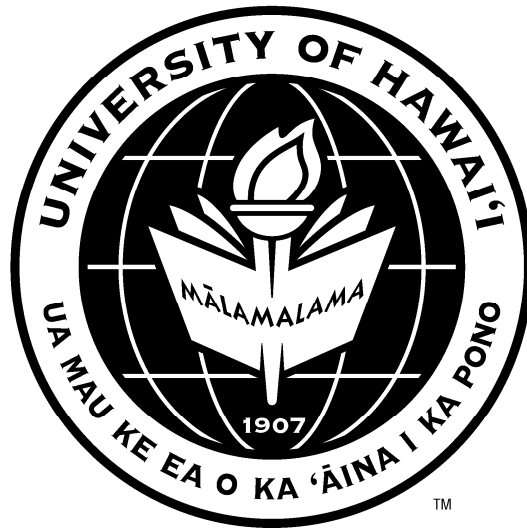


# UNIVERSITY OF HAWAI‘I SYSTEM REPORT



REPORT TO THE 2024 LEGISLATURE

Report on Strengthening the State's Reproductive Care Workforce

HR 57 (2023)

December 2023

**University of Hawai'i at Mānoa  
John A Burns School of Medicine**

**HR 57 (2023) Legislative Report**

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**INTRODUCTION**

House Resolution (HR) number 57, from the 2023 State Legislature of Hawai'i requests the University of Hawai'i (UH) at Mānoa (UHM) John A. Burns School of Medicine (JABSOM) to (a) prioritize efforts to strengthen Hawai'i's reproductive care workforce, particularly for rural and remote areas of the State, (b) consider ways of increasing financial assistance for students who are pursuing academic programs in fields related to reproductive care, and (c) submit a report on its efforts to strengthen the State's reproductive care workforce to the Legislature no later than twenty days prior to the convening of the Regular Session of 2024, including any findings, recommendations, and proposed legislation.

In recognizing the fundamental importance of reproductive health and healthcare as an essential component of health, the State of Hawai'i continues to prioritize and preserve access to safe and legal reproductive care since becoming the first state to legalize abortion in March 1970. The JABSOM core values of diversity and inclusion, excellence, and pono - taking action to eliminate

health disparities in the spirit of social justice – inspire our faculty and learners to achieve the mission of advancing women’s health in Hawai’i through excellence in education, research, clinical care, and community service in perpetuity.

In response to House Resolution 57, this report presents the following:

- A. How the JABSOM is prioritizing efforts to strengthen the reproductive care workforce in Hawai’i, including in rural and remote areas of the state
- B. How JABSOM is considering ways of increasing financial assistance for students who are pursuing academic programs in fields related to reproductive care
- C. The achieved and future efforts of the UHM John A. Burns School of Medicine, UHM Nancy Atmospera Walsh School of Nursing, UHM Thompson School of Social Work and Public Health, UH Hilo Daniel K. Inouye College of Pharmacy, and UH Hilo School of Nursing, towards strengthening the State’s reproductive care workforce through classroom curriculum, experiential curriculum, and interface with health profession pathway programs including but not limited to high school health academies, area health education centers (AHEC), school health education programs (SHEP), and community colleges.

