



Office of Governor Christopher T. Sununu
Press Conference
Thursday, September 24, 2020 at 3:00 p.m.

Governor Sununu:

Well, good afternoon, everybody. Appreciate everyone for joining us on our weekly press conference. As we do these press conferences weekly, there's always a little more to talk about. So we're going to talk a little bit about contact tracing and Halloween, and a bunch of other things, restaurants, some new funds and some new financial opportunities we're creating for the State. But, as usual, let's kick things off with a public health update from Dr. Chan.

Dr. Chan:

Great, good afternoon, everybody. Just a quick global update first, we're at approximately 32 million people globally that have been infected with COVID-19. And this includes approximately 7 million people within the United States with more than 200,000 people that have died, due to the COVID-19, or with COVID-19-related complications.

And just to put that number in perspective, every year, for a typical flu season, nationally there are anywhere from 25,000 to 50,000 that are estimated to die from yearly influenza. And we're now at over 200,000 people that have died related to COVID-19 nationally.

For New Hampshire, we are reporting an additional 37 new people who have been infected with confirmed COVID-19 for today, totaling now more than 8,000 individuals. We're at 8,044 total people confirmed.

There are four new hospitalizations to report today, for a total of 732 people that have been hospitalized with confirmed COVID-19 and for their disease. And thankfully still, zero new deaths, we've had zero new deaths to report out for over a week now. But there's still a total of 438 New Hampshire residents who have died related to COVID-19.

So, again, as we stress every week, we continue to see spread of COVID-19 within our communities. We believe there continues to be community-level transmission and spread within New Hampshire. We are average still about 35 to 40 new infections every day. That's been stable the last week, compared to the week prior.

But you will also note that there's been a small increase in the number of new hospitalizations reported the last couple of days. And the daily hospital census has crept up slightly. Before the last couple weeks, we've been at 10-or-fewer total people hospitalized with COVID-19 on any given day. On the last couple of days, that has been closer to 16 to 17 individuals hospitalized on any given day with COVID-19.

Our percent-positivity rate continues to be low, however, at 1%-or-less. And so, we continue to follow these numbers very closely. We continue to monitor the levels of community transmission. We continue to promote testing, especially for anybody that might have symptoms, even mild symptoms, of COVID-19, even mild cold symptoms. These individuals, we recommend, should be tested for COVID-19

so that we can conduct Public Health contact tracing and investigations to make sure that people who are infected are isolated, and make sure that people who are exposed and at-risk for coming down with COVID-19 are quarantined.

We continue to investigate each and every person with COVID-19. But we continue to need everybody to practice social distancing. Wear cloth facemasks when in public locations, and please continue to avoid large gatherings and crowds, which are the exact settings that we know COVID-19 likes to take advantage of and spread from person-to-person. And with that, I will hand things over to the Commissioner. Thank you.

Commissioner Shibinette:

Good afternoon. For today's long-term care outbreak update, we only have Mountain View Community in Ossipee as our remaining outbreak. So we are still at one. No new ones to close, no new ones to open.

Each week, we look at the prevalence rates in our counties to move between phases. We've done this every week now for several weeks. And you will see on the slide behind me that the counties in green are the counties that get to be in, or remain in, Phase 3. All the other counties in yellow either move to Phase 2 or remain in Phase 2.

And this is a very fluid number and a very fluid phasing. We completely expect to move between Phase 2 and Phase 3 pretty often, especially in the northern counties, or in the low population counties where even a handful of cases can move people between the phases. So, this is where we are for this week. And we will continue to update this week-by-week.

The other thing that I want to talk about today is the long-term care surveillance program, something that we've been working on for several weeks now, about transitioning to self-directed testing for the long-term care facilities. So, yesterday, on our partners call, we talked with the facilities about this transition. And like I said, we've been working with them for a couple weeks now.

So we're going to be asking the facilities to each start the process of contracting with a commercial lab. We're providing the contact information and all the information they need to be able to do that. There are several labs all over New England even nationally that they can contract with.

We're going to be doing a reimbursement of \$100 per test, which is the average amount that we've been paying for it for the last several months. And once a facility has a positive test, or if they have an outbreak, the testing then comes back to us again. So this is strictly for the surveillance program.

