



**Public Health:  
Public University Student Health Centers:  
Abortion by Medication Techniques  
(Senate Bill 24)**

Annual Report to the Governor and Legislature  
2021-2022

Prepared by:  
California Commission on the Status of Women and Girls

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## ***Executive Summary-CCSWG***

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California has chosen to be a leader on reproductive healthcare access. The College Student Right to Access Act, formerly Senate Bill 24 (SB 24), requires, on and after January 1, 2023, each student health care services clinic on a University of California (UC) or California State University (CSU) campus to offer abortion by medication techniques through campus health centers, which is a fundamental right and an essential part of sexual and reproductive health care.

The UC Student Health Services (SHS) centers have made substantial progress in readying their clinical centers to provide medication abortion services to students at each UC and CSU campus by January 1, 2023, despite delays caused by the COVID-19 pandemic, which resulted in the closing of campuses, redirecting priorities to COVID-19-related services and response, and to re-opening and readying campus-based learning and large-scale tracking systems for COVID-19 vaccinations. The Commission has worked collaboratively with SHS Medication Abortion Workgroups who have shared best practices, troubleshoot implementation issues, reviewed standardized quality assurance and patient experience metrics, and reviewed individual campus progress.

All campuses have adopted protocols, conducted clinical and support staff training sessions, and designed site-specific scheduling and follow-up procedures. Campuses have also recruited, trained, and/or contracted with providers, as needed, to establish the capacity to provide these services. Individual UC and CSU campuses have received a high level of collaboration from Essential Access Health and the National Abortion Federation in this process.

Additionally, the Commission's partnership with Essential Access Health has been influential to understanding the current landscape of best practices in the provision of medication abortion. As a result of understanding the landscape, the standard of care has shifted to conducting an ultrasound only in cases where it is needed. Recently, the use of telehealth and mail order as a service delivery model has also become an option for the standard of care. This will facilitate access to healthcare providers outside of the student health centers for consultation, assistance, and after-hours care, as needed.

Finally, a long-standing requirement for in-person medication pick up has been lifted, which will broaden access and allow more pharmacies, including mail-order services, to distribute the medication. This permanent approval, along with recent decreases in the cost of such medications, will facilitate increased timeliness, accessibility, and affordability for students.

These extensive readiness activities for implementation of the College Student Right to Access have been extraordinarily successful and all campuses are ready to provide medication abortion services by the statutory deadline of January 1, 2023.

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## ***Background***

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The California Commission on the Status of Women and Girls (CCSWG) is responsible for administering the College Student Health Center Sexual and Reproductive Health Preparation Fund and is also tasked with providing non-monetary assistance and support, as well as activity and expenditure reporting requirements to the Legislature.

Senate Bill 24 requires the Commission on the Status of Women and Girls to administer the College Student Health Center Sexual and Reproductive Health Preparation Fund, which the bill establishes, to provide private funding for statewide readiness efforts across all state of California University campuses. The bill continuously appropriates the monies in that fund to the Commission for allocation to each public university student health care services clinic for specified activities in preparation for providing abortion by medication techniques.

This report is required pursuant to Senate Bill 24 (Chapter 740, Statutes of 2019), which is an act to add Chapter 5.5 (commencing with Section 99250) to Part 65 of Division 14 of Title 3 of the Education Code, relating to public health, and making an appropriation requirement. Senate Bill 24 (SB 24), hereafter referred to as the College Student Right to Access Act, requires, on and after January 1, 2023, each student health care services clinic on a California State University or University of California campus to offer abortion by medication techniques, as specified.

Senate Bill 24 requires the Commission to submit a report to the Legislature, on or before December 31, 2021, and on or before December 31 of every year thereafter until December 31, 2026, that includes, but is not necessarily limited to, specified information relating to abortion by medication techniques at these student health clinics.

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## ***Executive Summary-Universities***

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### **University of California Office of the President (UCOP)**

The University of California Student Health Services (SHS) centers have continued to make progress in readying their clinical centers to provide medication abortion services to students at each SHS center. They have continued to be hampered by the need for their centers to prioritize efforts around COVID-19, monkey-pox, and public health obligations for campus re-opening. While these obligations have eased significantly, they are at the forefront of campus planning and needs for the UC system.

While the above-mentioned obstacles present significant challenges, continued progress has been made to enact services. The UC system expects that full implementation of services will occur this fall and meet the 2023 deadline per the legislative mandate. In the previous year's annual report, they outlined the various operational projects completed systemwide to setup the infrastructure to co-ordinate implementation systemwide. Most of this past fiscal year's work has been to co-ordinate with campuses on various parts of their implementation processes.

This report will review primarily the state of readiness of UC campuses as services have expanded across the institution. There has been a significant uptick in procedures as campuses have offered the services. The UC system has yet to receive any responses to the patient satisfaction surveys for this line of service and are awaiting a significant number of procedures to be completed before beginning a quality assurance review sometime in FY 2022-23. Lastly, financial data is provided in a summary table detailing the rolled-up expenses at each campus and central expenses at the Office of the President. The expenses will be broken down by expenses on SB-24 grant funds and those from other fund sources.