## **PRIORITIZING EFFORTS TO STRENGTHEN THE REPRODUCTIVE CARE WORKFORCE**

JABSOM, like all US medical schools, is required to provide a core, required curriculum in obstetrics, gynecology, and women’s health. We are fortunate to have an extremely strong academic department of Obstetrics, Gynecology, and Women’s Health (OB/GYN) whose talented faculty and residents constantly encourage and nurture pre-medical students and medical students who express interest in women’s health. In 2006, the Complex Family Planning division of the department established the Ryan Residency Training Program, and in 2011, started the Complex Family Planning fellowship, which is additional subspecialty training after completing an accredited OB/GYN residency program. The graduates of this fellowship are experts in their field, acknowledged both in Hawai’i and internationally, and provide education, advocacy, and clinical service in their communities. The Division’s clinical research benefits patients in Hawai’i and the Pacific and trains the next generation of clinical researchers. Their lead faculty investigators were awarded the Roy M. Pitkin Award in 2020 and 2021 for excellence in research. These same committed faculty and staff ardently advocate for reproductive access and train medical students, OB residents, and Family Medicine residents in options counseling, contraception, and abortion care. The majority of OB/GYN providers in Hawai’i were trained in JABSOM’s programs and many working on the neighbor islands teach JABSOM’s medical students and residents. Our Complex Family Planning faculty physicians provide services via telehealth.

JABSOM’s Department of Family Medicine and Community Health has been committed to social justice, access to care, health equity, and high-quality, culturally relevant primary care since the Department’s inception in 1992. Over the years, the residency program has participated in and received Reproductive Health Education in Family Medicine (RHEDI) grant funding, which supports curriculum and skills development in abortion, and sexual and reproductive health training in family medicine residency programs. JABSOM OB/GYN faculty have also augmented these efforts, such that there is now a longitudinal curriculum in family planning and abortion

services for the family medicine residents. More than 75% of the UH Family Medicine Residency Program graduates practice in Hawai'i, including on Hawai'i Island, Maui, Lanai, and Kaua'i.

The changing social contexts require us to train the next generation of physicians to value and advocate for health equity and social justice, including high quality, safe patient care that is increasingly delivered in interprofessional teams. As such, JABSOM's revised graduation expectations for medical students and curriculum ensure students are able to provide equitable care of diverse patients and communities by evaluating the influences of various social determinants of health, working with other members of the healthcare team to mobilize services and resources, and advocating for changes in the healthcare ecosystem. For more than 10 years, JABSOM has been gradually building educational experiences on the neighbor islands and other rural areas, which include longitudinal OB/GYN and family medicine experiences. The high travel and housing costs have been covered through philanthropy and, more recently (2022 Legislature) through new operational funds provided to JABSOM to help with neighbor island expansion. Expansion to the neighbor islands continues to be a priority but requires more compensated faculty members with some non-clinical time to properly coordinate and administer these rotations, work with local hospitals and other potential clinical sites to ensure learning environment requirements can be met, and work to better connect high school health academy or STEM-focused programs with a myriad of JABSOM and UH pathway programs, the UH community colleges, and JABSOM and UH STEM and research programs aimed to increase more underrepresented in medicine and science into these fields. Having additional JABSOM faculty (with non-clinical duties) and staff on the neighbor islands will also help make those important and early mentoring connections with our specialty faculty, like OB/GYN and family medicine. Early (pre-college, college) exposure to clinicians who provide reproductive care, through mentoring, shadowing, or participating in outreach activities, is critical to developing more interest in this area.

### **POSSIBILITIES TO INCREASE FINANCIAL ASSISTANCE FOR STUDENTS PURSUING MEDICAL SPECIALTIES THAT PROVIDE REPRODUCTIVE CARE**

The pathway to becoming a board-certified physician specialist is long and complex. After completing their medical school prerequisite courses and exams, students must successfully compete for entry into medical school. While some students may have an idea on entry to medical school of what specialty they want to pursue in residency, most students change their mind over the three years they have to decide. Medical schools offer elective experiences throughout the four years to help students decide on their specialty, but those cannot be financially incentivized. In the fourth year of medical school, students apply for their residency programs - in which they will specialize in a particular field. During or after residency, some will decide to pursue additional subspecialty training via fellowships. After completion of an accredited residency program, physicians become eligible to complete their specialty board certification, the attainment of which demonstrates high competency and quality in that field.

