

**PBPA Podcast Transcript**  
**Episode 19 – Employer Vaccine Mandates: What Your Nonprofit Needs to Know about Testing, Vaccines & the Latest from OSHA (40:48 minutes)**



Sireesha ([00:02](#)):

First the questions were around social distancing, then about masking and now vaccines. What must and should an employer do as it navigates the latest round of return to work concerns? In this episode of the PBPA Podcast, Chris Caiaccio and Katie Barton with the law firm, Kilpatrick Townsend, will walk us through some legal requirements and general tips for navigating workplace safety a year and a half into this pandemic.

Sireesha ([00:38](#)):

Hello and welcome to the PBPA Podcast. In each episode of the PBPA Podcast, we explore legal questions relevant to Georgia nonprofits. I'm your host Sireesha Ghanta, Counsel and Education Director at the Pro Bono Partnership of Atlanta. PBPA strengthens our community by engaging volunteer attorneys to provide nonprofits with free business legal services. We provide numerous free resources via our website, including articles and webcasts specific to Georgia nonprofits and their business legal concerns. We also provide direct legal services to our clients. For more information on client eligibility requirements, to apply to be a client or to access our vast learning center, visit our website at [pbpatl.org](#). Before we jump into this episode's topic, keep in mind that this podcast is general information, not legal counsel, contact your attorney for guidance on your nonprofits' specific situation.

Sireesha ([01:49](#)):

Katie and Chris. Welcome. I appreciate you both taking the time to answer some of the many questions we have around reopening.

Katie ([01:59](#)):

Thank you, Sireesha. This is Katie. I appreciate the opportunity for Chris and I to chat today with y'all and to try to provide some clarity on some of the most common questions that employers are having today.

Chris ([02:12](#)):

And thank you very much for having us. We hope that we're able to provide some useful information for all the listeners. This is an area that's constantly changing, so we will certainly do our best to give you the answers, as of right now,

Sireesha ([02:30](#)):

Let's start there. The questions and legal considerations around reopening are changing day to day. So to start off, can you tell us where are we today? And we're recording this on Monday, September 27th.

Chris ([02:48](#)):

So, so as of today on September 9th, President Biden issued an edict that OSHA develop an emergency temporary standard that will apply to all private employers with a hundred or more employees. He also issued an executive order regarding federal contractors that also includes a vaccine mandate. And then

back in August, a emergency temporary standard was issued with respect to nursing homes and that, since, been expanded. So it's pretty broad.

Katie ([03:30](#)):

Yeah. To follow up. So there's been a lot of activity at the federal level regarding vaccine mandates. And certainly this administration is going to test the limits of its authority over employer vaccine mandates. Of private employers, particularly. How that all plays out, I think remains to be seen at, at a local or a more local level within the state of Georgia. There's not a lot of activity, certainly not leaning toward the direction of this administration, if anything, the direction from the governor. Governor Kemp has been going in the other direction and trying to restrict to some degree what private businesses and employers are able to do. At this time, the only real restriction is in the city of Atlanta. That businesses in the city of Atlanta have an indoor face mask requirement that would have applied to both businesses and also to employers. One Republican state Senator has said that he will introduce legislation banning vaccine mandates or related to requirements around, like vaccine passports. But that legislation, it can't be filed until November 15th for the 2022 session, which starts in January. So there's nothing pending yet. We'll just have to wait and see, if it does get filed, what kind of traction it gets. Currently Montana is the only state that has that type of prohibition on an employer vaccine mandate.

Chris ([05:07](#)):

And I, I think to Katie's point, it's important to mention that this emergency temporary standard's going to be federal and federal is going to Trump state. So that's going to sort of take precedent over the state law.

Sireesha ([05:21](#)):

For now, at least in Georgia, are employers currently permitted to require that employees be vaccinated?

Katie ([05:30](#)):

Absolutely. Employers in Georgia can implement an employer vaccine mandate. And I know Chris and I know I've been involved. I'm sure Chris has been involved also in helping implement those, those out answer questions that the caveat is that employees, particularly of employees, of employers who are covered by title seven and the ADA employees can request exemptions from any vaccine mandate on disability grounds or on a sincerely held religious belief grounds. So employers who are covered by title seven and the ADA will have a duty to accommodate it. We'll have a duty to accommodate medical requests and religious requests. You have to, the employee would first have to demonstrate that they have a disability that's covered by the ADA and /or that they hold a sincerely held religious belief.