### **University of California, Hastings**

Since August 2020, UC Hastings Law has partnered with Carbon Health Technologies Inc. and Direct Urgent Care Inc. (collectively, "Carbon Health") to provide student health services to all UC Hastings students at its in-person clinics or virtually. UC Hastings' current contract with Carbon Health is effective until August 2026.

As of January 1, 2022, Carbon Health has completed the implementation requirements of SB 24. Carbon Health's Director of Primary Care Service Line oversees this service and ensuring continued compliance with the requirements of SB 24.

The implementation of medication abortion techniques readiness included clinical and operational training, partnership with an approved third-party educator, and operational infrastructure enhancements:

1. Training: Primary care physicians, nurses, medical assistants, central

- support and care navigators participated in a minimum of four hours of training per scope of care and related workflow requirements.
2. Partnership: Third-party approved educator, Essential Access Health, was secured by Carbon Health to educate standard of care compliance and competency adherence.
  3. Infrastructure: Developed required administrative (e.g., workflow creation and deployment and patient educational materials) as well as proprietary EMR system product upgrades to support infrastructure for care delivery and compliance.

The initial cost of implementation was forecasted at \$173,000.00 with current, actual implementation cost at \$132,729.15. Both direct and indirect costs associated with implementation requirements were consistent with the allowable expenses noted by the California Commission on the Status of Women & Girls (“CCSWG”); details of associated costs are outlined in section (c) of this report. Additional training expenses are expected for 2023.

## **California State University**

The **California State University** Student Health Services (SHS) centers have made significant progress in readying their clinics to provide medication abortion services to students at each of the 23 CSU campuses by January 1, 2023. However, overall systemwide progress and campus-specific progress in offering these services has been hampered by the following:

1. The completion of the memorandum of understanding between the Commission on the Status of Women and Girls and the CSU was delayed until late June 2022. This resulted in a delay of the College Student Right to Access Act implementation funds to the campuses until the 2022-2023 year.
2. COVID-19 has continued to impact efforts by each SHS center to respond to the ongoing challenges accompanying the pandemic. Fall 2021 saw the full return of students to all CSU campuses and with this came the need for SHS clinics to develop additional infrastructure, processes, and support for their returning students.
3. In summer and fall of 2021, two crucial positions within the CSU Office of the Chancellor were vacated and not filled until June 2022. In August 2021, the Associate Vice Chancellor for Student Affairs was vacated, and in December 2021, the Systemwide Director, Student Wellness & Basic Needs was vacated. These positions provide direct support and oversight of all CSU Student Health Services activities. During these vacancies, the CSU Office of the Chancellor contracted with a special consultant to manage systemwide efforts toward implementing medication abortion.

Despite these challenges, significant progress has been made toward meeting the January 1, 2023, implementation date and the CSU system anticipates all 23 campuses

will be in compliance with this deadline. CSU funds were spent in the latter half of 2022 and will be reported on in the next year's report.

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## **Reports from the Universities**

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### **University of California Office of the President (UCOP)**

#### **State of Readiness**

The University of California remains on target for full implementation by this fall for services on all its campuses. Most of this past fiscal year's work has been aimed at campus implementation per best practices and shared guidelines. Campuses that will go live in the fall of the upcoming FY 22-23 are: UCLA 8/22, UCR 9/1, UCSC 9/6, UCD 9/22, UCSD 10/1, and UCM later in the fall term. As stated in previous updates, UC has developed a standardized template for clinical documentation and patient experience survey.

#### **Ongoing Readiness Work:**

1. UC continues to require and implement training for providers to conduct limited Pelvic Ultrasound for Early Pregnancy Dating and for Provision of Medication Abortion services and agreed upon best practices.
2. The Medication Abortion Workgroup continues to meet monthly to review and share best practices, troubleshoot implementation issues, develop standardized Quality Assurance and Patient Experience metrics, and review individual campus progress.
3. Campuses have adopted and implemented National Abortion Foundation (NAF) protocols.
4. Campuses have either trained, recruited, or contracted with providers to assist in provision of services.

<b>Campus</b>	<b>No. of Abortions by Medication Techniques Provided</b>
UC Berkeley	33
UC Davis	0
UC Irvine	25
UC Los Angeles	0
UC Merced	0
UC Riverside	0
UC San Diego	0
UC San Francisco	0
UC Santa Barbara	14
UC Santa Cruz	0
<b>UC Total</b>	<b>72</b>



## **Readiness Expenditures**

Cumulative Reimbursements from SB-24 Grants are as follows: Grant expenditures includes items such as facility upgrades, training, staff salaries, medical equipment, and one-time costs. The table below includes only actual reimbursed amounts. <sup>1</sup> The table also reports FY 2021-22 aggregated expenditures on other fund sources. Campuses that have not requested re-imbursements, or expensed funds are still on track to complete implementation. The financial data in this report only reflects spending up to 6/30/22. The UC system anticipates funds to be expensed on the next fiscal year, enroute to meeting the January 2023 implementation date. Typical expenditures include staffing, security, facility improvements, and medical equipment purchases outside of the grant funds. This campus expects more funds to be expended as they approach full implementation by January 2023. Monies are available to the campuses from the grant to complete implementation.

