

Through the Looking Glass:
The Legacy of Florence Nightingale in the Time of Covid:

VACCINE MANDATES, EXEMPTIONS, TERMINATION, STAFFING SHORTAGES, DIVERSION AND CRIMINAL PROSECUTIONS

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Objectives

- ▶ Consider the nurse in recovery who most reflects the Florence Nightingale Pledge, yet is abandoned by the very healthcare system she seeks to serve.
- ▶ Consider the legal and regulatory systems that create staffing shortages through termination, criminal prosecution, vaccine mandates, rejection of exemptions and failure to accommodate.

"It's a great huge game of chess that's being played—all over the world—if this is the world at all, you know."
Through the Looking Glass
 -Alice

▶ We are certain that our intelligence, backed by willpower, can rightly control our inner lives and guarantee us success in the world we live in. This brave philosophy, wherein each man plays God, sounds good in the speaking, but it still has to meet the acid test: how well does it actually work?

▶ Everywhere he sees people filled with anger and fear, society breaking up into warring fragments. Each fragment says to the others, "We are right and you are wrong." Every such pressure group, if it is strong enough, self-righteously imposes its will upon the rest. And everywhere the same thing is being done on an individual basis. The sum of all this mighty effort is less peace and less brotherhood than before. The philosophy of self-sufficiency is not paying off. Plainly enough, it is a bone-crushing juggernaut whose final achievement is ruin.

Twelve Steps and Twelve Traditions

The Florence Nightingale Pledge provides, in part:

I solemnly pledge myself before God to pass my life in purity, to practice my profession faithfully and will not take or knowingly administer any harmful drug. In this session, we will explore the Florence Nightingale Pledge in the context of the legalisms of our society and healthcare systems today, resulting in staffing shortages, workplace frustration and challenges to nurses and facilities in providing care to the sick and compassion to families who are suffering with their loved ones.

Who was Florence Nightingale?

- ▶ Daughter of a privileged British couple, Frances Smith and William Edward Nightingale.
- ▶ In 1837 when she was 16, she had a major epiphany and sense of calling, inspired by the works of Congregational minister, Jacob Abbot.
- ▶ She spent several months working in the service of disadvantaged people, unsure of what purpose her calling led to, but moved by her religious feelings to act.

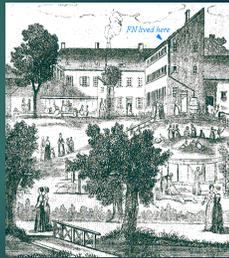


Travels and Education

- ▶ As Florence travelled extensively, it brought her to the path of people who would inspire her to listen to 'God's voice' and help her channel her calling to serve.
- ▶ She met Roman Catholic nun, Laure de Ste. Columbe in Rome.
- ▶ In Athens, she met a missionary named Mary Baldwin.
- ▶ Her travels also brought her the friendship of Mrs. Hill, an American missionary, and the acquaintance of Sidney Herbert.

Kaiserswerth Deaconess Institute Germany 1850-1851

- ▶ Founded by Lutheran minister, Theodor Fliedner in October, 1836.
- ▶ Pastor Fliedner was moved by the works of Protestant Mennonites and Moravians, as well as the ideas of Elizabeth Fry (a British, Quaker philanthropist pivotal to prison reform) toward organizing women in the aiding of needy people in society, such as orphans, the poor and the sick.
- ▶ Young ladies would learn the skills necessary towards the accomplishment of that practical bread of spiritual service.
- ▶ Florence was here as a probationer (a student) from July-October 1851.
- ▶ In 1853 she traveled to France and received further immersion into the life of nursing moved by spirituality.





Crimean War (1853-1856)

CONSIDERED BY MANY HISTORIANS AS 'THE FIRST MODERN WAR.'

Wartime Nurse

- ▶ In October 1854, then Secretary of State, Sidney Herbert, whose acquaintance Florence Nightingale made in her travels, wrote to her seeking help for the soldiers' situation in the Crimea.
- ▶ Nightingale organized Roman Catholic Sisters; Anglican Sisters; and nurses from different homes and hospitals across the country.
- ▶ She spent a year and a half in the warzone, and reportedly returned home only once the conflict came to a resolution in 1856.
- ▶ The Crimean War had helped Florence Nightingale find her calling and her voice.
- ▶ The conditions and experiences of her nursing work in the Crimea were after all, traumatic by most accounts - 20-hour workdays, literally miles of beds about 20-inches apart, filled by a steady stream of sick and injured soldiers.





In 1856 she was a hero and a paragon of the ideal Victorian. She was a symbol of morality, hard work, industry and courage. She had humility and modesty. She was a patriot. She was a well-bred and a feminine caregiver and nurturer, but also had intellect and grit. She had the respect and gratitude of many men for her deeds, and the admiration of women for the example she set and the boundaries she pushed through for them to learn and find respectable, fulfilling work.

