ARTICLE XX – HOURS OF WORK AND SCHEDULING

A. The basic workweek shall be forty (40) hours in a designated seven (7) consecutive day period commencing at 12:01 a.m. When agreed to by the provider and PWC, a work period of eighty (80) hours in fourteen (14) consecutive days may be adopted in conformity with the Fair Labor Standards Act and applicable state law.

B. Physicians
   1. **Hours of Work.** A full-time (1.0 FTE) OB/GYN physician is defined as: Forty (40) hours of work per week, averaged over a four (4) week period to include clinic work, surgery time, inpatient work, ED consultation, inpatient consultation, labor and delivery coverage, administrative work and meetings.
      
      a. Work exceeding forty (40) hours per week, averaged over a four (4) week period, will be considered work over the physician’s FTE and will be compensated as laid out in Article XX Compensation and Appendix A.
      
      b. Providers will have one consistent weekday off per week.
   
   3. **Clinic Day.** A scheduled clinic day will consist of a maximum of seventy percent (70%) of time performing direct patient care and the remainder of time performing patient care coordination and administrative work. (i.e. A typical ten (10) hour day would include seven (7) hours of scheduled patient visits and three (3) hours of patient care coordination and administrative time.)
   
   3. **Doctor of the Day (DOD).** DOD shifts are defined as those where a physician is designated to be the available physician for inpatient care and emergency consultation.
      
      a. Physicians may be scheduled for no more than eight (8) DOD twelve- (12) hour shifts or four (4) DOD twenty-four- (24) hour shifts, or any combination thereof, over a four (4) week period.
      
      i. Twelve (12) hour DOD shifts will be scheduled for twelve and one half (12.5) hours with a thirty (30) minute uninterrupted meal break.
ii. Twenty-four (24) hour DOD shifts will be scheduled for twenty-four and one half (24.5) hours with a thirty (30) minute uninterrupted meal break.

b. The first and last thirty (30) minutes of a twelve (12) hour DOD shift shall be reserved for patient administrative time. The first thirty (30) and last sixty (60) minutes of a twenty-four (24) hour DOD shift shall be reserved for patient administrative time.

c. If emergent patient needs make the provisions of this section impossible during a given DOD shift, the physician will be paid at the hourly per diem rate for any time spent after their scheduled shift to perform patient care or associated charting, sign-out and administrative work.

4. Operating Room: For Operating Room shifts, shifts will be ten (10) hours beginning at 7:00 AM and concluding at 5:00 PM. Work beyond that time will be compensated at the hourly per diem rate.

5. On Call /Backup time. On call time shall be defined as time when the physician is providing emergency backup standby service for the primary DOD. The physician must be within thirty (30) minutes of the affiliated hospital during this time and must be available to provide patient services as needed. On Call work will be compensated as described in Appendix A.

6. All inpatient work will occur at only one hospital per shift.

7. Administrative time. Providers may perform administrative work including but not limited to attending Clinic meetings, attending trainings, maintaining certifications, reading emails, and other paperwork that is not directly in support of patient care. Assigned administrative time exceeding FTE shall be paid at the physician per diem rate as defined in Article XX Compensation and Appendix A.

C. Certified Nurse Midwives (CNMs)

1. Hours of Work. A full-time (1.0 FTE) CNM is defined as: Forty (40) hours of work per week to include clinic work, Midwife of the Day (MOD) shifts, administrative work and meetings.
2. Work exceeding forty (40) hours per week will be paid at the hourly CNM per diem rate.

3. **Clinic Day**: A scheduled clinic day for a CNM will be either four (4) or eight (8) hours and will consist of a maximum of seventy percent (70%) of time performing direct patient care and the remainder of time performing patient care coordination and administrative work.
   
a. Patient admin time may be performed in clinic or remotely.
   
b. CNMs will maintain set times per visit based on the type of visit as laid out in Appendix C.

4. **Midwife of the Day (MOD)**. MOD shifts are defined as time when the CNM works at an affiliated hospital and is available to provide patient services as needed.
   
a. Twelve (12) hour MOD shifts will be scheduled for twelve and one half (12.5) hours with a thirty (30) minute uninterrupted meal break.
   
b. Twenty-four (24) hour MOD shifts will be scheduled for twenty-four and one half (24.5) hours with a thirty (30) minute uninterrupted meal break.
   
c. The first and last thirty (30) minutes of a twelve (12) hour MOD shift shall be reserved for patient administrative time. The first thirty (30) and last sixty (60) minutes of a twenty-four (24) hour MOD shift shall be reserved for patient administrative time.
   
d. If emergent patient needs make the provisions of this section impossible during a given MOD shift, the CNM will be paid at the hourly per diem rate for any time spent after their scheduled shift to perform patient care or associated charting, sign-out and administrative work.

5. **Administrative time**. Providers may perform administrative work including but not limited to attending Clinic meetings, attending trainings, maintaining certifications, reading emails, and other paperwork that is not directly in support of patient care. Assigned administrative time exceeding
FTE shall be paid at the CNM per diem rate as defined in Article XX Compensation and Appendix A.

6. **Scheduling.**
   a. The average CNM work week should consist of
      i. Two (2), eight- (8) hour patient care clinic shifts; and
      
      ii. Twenty-four (24) hours of MOD shifts to consist of either one (1) twenty-four (24) hour shift or two (2) twelve- (12) hour shifts.
      
      iii. Hours of work shall be prorated based on FTE status.
   
   b. Each clinic location has the flexibility to develop their own process for scheduling CNMs, subject to the following:
      i. The process must be approved by the manager;
      
      ii. There should be a reasonable attempt to give each CNM an equal amount of day shifts and night shifts per quarter;
      
      iii. CNM preference should be taken into account; and
      
      iv. After the schedule has been published, shifts may not be moved or changed without prior approval by the CNM(s) affected.
   
   c. After the schedule is posted, a CNM may trade shifts with another CNM who is qualified to perform the CNM’s duties so long as the CNM originally scheduled provides their manager with written confirmation from the CNM accepting the shift at least forty-eight (48) hours prior to the shift.

D. Nurse Practitioner (NP)

1. **Hours of Work:** A full-time (1.0 FTE) NP workweek will consist of forty (40) hours worked. The basic workday shall be either eight (8) hours to be worked within eight and one-half (8.5) consecutive hours or ten (10) hours to be worked within ten and one-half (10.5) consecutive hours in a twenty-four (24) hour period, commencing at 12:01 a.m. including:

   a. A meal period of one-half (1/2) hour on the nurse’s own time to be taken as near to the middle of the work period as is practicable; and
b. One (1) fifteen (15) minute rest period without loss of pay during each four (4) consecutive hours of work (or major portion thereof) which, insofar as is practicable, shall be near the middle of such work duration.

2. Hours of work shall be prorated based on part-time status.

3. Workday
   a. An eight (8) hour workday will include six (6) hours of providing direct patient care and two (2) hours of patient administrative time.
   
b. A ten (10) hour workday will include eight (8) hours providing direct patient care and two (2) hours of patient administrative time.
   
c. Patient administrative time can be worked in the clinic or off-site, as needed.

4. Overtime. Overtime compensation shall be paid at one and one-half (1.5) times the NP’s regular hourly rate of pay for all hours worked in excess of:
   
a. Forty (40) hours in each basic workweek, or
   
b. A NP’s scheduled regular shift.

5. Administrative time. Providers may perform administrative work including but not limited to attending Clinic meetings, attending trainings, maintaining certifications, reading emails, and other paperwork that is not directly in support of patient care. Assigned administrative time exceeding FTE shall be paid at the overtime rate as described above.