### **Cumulative SB-24 Readiness Expenses by Fund Source Type**

<b>Campus</b>	<b>SB-24 Grant Amount</b>	<b>Other Fund Sources</b>	<b>Totals</b>
UC Berkeley	\$ 67,536.34	\$ 21,500.00	\$ 89,063.34
UC Davis	\$ 21,724.53	\$27,574.00	\$ 49,298.53
UC Irvine	\$83,445.07	\$ 496,965.10	\$580,410.17
UC Los Angeles	0	0	0
UC Merced	0	0	0
UC Riverside	\$131,797.43	\$15,495.00	\$147,292.43
UC San Diego	0	0	0
UC San Francisco	0	0	0
UC Santa Barbara	\$47,112.27	\$ 1,120.00	\$ 48,232.27
UC Santa Cruz	\$172,241.96	0	\$ 172,241.96
UCOP	\$132,645.71	0	\$132,645.71
<b>System Total</b>	<b>\$656,503.31</b>	<b>\$ 562,654.10</b>	<b>\$ 1,219,184.41</b>

### ***Closing Comments for Annual Report for SB-24 Implementation for FY 2021-2022***

The University of California appreciates the continued assistance of the California Commission on the Status of Women and Girls in supporting implementation readiness for SB-24. Individual UC campuses have received a very high level of collaboration from Essential Health Access (EHA) in providing staff training and in implementing NAF protocols. It is also important to note the highly volatile social, legal, and medical practice environments in which UC's implementation of medication abortion has occurred at its 10 campuses. This has fortunately not impacted current operations or continued progress

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<sup>1</sup> Pending, anticipated and other un-reconciled expenses are not totaled.

with our implementation processes. It is further anticipated that future best practices will evolve and change as additional standards are established and more widely adopted.

COVID-19 has continued to be an influential factor in limiting the campus Student Health Centers' abilities to shift more resources and staff towards implementation of SB-24. SHS centers are still tracking and performing public health functions associated with campus safety and health, including vaccination, surveillance, and contact tracing. Nonetheless, the UC campuses are moving forward with full systemwide implementation to meet the SB-24 compliance deadline.

## Appendix 1: University of California College Student Right to Access Act Activity Summary by Campus

### University of California, Berkeley

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	33

### Expenditures by Campus

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 65,556.35	\$ -		
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -	\$ -	\$ -	\$ -	\$ 15,000
<b>Total Capitalized Costs</b>					
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ 1,872.58	\$ -	\$ -	\$ -
<b>4. Consultant/Content Specialist/</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>5. Training Costs / Fees</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>6. Salaries*</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ 6,500.00
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ 107.41	\$ -	\$ -	\$ -
<b>Totals</b>	<b>\$ -</b>	<b>\$ 67,536.34</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 21,500.00</b>

### Summary of Activities

UC Berkeley has been providing the service since late 2021. It is anticipated that remaining funds will be used to support supplies and equipment, additional facility security upgrades and enhancements, and additional needs as service expansion continues.

**University of California, Davis**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Expenditures by Campus**

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 11,126.39	\$ -	\$ -	\$ -
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Total Capitalized Costs</b>					
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ -	\$ -	\$ 9571.90	\$ -
<b>4. Consultant/Content Specialist/</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>5. Training Costs / Fees</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>6. Salaries*</b>					
Subtotal	\$ -	\$ -	\$ -	\$ 452.40	\$ 27,574.00
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ 226.84	\$ -	\$ 347.00	\$ -
<b>Totals</b>	\$ -	\$ 11,353.23	\$ -	\$ 10,371.30	\$ 27,574.00

**Summary of Activities**

UC Davis is ready to provide service as of Fall 2022. It is anticipated that future grant fund reimbursement requests will be submitted for additional equipment and supplies, salary support, expansion of services, and additional implementation needs.

**University of California, Irvine**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	25

**Expenditures by Campus**

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 56,016.03	\$ -	\$ -	
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -	\$ -	\$ -	\$ -	\$ 487,892.00
<b>Total Capitalized Costs</b>		\$ 56,016.03			\$ 487,892.00
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ -	\$ -	\$ 1,793.04	\$ 2,273.10
<b>4. Consultant/Content Specialist/</b>					
Subtotal	\$ -	\$ 4,760.00	\$ -		\$ -
<b>5. Training Costs / Fees</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>6. Salaries*</b>					
Subtotal	\$ -	\$ -	\$ -	\$ 19,448.00	\$ 6,800.00
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ 1,428.00	\$ -	\$ -	\$ -
<b>Totals</b>	\$ -	\$ 62,204.03	\$ -	\$ 21,241.04	\$ 496,965.10

**Summary of Activities**

UCI is currently providing services. Grants are being used to provide staffing support for UCI medical center faculty to provide the service, medical equipment, consultant fees, and indirect costs. Non-grant source funds are being used to support facility and security upgrades.

**University of California, Los Angeles**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

UCLA is currently available to provide medication abortion services. Grant funds for implementation expenditures are anticipated to be primarily used for facility security enhancements, additional equipment, supplies, and training. UCLA anticipates reimbursement requests for incurred expenses to be submitted in FY 2022-2023 and beyond.