Later Struggles

- ▶ After her return from the Crimea, the bulk of her struggles apparently related to her health.
- ▶ In 1861 she became gravely ill and unable to walk. By 1867 she was having difficulties concentrating.
- ▶ One by one she lost her family as she was burdened with helping to manage their care. Her father died in 1874, her mother in 1880, and her sister in 1890.
- ▶ By 1896 she would be bedridden for the rest of her life. In 1902 she lost the ability to read and write and by February, 1910, she was no longer able to speak.
- ▶ She would die a few months later, on August 13, 1910.

Florence Nightingale to Her Nurses

- ▶ We have three judges: our God, our neighbour, and ourselves. Our own judgement of ourselves is the most general and the most variable; our neighbour's judgement that is in your favour, and all we always remember, is God's judgement of us, knowing this, that it will sort itself out, whether we seek it or not? He knows who is His nurse, and He knows who is not.
- ▶ It is not to feel that we do anything for ourselves in our nursing the present and future, but only this, "Thy will be done," as we say in our daily prayer. Is it not true that His will is really the best for each one of us?

And may I say a thing from my own experience? No training is of any use, unless one can learn (1) to feel, and (2) to think out things for oneself. And if we have not true religious feeling and purpose, Hospital life – the highest of all things with these – without them becomes a mere routine and bustle, and a very hardening routine and bustle.

For prayer is communion or co-operation with God: the expression of a life among his poor and sick and ailing ones. But when we speak with God, our power of addressing Him, of holding communion with Him, and listening to His still small voice, depends upon our will being one and the same with His.

Do we ever do things because they are right, without regard of our own credit? When we ask ourselves only "What is right?" or (which is the same question), "What is the will of God?" then we are truly entering His "kingdom." We are no longer groveling among the opinions of men and women.

And the highest "authority" which a woman especially can attain among her fellow women must come from her doing God's work here in the same spirit, and with the same thoroughness, that Christ did, though we follow him but "afar off."



Amid Pandemic, Hospitals Lay Off 1.4M Workers in April

npr May 10, 2020

An estimated 1.4 million healthcare workers lost their jobs in April. It's an ironic twist that as the COVID-19 pandemic spreads across the country, hospitals aren't making much money

Hospitals have experienced financial challenges as a result of the pandemic. They are no longer performing elective procedures.

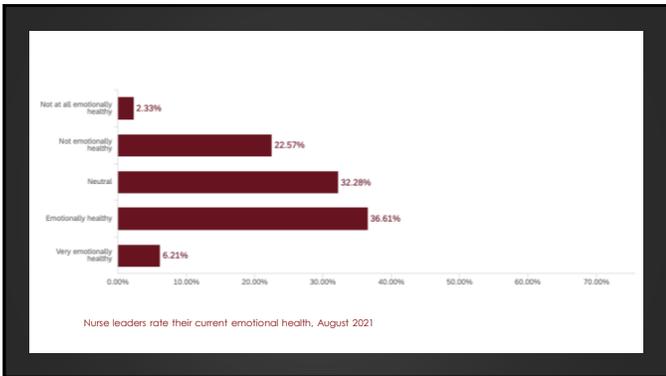
HEALTHCARE LOST HALF A MILLION WORKERS SINCE 2020

October 12, 2021

- ▶ Since mid-February 2020, nearly 1 in 5 healthcare workers, or 18 percent, have quit their jobs, according to poll results from Morning Consult, a global privately held data intelligence company.
- ▶ Additionally, some workers have been fired or resigned over the vaccination mandates.

EMOTIONAL HEALTH & WELL-BEING WORSENS FOR ALL ROLES

The most alarming statistic concerns the emotional health of nurse leaders, which is dropping at a critical rate. As of August 2021, 25% of nurse leaders say they are not emotionally healthy. Managers, specifically, tend towards emotional distress. In February, 24% indicated they were not or not at all emotionally healthy.

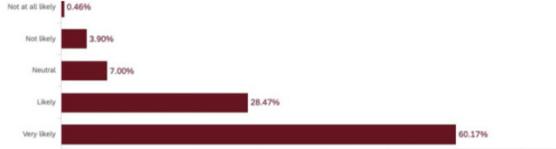


INTENT TO LEAVE NURSING AS A RESULT OF THE PANDEMIC GROWS

- ▶ The February 2021 survey findings provided room for hope as 90% of nurse leaders said they would not leave nursing due to COVID-19.
- ▶ The August 2021 data reveals a negative trend. As of today, 80% of nurse leaders say they intend to stay in nursing, down 10 percentage points over only six months.