Katie ([06:21](#)):

To that point, once the exemption is met from that perspective, that the real focus turns to what is the reasonable accommodation that has to be provided. And that's where there's a lot of discussion around what is a reasonable accommodation. And certainly an employer will still have the ability to say that it is an undue burden under the ADA or title seven to allow an unvaccinated employee to come into the workplace. And so the really the accommodation discussions tend to focus on, on social distancing and masking requirements and work from home or work from home requirements or work from home accommodation, or

Chris (07:02):

It's possible to segregate the unvaccinated employee.

Katie (07:05):

Some employees are saying that they want to be allowed to come in and work in the building because they value that collaboration in person collaboration aspect as well, others are trying to stay home. And I think it's important to note too, that the employee's preferred accommodation is not the one that has to be granted. So an employee may ask to continue to be allowed to come into the office, but to physical distance and they ask and perhaps be physically separated and an employer can still say, we're not going to grant you that accommodation we'll grant you another one in light of your medical exemption or your religious exemption. So the employee cannot insist on a particular accommodation, but is only entitled to a reasonable accommodation that does not cause an undue burden on the employer.

Sireesha (07:56):

That's interesting. Let's speak a little bit more about those religious exemptions. What should an employer do when an employee approaches them and tells them that they will not get the vaccine due to religious beliefs?

Chris (08:12):

So when an employer becomes aware that an employee's reason for not getting the vaccine has to do with their religion, some guidance from the EOC has said that unless you have reason to question, whether there's a sincerely held belief, I mean, you really shouldn't ask a whole lot, but if you do have those questions, you might elicit information from the employee. What's the religion? Is there something specific about the vaccine that is preventing you from getting it? Just ask them for an explanation about that. And assuming they're able to provide that, that's when you need to jump into the interactive process.

Katie (08:56):

And in that interactive process, you are talking with the employee about what accommodation they want. You certainly should ask what kind of accommodation they are seeking and have conversations around the accommodation they want as well as other possible accommodations to their religious exemption. Again, one is that the employee can still come into the workplace, but with a mask and physical distancing they could be limited to a certain part of the building and really be isolated from the rest of the workforce. I think the more common both requests and employer desire is to have an employee continue to work remotely. If they've been, especially if they've been working remotely for the duration of the pandemic [instead of] to continue that and one thing I've been counseling clients on when it comes to this is that for a long time, employees have been working remotely, if their drops were amenable to that. So be mindful of now saying that an employee can't do their job remotely, cause there's going to be 18 months or so of history to either support that decision or to undermine that decision. Depending on that particular employee's track record or work record of working remotely that, although everyone now we're in a place where a lot of employers want to get back into the office and that in and of itself would not be enough to, to, to really justify saying that an employee can't work from home anymore. So that there are some nuances here and every, every discussion, every interactive process is different. And there's no real, we can give you the framework of getting to the interactive process

Chris ([10:57](#)):

Completely a case by case basis. I mean, every case is going to involve different facts. So you're going to need to tailor the interactive process to that.

Katie ([11:06](#)):

And I think you want to employers, especially small employers want to be careful jumping from you get a religious exemption to there's no accommodation that doesn't cause an undue hardship. So first, like generally speaking, we believe that a court will be we'll look at undue hardship in a more employer friendly way, if you will. So some employers might rely on that general principle to kind of quickly move from, okay, you get an exemption to, but there's no accommodation that doesn't create more than a diminished burden on the employer. And the, the risk. And that is one, we, there isn't a lot of case law or a lot of majority period around what is an undue burden under the religious exemption. So that's going to develop and then second, if you kind of jumped straight from, you can get the exemption, but we're still going to separate your employment because there's no accommodation that doesn't create an undue hardship. We, we are concerned that there we'll have, there will have to be test cases to employers separating employment under even with the religious exemption and those types of test cases, which might be funded by particular political leaning groups that have a lot of support. And a lot of backing can be devastating to a small employer in terms of litigation costs and attorney's fees.

Chris ([12:43](#)):

That's a very good point, Katie. Nobody wants to be the test case. So that's exactly why we recommend being conservative. When doing that analysis.

Sireesha ([12:53](#)):

What should an employer do if an employee refuses to comply with a mandatory vaccine policy?

