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**AB-732 County jails: prisons: incarcerated pregnant persons.** (2019-2020)

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**Assembly Bill No. 732**

**CHAPTER 321**

An act to amend Sections 3405, 3406, 3409, 4023.5, 4023.6, and 4028 of, and to add Sections 3408 and 4023.8 to, the Penal Code, relating to incarcerated persons.

[ Approved by Governor September 30, 2020. Filed with Secretary of State September 30, 2020. ]

**LEGISLATIVE COUNSEL'S DIGEST**

AB 732, Bonta. County jails: prisons: incarcerated pregnant persons.

(1) Existing law establishes the state prisons under the jurisdiction of the Department of Corrections and Rehabilitation. Under existing law, a female prisoner has the right to summon and receive the services of any physician and surgeon to determine whether they are pregnant. If the prisoner is found to be pregnant, existing law entitles the prisoner to services from the physician and surgeon of the prisoner's choice. Existing law prohibits an inmate known to be pregnant or in recovery after delivery from being restrained by the use of leg irons, waist chains, or handcuffs behind the body and prohibits restraints by the wrist, ankles, or both, unless deemed necessary for safety purposes, during labor, delivery, and recovery. Existing law requires an incarcerated person in state prison who menstruates to have access to materials necessary for personal hygiene with regard to their menstrual cycle and reproductive system.

Existing law places county jails under the jurisdiction of the sheriff for the confinement of persons sentenced to imprisonment for the conviction of a crime. Existing law gives an inmate who is pregnant in a local detention facility the right to summon and receive the services of a physician or surgeon to determine if the inmate is pregnant and to receive medical services. Existing law requires the Board of State and Community Corrections to establish minimum standards for local correctional facilities to require that inmates who are received by the facility while they are pregnant are provided a balanced, nutritious diet approved by a doctor, prenatal and postpartum information and healthcare, information pertaining to childbirth education and infant care, and a dental cleaning. Existing law requires that these standards also prohibit the restraining of an inmate known to be pregnant or in recovery after delivery, except as specified.

This bill would require an incarcerated person in a county jail or the state prison who is identified as possibly pregnant or capable of becoming pregnant during an intake health examination or at any time during incarceration to be offered a test upon intake or request, and in the case of a county jail, within 72 hours of arrival at the jail. The bill would require an incarcerated person who is confirmed to be pregnant to be scheduled for pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant within 7 days. The bill would require incarcerated pregnant persons to be scheduled for prenatal care visits, as specified. The bill would require incarcerated pregnant persons to be provided specified prenatal services and a referral to a social worker. The bill would require incarcerated pregnant persons to be given access to community-based programs serving pregnant, birthing, or lactating inmates. The bill would allow an incarcerated pregnant person to elect to have a support person present during childbirth. The bill would require an incarcerated pregnant person to be provided with a postpartum examination one week, and as needed up to 12 weeks postpartum. The bill would prohibit the use of tasers, pepper spray, or other chemical

weapons against incarcerated pregnant persons. By imposing new duties on county jails, this bill would impose a state-mandated local program.

(2) Existing law provides an inmate in a prison or local detention facility with the right to summon and receive the services of any physician to determine whether they are pregnant.

This bill would provide an incarcerated person in a local detention facility with the right to summon a physician, nurse practitioner, certified nurse midwife, or physician assistant. The bill would make conforming changes.

(3) Existing law requires that any female person confined in a local detention facility be allowed to continue to use materials necessary for personal hygiene with regard to their menstrual cycle and reproductive system.

This bill would specify that this includes, but is not limited to, sanitary pads and tampons, and would require those items to be provided at no cost to the incarcerated person. By imposing additional duties on local detention facilities, this bill would impose a state-mandated local program.

(4) Existing law requires local detention facilities to furnish every female person confined in the facility with information and education regarding the availability of family planning services and requires that family planning services be offered at least 60 days prior to a scheduled release.

This bill would make these requirements applicable to all incarcerated persons. By imposing additional duties on local detention facilities, this bill would impose a state-mandated local program.

