A Message from Kevin Tabb, MD
President and CEO, Beth Israel Lahey Health

June 24, 2021

More than anything, the COVID-19 pandemic has inspired me to reflect on who we are as an organization – and what Beth Israel Lahey Health stands for. We have faced challenge after challenge for more than a year. Along the way, all of you – our staff – have cared for our patients and our communities with skill and compassion, and you've supported one another. You've discovered and innovated and advanced the science and art of medicine.

As the intensity and burden of the pandemic (thankfully) eases, our responsibility to our patients, to our communities and to each other carries on. And those responsibilities need to drive the decisions that we make as an organization.

As part of that, I'm sharing this video message with you today to let you know that we are moving towards requiring our staff to be vaccinated against COVID. All staff will also be required to get vaccinated against influenza later this year.

I say "moving toward requiring" vaccination against COVID-19, because, as you may know, the current COVID vaccines – which about 85 percent of our staff have already gotten – are authorized under Emergency Use Authorizations, or EUAs, by the federal government. We expect those EUAs to be lifted in the weeks or months ahead and that COVID-19 vaccines will be fully licensed by the FDA later this year.

Because we know that some of our staff would feel more comfortable getting a COVID vaccine after it has been formally licensed by the FDA, we won't require it unless and until the EUA is lifted. After the EUA is lifted, it will be a requirement that all staff be vaccinated against COVID as a condition of employment. Of course, we strongly encourage getting vaccinated between now and then if you haven't already been vaccinated.

Flu vaccines have long been permanently approved by the FDA, and mandatory flu vaccines for all staff have been common practice in many other Massachusetts health care systems for some time now.

I feel strongly that we should expect our staff – whether they are patient-facing or not patient-facing – to be vaccinated against COVID and influenza for three reasons.

First, we have a duty to protect our patients. Health care institutions like ours are unique. Our patients count on us. The care we provide is, for the most part, not optional. A subset of our patients are immunocompromised or have certain underlying medical conditions, things like cancer or lupus or rheumatoid arthritis.

For them, this pandemic is far from over. Even if they have taken all of the steps that they can to protect themselves – getting vaccinated… wearing masks… – they may not be fully protected. They turn to us… they put their trust in us… to help save their lives or improve

their quality of life. And we have a duty and responsibility to do everything in our power to protect them. I think it would be very hard for any of us, either individually or collectively as an organization, to live with ourselves knowing that we have put our patients at risk and exposed them and potentially caused harm or death if we can avoid it. And we can avoid it.

Second, we have a responsibility to each other – to our colleagues, the vast majority of whom – about 85% – have taken steps to protect themselves and their families. Unlike in many other industries, though, the large majority of our staff have to be physically present to do their work. Maybe not in a patient-facing environment, but they need to come to work. Our staff, some of whom also have immunocompromising conditions, have a reasonable expectation that we will do everything we can to protect them when they do. And that includes expecting colleagues working alongside them to also be vaccinated.

Third, we are an organization grounded in the art and science of health care – and in data. And the data show that vaccination is highly effective, and it's safe. We need to take the lead, for ourselves and for those around us, in setting an example to the broader community about why this is important. Our staff bore the brunt of a terrible pandemic. I've often heard from our people that they wish others had taken more responsibility by wearing masks and distancing, so that we were not overwhelmed during surge after surge. We have to lead the way in making clear how important it is to take personal and collective responsibility.

Even as we believe in individuals' rights to make their own decisions, we cannot let those rights outweigh the potential that we may give a life-threatening illness to a patient or to a colleague. In fact, we have required certain things to work here for many years, with processes in place for seeking medical and religious exemptions. We require proof of vaccination against measles, mumps, and rubella, for example. And those are nowhere near as common or as dangerous as COVID-19 or influenza. I also think that it's possible both to understand and believe that people are free to make their own decisions but not have that necessarily be true in a workplace that puts others at risk.

Look, I know taking a stand isn't always easy, but we need to have the courage to lead… because we know it's the right thing to do, and because it's worth it.

I also know that, as an organization, we have more work to do to explain why this is so important. We need to do everything we can to gain the trust of those of you who may still be hesitant. And we will.

We know you will have questions, and we have developed a set of resources to help answer those questions. And in the weeks and months to come, we will share more information about what comes next, particularly around when the FDA licenses at least one of the COVID vaccines.

Until then, please know how much I appreciate everything you do – for our patients, for our communities and for each other.

Thank you.