**University of California, Merced**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

As the sole provider of COVID-19 pandemic services for their campus, Student Health Services at UC Merced elected to defer submission of their reimbursement requests for the majority of its implementation expenses to FY 22-23. Anticipated expenses will be for staff training, equipment and supplies, salary support, and facility security enhancements.

**University of California, Riverside**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Expenditures by Campus**

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 131,797.43	\$ 15,495.00	\$ -	\$ -
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Total Capitalized Costs</b>		\$ 131,797.43	\$ 15,495.00		
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>4. Consultant/Content Specialist/</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>5. Training Costs / Fees</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>6. Salaries*</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Totals</b>	\$ -	\$ 131,797.43	\$ 15,495.00	\$ -	\$ -

**Summary of Activities**

The majority of UCR's initial implementation expenses have been for medical and lab equipment and supplies. At the latter half of FY 21-22, UCR decided to contract with an outside vendor, Family Planning Associates Women's Health, to provide services via telehealth to patients inside the Student Health clinic. Services are facilitated using a direct phone call at the UC Riverside SHS Clinic room.

**University of California, San Diego**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

UC San Diego has deferred submission of their reimbursement requests for the majority of its implementation expenses to FY 22-23 and future years. They have a number of internal providers already trained in provision of medication abortion services. Due to the demands of the COVID-19 pandemic, UCSD SHS leadership elected to defer initial offering of services to fall 2022. Anticipated expenses will be for staff training, equipment and supplies, and facility security enhancements.

**University of California, San Francisco**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

UC San Francisco was the first UC campus to be able provide early adoption of campus-based medication abortion services through the UCSF Women’s Options Center. It is 2.3 miles away by car, approximately 12 minutes away and accessible by regularly-scheduled free shuttles. UCSF is in the process of internalizing initial evaluation and provision of medications through its Student Health Services centers. Like some UC campuses, UCSF has deferred submission of their initial reimbursement requests for the majority of its implementation expenses to FY 22-23 and beyond. Anticipated expenses will be for staff training, equipment and supplies, and facility security enhancements.



**University of California, Santa Barbara**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	14

**Expenditures by Campus**

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ -	\$ -	\$ 44,240.00	\$ -
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Total Capitalized Costs</b>					
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>4. Consultant/Content Specialist/</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>5. Training Costs / Fees</b>					
Subtotal	\$ -	\$ -	\$ -	\$ 64.27	\$ -
<b>6. Salaries*</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ 1,120.00
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ -	\$ -	\$ 2,808.00	\$ -
<b>Totals</b>	\$ -	\$ -	\$ -	\$ 47,112.27	\$ 1,120.00

**Summary of Activities**

UC Santa Barbara is another campus where the Student Health Services center was tasked with the primary responsibility for providing a comprehensive COVID-19 pandemic response for all UCSB students, staff and faculty. Although it was the third campus to launch services in Spring 2022, UCSB quickly mobilized and provided medication abortion services in the first three months at a rate similar to the first two campuses, which had already been up and running for more than a year. Similar to other UC campuses, UCSB anticipates forthcoming expense reimbursement requests in FY 22-23 and beyond for additional equipment and supplies, salary support, and facility security enhancements.

**University of California, Santa Cruz**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Expenditures by Campus**

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 170,240.81	\$ -	\$ -	\$ -
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -		\$ -	\$ -	\$ -
<b>Total Capitalized Costs</b>		\$ 170,240.81			
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ 539.15	\$ -	\$ -	\$ -
<b>4. Consultant/Content Specialist/</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>5. Training Costs / Fees</b>					
Subtotal	\$ -	\$ 1,000.00	\$ -	\$ -	\$ -
<b>6. Salaries*</b>					
Subtotal	\$ -	\$ 462.00	\$ -	\$ -	\$ -
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Totals</b>	\$ -	\$ 172,241.96	\$ -	\$ -	\$ -

**Summary of Activities**

UCSC's initial expenditures were in the areas of medical and laboratory equipment (including an ultrasound machine and a lab analyzer), supplies, training and salary support. Due to the need for Student Health Services to serve as the primary resource for campus COVID-19 pandemic support, further expenditures and final implementation were delayed to the fall 2022 academic term. Anticipated expense reimbursement requests will likely be for additional staff training, equipment and supplies, and facility security enhancements.

## University of California, Hastings

### State of Readiness

As of January 1, 2022, medication abortion techniques are considered fully integrated into the scope of care for women's health at Carbon Health. Hence, on-going readiness is met systematically, e.g., regularly hiring, routine onboarding process, primary care compliance, competency training (per policy standards of care guidelines), and scheduled clinical development training for relevant workstreams (which differ between medical providers and ancillary staff).

In addition to routine on-boarding and competency and compliance training, materials and on-going updates on medication abortion techniques are easily accessible via Carbon Health's dedicated Policy and Training platforms that are actively managed by the Director of Primary Care Service Line and Program Manager.

### Ongoing Readiness Work:

1. As of October 25, 2022, no known challenges have been identified at this time.
2. Carbon Health will continue to monitor and evaluate as cases present and anticipate additional feedback for the next annual report.

