

EXHIBIT B

EQUITABLE RELIEF MEASURES

The parties agree equitable relief is a material component of the Settlement. The Parties further acknowledge that it is their mutual intent that the UCLA Health and the Arthur Ashe Student Health & Wellness Center (hereafter collectively “UCLA medical facilities”) medical personnel act consistently with standards recognized by applicable health oversight agencies such as the Medical Board of California and specialty societies such as the American College of Obstetricians and Gynecologists. In light of the Litigation (as defined in Paragraph 2.2 of the Agreement), and to the extent not already completed, UCLA medical facilities will implement the new procedures identified below with respect to the identification, prevention, and investigation and reporting of sexual harassment, including sexual assault, at UCLA medical facilities. Moreover, UCLA Title IX will complete ongoing investigations pursuant to applicable university policies and procedures.

Appointment of Compliance Monitor. The Senior Vice President for Ethics, Compliance and Audit Services in the University of California Office of the President, is designated to serve as “Compliance Monitor” to facilitate, oversee, and independently evaluate implementation of the measures described herein. The Compliance Monitor will assist UCLA medical facilities in establishing concrete steps and a timetable for the completion of these measures, and UCLA will describe the progress in annual reports sent to the Chancellor and UC Regents. UCLA will continue to evaluate and report on the effectiveness of the equitable relief for a period not less than three years.

New Sexual Violence/Sexual Harassment Clinical Setting Investigation Model. UCLA medical facilities will implement a new model for investigating alleged sexual harassment, including alleged sexual assault arising in the patient care context. This model will apply when there is an allegation that prohibited conduct as defined in UC’s Policy on Sexual Violence and Sexual Harassment (“SVSH Policy”) has occurred in the patient care setting. Key elements of the new model include:

- a. The Title IX Officer or designee will work with an interdisciplinary team to develop an Incident Response Plan (“IRP”) and will lead an Incident Response Team (“IRT”) to specify and carry out appropriate actions, reports, and escalations in response to allegations of prohibited conduct in the context of patient care. The IRT will receive relevant trainings on patient privacy; the SVSH Policy; the student, faculty or staff Adjudication Frameworks;¹ the UC Guidelines on Prohibited Conduct Definitions in

¹ The Adjudication Frameworks consist of the UC Policies Applying to Campus Activities, Organizations and Students (PACAOS) Appendix F: Sexual Violence and Sexual Harassment Student Investigation and Adjudication Framework for DOE-Covered Conduct (found at <https://policy.ucop.edu/doc/2710641/PACAOS-Appendix-E>), the UC Systemwide Investigation and Adjudication Framework for Senate and Non-Senate Faculty (found at <https://sexualviolence.universityofcalifornia.edu/files/documents/faculty-svsh-investigation-and-adjudication-framework.pdf>) and the UC Systemwide Investigation and Adjudication Framework for Staff and Non-Faculty Academic Personnel (<https://sexualviolence.universityofcalifornia.edu/files/documents/staff-nfap-svsh-investigation-and-adjudication-framework.pdf>).

the Context of Patient Care issued December 2019; the clinical location's incident reporting policies; medical staff and group bylaws, rules and regulations; cultural competency approaches to patient care.

- i. The IRP may include informing the relevant UCLA entities in accordance with applicable University policy (and law enforcement and the California Medical Board, if appropriate).
- b. In addition to the reporting options within UCLA medical facilities, UCLA medical facilities will notify patients of their right to report to external agencies, including but not limited to, the U.S. Department of Health and Human Services, the California Department of Consumer Affairs, and law enforcement. Notifications will be made available in languages other than English as required by University policy and applicable laws.
- c. The new model specifies that the Title IX Office has authority to recommend and oversee interim measures implemented under the SVSH Policy. The clinical locations, after consultation with the IRT, may implement additional (but not less restrictive) measures to protect patient or caregiver safety and well-being, or the integrity of the location's educational, research, and clinical programs, consistent with applicable law and accreditation standards and clinical location policy.
- d. UCLA medical facilities will comply with legally mandated reporting requirements.
- e. UCLA Health will employ two Title IX investigators, who will be appropriately trained.

Implementation of Formal Chaperone Policies. UCLA medical facilities will implement the UCLA Medical Chaperone Policy and Arthur Ashe Student Health and Wellness Center Chaperone Policy. The policies will require that a trained chaperone be present during any sensitive procedure that involves a physical examination of the breasts (female), genitalia or rectum ("Sensitive Examination"), of a patient age eight or older, unless the patient affirmatively opts out after receiving information regarding the role of the chaperone. Chaperones will report through central health system administration and not the physicians whose exams and procedures they chaperone.

- a. Chaperone Training. All medical chaperones to receive annual training on chaperone duties, and UCLA medical facilities sexual misconduct reporting. UCLA medical facilities will develop materials explaining to patients what to expect during a Sensitive Examination.

Boundaries Training. Beginning no later than July 2021, UCLA medical facilities will require that every physician credentialed or otherwise permitted to practice by UCLA medical facilities, within six months after a credentialing or recredentialing application is approved, complete and pass an in-person or online boundaries training course. Approved courses include, without limitation, those created by the American Medical Association, the Vanderbilt Center for

Professional Health, PACE, Praesidium, and PBI. UCLA medical facilities will require that every physician credentialed or otherwise permitted to perform Sensitive Examinations, within six months after a credentialing or recredentialing application is approved, complete a suitable boundaries training course reflecting best practices.

Provide Notice to Patients of Reporting Options. UCLA medical facilities websites will include links to pages notifying patients of their non-discrimination policies and of how to report sexual misconduct in the clinical setting internally and externally. UCLA medical facilities will display in plain language information about reporting inappropriate conduct by a healthcare provider.

Revision of Credentialing and Recredentialing Applications. During the credentialing or recredentialing process for individuals applying to the medical staffs or medical groups of UCLA medical facilities, or for credentials to independently practice as advance practice nurses or physician assistants, UCLA medical facilities will include questions inquiring as to whether any allegation of sexual misconduct has been substantiated against the applicant through a formal investigation and whether the applicant has been subject to certain adverse actions relating to allegations of sexual misconduct, consistent with applicable state and federal law. UCLA medical facilities will develop guidance that will lay out a process for evaluating and adjudicating affirmative responses that protect the UCLA medical facilities patient community while preserving applicants' due process rights.

Due Diligence Requirements. If UCLA Health wishes to acquire any physician or group practice, they will, when conducting due diligence, ask about policies, educational programs, monitoring and auditing activities relating to sexual misconduct; current or past allegations related to sexual misconduct; and related pending or potential claims, investigations, reports, judgments, and settlements.

Compliance with Settlement Agreement. UCLA medical facilities will undertake and implement the actions required hereunder for a minimum of three years. A copy of the Compliance Monitor's annual report concerning implementation of the measures described herein will be provided to Class Counsel on or before the date the report is delivered to the Chancellor and UC Regents. Class Counsel will have standing to seek relief from the Court if they believe there is material non-compliance on the part of UCLA medical facilities. Class Counsel will not initiate an action to enforce any obligation hereunder unless they have first met and conferred with counsel for UC Regents and UC Regents has had a reasonable opportunity to cure any alleged deficiency.