90% OF NURSE LEADERS ANTICIPATE A STAFFING SHORTAGE POST PANDEMIC

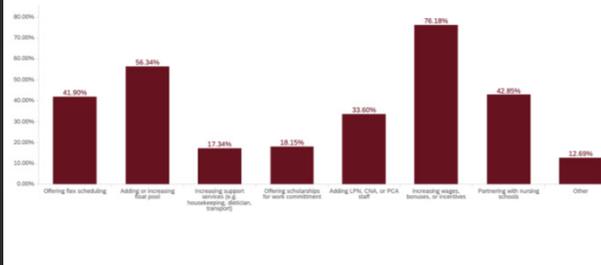
To understand the full extent of the staffing shortage problem and future projections, we asked nurse leaders to indicate how likely their organization is to experience a staffing shortage following the pandemic. The findings were some of the most dramatic in terms of trends since February 2021. Most significant, however, was the increase in respondent who said a staffing shortage is very likely. This number increased by 165%, jumping from 23% to 60% over six months. Overall, 90% of nurse leaders expect a staffing shortage post pandemic.



HOW NURSE LEADERS ARE ADDRESSING THE STAFFING SHORTAGE

76% of respondents selected increased wages, bonuses, or incentives. This was followed by 56% adding or increasing float pools, 43% partnering with nursing schools, and 42% offering flex scheduling. Another, 34% said they have considered or implemented adding licensed practical nurse, certified nursing assistant, or patient care assistant staff.

HOW NURSE LEADERS ARE ADDRESSING THEIR STAFFING SHORTAGE





Nurses

"My mom was an R.N., and she came home one day covered in blood because she saved the life of a man who begged her in the ambulance not to let him die so he could raise his babies. Then she took a shower and fixed dinner."

PAULA BARRAN, partner
Barran Lubman LLP, Portland, Ore.

PITTSBURGH BUSINESS TIMES

Pharmacists

Retail pharmacy counters have been compared to fast-food counters. Orders typically come in so quickly that these pharmacists don't take a lunch break. "...when you're in the weeds, it's hard to make it actually happen... we have a time limit. Reports are printed out at the end of the week and we get reprimanded for not meeting metrics."



Starting Feb 28, Your pharmacy will close daily from 1:30 to 2:00 PM for the pharmacist to take a lunch.

During this half-hour, the pharmacy will stop all activity and pickup, drop-off and drive-thru (where applicable) will be unavailable.

Pharmacists

A recent study of practicing pharmacists found that more than 68% experienced job stress and role overload. Uncertainty about continuing employment, heavy workload, long hours, and short staffing are significant stressors.



Doctors

- ▶ Physicians have the highest suicide rate of any profession.
- ▶ We masquerade as strong and untroubled professionals even in our darkest and most self-doubting moments. How, then, are we supposed to identify colleagues in trouble – or admit that we may need help ourselves?



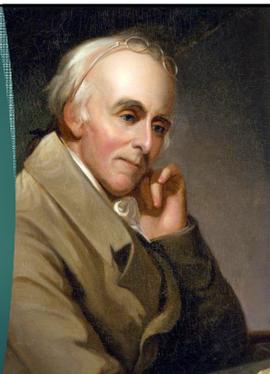
The Perfect Storm

- ▶ Access
- ▶ Narcotic Prescriptions
- ▶ Desensitivity
- ▶ Physical Trauma
- ▶ Emotional Trauma
- ▶ The Workplace



Not only did drunkenness cause a "temporary fit of madness," but habitual drunkenness was itself kind of insanity. Rush described habitual drunkenness as a chronic and relapsing disease. Rush's was the clearest statement up to that point that habitual drunkenness was a disease unto itself.

Benjamin Rush
An Inquiry into the Effects of Ardent Spirits upon the Human Body



▶ "Addiction Is a Brain Disease, and It Matters." Published in 1997 by Alan Leshner, director of the National Institute on Drug Abuse.

▶ Leshner argued that two decades of studies, from meticulous molecular characterizations of neurotransmitters and receptors to the relatively new science of brain imaging, had established that the brains of addicted people were different from those of others. A single common neurobiological pathway was disordered in all cases of drug addiction.

Disease

Merriam-Webster Definitions

1: a condition of the living animal or plant body or of one of its parts that impairs normal functioning and is typically manifested by distinguishing signs and symptoms ; SICKNESS, MALADY;

2: a harmful development (as in a social institution)

Recovery

Merriam-Webster Definitions

1: the act or process of becoming healthy after an illness or injury

2: the act or process of returning to a normal state after a period of difficulty

3: the return of something that has been lost, stolen, etc.

Twelve Steps

1. We admitted we were powerless over alcohol—that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God as we understood Him.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.

Twelve Steps (cont)

7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs.

Groping Toward God

"More than most people, I think, alcoholics want to know who they are, what this life is about, whether they have a divine origin and an appointed destiny, and whether there is a system of cosmic justice and love.

"It is the experience of many of us in the early stages of drinking to feel that we have had glimpses of the Absolute and a heightened feeling of identification with the cosmos. While these glimpses and feelings doubtless have a validity, they are deformed and finally swept away in the chemical, spiritual, and emotional damage wrought by the alcohol itself.