Because interests and life circumstances change during medical school and because of our duty and requirements to train broadly and provide equitable learning environments, it is not possible to provide specialty-directed scholarships or financial aid. There are some federal programs available for those who are certain to go into primary care or behavioral health – if they do not,

there is a substantial payback penalty. Low numbers of students across the country enter these programs, because most need time and exposure to the different medical specialties to decide. If, however, a student is interested in a medical specialty that provides reproductive care, there is some financial assistance to help defray travel to a conference (to present their scholarly work) or to cover the costs of posters or published research articles. The critical factor in determining one's ultimate specialty is exposure to the curriculum, excellent mentors, and elective opportunities while in medical school. Many of these efforts are described below.

## **ACADEMIC EFFORTS TO STRENGTHEN THE STATE'S REPRODUCTIVE CARE WORKFORCE**

Brief summaries of major curricular and training activities in reproductive care follow. More detail is provided in Appendix A. We would like to highlight that undergraduate medical education (i.e., medical students) and all other nursing, pharmacy, social work, and public health courses are required or elective for students before they "differentiate" into specialties that provide direct care to reproductive persons. This general exposure allows for the health professions students to decide on future specialization. Additional specialty training in reproductive health and, in particular, abortion care, are provided in JABSOM's graduate medical education programs in Obstetrics and Gynecology (OB/GYN) (residency), Complex Family Planning (CFP) (fellowship), and Family Medicine (residency).

### **John A. Burns School of Medicine (JABSOM)**

#### ***Undergraduate Medical Education (UME)***

During the second year of the four-year medical doctoral degree (MD) program, students complete an eleven-week unit on the life cycle that features reproductive health Problem-Based Learning cases encompassing the spectrum of family planning and pregnancy. Students learn from patient panels that include survivors of ovarian cancer, reproductive health choices, and sexual/gender minorities. Medical students complete workshops that include sexual health, trauma-informed care, breast and pelvic exams, and pathology laboratories with many didactic sessions that include reproductive anatomy, physiology, embryology, and many clinical care topics such as contraception, prenatal care, and sexually transmitted infections.

At the beginning of their third year, before rotations start, medical students have workshops on contraception and a skills station on aspiration of uterine contents. They also have a standardized patient experience workshop on sexual history taking, where they receive feedback that enhances their effectiveness as clinicians. During the third year of the MD program, students complete a longitudinal integrated clerkship that immerses them into clinical disciplines including obstetrics and gynecology where students counsel patients on family planning, contraception, and pregnancy options under the supervision of an attending physician. Students in their fourth year of medical school have the opportunity to complete an elective working directly with JABSOM's Complex Family Planning fellowship program where they are exposed to office-based and medication abortions and contraception. Students interested in pursuing specialty careers in OB/GYN have additional rotations, mentoring, and workshops available to them to support knowledge and skills development in the full spectrum of reproductive care.

Students have the opportunity to complete a Girl Power Community Health elective that allows students to provide mentorship to girls from Kawanānakoā Middle School on an array of topics pertaining to adolescence. Additionally, students interested in educational or clinical research related to abortion access or abortion care are able to participate in clinical research projects conducted by JABSOM's Complex Family Planning or generalist OB divisions.

### ***Graduate Medical Education (GME)***

The core OB/GYN Residency Program and CFP Fellowship Program trains residents in abortion and contraceptive care at weekly didactic sessions and case conferences. Residents and faculty members participate in weekly morbidity and mortality conferences to learn from medical errors, complications, and unanticipated outcomes with the focus being educational, rather than on culpability. Residents and fellows gain clinical experience in office-based abortions, medication abortions, and inpatient consults at the Queen's University Medical Group (QUMG) Family Planning practice and Kapi'olani Medical Center for Women and Children (KMCWC). Fellows of the Complex Family Planning Fellowship Program complete rotations on Hawai'i Island at Hilo Medical Center and Planned Parenthood of Honolulu and Maui while often contracted as consultants for complex cases. Additionally, CFP fellows have the opportunity to complete clinical rotations at the World Health Organization (WHO), Centers for Disease Control (CDC), and American College of Obstetricians and Gynecologists (ACOG). Training is held for residents, fellows and faculty members to develop expertise in providing care in low resource settings and providers work closely with advanced practice nurse practitioners at Planned Parenthood sites. Planning for abortion access on a statewide level is completed through the Hawai'i Maternal and Infant Health Collaborative which is facilitated by one of JABSOM's program directors.