<b>Campus</b>	<b>No. of Abortions by Medication Techniques Provided</b>
UC Hastings	0

### Readiness Expenditures

Cumulative reimbursements from SB-24 Grants are shown in the table below. Grant expenditures includes items such as facility upgrades, training, staff salaries, medical equipment, and one-time costs.

#### Cumulative SB-24 Readiness Expenses by Fund Source Type

<b>Campus</b>	<b>SB-24 Grant Amount</b>	<b>Other Fund Sources</b>	<b>Totals</b>
UC Hastings	\$132,729.15	\$0.00	\$132,729.15
<b>UC Hastings Total</b>	<b>\$132,729.15</b>	<b>\$0.00</b>	<b>\$132,729.15</b>

***Closing Comments for Annual Report for SB-24 Implementation for FY 2021-2022***

As noted, medication abortion techniques are considered fully integrated into the scope of care for women's health at Carbon Health at 11 locations in California. As of October 25, 2022, there have been zero cases reported; hence, Carbon Health will continue to monitor, evaluate and report feedback in the next annual report.

## Appendix 2: University of California Hastings College Student Right to Access Activity Summary by Campus

### Readiness Expenditures

Cumulative reimbursements from SB-24 Grants are shown in the table below. Grant expenditures includes items such as facility upgrades, training, staff salaries, medical equipment, and one-time costs.

### Expenditures by Campus

	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>1. Equipment &gt; \$5,000</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 0.00	\$ -	\$ -	\$ -
<b>2. Facility and security upgrades</b>					
Subtotal (Capitalized Costs)	\$ -	\$ 48,000.00	\$ -	\$ -	\$ -
<b>Total Capitalized Costs</b>		\$ 48,000.00			
	FY 19-20	FY 2020-2021		FY 2021-2022	
	Other Fund Sources	Grant Funds	Other Fund Sources	Grant Funds	Other Fund Sources
<b>Indirect Costs (F&amp;A)</b>					
<b>3. Medical and Lab Supplies, Clinic Fixtures (under \$5K)</b>					
Subtotal	\$ -	\$ 8,509.15	\$ -	\$ -	\$ -
<b>4. Consultant/Vendor Partnerships</b>					
Subtotal	\$ -	\$ 5,300.00	\$ -	\$ -	\$ -
<b>5. Salaries Implementation/Training: Project management, PCP, RNs, Mas, Central Support, and Care Navigation Teams</b>					
Subtotal	\$ -	\$ 66,920.00	\$ -	\$ -	\$ -
<b>6. Program Management: Post implementation and ongoing oversight</b>					
Subtotal	\$ -	\$ 4,000.00	\$ -	\$ -	\$ -
<b>7. Total Indirect Costs F&amp;A</b>					
Subtotal	\$ -	\$ 0.00	\$ -	\$ -	\$ -
<b>Totals</b>	\$ -	\$ 132,729.15	\$ -	\$ -	\$ -

### Summary of Activities

October 25, 2022, Carbon Health reported zero cases and therefore no activities to report by location.

As of January 2022, Carbon Health has launched medication abortion techniques services. Access to medication abortion techniques is available at 11 locations (via in-clinic dispensing) or virtually (via prescription) by appointment.

Carbon Health's Support Team also provides scheduling assistance as initiated by the patient with a dedicated support email address for UC Hastings students: uchastings-support@carbonhealth.com.

Between January 1, 2022 (the implementation date) and October 25, 2022 (the data available at the time for this report), Carbon Health has had zero cases of medicated abortion. Hence, there are no known challenges or issues to report at this time.

As of October 25, 2022, Carbon Health has expended \$132,729.15 in implementation-related costs. Both direct and indirect costs associated with implementation requirements were consistent with the allowable expenses noted by the CCSWG. No other funds sources were appropriated to support the operational readiness for medication abortion techniques other than the expected reimbursement from UC Hastings upon submission of invoice as their third-party outsourced partner. Additional training expenses are expected for 2023.

## California State University (CSU)

### **State of Readiness**

What follows is a review of the steps that have been undertaken to prepare the CSU system to offer medication abortion services to students on all CSU campuses and to ensure the quality and safety of services offered.

#### Initial Steps:

In June of 2022, the CSU Office of the Chancellor and the CCSWG completed the memorandum of understanding process which resulted in a Standard Agreement between the CSU and the CCSWG. This document serves as the basis for the CCSWG to award the funding provided for by the College Student Right to Access Act and for the CSU Office of the Chancellor to lay the foundation for transferring the funding to the 23 separate campuses.