"In A.A., and in many religious approaches, alcoholics find a great deal more of what they merely glimpsed and felt while trying to grope their way toward God in alcohol."

Letter, 1960

Warner v. Orange County Department of Probation
United States Court of Appeals for the Second Circuit

September 9, 1996

The drunk driver was convicted of his third drunk driving offense within a year. The county probation department recommended, in accordance with its established policy in drunk driving cases, that he attend A.A. meetings as a condition of probation. The sentencing judge imposed the condition. The drunk driver complained after a while that the meetings were too "religious" for him. They prayed at every meeting. Spirituality and belief in a higher power were stressed. The drunk driver claimed to be an atheist. The court held that the condition of probation violated the First Amendment's establishment of religion clause. The drunk driver was coerced into religious activity and was not offered a non-religious alternative treatment for his drinking problem.

Case Studies

- ▶ Diverting from Waste
- ▶ Diverting from Inventory and Billing Patient's Insurance
- ▶ Diverting from Patients Directly
- ▶ Failure to Properly Document Waste

Diversion and its Consequences

- I. WORKPLACE
- II. CRIMINAL
- III. LICENSURE
- IV. COLLATERAL

The Workplace
Workplace Intervention

- ▶ Supervisor
- ▶ Human Resources
- ▶ Fit for Duty Test



Termination



Employer Reporting Requirements

- ▶ Licensing Board
- ▶ Law Enforcement



Criminal Charges

- ▶ Charges
- ▶ Disposition
- ▶ Sentence



Charges

1 - CRIMES CODE

- **Theft:** 18 PaCS § 3921
 - ⚖ Misdemeanor < \$2000
 - ⚖ Felony > \$2000
- **Insurance Fraud:** 18 PaCS § 4117
 - ⚖ Felony 3



Charges - continued

2 - CONTROLLED SUBSTANCES ACT

- Acquisition by misrepresentation/fraud:
35 PaCS § 780-113(a)(12)
⚖ Felony
- Possession with Intent to Deliver/Delivery:
35 PaCS § 780-113(a)(30)
⚖ Felony
- Possession:
35 PaCS § 780-113(a)(14)
⚖ Misdemeanor



Charges - continued

2 - CONTROLLED SUBSTANCES ACT

- **Failure to Document** - 35 P.S. § 780-113(a)(21);
"The refusal or failure to make . . . any record . . . required under this act."
- **Fraudulent Documentation** - 35 P.S. § 780-113(a)(28);
"The furnishing of false or fraudulent material information . . . [in a] record required to be kept by this act."

Charges - continued

- ▶ State and Federal law require accurate record keeping for the use and disposal of controlled substances. 35 P.S. § 780-112.
- ▶ In compliance with these laws, each employer will have a set of policies and procedures to follow when administering and disposing of controlled substances.

Charges - continued

3 - PHARMACY ACT

- ▶ • Procurement of controlled substances by fraud:
 ▶ 63 PaCS § 390-8(13)
 ▶ ⚡ Ungraded Misdemeanor



Alternative Dispositions

- ▶ **Accelerated Rehabilitative Disposition (ARD):**
 - No plea, no conviction, expungement
- ▶ **Disposition in Lieu of Trial:**
 - Physician appointed by the court, drug dependent, non-violent
 - Dr. makes non-binding recommendation to prosecutor
 - Charges held in abeyance and dismissed
- ▶ **Probation Without Verdict (PWV):**
 - Drug dependent, non-violent, discretion of judge
 - Nolo or Guilty Plea Required, but charges dismissed
 - Shall not be a conviction for any purpose, *OIG definitions*

Traditional Dispositions

Guilty Plea, Nolo Contendere, Conviction by Trial

- ▶ Sentencing Guidelines
 - Considers Prior Record Score and Gravity of Offense
 - 1st offense misdemeanor generally probation
 - Felony generally depends upon facts and additional charges
 - Second Offense is incarceration
- ▶ Cooperation vs. non-cooperation
- ▶ PNAP, commitment to recovery considerations
- ▶ Insurance fraud, patient care compromised
- ▶ Trial penalty enhancements

LICENSURE

- ▶ Types of Board Discipline
- ▶ Mandatory Automatic Suspensions
- ▶ Discretionary Discipline
 - VRP and DMU

Types of Board Discipline

- ▶ Revocation (no longer licensed)
- ▶ Suspension (cannot practice)
- ▶ Probation (possible restrictions on practice)
- ▶ Remedial education
- ▶ Public reprimand
- ▶ Civil Penalties of up to \$1,000 for each violation (Note: If conduct occurred after September 15, 2009 the fine could be up to \$10,000).

Controlled Substance, Drug Device and Cosmetic Act

Mandatory Automatic Suspension of License

The appropriate licensing boards in the Department of State shall automatically suspend, for a period not to exceed one year, the registration or license of any practitioner when the person has pleaded guilty or nolo contendere or has been convicted of a misdemeanor under this act.

