

National Association for Behavioral Healthcare

Access. Care. Recovery.



Executive Committee Call
Sept. 13, 2021
3 p.m. ET

Minutes

Roll Call

Present: Members: Jameson Norton, Board Chair; Frank Ghinassi, Pat Hammer, John Hollinsworth, Eric Kim, Dominic Sirianni, Mark Covall

Staff: Shawn Coughlin, Kirsten Beronio, Maria Merlie, Julia Richardson, Sarah Wattenberg, Emily Wilkins, Jessica Zigmond

Absent: Tom Kenny, Matt Peterson

Shawn began the call at 3 p.m. The purpose of this month's call was to discuss the Biden administration's recent expanded mandate for Covid-19 vaccinations for healthcare workers.

Shawn said that the Biden administration's expanded mandate announcement has generated more questions than answers. The administration released an executive order that applies to all federal employees and contractors that mandates vaccines. There are exemptions to this mandate.

Shawn added that the Biden administration said it expects to release an interim final rule in October, which will allow for a public comment period.

NABH has taken a position that we support Covid vaccinations and voluntary initiatives to promote vaccinations. At the same time, some members have expressed concern that this be a mandate included in CoP, and also that a mandate could exacerbate the segment's existing workforce shortage.

NABH Board Chair Jameson Norton said has implemented a testing requirement for employees without the mandate. He added that it's helpful to make a mandate for all healthcare workers or make it a CoP because it relieves that burden from the employer. He added that Newport has not lost any licensed providers as a result of the requirement. One group where we're closely monitoring recruitment is non-direct caregivers.

Jameson also said his organization is seeing an uptick in vaccination rates. We are seeing a group who have opted out and received an exemption. I think we need to think about scope: for those who are not required to have it might go elsewhere.

Jameson said his organization is a huge advocate of the vaccine, but not a heavy-handed approach.

John Hollinsworth said he is concerned about parts of the country that have a complete opposite view of the vaccine than the view typically held in California and Connecticut, both of which have solid vaccination

rates.

Mark asked Shawn if other associations have offered positions on the mandate. Shawn said AHA called for strongly supporting vaccines, but also said that it wanted exemptions for health and religious reasons.

Frank Ghinassi said workforce issues aside, we're talking about an epidemic that has killed more people than we've seen in many years. Whether you're in CT, CA, LA, those healthcare providers who are choosing not to vaccinate are still providing healthcare, he said, adding that it strikes him as all the more dangerous to be providing care in states where people aren't largely vaccinated. This is a difficult balance between workforce concerns and saving lives.

Shawn reiterated that the AHA strongly encourage the vaccine, but in states that have mandates, that there are exemptions and due process.

Dominic said his system implemented a mandate. Also, his system has seen quite a few workforce stoppages due to Covid, and when the organization has conducted contract tracing, it was largely staff who had it. Then the facility was forced to stop admissions. Dominic said his team made that choice, which was a tough one.

Dominic said the mandate is for anyone who works in the facility and sees patients. We did bona-fide medical and religious exemptions.

Frank Ghinassi said the Rutgers Health System and Barnabas have implemented a vaccine mandate. Most, if not all, have been considered covered, because even people who do clerical work share space with patient-facing staff. Frank said the system has allowed for medical and religious exemptions and it's based on merit of sincerity (not, for instance, a formal letter).

Dominic said his system also had Town Hall meetings and also offered "carrots," such as PTO and gift carrots, along with the "stick."

Shawn said Rutgers still requires masks and has also re-arranged cubicles, etc. for social distancing. And Rutgers requires testing, which it pays for, for staff who have been exempted.

Mark Covall said there could be potential litigation on the interim final rule. But on a practical matter, it could go into effect. As an association, NABH should comment that it's important for there to be exemptions.

Frank added: for NABH to come down on the side against the most logical side of the most logical, medical solution: What message does that send?

Shawn emphasized that NABH's position is not to oppose the mandate. Rather, our focus should be on allowing for exemptions and flexibility for providers.

John Hollinsworth said Acadia is all for the vaccine. He said the concern is about non-licensed providers, such as mental health techs. The concern is where you're shutting down services.

Dominic said we should push for subsidies for continued testing. The vaccine is free. Testing costs a lot and could go on for some time.

Frank testing provides a better protection, and it's better than nothing. He added that in New Jersey, 20,000 prisoners and 9,000 officers have been tested for 18 months. This requires an entire new workforce. No one is paying for this. Maybe it keep this workforce in place: would the federal government pay for that?

Shawn asked about immunity. If a healthcare worker can show proof of antibodies, does that count for an exemption? Frank Ghinassi said he's not sure the science supports this because if someone can show proof of antibodies with, say, the Alpha variant, that doesn't apply to the Delta variant.

Shawn thanked everyone for their time and asked that if EC members have additional thoughts on this issue to please send those to Shawn.

The meeting adjourned at 4 p.m. ET.