### **Ongoing Readiness Work:**

1. Following the passage of the College Student Right to Access Act, the CSU established a working group in 2020 that continued to meet throughout 2021-2022 to provide monthly updates at the regular CSU SHS directors meetings. These updates have included information regarding best practices and educational opportunities, and the workgroup has helped to troubleshoot implementation challenges.
2. In January 2022, the CSU Office of the Chancellor contracted a special consultant to oversee medication abortion preparation within the system due to the vacancy of two crucial permanent positions.
3. In March 2022, Essential Access Health began providing general orientation training for campus health center employees.
4. In May 2022, Essential Access Health began providing Clinical MAB training for SHS medical providers.
5. In May 2022, CSU SHS directors had a two-day conference which included presentations by Essential Access Health, the CSU Office of the Chancellor's Office of General Counsel, and a SHS physician from UC Riverside to provide training on the application of ultrasound in Primary Care Student Health Centers. This included a demonstration and in-service training on ultrasound equipment.
6. On May 6, 2022, the CSU Office of the Chancellor staff met with campus Vice Presidents of Student Affairs for a discussion on the implementation of SB 24 and to address any questions or concerns.
7. In spring of 2022, the CSU Office of the Chancellor Procurement and Contracts department negotiated a purchasing contract that enabled SHS centers to obtain leveraged group pricing for ultrasound machines.
8. In late spring of 2022, the CSU Office of the Chancellor, Human Resources Labor Relations staff commenced the meet and confer process with the California State University Employees Union (CSUEU) and the Union of

American Physicians and Dentists (UAPD). This process was engaged to agree upon a means to opt-out of providing abortion by medication techniques if declaring a moral, ethical, or religious basis for refusing to participate in accordance with California Health and Safety Code section 123420.

9. In June 2022, the CSU Office of the Chancellor filled the vacancies of both the Associate Vice Chancellor for Student Affairs and the Systemwide Director, Student Wellness & Basic Needs. The special consultant worked with these two new staff members to update them on the work being done toward meeting the January 2023 medication abortion implementation deadline. Upon beginning work with the CSU Office of the Chancellor, these two staff members made SB 24 a very high priority and engaged in multiple activities to fully support implementation on all 23 CSU campuses. This included stakeholder meetings, workgroups to address specific elements of implementation, and ongoing collaboration with the campuses.

### **Readiness Expenditures**

Grant expenditures include items such as facility upgrades, training, staff salaries, medical equipment, and one-time costs. Given the memorandum of understanding between the CSU and the CCSWG was not completed until June 2022, no funds were available to the campuses during this reporting period. Campuses received the funds in late August 2022.

### ***Closing Comments for Annual Report for SB-24 Implementation for FY 2021-2022***

Overall, all of the campuses in the CSU have made significant progress toward implementing MAB in January 2023, and a few campuses are on track to begin offering services in late 2022. Our collaboration with Essential Access Health has proven to be an invaluable resource as they have not only facilitated MAB trainings, but they have also provided significant consultation to the Office of the Chancellor and individual campuses. Since the campuses did not receive funding until late summer 2022, they have been laying the groundwork to move ahead quickly once the funding is secured. The opt-out option for providers is likely going to provide challenges for some of our campuses; however, the Office of the Chancellor has been working toward finding ways to support these campuses through exploring temporary contracts with outside providers to serve the students on these campuses until staff can be hired within the SHS clinics to provide the services. The CSU SHS leadership across our 23 campuses have worked diligently to begin to build the necessary infrastructure to offer safe and high-quality MAB services to our students.



### Appendix 3: California State University College Student Right to Access Act Activity Summary by Campus

#### California State University, Bakersfield

Implementation Readiness on Target? (Y/N)	No. of Abortions by Medication Techniques Provided
Y	0

#### Summary of Activities

SHS staff met with the University Police Department (UPD) to discuss medication abortion implementation. UPD completed a safety inspection and made recommendations for building modifications. SHS also convened Quality Management and Improvement Committee to discuss medication abortion implementation needs including needed equipment, after-hours support, and training. In June 2022, SHS leadership met with campus Vice President of Student Affairs, Campus General Counsel, and Human Resources to discuss management of opt-out option for medical providers. One challenge this campus has encountered is the extensive cost of the security upgrades that will be needed.

#### California State University, Channel Islands

Implementation Readiness on Target? (Y/N)	No. of Abortions by Medication Techniques Provided
Y	0

#### Summary of Activities

All CSUCI Student Health Services are contracted by a third party. Campus leadership explored the possibility of the third-party offering MAB but were informed that this contractor does not provide any abortion services. Given this, campus leadership began exploring alternative contractors to provide this service. Meetings with Planned Parenthood and FPA Women's Health were conducted to determine if either of these organizations could meet the campus needs.

**Chico State**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Chico State established an SB 24 implementation workgroup. Clinicians and SHS staff have completed the Essential Access Health trainings. A security assessment of the Chico State WellCat Health Center was completed, and recommendations were made. Staff have developed clinical protocols and related policies for MAB and have worked toward establishing a network of support with local medical providers and have been exploring after-hours support. The largest challenge has been finding ways to address the extensive cost of the security upgrade recommendations.

**California State University, Dominguez Hills**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

CSUDH SHS staff have completed the Essential Access Health orientation and provider trainings. SHS leadership worked with UPD and Risk Management to complete a security assessment, and cameras and a panic button system will be purchased. The Place, Time and Manner policy has been reviewed, and workflow scenario training has begun.

**California State University, East Bay**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

SHS staff reviewed physical security and began developing an action plan to address any security challenges. SHS staff also completed a MAB protocol for their Policy and Procedures manual. Leadership began pursuing obtaining a contract with Fonemed for 24-Hour Registered Nurse support. Fonemed will be used, as a whole, for all student health concerns.