▶ 35 P.S. § 780-124

Professional Health Monitoring Programs

Voluntary Recovery Program (VRP)

- Alternative to discipline
- Confidential Agreement (no public disclosure)
- Violations might result in formal Disciplinary Action

Disciplinary Monitoring Unit (DMU)

- Permanent discipline on record
- Board Mandated
- All violations reported to Legal

Collateral Consequences

- ▶ Data Bank Reports
- ▶ Exclusion Lists
- ▶ Felony Convictions



Data Banks

- ▶ National Practitioner Data Bank
- ▶ Health Care Integrity and Protection Data Bank



Federal Exclusion (DHHS/OIG) State Preclusion (Medicheck) Lists

- ▶ Barred from employment with health care providers that bill government for products and services - fraud prevention
- ▶ Notice of Exclusion, 30 days to respond
 - ◌ *mandatory minimum exclusions* - 5 years
 - ◌ *permissive minimum exclusions* - 3 years



Relative Permissive OIG Exclusions

Exclusion	42 USC §
Misdemeanor conviction relating to health care fraud. Minimum period: 3 years	1320a-7(b)(1)(a)
Misdemeanor conviction relating to controlled substance. Minimum period: 3 years	1320a-7(b)(3)
License revocation or suspension. Minimum period: No less than the period imposed by the state licensing authority.	1320a-7(b)(4)

Older Adults Protective Services Act

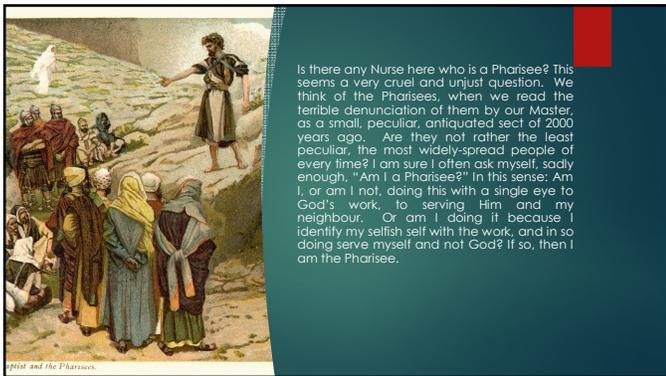
Criminal History for Employees

In no case shall a facility hire an applicant or retain an employee required to submit information pursuant to section 502(a) if the applicant's or employee's criminal history record information indicates the applicant or employee has been convicted of an offense designated as a felony under the act of April 14, 1972 (P.L.233, No.64), known as "The Controlled Substance, Drug, Device, and Cosmetic Act."

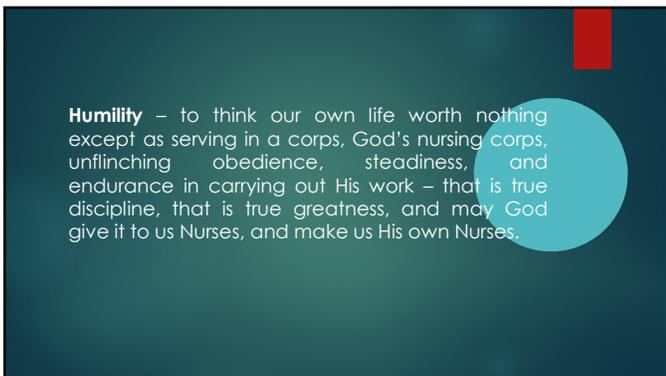
COVID-19



Now, there is a danger in the air of becoming Parasites in Nursing (and also Midwifery) – of our becoming Nurses (and Midwives) by deputy, a danger now when there is so great an inclination to make school and college education, all sorts of Sciences and Arts, even Nursing and Midwifery, a book and examination business, a profession in the low, not in the high sense of the word. It is not the certificate which makes the Nurse or the Midwife. It may un-make her. The danger is to let the certificate be instead of herself, instead of her, with never ceasing going up higher as a woman and a Nurse.



Is there any Nurse here who is a Pharisee? This seems a very cruel and unjust question. We think of the Pharisees, when we read the terrible denunciation of them by our Master, as a small, peculiar, antiquated sect of 2000 years ago. Are they not rather the least peculiar, the most widely-spread people of every time? I am sure I often ask myself, sadly enough, "Am I a Pharisee?" In this sense, Am I, or am I not, doing this with a single eye to God's work, to serving Him and my neighbour. Or am I doing it because I identify my selfish self with the work, and in so doing serve myself and not God? If so, then I am the Pharisee.



Humility – to think our own life worth nothing except as serving in a corps, God's nursing corps, unflinching obedience, steadiness, and endurance in carrying out His work – that is true discipline, that is true greatness, and may God give it to us Nurses, and make us His own Nurses.