As mentioned above, the JABSOM Family Medicine residency program has a longitudinal, required curriculum in family planning and abortion care. Full-spectrum sexual and reproductive health care (including contraception, abortion, and all stages of pregnancy care) are routine components of primary care; the RHEDI curriculum aims to increase the skills and numbers of family medicine providers providing full spectrum sexual and reproductive health care.

### ***Nancy Atmospera Walsh School of Nursing (NAWSON)***

Students of the Bachelor of Science (BS) in Nursing Program and graduate entry program in nursing students complete critical courses that cover normal and at-risk childbearing, women's health, sexually transmitted infections, family planning, infertility, and genetics. Clinical experiences occur at KMCWC, Tripler Army Medical Center (TAMC), and Queens Medical Center (QMC) in labor and delivery and postpartum departments. High school direct entry programs at local high schools across Hawai'i and the translation of associate degrees in nursing at community colleges on Kaua'i and Maui for entrance into the Registered Nurse (RN) program after completion of community college are examples of efforts to recruit future nurse providers.

Students completing the Doctoral Program of Nursing (DNP) complete a *Women's Health - Promotion and Maintenance* course that covers a professional patient experience where they

must complete a breast and pelvic exam with a pap smear. Students gain supervised clinical experiences in labor and delivery, nursery, and postpartum at local hospitals, and simulation.

### **Thompson School of Social Work & Public Health**

Masters of social work students who are in the Health Specialization are required to complete a health specialization course that features sessions on maternal and child health. Students completing their required field education may be placed at Federally Qualified Health Centers (FQHCs) where they participate in counseling patients who are pregnant. Additionally, students may complete an elective course on women and health that features multiple sessions covering reproductive health infertility, abortion access, and overall reproductive care topics.

Public health students complete courses where class sessions focus on health policy and rural health access barriers with specific examples related to reproductive health and healthcare access. Students are required to complete a maternal health documentary assignment. Students often select topics for projects linked to reproductive health and are placed with community partners including Health Mothers, Healthy Babies; Residential Youth Service & Empowerment (RYSE) Hawai'i; and Planned Parenthood. Public health courses are offered through UHM and Kaua'i Community College at Waimea High School.

### **UH Hilo Daniel K. Inouye College of Pharmacy**

Required pharmacotherapy courses specifically focus on women's overall health and contraceptives. Additionally, a law and ethics course emphasizes prescribing and dispensing of oral contraceptives and mifepristone. Pharmacology students have the opportunity to counsel patients on various forms of birth control, whether dispensed or over the counter, at pharmacies across the state of Hawai'i and in the continental United States. Students learn from pharmacists who are trained and registered to prescribe oral contraceptives. Currently, the number of pharmacists who prescribe oral contraceptives and dispense mifepristone is limited due to the lack of reimbursement for pharmacists' services. Reimbursement for care provided by pharmacists, for health conditions for which they are trained and licensed within their scope of practice, is needed to provide more accessible reproductive health care, particularly in rural and neighbor island areas.

### **UH Hilo Nursing**

Students of the BS in Nursing Degree program must complete a *Perinatal and Pediatric Health Practice* course that emphasizes the nursing process in providing healthcare to perinatal women and children in the context of family while exploring preventive healthcare, anticipatory guidance, and health promotion in a developmental context. Completion of a practicum is required at either a labor and delivery, nursery, and postpartum department at a local hospital, simulation at the UH Hilo nursing lab, or inpatient pediatrics and community settings.