So some of the -- what this looks like -- and if we go to the next slide, we will see that we expect that facilities will start transitioning to their commercial-based testing partner right around October 12th. We're going to keep our schedule. All of these facilities are scheduled to test through October. So we're going to keep our schedule the way it is. But we expect people to start transitioning over October 12th. And we anticipate having everybody transitioned over by October 26th.

So that's really a decent timeline that allows us to continue to work together with the facilities and really problem-solve anything that they run into. And we've committed to all of the nursing homes that if, for some reason, they run into contracting issues with the commercial labs, we certainly will extend beyond the 26th. This is not a hard-and-fast date that, if they don't have a partner by the 26th, that we're just going to stop testing. We're very committed to making sure that they have good surveillance testing going forward. So that's what we're working on this week.

And so, the way that the surveillance program is going to be set up, and our recommendations that we're making -- if we can go to the next slide, and this is an example. One of the reasons why we're going to this type of program is to provide maximum flexibilities for the facility.

So what we're recommending is all PCR-based testing. One week of the month, they are going to have 100% of their Staff tested. And every other week in that month, they're going to test 10% randomly of their Staff.

So the great thing about this schedule is that they can choose what week and what day of that week that they want to do specimen collection. It's between them and their commercial lab partner. So if they decide that they're going to do 10% on week 1 and week 2, and then 100% on week 3, that is completely okay. These individual contracts gives them the flexibility to do what's best for their facility and their Staff. This puts them in compliance with all of the CMS Guidelines. It still provides the funding and the support that is needed to have a good surveillance program.

Most States moved to a self-directed testing program for long-term care back in the summer. We chose to hold onto our program a little bit longer. And what this is going to allow us to do is we have other groups of people that we want to put on surveillance outside of long-term care. We want to bring some assisted living -- more assisted living into surveillance programs, homeless populations, jails, different congregate living settings that I think need to be on the surveillance program. And so, moving the nursing homes off into their own self-directed program gives us the room to be able to bring those other populations onto a program. That's all I have. Thank you. I think I'm going to hand it over to Beth Daly.

Dr. Daly:

Not quite as good as with the foot, oh, thank you. All right, good afternoon, everyone. I'm going to provide an overview of what we've learned to-date around contact tracing in New Hampshire. Since March, we've investigated now just over 8,000 cases of COVID-19. And this has resulted in us interacting with more than 22,000 close contacts who have been identified and named as having had close contact with those individuals.

We've been able to maintain a very robust contact tracing operation at the State Health Department, and have been able to expand and contract our Staff, as needed, throughout the response. Currently, we have about 110 Contact Tracers working with us.

At the beginning of our response, the primary risk factor for COVID-19 was first international travel and then, later, domestic travel. Travel, as a risk factor, as you can see, has declined, as the Stay-at-Home Orders were implemented. When these were then later lifted, we've had started to see travel-associated cases increase but not to the same extent as prior to the Stay-at-Home Orders. In particular, we want to emphasize that, when you do choose to travel, it's best to avoid public transportation, and then also attending any large events or crowded spaces.

Next slide, please. As local community transmission initially increased during the late-spring, COVID took hold in our long-term care facilities. And a majority of the people that we were identifying as cases had exposure to an outbreak. And that was what their risk factor for COVID-19 was. As these outbreaks came under control through this enhanced infection prevention in the facilities, as well as our very aggressive long-term care facility testing program, fewer outbreaks occurred and then fewer outbreak-associated cases naturally occurred, as well, over the summer months.

Next slide, please. Currently, and over the summer, as people have relaxed their social distancing restrictions, we have continued to identify people who come into close contact with a confirmed case. And at this point, this has taken over as our primary risk factor for COVID-19 in New Hampshire.

This has always been a significant potential risk factor for COVID-19 in our State, because this virus is primarily spread through close contact to someone who has been infected. But the proportion of individuals diagnosed with COVID-19 has increased over time and is holding fairly steady now at about 1/3 of our confirmed cases.

Next slide, please. And then, lastly, in terms of risk factors, the proportion of people with COVID-19 who have not identified a specific risk factor -- one of the ones I've already mentioned: travel, being associated with an outbreak, or being associated with a known case -- this has increased as people have gone out into the community. So it decreased during the Stay-at-Home Orders. And now, about 25% to 30% of our people who have COVID-19 have no identified risk factor. And we think this really is representing that community transmission.