Katie ([12:59](#)):

We've talked a lot about the religious exemption and there's also medical exemptions, the burden on an employer to prove that a particular accommodation is an undue hardship under the ADA for medical exemption is higher. It's I think there's no question that it's higher. It's just the degree to which it's higher from the religious exemption on dupe and showing once you, once an employee has established that they either are entitled to a medical or religious exception. That's again where we have the interactive process. And it's very important that that interactive process is allowed to run its course and that all of the possible combinations are discussed. And, but I feel fairly comfortable in saying that under both undue hardship analysis, an employer will have good, what will be well-founded to say that it is an undue burden to allow the employee to come into the building unvaccinated.

Katie ([13:58](#)):

That is something that an employee may want, but I feel, again, I feel comfortable saying that employers don't have to allow that in addition to having perhaps their own views of things, there's also the OSHA general duty of safety clause where employers have the general duty to provide a safe workplace that is free from direct threats of safety and harm. And certainly there is a strong argument that allowing an unvaccinated employee into the building for hours and hours at a time is compromising the safety of everyone else there. And there's a direct threat to the safety of other employees. So what the next step will be, because perhaps you have a general, have decided we're not going to let anyone in, that's not vaccinated and including customers and visitors and vendors, not just employees, and to slow down

before making that jump to, but you can't do your job remotely. So we're going to separate, that's going to be the right answer. And sometimes the cases, and that's going to be the right answer after a lot of thought and going around.

Sireesha ([15:11](#)):

So we have talked about, so far religious exemptions and medical exemptions and making accommodations for those situations. What if an employee refuses for other reasons?

Katie ([15:26](#)):

Sireesha, you may have been also asking about personal objections to the vaccine. And so if an employee doesn't qualify for a religious or a medical exemption and just purely has a personal objection to the vaccine, such as it's been rushed to development don't trust it. You know, I've been told by my, my sister's friend's doctor not to take it. Those are not protected reasons. So the only protected reason to get an exemption that requires some accommodation is medical and religious and employee who has a purely personal objection, is not entitled to an exemption and is not entitled to an accommodation process at all. So if it's a purely personal exemption and the employer has decided we're not going to entertain purely personal objections, then the natural next step would be separation of employment. Within that be mindful of discretionary decision-making and be sure that that decision is applied to all similarly situated employees,

Chris ([16:32](#)):

Consistency, is the key. You just want to do it consistently across the board. So you're not opening yourself up to some type of discrimination.

Katie ([16:42](#)):

You shouldn't pick and choose which employee's personal objections to entertain. You should be consistent in how you roll out that decision, not to entertain them. And aside from even legal issues, also employee morale issues that if we, if it's perceived that high-performing, high revenue generating salespeople are being allowed to get around the vaccine requirement, but the receptionist is not that's certainly going to affect, if nothing else employee morale within the office, that there's the esteemed hierarchy of importance that on such an important issue be mindful that allowing any vexed employee unboxed employee into the workplace may cause fully vaxxed employees to refuse to come in. Again, feeling they, they may certainly feel like they're not being protected by their employer, by the employer, allowing unvaccinated employees into the office. So there's, there's no easy answers. But once you've set your course, Chris, picked the one word, is consistency and is staying true to what that initial policy is and not letting him be exceptions, overcome the policy just, you know, to a high degree.

Sireesha ([18:03](#)):

And Katie, you just mentioned something that kind of leads me to my next question. What if you have an employee who is not comfortable with the safety precautions being taken at the workplace, what if once an office reopens can an employee be forced to come back to work in person, even if they are uncomfortable with employers safety precautions.

Chris ([18:26](#)):

This goes to something I know that Katie had mentioned when she was answering your last question. I mean, a lot of this result revolves around OSHA standards. So under OSHA an employee can refuse to

work if there is a specific hazard within the workplace that the employer has not corrected and which is likely to cause death or serious bodily injury from that specific hazard. There hasn't been specific guidance on this, but we're advising clients that it employees, aren't going to be able to just say, "we don't feel like you're taking proper safety precautions". As long as an employer can show that look, we're doing everything that we've been guided to do through CDC, OSHA, they're following all the guidance. It wouldn't be enough for them to refuse to work and they could be terminated for that. But at the same time, I mean, if an employer's falling short on doing what's expected of them in terms of the CDC and OSHA guidance, if an employee can point to some specific that they're falling short, they have a much better argument for their refusal to work.