Students of the DNP program complete a *Primary Care of Women* course that emphasizes the provision of comprehensive primary care to women including the maturation process through menarche, pregnancy, childbearing period, and menopause. Specific emphasis is placed on

evidence-based health assessment, diagnosis, health education, health promotion, disease prevention, perinatal care, clinical management, and evaluation of common gynecological and obstetric healthcare needs of women. The required lab for this course features a supervised advanced-practice practicum that focuses on health promotion and clinical management of the health concerns of female clients including health and wellness, perinatal care, gynecologic care, and occupational health concerns. Experiences include breast and pelvic exams and birth control options including certification in intrauterine device (IUD) insertion.

## **LEGISLATIVE RECOMMENDATIONS**

Related to Pharmacy Practice and Reimbursement: In the 2023 Hawai'i State Legislative Session, [Senate Bill 165](#) was introduced and advocated for mandated reimbursement for pharmacists. Concurrently, [Senate Bill 513](#) supported pharmacists prescribing oral contraceptives whether the patient has evidence of a previous prescription for contraceptive supplies from a licensed physician, advanced practice registered nurse, or other primary care provider authorized to prescribe contraceptive supplies. In the 2024 Legislative session, these two bills (Senate Bills 165 and 513) will be reintroduced. Successful passage will make more rapid progress to eliminate barriers to contraceptive access. At the Federal level, advocacy work would need to result in an FDA modification of the Mifepristone REMS program to remove in-person dispensing requirements and add pharmacy certification to dispense (REMS modification 1/2023).

Related to medical education operations: Due to budgetary constraints, JABSOM medical students learn to perform the breast and pelvic exam through simulation on mannequins and gynecologic teaching assistants before examining actual patients. There is a professional patient program, which is invaluable. However, the cost of the professional patient program has increased by 33% in the past fiscal year due to increased professional patient costs and is currently narrow in scope. JABSOM does not have sufficient operational or private funds to make this experience available to all students as part of their core curriculum. The Obstetrics and Gynecology (OB/GYN) medical student interest group hosts hands-on workshops and simulations on labor and delivery and ultrasound techniques. New O (Operational) funds to JABSOM, specifically to expand reproductive healthcare training in the curriculum and to our neighbor island learners, would support the professional patient program (for breast and pelvic exams), the standardized patient program (sexual and reproductive health counseling, increase skills in providing equitable access to care for SGM persons), refurbishing of manikins and procurement of additional pelvic models, supplies for training. No specific amount for this was included in the JABSOM supplemental budget request, but an additional \$150,000 in operational funding would allow us to greatly enhance our curriculum and co-curricular offerings.

JABSOM's Supplemental Budget Request to the 2024 Legislature of 4.0 FTE positions and \$925,000 was approved by the UH Board of Regents and will be included as part of the UH budget request. While this request does not directly address reproductive care, it will definitely expand our training capacity on the neighbor islands and provide better connectivity and mentoring opportunities for neighbor island high school and college students to pathways into health careers, including those professions and medical specialties that have critical roles in ensuring neighbor island and rural populations have access to full spectrum reproductive health care. JABSOM



appreciates the continued support of the Legislature. A brief narrative of the supplemental budget request is below and is also being recommended by the Hawai'i Medical Education Council (HMEC) in their report to the 2024 Legislature:

UH/HMEC recommends the State Legislature and State Executive Branch provide increased support for growing medical and health professions education on the neighbor islands by providing 1.5 FTE physician (faculty) coordinator positions and 1.5 FTE non-physician program coordinator/outreach positions, including salary and operational funding to JABSOM's base budget. The neighbor island-based faculty coordinator position will support a more rapid expansion of JABSOM's residency training and medical student experiences by providing on-island coordination and focused attention to increase local health system capacity to provide high-quality clinical education. The dyad of physician coordinator and program coordinator/outreach position will enhance connectivity between the high schools, Department of Education, community colleges, Area Health Education Center programs, UH and JABSOM's many STEM programs, and UH health professions programs, including the medical school. Less directly related to expanding medical education opportunities on the neighbor islands, but critical to reducing health disparities in diabetes across the state, is a funding request for 1.0 FTE physician-scientist in endocrinology. This position will synergize with JABSOM's existing basic science, translational research, and community-based research programs in diabetes and cardiometabolic disease and help grow JABSOM's capacity for clinical translational research. This position will also help ameliorate the state's shortage of endocrinologists. JABSOM's total supplemental budget request to the 2024 Legislature is 4.0 FTE and \$925,000.