However, due to our effective personal-prevention measures that people are taking, the actual number of people with COVID-19 has not increased. So it's just the proportion of cases attributed that have no attributable risk factor has increased. But this has not resulted in an actual increase in numbers of cases, as you all know.

Next slide; so these 8,000 cases have impacted many institutions in New Hampshire and, in particular, you know our long-term care facilities have been heavily impacted. More recently, we've seen some cases in colleges and universities, as well as our K-12 schools, being impacted. But you can see from this graphic that correctional facilities and childcare centers have had relatively few cases.

Despite this increasing number of infections identified in our colleges and universities, and K-12 schools, a lot of this has been attributed to increases in testing and more aggressively testing both Staff and students. And we think that this helped prevent some introduction or spread in these institutions. And you can see that our statewide percent-positive number of cases is very low, and at just under 1% of our positives. So we're not seeing any outbreaks associated with public settings, as you can see from this slide, such as retail stores and services, and restaurants.

And then, my final slide; great. So, over the last several weeks, as people have begun to move about more, our case investigations have become increasingly complex. While our case counts remain low, the average number of close contacts to each case has increased, which is what this chart is showing. So currently about five close contacts are identified for every single case. Now, sometimes it may be none, and sometimes it could be 40 or 50 per case, depending on what their activities have been.

We know, though, that the majority of these close contacts are household contacts, about 56%. And we've had relatively few close contacts identified in workplaces. Just 6% of our close contacts are in workplaces. So this is suggesting that many of our institutional settings, such as the long-term care facilities, but other workplaces, as well, have implemented social distancing measures to prevent that close contact.

However, close contact is occurring in other settings, including through social interactions with friends and family, and in other group settings that are not work-related. So we're concerned that people may be letting their guard down when they're out and about with friends and family, or going to other types of social gatherings, because they have been identified as close contacts in a number of our investigations.

We can't regulate the settings of backyard barbecues or birthday parties, or other types of social gatherings that people come together. So we just want to emphasize that these particular types of events

that occur are potentially high-risk for COVID-19 transmission. And it's incumbent upon all of us to make sure that we're taking our own personal responsibility to take those measures of social distancing at these types of events. And if you can't social distance, then being sure to wear a mask.

We also continue to recommend that people avoid large gatherings, and then also making sure that you stay home if you're ill. And if you are identified as a close contact, it's really important that you do quarantine for those 14 days. So, thank you, all, for doing your part to prevent COVID-19 transmission.

Governor Sununu:

Well, thank you very much, Dr. Daly. That's fantastic. I know we just get a lot of questions about everything from contact tracing to the impact of these COVID cases, specifically with the outbreaks, right? What is an outbreak, cluster settings, things of that nature? And again, we have over 100 people just doing an incredible job and great leadership over with our Contact Tracing Team.

And we will just ferret on it, right, as the numbers may go up. They may go down. We kind of don't lose our focus and we give it 110%, because I'm a firm believer that great contact tracing that we've been able to implement is truly one of the reasons why our numbers are so low. We're able to isolate individuals very quickly, and make sure that the folks that they've interacted with could become isolated, quarantined, and obviously get the subsequent testing.

So, a variety of different things to move on with, and then we will happily open up for questions; so first of all, let's start off with some new CARES Act allocations. So the CARES Act funds that we still have some of those funds available, we've kept some available through the fall to make sure that we're covering any gaps that might appear in the system, or additional funding needs that may spur up, whether it's PPE or testing.

But today, we're talking specifically about our ongoing effort to ensure that no one falls through the cracks specifically around what we're creating, the Special Education Provider Fund. So, what is this? This is a \$4 million fund specifically aimed at schools that will help students and families with developmental disabilities. In total, the funds can help up to about, we estimate, around 21 different schools that serve over 750 students with a variety of different developmental disabilities across the State.

Currently, these schools and institutions just do an outstanding job educating students. I've had the pleasure of visiting quite a few of them. I'm getting to know the students and the faculty, very dedicated Staff. And just we want to make sure that they have the opportunity to not just stay open, but make sure they're doing their job in allowing these individuals, these students, to get onto a path of a more independent life.