(5) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: yes

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## THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

### **SECTION 1.** Section 3405 of the Penal Code is amended to read:

**3405.** (a) A condition or restriction shall not be imposed upon the obtaining of an abortion by an incarcerated person, pursuant to the Reproductive Privacy Act (Article 2.5 (commencing with Section 123460) of Chapter 2 of Part 2 of Division 106 of the Health and Safety Code), other than those contained in that act. Impermissible restrictions include, but are not limited to, imposing gestational limits inconsistent with state law, unreasonably delaying access to the procedure, or requiring court-ordered transport. Incarcerated persons found to be pregnant and desiring abortions, shall be permitted to determine their eligibility for an abortion pursuant to state and federal law, and if determined to be eligible, shall be permitted to obtain an abortion after giving informed consent.

(b) The rights provided by this section shall be posted in at least one conspicuous place to which all incarcerated persons capable of becoming pregnant have access.

### **SEC. 2.** Section 3406 of the Penal Code is amended to read:

**3406.** (a) Any incarcerated person shall have the right to summon and receive the services of any physician, nurse practitioner, certified nurse midwife, or physician assistant of their choice in order to determine whether they are pregnant. The warden may adopt reasonable rules and regulations with regard to the conduct of examinations to effectuate this determination.

(b) If the incarcerated person is found to be pregnant, they are entitled to a determination of the extent of the medical and surgical services needed and to the receipt of these services from the physician, nurse practitioner, certified nurse midwife, or physician assistant of their choice. Any expenses occasioned by the services of a physician, nurse practitioner, certified nurse midwife, or physician assistant whose services are not provided by the institution shall be borne by the incarcerated person.

(c) (1) A physician providing services pursuant to this section shall possess a current, valid, and unrevoked certificate to engage in the practice of medicine issued pursuant to Chapter 5 (commencing with Section 2000) of Division 2 of the Business and Professions Code.

(2) A nurse practitioner providing services pursuant to this section shall possess a current, valid, and unrevoked certificate issued pursuant to Article 8 (commencing with Section 2834) of Chapter 6 of Division 2 of the Business and Professions Code.

(3) A certified nurse midwife providing services pursuant to this section shall possess a current, valid, and unrevoked certificate issued pursuant to Article 2.5 (commencing with Section 2746) of Chapter 6 of Division 2 of the Business and Professions Code.

(4) A physician assistant providing services pursuant to this section shall possess a current, valid, and unrevoked certificate issued pursuant to Chapter 7.7 (commencing with Section 3500) of Division 2 of the Business and Professions Code.

(d) The rights provided for incarcerated persons by this section shall be posted in at least one conspicuous place to which all incarcerated persons capable of becoming pregnant have access.

**SEC. 3.** Section 3408 is added to the Penal Code, to read:

**3408.** (a) A person incarcerated in the state prison who is identified as possibly pregnant or capable of becoming pregnant during an intake health examination or at any time during incarceration shall be offered a test upon intake or by request. Pregnancy tests shall be voluntary and not mandatory, and may only be administered by medical or nursing personnel. An incarcerated person who declines a pregnancy test shall be asked to sign an "Informed Refusal of Pregnancy Test" form that shall become part of their medical file.

(b) An incarcerated person with a positive pregnancy test result shall be offered comprehensive and unbiased options counseling that includes information about prenatal health care, adoption, and abortion. This counseling shall be furnished by a licensed health care provider or counselor who has been provided with training in reproductive health care and shall be nondirective, unbiased, and noncoercive. Prison staff shall not urge, force, or otherwise influence a pregnant person's decision.

(c) A prison shall not confer authority or discretion to nonmedical prison staff to decide if a pregnant person is eligible for an abortion. If a pregnant person decides to have an abortion, that person shall be offered, but not forced to accept, all due medical care and accommodations until they are no longer pregnant. A pregnant person who decides to have an abortion shall be referred to a licensed professional specified in subdivision (b) of Section 2253 of the Business and Professions Code.

(d) A person incarcerated in prison who is confirmed to be pregnant shall, within seven days of arriving at the prison, be scheduled for a pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant. The examination shall include all of the following:

(1) A determination of the gestational age of the pregnancy and the estimated due date.

(2) A plan of care, including referrals for specialty and other services to evaluate for the presence of chronic medical conditions or infectious diseases, and to use health and social status of the incarcerated person to improve quality of care, isolation practices, level of activities, and bed assignments, and to inform appropriate specialists in relationship to gestational age and social and clinical needs, and to guide use of personal protective equipment and additional counseling for prevention and control of infectious diseases, if needed.