**California State University, Fresno**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

SHS completed a security review with UPD and have determined to add an external camera to the clinic. This campus also convened a workgroup comprised of providers and pharmacists and developed a MAB Clinical Protocol/Workflow and a “Things to Know” pamphlet for patients.

**California State University, Fullerton**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

All staff completed the Orientation to MAB training, and all clinical staff completed all clinical training for MAB offered by Essential Access Health. Existing clinical protocols for administering MAB within primary care setting have been researched and staff have begun drafting protocols for our clinic. CSUF formed a security task force to address possible concerns. The Task Force consisted of University Police, Risk Management, Dean of Students Office, Student Conduct, Student Life and Leadership, Environmental Health and Safety, and CAPS. Recommendations were made to adjust the entrance to Center, move tables from Center perimeter, and increase signage around the building. Electronic Health Record (EHR) templates have been created and are ready for use. SHS staff have presented access and administration procedures to various departments in student affairs. Additionally, SHS staff have connected with Planned Parenthood of Orange and San Bernardino County for additional training and consultation.

**California Polytechnic State University, Humboldt**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Cal Poly Humboldt has had two building inspections to determine appropriate modifications for increased security and safety. The first included the Chief of Police, the head of Risk Management, several people from Facilities, and SHS leadership. As a result of these inspections, some modifications will be made to increase security and privacy. There have been additional measures taken to assist with flow into the building. SHS also has convened an SB24 implementation team that has been meeting regularly to prepare for the January 2023 implementation. Multiple meetings with the local Planned Parenthood have been held to help with preparation for onsite MAB services as well as the referral process for cases not appropriate for MAB. Conversations with a local Ob/Gyn have also been started to develop a partnership for consultation services as well as an additional referral resource.

**California State University, Long Beach**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

In-house training for all staff was completed. This campus reviewed the importance of providing all services, including MAB, in a non-judgmental, supportive, and empathetic manner. Additional training for all clinical staff was provided by Essential Access Health. SHS staff have coordinated with Planned Parenthood Los Angeles for referring women who are not candidates for MAB at SHS. Internal workflows, policies and procedures, and clinical protocols have been developed, as have patient education materials, including detailed patient care plans and after-hours care contact information. Additionally, a patient care package will be distributed to all students receiving MAB. EHR templates and patient consents have also been developed.

**California State University, Los Angeles**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

SHS leadership formed an SB 24 workgroup that began meeting weekly in April 2022. All SHS providers and support staff completed the Essential Access Health trainings. SHS staff developed clinical protocols and a workflow chart including counseling and screening procedures. SHS risk management reviewed protocols to ensure proper policies and procedures were in place.

**California State University, Maritime Academy**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Cal Maritime has their own in-house student health center. Cal Maritime staff and providers have completed the Essential Access Health trainings. Staff have developed a clinical protocol and are working on developing EHR templates.

**California State University, Monterey Bay**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

CSU Monterey Bay's health services are provided by Doctors on Duty (DOD) urgent and primary care provider. The Health and Wellness Services (HWS) department oversees the DOD MOU. In February 2022, HWS met with DOD to discuss planning of the implementation of MAB services. In April 2022, HWS and DOD met with Essential Access Health to discuss MAB implementation. In June 2022, HWS Director, Health Promotion Education Manager and DOD clinical staff attended orientation and clinical trainings by Essential Access. HWS Director also met with the University Police Department, Risk Management and Communications to review Security Review, Time, Place, and Manner policy and Communications media preparation.

**California State University, Northridge**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

CSU Northridge created a MAB workgroup. This workgroup developed MAB Policies and Procedures and created initial, and follow-up visit templates for the electronic medical record. SHC Director provided a PowerPoint presentation on MAB for the CSUN Student Affairs Leadership Team.

**California Polytechnic Institute, Pomona**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Cal Poly Pomona SHS personnel have completed the full staff Orientation provided by Essential Access Health and all providers have completed the clinical training. A workgroup was created, and weekly meetings held. Clinical protocols and a department process flow have been developed and templates for the electronic health record have been developed. This campus has confirmed a commitment from Fonemed to provide after-hours nurse triage services for MAB. A security walk-through with IT and UPD was completed and the procurement process for additional security cameras was initiated. A “Quick Start” guide for patients was developed. Consultations with Planned Parenthood and Essential Access health have been undertaken to explore collaboration and referral opportunities. Campus constituents including student leaders, Government Relations personnel and leaders in the Division of Student Affairs have been briefed on implementation plans.

**Sacramento State University**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Sac State SHS staff have completed both Essential Access Health trainings. A clinical protocol for providing MAB was written and policies and procedures for storing and dispensing the medications were developed. A student information booklet about MAB was created. SHS staff verified that the after-hours nurse advice line has protocols to manage students' after-hour telephone calls related to MAB services. Templates for the electronic health record have been created.