The Providers are very unique. And that's why the subset that we're trying to close the gap with, if you will, is fairly small. One such school that I talk about a lot is the Monarch School over in Rochester, a fantastic facility. And I want to give them a lot of credit. They kind of came to us and talked very directly about what their finances were, what the structure was, some of the challenges they were having with Medicaid reimbursement. The funding of these institutions can become very complex from a Federal, State, and local level. And they really worked with us to help us understand all those different barriers that they were facing, given the COVID crisis.

And again, the State remains very focused on assisting these students with special needs, and ensuring that schools and Providers have resources to meet the needs, and not just stay open, but really

meet those very specific and individualized needs around the physical, medical, developmental, behavioral, emotional disabilities that might exist. And we just want to thank them for everything that they're doing. And now, we're creating this opportunity for them to essentially apply into a fund in a very simple way, and get some Provider relief, if you will, as we go through the COVID pandemic.

Today, also, we want to talk about some of the changes we're making with restaurants. We get a lot of questions. We've, I think, taken very smart steps to slowly open up restaurants, make sure that we are looking at data, not creating a situation with additional outbreaks, or clusters of illness, if you will. It's one of the higher areas of incidents that we saw down in the southern part of the country, as they opened up very quickly. They didn't really have a lot of the guidance in place. And it resulted in some very quick and very drastic outbreaks in some of the cities like Miami or Houston, and other parts of the country. So we knew we had to be very careful.

Today, we're making another step forward. And currently restaurants can open up to 100% of indoor capacity. But everyone still has to maintain that 6-foot buffer between tables. And again, you can only sit with your party, your family members at your table. We don't want folks congregating around, or standing, at a bar. That's really where a lot of the incidents would happen.

But we know that, as things get colder, as we've opened up outdoor seating, and as things get colder, the ability to actually utilize that additional outdoor seating is going to become very limited. And so, a lot of these restaurants that have been able to survive with the opportunity of outdoor seating, that's going to quickly contract.

So, today, we're making an announcement that really has the public buy-in of all the stakeholders that have been involved, from Public Health, the support of the restaurants owners, so that, effective on October 1st, we will be easing the 6-foot distancing rule for tables and booths at restaurants, as long as they enact protective barriers. And this change, again, was approved by the team over at Public Health.

And as evidenced at today's contact-tracing presentation, we do continue to see positive data in restaurants. They are currently not a source of widespread transmission. We've seen this model be enacted in other places across the New England region and across the country very successfully. And so, we're very confident that we can move forward with this model in a very safe manner, and so allow, again, the Staff to be safe, the Employees to be safe, as well as those coming to visit the restaurants, knowing that, again, having these barriers can allow things to be maybe a little closer, a few more people indoors, but still maintain the safety protocols that we like to see so that are mitigating the spread of the virus.

On another note really quick, this summer -- or previous summer -- it seems like summer was years ago, right -- we did launch our Don't Go Viral PSA campaign. It was a very successful campaign across the State, encouraging folks to wear masks and ensure proper health practices across the State.

The success of the campaign actually far-exceeded our expectations with over 16 million people seeing or interacting with some part of the campaign across New Hampshire. And as we head into the fall, we're launching, I guess you could call it Phase 2 of the Don't Go Viral campaign, which will start next week and continue through the end of November. And this latest phase will really utilize a lot of the same digital-media strategy that was very effective in the first phase this past summer.

But this fall, the State is going to -- we're really going to focus this campaign on young adults, particularly on college campuses where we know there's just a lot of natural congregating, which, again, we want to make sure that the students and the Staff understand some of the risks of that. I think compared to many of the other States that have had issues in their colleges and university system, we've

done very, very well here. We've had a couple instances here and there, but nothing that can't be managed. We've done well.

And we just don't want to take that for granted. And we kind of want to double-down on the preventative measures and the messaging, and the importance that the students hopefully will gather from this that what they do can have a domino effect in a very negative way sometimes. And we've seen it play out in other States. We don't want to see it play out here.