Appendix A (tables) below, provides additional detail on the academic or pathway activities that were summarized above.

Thank you for the opportunity to partner with the State in helping to expand access to reproductive care and strengthen our workforce, particularly in neighbor islands and rural communities.

**APPENDIX A. Curricular experiences and interfaces with pathway programs that grow the reproductive healthcare workforce.**

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
<b>JABSOM UME</b>	<p>MD7 (MDED577) - 5 reproductive health PBL cases including the spectrum of family planning, abortion, and pregnancy as well as GYN pathology. Patient panels include survivors of ovarian cancer, reproductive health choices including abortion, miscarriage, and pregnancy, and a sexual/gender minorities panel. Workshops include sexual health, trauma informed care, breast &amp; pelvic exams, and pathology laboratories. There are many didactic sessions that include reproductive anatomy, physiology, embryology, and many clinical care topics such as contraception, prenatal care, and sexually transmitted infections. Specific</p>	<p>No required rotations in pre-clerkship, but it would be great to offer family planning as an exposure clinical experience (1x/student) during the MDED577 course, which was done in the past.</p> <p>During the 3rd year OB/GYN Clerkship, students counsel patients on family planning, contraception and pregnancy options under the supervision of an Attending. They also have the opportunity to participate in family planning surgical cases. During their Designated Study Time, they may attend a Family Planning clinic.</p> <p>During the 4th year, there is a 2-4 week Family planning Elective working directly with the Complex Family Planning group learning about office-based, medication, and operating room-based abortions and</p>	<p>The Girl Power Community Health Elective is designed for first and second year JABSOM medical students to provide mentorship to middle school girls from Kawanakoa Middle School on an array of topics about adolescence including menarche, bullying, and relationships. This program is run in coordination with the Nu`uanu YMCA.</p>

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
	<p>didactic session on reproductive determinants of health (SDOH).</p> <p>During the Transition to Clerkship week, students participate in a contraception workshop and simulation on performing a manual vacuum aspiration of a papaya.</p> <p>In MS3 year, students participate in a sexual history taking workshop with simulated patients and receive feedback about how they conducted their history, with regard especially to creating an inclusive and non-judgmental clinical space.</p>	contraception.	
<b>JABSOM Core OB GME</b>	As part of a rotating curriculum residents receive training in abortion and contraceptive care at their weekly didactic sessions, CFP faculty and fellows participate in weekly M&M conferences	Clinical experiences at the Queens University Medical Group Complex Family Planning practice (office based abortions, medication abortion, OR-based abortion, inpatient consults at Queens and Kapi'olani)	None

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
<b>JABSOM CFP GME</b>	Weekly didactics, case conferences, twice yearly travel to national meetings for complex family planning specialists, public health training, training for providers to develop expertise in providing care in low resource settings, opportunities for rotations at the WHO, CDC, ACOG	Clinical experiences at Queens University Medical Group Complex Family Planning Practice (2 days per week of clinic-based abortion procedures and medication abortion, 1 day per week of operating room based abortion procedures, 1 day of telemedicine), rotation in Hilo, Rotations at Planned Parenthood Honolulu and Maui, inpatient consults at Queens and Kapi'olani. Our fellows serve as consultants across the state of Hawai'i and are often contacted for complex cases	Fellows participate in the education of pharmacists/pharmacy students, collaboration with MPH students, physician trainees in multiple levels of training (including Family Medicine residents), Providers work closely with APRNs at Planned Parenthood sites, Planning for abortion access on a state level through the Hawai'i Maternal and Infant Health Collaborative (B. Kaneshiro is the co-convenor)
<b>JABSOM FM GME</b>	Family Planning (RHEDI) rotation includes weekly 1:1 teaching on abortion legislation, diagnosis of pregnancy, options counseling, and medication and procedure abortions.	Weekly clinic during family planning rotation where medication and procedure abortions are offered to patients within the family medicine primary care clinic. Option to have weekly Planned Parenthood training during this 4-week rotation.	
<b>DKICOP</b>	P2 Law & Ethics - pharmacy prescribing and dispensing of OCs and mifepristone.	Community Pharmacy rotation (required for post-P1 summer and P4s) - students have the opportunity to counsel	Education on medication abortion care for pharmacists, pharmacy students, and pharmacy technicians at Hawai'i