(3) The ordering of prenatal labs and diagnostic studies, as needed based on gestational age or existing or newly diagnosed health conditions.

(e) Incarcerated pregnant persons shall be scheduled for prenatal care visits as follows, unless otherwise indicated by the physician, nurse practitioner, certified nurse midwife, or physician assistant:

(1) Every four weeks in the first trimester up to 24 to 28 weeks.

(2) Every two weeks thereafter up to 36 weeks gestation.

(3) Every one week thereafter until birth.

(f) Incarcerated pregnant persons shall be provided access to both of the following:

(1) Prenatal vitamins, to be taken on a daily basis, in accordance with medical standards of care.

(2) Newborn care that includes access to appropriate assessment, diagnosis, care, and treatment for infectious diseases that may be transmitted from a birthing person to the birthing person's infant, such as HIV or syphilis.

(g) Incarcerated pregnant persons housed in a multitier housing unit shall be assigned lower bunk and lower tier housing.

(h) Incarcerated pregnant persons shall not be tased, pepper sprayed, or exposed to other chemical weapons.

(i) Incarcerated pregnant persons who have used opioids prior to incarceration, either by admission or written documentation by a probation officer, or who are currently receiving methadone treatment, shall be offered medication assisted treatment with

methadone or buprenorphine, pursuant to Section 11222 of the Health and Safety Code, and shall be provided information on the risks of withdrawal.

(j) (1) An eligible incarcerated pregnant person or person who gives birth after incarceration in the prison shall be provided notice of, access to, and written application for, community-based programs serving pregnant, birthing, or lactating incarcerated persons. At a minimum, the notice shall contain guidelines for qualification, the timeframe for application, and the process for appealing a denial of admittance to those programs.

(2) If a community-based program is denied access to the prison, the reason for the denial shall be provided in writing to the incarcerated person within 15 working days of receipt of the request. The written denial shall address the safety or security concerns for the incarcerated person, infant, public, or staff.

(k) Each incarcerated pregnant person shall be referred to a social worker who shall do all of the following:

(1) Discuss with the incarcerated person the options available for feeding, placement, and care of the child after birth, including the benefits of lactation.

(2) Assist the incarcerated pregnant person with access to a phone in order to contact relatives regarding newborn placement.

(3) Oversee the placement of the newborn child.

(l) An incarcerated pregnant person shall be temporarily taken to a hospital outside the prison for the purpose of giving childbirth and shall be transported in the least restrictive way possible and in accordance with Section 3407. An incarcerated pregnant person shall not be shackled to anyone else during transport. An incarcerated pregnant person in labor or presumed to be in labor shall be treated as an emergency and shall be transported to the outside facility, accompanied by prison staff.

(m) An incarcerated pregnant person may elect to have a support person present during labor, childbirth, and during postpartum recovery while hospitalized. The support person may be an approved visitor or the prison's staff designated to assist with prenatal care, labor, childbirth, lactation, and postpartum care. The approval for the support person shall be made by the administrator of the prison or that person's designee. If an incarcerated pregnant person's request for an elected support person is denied, reason for the denial shall be provided in writing to the incarcerated person within 15 working days of receipt of the request. The written denial shall address the safety or security concerns for the incarcerated person, infant, public, or staff. Upon receipt of a written denial, the incarcerated pregnant person may choose the approved institution staff to act as the support person.

(n) All pregnant and postpartum incarcerated persons shall receive appropriate, timely, culturally responsive, and medically accurate and comprehensive care, evaluation, and treatment of existing or newly diagnosed chronic conditions, including mental health disorders and infectious diseases.

(o) An incarcerated pregnant person in labor and delivery shall be given the maximum level of privacy possible during the labor and delivery process. If a guard is present, they shall be stationed outside the room rather than in the room, absent extraordinary circumstances. If a guard must be present in the room, the guard shall stand in a place that grants as much privacy as possible during labor and delivery. A guard shall be removed from the room if a professional who is currently responsible for the medical care of a pregnant incarcerated person during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of the guard is medically necessary.