So, we're going to be using some of the CARES Act funds to continue this campaign. And I just want to thank the folks at the Department of Business and Economic Affairs. They've really led a lot of these marketing efforts, kind of marketing arm in the State, if you will. They did a great job with the first phase of this. Now we're going to roll it out for the next couple -- I guess the next couple months, really focusing on some of those young adults but really everyone, making sure that we don't go viral. We keep our numbers low, even through these what will be tricky months.

And speaking of tricky and tricks, as many folks are aware, Halloween is just around the corner, a favorite holiday for a lot of us here in New Hampshire and the greater New England area. So, the State of New Hampshire is issuing a Trick-or-Treat Safety Tip Sheet. We always do put out some type of Tip Sheet for folks, just reminding them of ways to be safe around trick-or-treating.

But obviously with the COVID pandemic this year, we're adding just that additional effort to include maintaining social distancing, when possible; using face coverings; frequent handwashing. These are obviously important commonsense reminders for folks who choose to go out and trick-or-treat, or choose to provide treats to all the kids that might be coming to the door.

We've made the Tip Sheet available today. Do we have a website that it's available at? NH.gov, that's really my go-to website for almost everything, when it comes to COVID, right? At nh.gov, you can go and get that Tip Sheet. We will be providing it to a lot of the cities and towns.

And again, a lot of the cities and towns may have their own local Ordinances, whether it's time changes or procedures around Halloween. And it's obviously their ability to do so, given every city and town is a little bit different. It's long been an activity organized at that local level. And we're obviously going to keep it that way.

But, again, it is trick-or-treating. It's something that is 100% optional for both kids and adults. And if folks don't feel safe, they don't feel comfortable, then they definitely should not partake in either trick-or-treating or providing candy. So you need both Parties to really hopefully understand those precautions that we're hoping people will enact.

And again, we know that if we can be successful with NASCAR, we can be very successful with Bike Week. We can be very successful with some of the events that happened around the State. There's no reason, with a little extra precaution, we can't all be very successful this Halloween.

And one final thing I'd like to mention, and then we're going to open it up for questions, tomorrow I'll be joining with the NFL Hall of Fame, the Granite YMCA, and NAMI New Hampshire to host a Strong Youth, Strong Communities event. This is actually very exciting. It's a forum of young adults to discuss mental illness and teen suicide prevention.

Again, the issues around mental illness and especially around kids is something that we've been right on top of since day 1 through this pandemic. We've provided funds and resources. But having a lot of these other community public and private partners come together, keep that messaging strong, providing avenues and resources for these kids is really, really important, because we are still in the midst of this COVID pandemic. There are still this remote learning. There's still issues of isolation. And that can be very tough on a lot of these kids.

So, we're very happy to be partnering with the NFL Hall of Fame. The program is also put together with former Patriot Andre Tippett and a bunch of other stellar Athletes. It's really kind of exciting. And so, you can check it out tomorrow starting at nhdot -- oh, sorry, that's dot, my bad. NH.gov\COVID-19, under the little button that says Mental Health that we put up there a few weeks ago, so nh.gov\COVID-19, under the Mental Health Stress and Anxiety tab that we created with a lot of the other resources there. So it should be great. And people should definitely check it out.

With that, I guess we will open it up for questions. I'm still shocked that I said nhdotgov, sorry, my bad. I got DOT. We're building roads and bridges, too. It's all going well. Yes, Paula, good afternoon.

Q&A Session

Good afternoon, Governor.

Governor Sununu:

Good morning.

Good to see you. Will you be revisiting your guidance on out-of-New England travel at any time? I hear that parents who have students that go to out-of-New England schools are pressuring the State to allow them to seek an exemption under the travel outside of New England, and wondered if there were other organizations or groups that were trying to get something like that.

Governor Sununu:

Yeah, so one of the areas that we're looking at is to making sure that education is included as part of that essential travel, just like work is considered essential as part of allowing the quarantine provisions. The 14-day quarantine should not be enacted. School is just as essential, obviously, for kids. And I know that's something that they're looking at in terms of making those changes very shortly.

But, in general, would you look at the possibility of saying, okay, well, maybe outside of these States, or a certain percentage of PCR, or something that would allow more travel of New Hampshire residents?