SUPREME COURT OF THE UNITED STATES
 Nos. 21A244 and 21A247
 NATIONAL FEDERATION OF INDEPENDENT BUSINESS, ET AL., APPLICANTS
 v.
 21A244 DEPARTMENT OF LABOR, OCCUPATIONAL SAFETY AND HEALTH
 ADMINISTRATION, ET AL.
 OHIO, ET AL., APPLICANTS
 v.
 21A247 DEPARTMENT OF LABOR, OCCUPATIONAL SAFETY AND HEALTH
 ADMINISTRATION, ET AL.
 ON APPLICATIONS FOR STAYS
 [January 13, 2022]

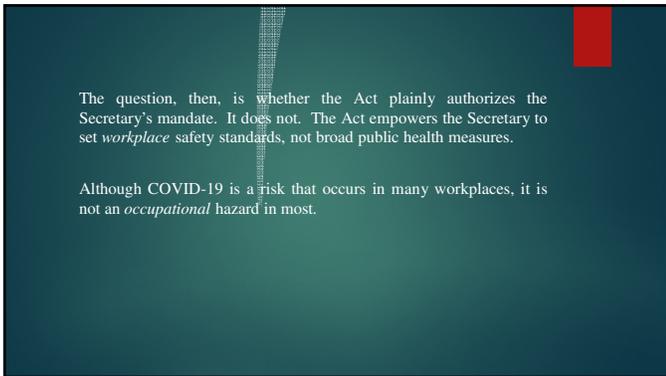
On September 9, 2021, President Biden announced “a new plan to require more Americans to be vaccinated.” Remarks on the COVID-19 Response and National Vaccination Efforts, 2021 Daily Comp. of Pres. Doc. 775, p. 2. As part of that plan, the President said that the Department of Labor would issue an emergency rule requiring all employers with at least 100 employees “to ensure their workforces are fully vaccinated.” *Ibid.* The purpose of the rule was to increase vaccination rates at “businesses all across America.” *Ibid.* The administration’s goal was to impose “vaccine requirements” on “about 100 million Americans, two-thirds of all workers.” *Id.*, at 3.

After a 2-month delay, the Secretary of Labor issued the promised emergency standard. 86 Fed. Reg. 61402 (2021). Consistent with President Biden’s announcement, the rule applies to all who work for employers with 100 or more employees.

Unvaccinated employees who do not comply with OSHA’s rule must be “removed from the workplace.” *Id.*

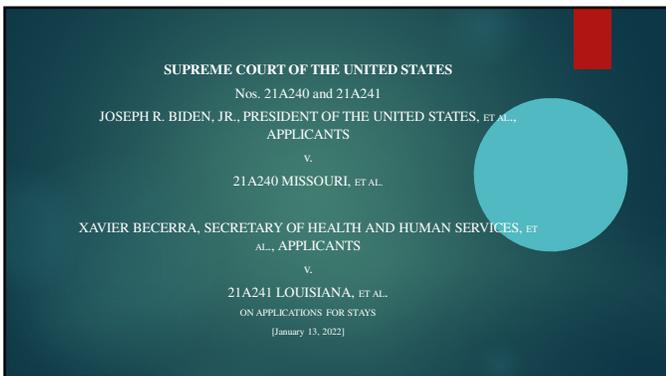


Many States, businesses, and nonprofit organizations challenged OSHA's rule in Courts of Appeals across the country. The Fifth Circuit initially entered a stay. But when the cases were consolidated before the Sixth Circuit, that court lifted the stay and allowed OSHA's rule to take effect. Applicants now seek emergency relief from this Court, arguing that OSHA's mandate exceeds its statutory authority and is otherwise unlawful. Agreeing that applicants are likely to prevail, we grant their applications and stay the rule.



The question, then, is whether the Act plainly authorizes the Secretary's mandate. It does not. The Act empowers the Secretary to set *workplace* safety standards, not broad public health measures.

Although COVID-19 is a risk that occurs in many workplaces, it is not an *occupational* hazard in most.



SUPREME COURT OF THE UNITED STATES

Nos. 21A240 and 21A241

JOSEPH R. BIDEN, JR., PRESIDENT OF THE UNITED STATES, ET AL.,
APPLICANTS

v.

21A240 MISSOURI, ET AL.

XAVIER BECERRA, SECRETARY OF HEALTH AND HUMAN SERVICES, ET
AL., APPLICANTS

v.

21A241 LOUISIANA, ET AL.

ON APPLICATIONS FOR STAYS

[January 13, 2022]

The Secretary of Health and Human Services administers the Medicare and Medicaid programs, which provide health insurance for millions of elderly, disabled, and low-income Americans. In November 2021, the Secretary announced that, in order to receive Medicare or Medicaid funding, participating facilities must ensure that their staff—unless exempt for medical or religious reasons—are vaccinated against COVID-19. 86 Fed. Reg. 61555 (2021). Two District Courts enjoined enforcement of the rule, and the Government now asks us to stay those injunctions. Agreeing that it is entitled to such relief, we grant the applications.