(p) Upon return to prison, the physician, nurse practitioner, certified nurse midwife, or physician assistant shall provide a postpartum examination within one week from childbirth and as needed for up to 12 weeks postpartum, and shall determine whether the incarcerated person may be cleared for full duty or if medical restrictions are warranted. Postpartum individuals shall be given at least 12 weeks of recovery after any childbirth before they are required to resume normal activity.

(q) The rights provided for incarcerated persons by this section shall be posted in at least one conspicuous place to which all incarcerated persons have access.

**SEC. 4.** Section 3409 of the Penal Code is amended to read:

**3409.** (a) A person incarcerated in state prison who menstruates or experiences uterine or vaginal bleeding shall, upon request, have access to, and be allowed to use, materials necessary for personal hygiene with regard to their menstrual cycle and reproductive system, including, but not limited to, sanitary pads and tampons, at no cost to the incarcerated person. Any person incarcerated in state prison who is capable of becoming pregnant shall, upon request, have access to, and be allowed to obtain, contraceptive counseling and their choice of birth control methods, subject to the provisions of subdivision (b), unless medically contraindicated.

(b) (1) Except as provided in paragraph (2), all birth control methods and emergency contraception approved by the United States Food and Drug Administration (FDA) shall be made available to incarcerated persons who are capable of becoming pregnant,

with the exception of sterilizing procedures prohibited by Section 3440.

(2) The California Correctional Health Care Services shall establish a formulary that consists of all FDA-approved birth control methods and that shall be available to persons specified in subdivision (a). If a birth control method has more than one FDA-approved therapeutic equivalent, only one version of that method shall be required to be made available, unless another version is specifically indicated by a prescribing provider and approved by the chief medical physician at the facility. Persons shall have access to nonprescription birth control methods without the requirement to see a licensed health care provider.

(c) (1) Any contraceptive service that requires a prescription, or any contraceptive counseling, provided to incarcerated persons who are capable of becoming pregnant, shall be furnished by a licensed health care provider who has been provided with training in reproductive health care, including contraceptive care and counseling, and shall be nondirective, unbiased, and noncoercive. These services shall be furnished by the facility or by any other agency that contracts with the facility. Except as provided in paragraph (2), health care providers furnishing contraceptive services shall receive training in the following areas:

(A) The requirements of this section.

(B) Providing nondirective, unbiased, and noncoercive contraceptive counseling and services.

(2) Providers who attend an orientation program for the Family Planning, Access, Care, and Treatment Program are deemed to have met the training requirements described in paragraph (1).

(d) Any incarcerated person who is capable of becoming pregnant shall be furnished by the facility with information and education regarding the availability of family planning services and their right to receive nondirective, unbiased, and noncoercive contraceptive counseling and services. Each facility shall post this information in conspicuous places to which all incarcerated persons who are capable of becoming pregnant have access.

(e) Contraceptive counseling and family planning services shall be offered and made available to all incarcerated persons who are capable of becoming pregnant at least 60 days, but not longer than 180 days, prior to a scheduled release date.

(f) This section does not limit an incarcerated person's access to any method of contraception that is prescribed or recommended for any medically indicated reason.

**SEC. 5.** Section 4023.5 of the Penal Code is amended to read:

**4023.5.** (a) Any person confined in any local detention facility shall, upon request, be allowed to continue to use materials necessary for (1) personal hygiene with regard to their menstrual cycle and reproductive system, including, but not limited to, sanitary pads and tampons, at no cost to the incarcerated person, and (2) birth control measures as prescribed by a physician, nurse practitioner, certified nurse midwife, or physician assistant.

(b) Each and every person confined in any local detention facility shall be furnished by the county with information and education regarding the availability of family planning services.

(c) Family planning services shall be offered to each and every incarcerated person at least 60 days prior to a scheduled release date. Upon request, any incarcerated person shall be furnished by the county with the services of a licensed physician or they shall be furnished by the county or by any other agency which contracts with the county with services necessary to meet their family planning needs at the time of their release.

(d) For the purposes of this section, "local detention facility" means any city, county, or regional facility used for the confinement of any prisoner for more than 24 hours.

**SEC. 6.** Section 4023.6 of the Penal Code is amended to read:

**4023.6.** (a) Any incarcerated person in any local detention facility shall have the right to summon and receive the services of any physician, nurse practitioner, certified nurse midwife, or physician assistant of their choice in order to determine whether they are pregnant. The superintendent of the facility may adopt reasonable rules and regulations with regard to the conduct of examinations to effectuate the determination.