**California State University, San Bernardino**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Student Health Center team members participated in the two trainings provided by Essential Access Health. The National Abortion Foundation was contacted and visited the SHC and provided a security assessment. A campus taskforce was established that included the Vice President for Student Affairs, the Executive Director of Health, Counseling & Wellness, the CARE Team Office, Office of Student Engagement, Office of Basic Needs, Police, Facilities, Planning & Management, Housing & Residential Education, Risk Management, Procurement & Contracts, Campus Counsel and Human Resources. Local abortion care providers were contacted for possible temporary contracting and discussions began with Planned Parenthood of Orange and San Bernardino Counties.



### San Diego State University

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

#### Summary of Activities

The SDSU SHS team participated in the Essential Access Health orientation and clinical trainings. SHS leadership collaborated with the Campus Life Planning Group to provide an overview of SB 24 and MAB and initiate discussions regarding security assessments that may be needed, safety planning for the Calpulli Center which houses the Student Health Center, and communications planning. Multi-disciplinary security planning meetings were held with UPD, the Vice President for Student Affairs & Campus Diversity, and the San Diego Police department. This included a walkthrough of the health center to assess for potential security concerns. A team from Strategic Communications and the Vice President for Student Affairs & Campus Diversity met to begin mapping out communications plans.

### San Francisco State University

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

#### Summary of Activities

All SFSU SHS staff attended the Essential Access Health trainings. MAB training was added to staff onboarding procedures and MAB proficiency has been added to clinician privileging protocols. A work group was established and began developing clinical protocols and procedures, patient education materials, patient satisfaction forms, patient agreement forms, identifying referrals for those ineligible for MAB or requiring a higher level of care than SHS can provide, and developing an internal infrastructure for tracking SB 24 related orders, funds used, and services provided. Security assessments have also been conducted at the SHS clinic. SFSU has experienced a significant number of leadership transitions, including the SHS director as well as the Associate Vice President for Student Wellness. These transitions have slowed progress at times, but this campus is now on track for January 2023 implementation.

**San José State University**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

SJSU staff completed both Essential Access Health trainings. Two workgroups were established: 1. A University-level workgroup consisting of the Student Affairs Vice President’s Office, the Student Wellness Center, Counseling & Psychological Services, Risk Management, Strategic Communications, and UPD to review university response and support protocols; 2. SHS MAB Committee. The SHS committee was tasked with reviewing and implementing deliverables for MAB readiness including medical protocols, electronic health record templates, the options counseling process, and clinical workflow. Medical providers who would be providing MAB were identified and privileged. Medical protocols and workflows were established. After-hours support was confirmed with current contracted service.

**California Polytechnic University, San Luis Obispo**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

In January 2022, a project lead and senior leader sponsor were selected. A working group comprised of Health Services, Counseling Services, and Wellbeing Services was identified, and included auxiliary participation from campus police, communications, IT support and Human Resources. The MAB implementation project lead conducted a Strength, Weakness, Opportunity, Threat (SWOT) Analysis with senior management of Campus Health and Wellbeing in March 2022. In addition to the SWOT, the session included a presentation from a California Health and Wellness provider about medication abortion, introduction of working group members, and a discussion of next steps. The working group held its first full meeting in March, where results from the SWOT analysis were reviewed, tasks were assigned, and scope was discussed. The working group then met on a weekly basis for the duration of the fiscal year. Through April and May, strategic partnership meetings were conducted with Planned Parenthood, Essential Access Health and UCSB, to gain insight into training

and security needs, protocol consultation and working group support. A preliminary training plan was created for all staff within CH&W. Early development and revision of clinical protocols were created, in consultation with Planned Parenthood and UCSB for feedback. Campus protocols were continuously reviewed and updated in response to new training information, feedback from collaborators and from student reviewers. A communications plan was drafted in collaboration with division and university communicators, outlining strategic talking points, key stakeholder groups, and proactive and reactive messaging needs. Plans to incorporate a student internship, education speakers series and robust outreach plans were also started.

**California State University, San Marcos**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

Current SHS providers have indicated that they will be utilizing the opt-out process, so MAB services will need to be provided by a contractor until additional providers can be hired. SHS leadership has been exploring a possible relationship with Planned Parenthood or FPA Women’s Health as possible contractors to provide this service.

**Sonoma State University**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

SHS staff established a Workgroup. All staff have completed the MAB trainings offered by Essential Access Health. Staff researched MAB protocols and developed a protocol for provision of services at Sonoma State. A security assessment with the University Police Department was completed. Additionally, meetings with multiple outside providers, and a consultation with Planned Parenthood was undertaken to explore referral and consultation possibilities. A contract with an after-hour phone line was (Fonemed).

**Stanislaus State University**

<b>Implementation Readiness on Target? (Y/N)</b>	<b>No. of Abortions by Medication Techniques Provided</b>
Y	0

**Summary of Activities**

At Stanislaus State, all staff have participated in the Essential Access Health trainings. SHS leadership convened a workgroup for planning and implementation, including protocol reviews, referral processes, and follow-up and tracking procedures. SHS has also developed an internal capacity to send confidential satisfaction surveys via the EHR. SHS staff have also collaborated with other campuses and Stanislaus State stakeholders, such as SHAC, UPD, Housing, CAPS, and Student Affairs.

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