These FAQs are also on your Data Entry screen by clicking the link near the top right corner.

***** **END** *****