(b) If the incarcerated person is found to be pregnant, they are entitled to a determination of the extent of the medical and surgical services needed and to the receipt of such services from the physician, nurse practitioner, certified nurse midwife, or physician assistant of their choice. Any expenses occasioned by the services of a physician, nurse practitioner, certified nurse midwife, or physician assistant whose services are not provided by the facility shall be borne by the incarcerated person.

(c) For the purposes of this section, "local detention facility" means any city, county, or regional facility used for the confinement of any female prisoner for more than 24 hours.

(d) (1) Any physician providing services pursuant to this section shall possess a current, valid, and unrevoked certificate to engage in the practice of medicine issued pursuant to Chapter 5 (commencing with Section 2000) of Division 2 of the Business and Professions Code.

(2) A nurse practitioner providing services pursuant to this section shall possess a current, valid, and unrevoked certificate issued pursuant to Article 8 (commencing with Section 2834) of Chapter 6 of Division 2 of the Business and Professions Code.

(3) A certified nurse midwife providing services pursuant to this section shall possess a current, valid, and unrevoked certificate issued pursuant to Article 2.5 (commencing with Section 2746) of Chapter 6 of Division 2 of the Business and Professions Code.

(4) A physician assistant providing services pursuant to this section shall possess a current, valid, and unrevoked certificate issued pursuant to Chapter 7.7 (commencing with Section 3500) of Division 2 of the Business and Professions Code.

(e) The rights provided by this section shall be posted in at least one conspicuous place to which all incarcerated persons capable of becoming pregnant have access.

**SEC. 7.** Section 4023.8 is added to the Penal Code, to read:

**4023.8.** (a) A person incarcerated in a county jail who is identified as possibly pregnant or capable of becoming pregnant during an intake health examination or at any time during incarceration shall be offered a pregnancy test upon intake or by request, within seventy-two hours of arrival at the jail. Pregnancy tests shall be voluntary and not mandatory, and may only be administered by medical or nursing personnel. An incarcerated person who declines a pregnancy test shall be asked to sign an "Informed Refusal of Pregnancy Test" form that shall become part of their medical file.

(b) An incarcerated person with a positive pregnancy test result shall be offered comprehensive and unbiased options counseling that includes information about prenatal health care, adoption, and abortion. This counseling shall be furnished by a licensed health care provider or counselor who has been provided with training in reproductive health care and shall be nondirective, unbiased, and noncoercive. Jail staff shall not urge, force, or otherwise influence a pregnant person's decision.

(c) A jail shall not confer authority or discretion to nonmedical jail staff to decide if a pregnant person is eligible for an abortion. If a pregnant person decides to have an abortion, that person shall be offered, but not forced to accept, all due medical care and accommodations until they are no longer pregnant. A pregnant person who decides to have an abortion shall be referred to a licensed professional specified in subdivision (b) of Section 2253 of Business and Professions Code.

(d) A person incarcerated in a county jail who is confirmed to be pregnant shall, within seven days of arriving at the jail, be scheduled for a pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant. The examination shall include all of the following:

(1) A determination of the gestational age of the pregnancy and the estimated due date.

(2) A plan of care, including referrals for specialty and other services to evaluate for the presence of chronic medical conditions or infectious diseases, and to use health and social status of the incarcerated person to improve quality of care, isolation practices, level of activities, and bed assignments, and to inform appropriate specialists in relationship to gestational age and social and clinical needs, and to guide use of personal protective equipment and additional counseling for prevention and control of infectious diseases, if needed.

(3) The ordering of prenatal labs and diagnostic studies, as needed based on gestational age or existing or newly diagnosed health conditions.

(e) Incarcerated pregnant persons shall be scheduled for prenatal care visits in accordance with medical standards outlined in the most current edition of Guidelines for Perinatal Care developed by the American Academy of Pediatrics (AAP) and the American College of Obstetricians and Gynecologists (ACOG) Committee on Obstetric Practice, unless more frequent visits are indicated by the physician, nurse practitioner, certified nurse midwife, or physician assistant.