Katie ([19:49](#)):

I think it's important here to hear the employee out and find out what it is that they think is not being handled well, have a dialogue about it. And it may end up being that a particular employee is just generally uncomfortable being in public after being at home for 18 months, and you can kind of work through it and provide some assurances and set up some parameters that they're comfortable with. There may also be employees who there will be no level of practices at the workplace that can, that satisfies them. And they may have a particular medical issue such that being in any open air indoor environment with a lot of people that because of a particular underlying condition leads them to be more vulnerable, to, to serious illness or to death from COVID. And so then we're back into the ADA.

Katie ([20:48](#)):

So we kind of started at OSHA and perhaps we check all the OSHA boxes and there's no OSHA noncompliance issue, but we still have an employee who has a disability who is at higher risk of complications if they get COVID. And we certainly now know that fully vaxxed people can spread COVID. So even the February ones, Bakst, it still happens. You may need to work through the interactive process on the ADA side with that particular employee to determine if they have a disability that is that relevant, that prohibits them from coming into the office and an open environment. And is there an accommodation like working remotely. Outside of these OSHA issues and these ADA issues with individual employees, if there's a return to work requirement, then certainly an employer can insist on it. Again, being mindful of consistency on equals, you know, fair application of that, of that expectation.

Chris ([21:48](#)):

And to build on what Katie was talking about. I think it's important to mention that if an employee has a family member that immunocompromised that they wouldn't be covered under the ADA, meaning an employee, can't say, well, I'm taking care of my mother and she has this health condition that could be exacerbated if, if I caught COVID. So that, that type of situation wouldn't be covered by the ADA would only be the employee's medical condition. And again, we're not saying that if an employee requests an accommodation and in that situation "Don't grant it." I mean, there certainly could be a practical or business reasons that you want to work with the employee, but that they're not legally required to do it.

Sireesha ([22:42](#)):

Wow. Lots of, lots of possibilities here. And when a nonprofit gets to the point where they decided what they're going to do and how they want to move forward, how should they go about distributing this information to their employees? Like if they have a policy or just emails that they send out, what is the best way to distribute this information among the workforce?

Chris ([23:07](#)):

It really goes all back to being consistent. I think that it nonprofits should look how they've distributed policies in the past, whether they're handing employees a physical memo, if they're just sending an email if the, if they're sending an email, our recommendation is to at least get some type of acknowledgement form where the employee says, yes, I've received this policy. I understand it just in case somewhere down the road, you need to go back to that acknowledgement. If an employee tries to claim that they weren't aware the policy or what was required.

Sireesha ([23:47](#)):

How should a nonprofit employer record or document? Keeping track of who's received a vaccine and who hasn't should they just keep a checklist next to the employee's name? They put a check mark yes. Or no vaccinated, or should they actually get a copy of the vaccine card?

Katie ([24:09](#)):

I've seen clients so far do this in all of those ways that you've mentioned. Where they are requiring some kind of affirmation of vaccine status, and then keeping a record of that or requesting employees to send in pictures of their vaccine cards or provide, you know, provide it to be copied. I have certainly seen that. So employers are choosing to do this in all sorts of ways. Some are following the honor system and kind of taking employee's word for it. Like I wouldn't, I, I wouldn't really recommend that I would try to go a step further than that. Or scheduling meetings with employees to just show it, you know, maybe even be assumed to just show, you know, hold it up in front of the camera and show the vaccine card. And then yes, there was a, how do you record it?

Katie ([25:01](#)):

And the, the real meat there is understanding and appreciating that an employee's vaccine status, however, that is communicated to an employer is confidential medical information that needs to be maintained in a separate, secure location, away from the personnel file. That's all confidential medical information that belongs in a medical folder. It does not belong in the main personnel file. And the access to those folders are limited only to those who need to know supervisors, for instance, don't always have access or need to know medical information. So the employer can ask the question, are you vaccinated and can get the information: Yes or no. But once that question is answered, that is confidential medical information that has to be maintained confidentially, just like any other type of medical information. And so that's what we want to be sure that whether it's getting a copy of each employee's card or having a sit down with each employee or maintaining a spreadsheet and checking employees at that spreadsheet, if that's what it is, is locked.

Chris ([26:15](#)):

And I think Katie, for that very reason, we're recommending that each employer have a designated person whose responsibility is for tracking vaccination status, maintaining records, because they'll know the rules regarding disclosure, segregating the medical information. So it certainly makes the whole process much more efficient if you have one employee that's responsible for all of

Sireesha ([26:47](#)):

Great recommendation and as employers move forward with the vaccine mandatory vaccine policy, what about booster shots? How should booster shots be incorporated into a vaccine policy?