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
	<p>P3 Pharmacotherapy - women's health and contraceptives.</p>	<p>patients on various forms of birth control (dispensed or OTC) at pharmacies across the islands and continental US. Some pharmacies have pharmacists who went through training and are registered to prescribe oral contraceptives. Students would be exposed to this if working with one of these pharmacists. Currently, the number of pharmacists who can prescribe OCs and pharmacies that can dispense mifepristone are limited because of lack of reimbursement for pharmacists' services. Pharmacists need reimbursement to be able to provide more widespread reproductive health (and other) services. (some with health provider attached (i.e., MinuteClinic) do provide extra counseling and bill for reimbursement (i.e., NP) or charge a separate counseling fee.</p> <p><b>RECOMMENDATION:</b>  <a href="#">SB 165</a>, last years bill mandating reimbursement for pharmacists services (will be reintroduced next</p>	<p>Pharmacists Association by JABSOM OB faculty and Complex Family Planning fellows</p>

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
		legislative session), prior bill that support pharmacists prescribing OC ( <a href="#">SB 513</a> ), and FDA modification of Mifepristone REMS program to <a href="#">remove in-person dispensing requirement and add pharmacy certification to dispense (REMS modification 1/2023)</a>	
<b>Thompson School of Social Work (SW) &amp; Public Health (PH)</b>	<p><b>SW-SW 723-</b> Specialization course in Health specialization, two sessions on maternal and child health.</p> <p>Elective, SW 776 Women and Health. Multiple sessions that cover reproductive health, infertility, abortion access, etc.</p> <p><b>PH-</b> PH 201 (Introduction to Public Health) &amp; PH 202 (PH in Hawai'i) Individual class sessions on Health Policy &amp; Rural Health Access Barriers, examples related to reproductive health &amp; healthcare access.</p>	<p><b>SW-</b>Options to complete placements at FQHCs, where students may participate in counseling of patients who are pregnant. Additional placement options include Planned Parenthood Votes NW and early intervention programs or home visiting programs that also may discuss reproductive health.</p> <p><b>PH</b> PH 201-N/A</p>	<p>PH 201/202/203 offered at UHM and Kaua'i CC. Kaua'i CC offers PH 201/202/203 as Early College courses at Waimea HS</p> <p>PH provides support as requested to high schools teaching public health</p>