(f) Incarcerated pregnant persons shall be provided access to both of the following:

(1) Prenatal vitamins, to be taken on a daily basis, in accordance with medical standards of care.

(2) Newborn care that includes access to appropriate assessment, diagnosis, care, and treatment for infectious diseases that may be transmitted from a birthing person to the birthing person's infant, such as HIV or syphilis.

(g) Incarcerated pregnant persons housed in a multitier housing unit shall be assigned lower bunk and lower tier housing.

(h) Incarcerated pregnant persons shall not be tased, pepper sprayed, or exposed to other chemical weapons.

(i) Incarcerated pregnant persons who have used opioids prior to incarceration, either by admission or written documentation by a probation officer, or who are currently receiving methadone treatment, shall be offered medication assisted treatment with methadone or buprenorphine, pursuant to Section 11222 of the Health and Safety Code, and shall be provided information on the risks of withdrawal.

(j) An eligible incarcerated pregnant person or person who gives birth after incarceration in the jail shall be provided notice of, access to, and written application for, community-based programs serving pregnant, birthing, or lactating incarcerated persons.

(k) Each incarcerated pregnant person shall be referred to a social worker who shall do all of the following:

(1) Discuss with the incarcerated person the options available for feeding, placement, and care of the child after birth, including the benefits of lactation.

(2) Assist the incarcerated pregnant person with access to a phone in order to contact relatives regarding newborn placement.

(3) Oversee the placement of the newborn child.

(l) An incarcerated pregnant person shall be temporarily taken to a hospital outside the jail for the purpose of giving childbirth and shall be transported in the least restrictive way possible and in accordance with Section 3407. An incarcerated pregnant person shall not be shackled to anyone else during transport. An incarcerated pregnant person in labor or presumed to be in labor shall be treated as an emergency and shall be transported to the outside facility, accompanied by jail staff.

(m) An incarcerated pregnant person may elect to have a support person present during labor, childbirth, and during postpartum recovery while hospitalized. The support person may be an approved visitor or the jail's staff designated to assist with prenatal care, labor, childbirth, lactation, and postpartum care.

(n) All pregnant and postpartum incarcerated persons shall receive appropriate, timely, culturally responsive, and medically accurate and comprehensive care, evaluation, and treatment of existing or newly diagnosed chronic conditions, including mental health disorders and infectious diseases.

(o) An incarcerated pregnant person in labor and delivery shall be given the maximum level of privacy possible during the labor and delivery process. If a guard is present, they shall be stationed outside the room rather than in the room absent extraordinary circumstances. If a guard must be present in the room, the guard shall stand in a place that grants as much privacy as possible during labor and delivery. A guard shall be removed from the room if a professional who is currently responsible for the medical care of a pregnant incarcerated person during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of the guard is medically necessary.

(p) Upon return to jail, the physician, nurse practitioner, certified nurse midwife, or physician assistant shall provide a postpartum examination within one week from childbirth and as needed for up to 12 weeks postpartum, and shall determine whether the incarcerated person may be cleared for full duty or if medical restrictions are warranted. Postpartum individuals shall be given at least 12 weeks of recovery after any childbirth before they are required to resume normal activity.

(q) The rights provided for incarcerated persons by this section shall be posted in at least one conspicuous place to which all incarcerated persons have access.

**SEC. 8.** Section 4028 of the Penal Code is amended to read:

**4028.** (a) A condition or restriction upon the obtaining of an abortion by a person detained in any local detention facility, pursuant to the Reproductive Privacy Act (Article 2.5 (commencing with Section 123460) of Chapter 2 of Part 2 of Division 106 of the Health and Safety Code), other than those contained in that act, shall not be imposed. Impermissible restrictions include, but are not limited to, imposing gestational limits inconsistent with state law, unreasonably delaying access to the procedure, or requiring court-ordered transportation. Persons found to be pregnant and desiring abortions shall be permitted to determine their eligibility for an abortion pursuant to state and federal law, and if determined to be eligible, shall be permitted to obtain an abortion, after providing informed consent.

(b) For the purposes of this section, "local detention facility" means any city, county, or regional facility used for the confinement of any female person for more than 24 hours.

(c) The rights provided by this section shall be posted in at least one conspicuous place to which all incarcerated persons capable of becoming pregnant have access.

**SEC. 9.** If the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.