The Secretary issued the rule after finding that vaccination of healthcare workers against COVID-19 was “necessary for the health and safety of individuals to whom care and services are furnished.” *Id.*, at 61561. In many facilities, 35% or more of staff remain unvaccinated, *id.*, at 61559, and those staff, the Secretary explained, pose a serious threat to the health and safety of patients.



First, we agree with the Government that the Secretary’s rule falls within the authorities that Congress has conferred upon him.

Congress has authorized the Secretary to impose conditions on the receipt of Medicaid and Medicare funds that “the Secretary finds necessary in the interest of the health and safety of individuals who are furnished services.” U. S. C. §1395x(e)(9).*



WebMD

What are the rules on Vaccine Exemptions?

Every state has laws that require children to get certain vaccines before they can go to school or day care. Yet parents can opt out of one or more vaccines for medical, religious, or personal reasons. Vaccine exemption laws vary from state to state. Some states make it easier to avoid vaccines than others.

<https://www.webmd.com/children/vaccines/what-are-the-rules-on-vaccine-exemptions>

What are medical exemptions?

Parents can ask for a medical exemption if a vaccine wouldn't be safe for their child. Reasons that children can get an exemption include:

- They have a disease or take medicine that weakens their immune system.
- They have a severe allergy to a vaccine or an ingredient in it.
- They had a serious reaction to a vaccine in the past.

To get a medical exemption, parents need to have their child's doctor sign a form. Many states ask whether the exemption is temporary or permanent. And almost half of states require doctors to sign a new form every year or so.

What are Religious Exemptions?

This allows parents to opt their child out of vaccines based on their religious beliefs.



Croat Med J. 2016 Oct; 57(5): 516-521.
doi: 10.3325/cmj.2016.57.516

Religious exception for vaccination or religious excuses for avoiding vaccination

Gordana Plcic,^{1,2} Silvana Karacic,³ Galina L. Mikirichan,⁴ Olga J. Kubar,⁵ Frank J. Levitt,⁶ Michael Cheng-tek Tai,⁷ Naoki Morishita,⁸ Suzana Vuletic,⁹ and Luka Tomasevic¹⁰

The view of Catholicism

The most morally questionable issue regarding vaccination in Catholicism is using cell lines derived from a voluntary aborted fetus. The Moral Reflection On Vaccines published by the Pontifical Academy for Life suggests that these vaccines should be avoided and proposes a search for alternatives.

Protestant View

Protestantism accentuates individual freedom and gives parents the right to decide whether to vaccinate their children or not. According to Ruijs, Orthodox Protestant parent who refuse vaccination on religious grounds claim that vaccination is an act of interfering with divine providence.

Jewish view

The distinguished religious Jewish organization, the Orthodox Union "strongly urges all parents to vaccinate their healthy children on the timetable recommended by their pediatricians"

Islamic view

According to Islamic tradition, vaccination serves to protect life, to respect the principle of preventing harm (*izalat al-dharrar*), and public interest (*maslahat al ummah*).

Buddhist view

Buddhism claims that life is one, which means that all forms of life are essentially related to another and share a common essence.

In order to reach this Nirvana, every Buddhist must carefully observe the 8-fold Path and the Ten Precepts that help prevent any accumulation of karma. These precepts include: not taking life, not stealing being chaste, not lying, not drinking intoxicants. But according to the essential teaching of Buddhism, if the vaccine is derived from any life form its use is debatable.

Fetal Cells

In early development of mRNA vaccine technology the Pfizer and Moderna COVID vaccines used aborted fetal cells for "proof of concept" or to characterize the SARS-CoV-2 spike protein. The non-replicating viral vector vaccine produced by Johnson & Johnson required the use of aborted fetal cell cultures to produce and manufacture the vaccine.

What are Personal or Philosophical Objections?

This exemption is based on parents' personal beliefs about vaccines. Some parents are concerned about vaccine safety.

American Medical Association

CODE OF MEDICAL ETHICS OPINION 2.1.1

Informed consent to medical treatment is fundamental in both ethics and law. Patients have the right to receive information and ask questions about recommended treatments so that they can make well-considered decisions about care. Successful communication in the patient-physician relationship fosters trust and support shared decision making.

The process of informed consent occurs when communication between a patient and physician results in the patient's authorization or agreement to undergo a specific medical intervention. In seeking a patient's informed consent (or the consent of the patient's surrogate if the patient lacks decision making capacity or declines to participate in making decisions), physicians should:

- (a) Assess the patient's ability to understand relevant medical information and the implications of treatment alternatives and to make an independent, voluntary decision.
- (b) Present relevant information accurately and sensitively, in keeping with the patient's preferences for receiving medical information. The physician should include information about:
 1. The diagnosis (when known)
 2. The nature and purpose of recommended interventions
 3. The burdens, risks, and expected benefits of all options, including forgoing treatment
- (c) Document the informed consent conversation and the patient's (or surrogate's) decision in the medical record in some manner. When the patient/surrogate has provided specific written consent, the consent form should be included in the record.