Chris ([26:58](#)):

Obviously booster shots could be a little bit down the road. We're recommending that employers treat a booster shots in the same manner that the vaccine mandate is being traded. That's assuming that the definition of fully vaccinated will eventually be revised to include your two shots plus the booster.

Katie ([27:25](#)):

And I think that we thought booster shots for a minute and that we were all gonna be eligible like soon for them. That those of us who were not immuno-compromised or over 65, and once the sewer all running off the CDC definition right now, fully balanced. And so once that definition is updated by the CDC, then it would, you know, then it would kind of be incorporated if you will, into any policy that references the concept of being fully vaccinated, that we'll have to work through how a booster shot plays into that as well.

Sireesha ([28:04](#)):

So far, we have been talking about where we stand today, rules that could apply to any size organization. But let's talk a little bit about the upcoming OSHA rule. And for our audience, hat I'm referencing as the OSHA rule is what Chris and Katie have been referring to as ETS or emergency temporary standard. We know that it will apply to employers of 100 or more employees, federal contractors, and health facilities. It's coming, but it's not yet here, but based on what we know today, could you tell us just really quickly, first, what we know so far about who is a federal contractor, and if you receive a government grant from the federal government, could that make you a federal contractor?

Chris ([28:59](#)):

Okay. So the there's really two parts of your question in terms of a federal contractor that is somebody who has a contract to perform services with the federal government and the guidance that was issued by the task force. This past Friday talked about, you have to actually be working on a federal contract providing services or your necessary to that federal contract that would include somebody such as human resources, janitorial staff, security. So those would be the people that be covered by the new vaccine mandate in terms of your second question about the grant, reviewing the guidance that the task force issued there, there's nothing to suggest that just receiving a federal grant would bring you under the purview of this new mandate.

Katie ([30:01](#)):

So it's going to be broad, but we don't think it's broad enough to capture a grant where a nonprofit is, is receiving a grant of monies from the federal government following a grant application. I think we feel reasonably confident that it's not going to catch your grants.

Chris ([30:19](#)):

Because in that situation, you're not going to have the mutual obligations, so there's not going to be the federal contract.

Sireesha ([30:27](#)):

And let's talk about the requirements for a healthcare facility. What type of employers would be considered to be a healthcare facility?



Chris ([30:34](#)):

So that, that would be hospitals, a home health agency ambulatory providers. And that's in addition to nursing homes, I think I mentioned earlier on that the initial emergency temporary standard applied to nursing home facilities. So really what this is doing is just expanding the reach of the vaccine requirements.

Katie ([31:00](#)):

And I think it's those facilities that are, that receive Medicare or Medicaid reimbursement. So that's the hook, reimbursements.

Chris ([31:08](#)):

Yeah, that's the catch. I mean, they look to see if Medicare or Medicaid is involved and that's where the coverage standard is right now, like Katie mentioned.

Sireesha ([31:19](#)):

And what if it's an all-volunteer facility, would this apply to the volunteers at the healthcare facility?

Chris ([31:26](#)): They didn't directly address that? But my feeling is that, that it would just because they're trying to cut down on staff and patient patients catching COVID. So by applying that requirement to volunteers, I mean, that's going to be furthering that goal because there's a chance that volunteer staff are going to interact with paid staff, as well as patient.

Sireesha ([31:55](#)):

You know, most of the listeners to this episode are smaller community-based nonprofits. Not many of them are going to meet that threshold of more than 100 employees, but for those that are kind of close to that line, what is considered more than 100 employees?

Katie ([32:11](#)):

We don't know just yet how they're going to count employees under the 100 or more employee rule. We expect that that will be clarified by the ETS once it's issued. We, we are speculating that it will turn on whether you have to submit or file an EEO-1 report that there are standards for determining which employers have to file EEO-1 reports that's also based on a hundred or more employees. And so that, that would be a guy that if you have to file that, then you're probably going to be covered.

Chris ([32:48](#)):

I think we can expect that once ETS is issued, they will take the broadest view that they possibly will. And as Katie mentioned, whether you have to file the EEO-1, that is probably a good benchmark until we get more concrete guidance,

Katie ([33:04](#)):

The guidance that came out on Friday about a federal contractor. Well, I think we both agreed it went about as far as it could, in terms of capturing remote workers who never stepped foot into a covered contractor workplace or who don't even who might work in a cover contractor workplace, but don't actually work on the contract. There are cover there's all these different, like what's that have Venn

diagram all these different circles and they're kind of coming together to get you somehow some way and

Chris (33:36):

A lot of overlap.