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
	PH 203 (Global Health) individual class sessions focused on Maternal Mortality & Women's Health, etc PH 485 (Applied Learning Experience), 3 credits,	PH 203. Required Maternal Health Documentary Assignment  PH 485-Students often select projects/topics linked to reproductive health and are placed with community partners including Healthy Mothers, Healthy Babies, <a href="#">RYSE</a> , & Planned Parenthood.	(e.g. Kailua HS) - OPHS <a href="#">Summer Scholars Program</a> for local high school students
<b>NAWSON Undergraduate (UG) program</b>	NURS 321 (2 credits)/ Women, Newborn and Family Health - UG critical nursing lecture course. Weekly lectures (normal and at risk childbearing, women's health, STIs, family planning, infertility, genetics), case studies, women's health issues presentations.	NURS 321 Lab (6 credits- 135 hrs) on unit clinical experiences at KMCWC, TAMC, QMC in Labor and Delivery, Postpartum - working with nursing faculty and staff RNs, & simulation/ dry lab at UH Mānoa NAWSON, postpartum teaching project for community client	1. High School Direct Entry Program- recruitment at local high schools. 2. Pre-Nursing to traditional BS nursing program. 3. RN-BS program after completion of community college ADN programs (KCC, Maui, Kauai)
<b>NAWSON GEPN program</b>	NURS 508 (2 credits) Nursing care of Childbearing Families- GEPN lecture nursing course. Weekly lectures- (normal and at risk childbearing, women's health, STIs,	NURS 508 Lab (4 credits- 90 hrs) on unit clinical experiences at KMCWC, TAMC, QMC in Labor and Delivery, Postpartum- working with nursing faculty and staff RNs. simulation/ dry lab at UH Mānoa	GEPN-Upon completion of Graduate Entry to Nursing Practice students progress to DNP and APHN (advanced population health nursing) pathways

School/ College/Unit	Classroom curriculum (i.e., PBL cases, courses, panels/workshops)	Experiential experiences (i.e., required rotations, electives - please indicate if this is UME or GME)	Interface with pathway programs or other community orgs (i.e., high school, health academies, AHEC, SHEP, community college)
	family planning, infertility, genetics) case studies, women's health issues presentations.	NAWSON, PSA project relating to reproductive health issues	
<b>NAWSON DNP</b>	NURS 635 Women's Health: Promotion and Maintenance (3 credit hours)	Course provides foundation of concepts necessary to maintain and promote women's health, including developmental, physiological and social needs of women of all ages and the management of common health problems and concerns specific to women.  Professional Patient Experience - breast & pelvic exams with pap smear  N678L - 135 clinical training hours in Women's Health setting	Adult & Gerontology Primary Care NP  Family NP
<b>UH Hilo BSN for Hilo and Waianae Cohorts</b>	NURS 409 (3 credits) Perinatal and Pediatric Health Practice. This course emphasizes the nursing process in providing healthcare to perinatal women and children, in the context of the family. Explores	NURS 409L (4.5 credits) Perinatal and Pediatric Health Practice Practicum. Students gain supervised clinical experiences in Labor and Delivery, Nursery, and Postpartum at local hospitals, simulation in the UH Hilo Nursing Lab,	High School Direct Entry Program through recruitment efforts in the community.  RN-BSN program upon completion of ASN program at UH Community Colleges.



<b>School/ College/Unit</b>	<b>Classroom curriculum</b> (i.e., PBL cases, courses, panels/workshops)	<b>Experiential experiences</b> (i.e., required rotations, electives - please indicate if this is UME or GME)	<b>Interface with pathway programs or other community orgs</b> (i.e., high school, health academies, AHEC, SHEP, community college)
	preventative healthcare, anticipatory guidance, and health promotion in a developmental context.	inpatient pediatrics and community settings. In addition to healthcare practice for perinatal women, infants, children, adolescents, and their families.	
<b>UH Hilo DNP</b>	NURS 609 Primary Care of Women (2 credits). This course emphasizes the provision of comprehensive primary care to women including the maturation process from menarche, through pregnancy, childbearing period and menopause. Emphasis is on evidence-based health assessment, diagnosis, health education, health promotion, disease prevention, perinatal care, clinical management, and evaluation of common gynecological and obstetric healthcare needs of women.	NURS 609L Primary Care of Women Lab (2 credits). Supervised advanced-practice practicum focuses on health promotion and clinical management of the health concerns of female clients, including health and wellness, perinatal care, gynecologic care, and occupational health concerns of women. Experiences include breast and pelvic exams (with pap smears), and birth control options, including certification in IUD insertion.	BSN and MSN pathways. Primary Care Clinics.