<https://www.asa-usa.org/sites/default/files/media-browser/code-of-medical-ethics-chapter-2.pdf>



Search Results

From the 9/3/2021 release of VAERS data:

Found 675,593 cases where Vaccine is COVID19

Event Outcome	Count	Percent
Death	14,566	2.16%
Permanent Disability	18,439	2.73%
Office Visit	186,183	15.72%
Emergency Room	57	0.01%
Emergency Doctor/Room	17,863	11.53%
Hospitalized	58,268	8.62%
Hospitalized, Prolonged	172	0.03%
Recovered	218,994	32.42%
Birth Defect	413	0.06%
Life Threatening	14,583	2.16%
Not Serious	289,514	42.85%
TOTAL	1,799,002	1,118.27%

† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 675,593 (the number of cases found), and the Total Percentage is greater than 100.

From the 5/6/2022 release of VAERS data:

Found 1,261,149 cases where Vaccine is COVID19

Government Disclaimer on use of this data

Event Outcome	Count	Percent
Death	27,360	2.22%
Permanent Disability	51,906	4.12%
Office Visit	191,870	15.21%
Emergency Room	190	0.01%
Emergency Doctor/Room	128,777	10.21%
Hospitalized	155,258	12.31%
Hospitalized, Prolonged	375	0.03%
Recovered	339,055	26.85%
Birth Defect	1,071	0.08%
Life Threatening	31,190	2.47%
Not Serious	269,549	21.37%
TOTAL	1,148,150	1,118.79%

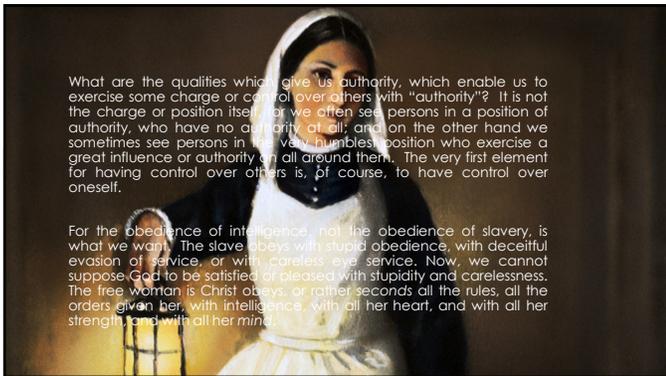
† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 1,261,149 (the number of cases found), and the Total Percentage is greater than 100.

California Assembly Bill (AB 2098) 2021-2022 Regular Session

Physicians and surgeons: unprofessional conduct

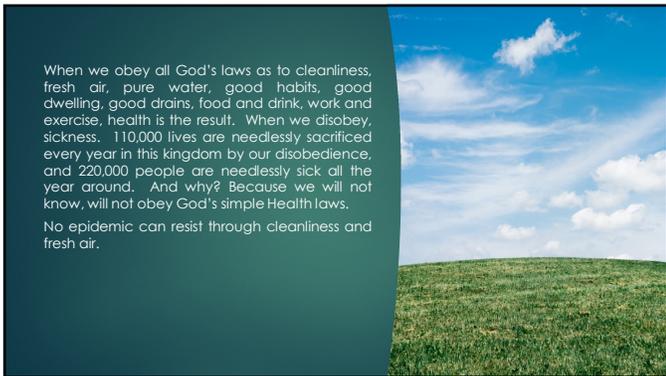
ABSTRACT

This bill would designate the dissemination or promotion of misinformation or disinformation related to the SARS-CoV-2 coronavirus, or "COVID-19," as unprofessional conduct. The bill would require the board to consider specified factors prior to bringing a disciplinary action against a physician and surgeon. The bill would also make findings and declarations in this regard.



What are the qualities which give us authority, which enable us to exercise some charge or control over others with "authority"? It is not the charge or position itself, for we often see persons in a position of authority, who have no authority at all; and on the other hand we sometimes see persons in the very humblest position who exercise a great influence or authority on all around them. The very first element for having control over others is, of course, to have control over oneself.

For the obedience of intelligence, not the obedience of slavery, is what we want. The slave obeys with stupid obedience, with deceitful evasion of service, or with careless eye service. Now, we cannot suppose God to be satisfied or pleased with stupidity and carelessness. The free woman is Christ obeys, or rather seconds all the rules, all the orders given her, with intelligence, with all her heart, and with all her strength, and with all her mind.



When we obey all God's laws as to cleanliness, fresh air, pure water, good habits, good dwelling, good drains, food and drink, work and exercise, health is the result. When we disobey, sickness, 110,000 lives are needlessly sacrificed every year in this kingdom by our disobedience, and 220,000 people are needlessly sick all the year around. And why? Because we will not know, will not obey God's simple Health Laws.

No epidemic can resist through cleanliness and fresh air.