Katie (33:36):

Yeah.

Sireesha (33:37):

And my last question, I promise. My last question is about testing. If an employer is not subject to the new OSHA rule, once it eventually comes out, or if an employer independently decides to go ahead, that wants to implement a vaccine or test weekly requirement how should that testing be handled? For example, who pays for it? What types of tests should be required and should an employee be compensated for that time?

Chris (34:10):

But I'm at right now for the emergency temporary standard until they issue that we really don't know the answer. We can tell you what we feel like is going to happen. I mean, under general wage and hour laws, employees need to be compensated for the, for the vaccine, if you make it a term and condition of employment. Also, when Biden asked the OSHA to prepare this emergency temporary standard, he mentioned that major Realty retailer will be issuing testing at cost, which suggests that employees may be required to pay for the cost of the test. But I kind of doubt that. But we'll see what happens. I'm sure Katie has something to add.

Katie (34:59):

Well, if it's an employer who's not covered by the ETS and wouldn't have that, it would not have their standards applicable. What we've been in. So that's really the status quo today is how are, who pays for the testing? The vaccines of course are free. So there's no cost sharing question about vaccines. If an employer has adopted a vaccine mandate but it allows employees to test in lieu of the mandate and it's an alternative and we think an employer should pay for it, if it's a condition of employment, I could see some wiggle room in there for giving you an option and you choose the one that costs money. Then the employer, the employee should be picking up the tab. But this again is probably not a spot where we want to draw any attention. And if the employer is allowing the test out option, then I think the safer course is for the employer to pay for it.

Katie (35:59):

I'd be keeping an eye on insurance coverage of tests, though. I'm just dropping this in and I don't know the answer to this, but I've at least been seeing balloons go up about insurance companies are pushing back on, what's the word I'm looking, just routine testing without no exposure. On surveillance testing, that's the word I'm looking for, surveillance once a week. Where people are doing so much of that, that it starting to add up. And so there may be some pushback to surveillance testing. That's not based on exposure symptoms, but just purely based on checking once a week. I will also say that my personal view of this is that weekly testing in lieu of vaccines is not very useful if you were, if the ultimate goal is to protect the workplace and to protect your people in it, that weekly testing in lieu of a mandate is not,

is not all that useful because it's, we know now that COVID takes up to five days, you know, five to seven days to even longer in some cases to show symptoms.

Katie ([37:19](#)):

And so an employee could be in your building for all of that five days symptomatic or asymptomatic or not symptomatic yet, but contagious. And they're not going to get captured by their tests because they tested before and they're testing after. So if that, when that comes up for me, with my clients, I'm advocating for at least two to three times a week, because then you've really got some, you've got a better chance of keeping someone out before they've come in when they're contagious. In turn, I think you asked about in terms of testing also or the type of testing, excuse me, there's the rapid at home test that like, frankly I've used a fair amount. I think, I think that's what all of the rapid at home tests are best used for is a pre-real test. And it's, if you're symptomatic, I don't think they are as accurate as catching asymptomatic cases.

Katie ([38:21](#)):

So that would then push us back toward PCR testing, which is in a clinical environment which is more expensive, but also as much more accurate in terms of catching asymptomatic cases. They also have a higher turnaround time. You know, PCR testing. I got an email today about somewhere offering two hour PCR tests. So that'll catch on eventually I'm sure, but, PCR testing, I think what that's going to be the gold standard. Which there is a delay usually in getting results back. So there's no, that's why also, you know, again, testing is tough to be a solution to a vaccine mandate, for folks who are wanting to opt out it's, it's not one for one. It's a, it's a compromise and you hope that that compromise doesn't have a lot of adverse effects that affect more people. So it's tough, tough decisions.

Sireesha ([39:31](#)):

Yes. There are lots of tough decisions, but you guys shared lots of food for thought with us today. We so appreciate you giving us this insight into the many considerations around vaccinations and returning to work.

Chris ([39:45](#)):

Very glad to do it.

Katie ([39:48](#)):

Thank you.

Sireesha ([39:50](#)):

We hope that you found this episode of the PBPA Podcast to be informative and helpful. We add new episodes every month with short conversations about general, yet important legal information for Georgia nonprofits. Remember that this is not legal counsel. Talk to your attorney about your organization's specific concerns. Thanks for tuning into the PBPA Podcast. And to all nonprofits listening out there, thank you for all the good work you continue to do in our community.