Governor Sununu:

Sure; well, I'd probably defer to Public Health and the Commission about the specifics in terms of if there are specific regions. Again, I'd like folks to look at data. We try to make everything very data-driven, not just on gut reaction. So, we will probably have to go back and revisit a little bit, talk about the data, what States and what provisions that they would be looking at enacting. But I'm open to all of that.

Governor, some of the school districts were counting on that FEMA reimbursement for the PPE. I know you said before that schools have not drawn down the full amount of CARES Act funds they've been allocated. But, is the thought that you're going to have to step in with CARES Act money here for New Hampshire to fill in that gap that FEMA is no longer covering?

Governor Sununu:

It's very possible, yes. So the question is FEMA came out with an announcement, I believe two weeks ago now, approximately, saying that they were not going to do the reimbursement coverage on the PPE side for schools. Schools, again, I'll just reiterate it again, we're going to make sure schools don't have to go without. We will be there in some way.

Using our CARES Act funds to supplement that is absolutely on the table. And if there's certain districts that need more PPE, it's possible that we can get it to them through our own strategic stockpile that Commissioner Shibinette and her team has done a great job building up. We could provide direct funding, if they've already made financial commitments on those purchases, the opportunities to provide some of that funding.

There are very, very few districts. There's a couple. But there's very, very few out of the -- or I should say few schools, out of the 400-plus schools we have in the State, that are looking to make that request now. But we know, again, that that could come in November or December. And that's why we're going to keep some of the CARES Act money in our back pocket a little bit, just for these exact type of situations.

But, yes, if they can draw down, obviously the first option's to draw down their education funds out of the CARES Act. The second would be to go to the municipal funds out of the CARES Act. And a third step could be, if those both get exhausted and they still need something, they can always come to the State.

Governor, for a number of weeks now, restaurants and bar owners have been looking for the State to permit games to occur in their establishments, which is obviously a more risky behavior than just sitting down and dining. Are you still reviewing that? Is that possible that you might approve those in New Hampshire? Where are you at?

Governor Sununu:

Yeah, we've heard some restaurants and bars that are looking for us to allow them to do darts or pool, or something like that. And only in extreme circumstances are we looking at allowing that right now. Those are just activities, unfortunately, where folks, they're up. They're standing together. They're in kind of that congregate, close face setting, usually within 6 feet. And I think it's a small sacrifice to ask.

I know it's a pain for some folks. They like to have those types of options in the restaurants and stuff. But we are asking, until we get through the COVID crisis, which I think there is a light at the end of the tunnel here, right now we're not in a position to open that up, except in a few extreme circumstances.

One of the examples I would give is there's a couple of restaurants where their primary business is those games. Think of like a bowling alley, for example, right? So, bowling alleys have their own guidance, and if there are other businesses where the gaming aspect is as much of a business or more of a business than the restaurant aspect, we have made some exceptions in those very, very rare cases.

But traditional throwing darts at the bar or something, that's exactly what got a lot of folks into trouble in other parts of the country. And we're just asking folks to be patient and we will get there. But we still have a COVID crisis on our hands.

This team has done an incredible job keeping our numbers low. But it is just the attack rate of the virus has not changed. The ability of the virus to spread has not changed. I think some of our habits and

our practices have. And that's why our numbers are low. So that's what we don't want to give up on, right?

Just because we've gotten that curve flat doesn't mean we just give up on all the good practices that got us to such a positive place, because it's those practices, if I may, that have allowed the economy to open up. It's those practices that give customers a lot of confidence to go to a restaurant, or to go to one of those settings, because they know there are certain stipulations in place, and they can do it in a safe and happy way with their families. So to give up on all that I think could shatter -- not just create a pandemic problem, but also shatter consumer confidence with a lot of those establishments.

Governor, question for Dr. Daly on the contact tracing. We saw a couple of spikes in the timeline right around July and late-August. Did those coincide with larger numbers of gatherings around the 4th of July and Labor Day? Or sort of what was the...

Governor Sununu:

Come on up, Dr. Daly.

Can you give us a sense of what fueled some of those spikes there that we see right in early-July and right in the end of August?

Dr. Daly:

Yeah, great, great question, thank you. So, absolutely, those spikes there are driven by the 4th of July weekend, as well as Labor Day weekend. And so, that just reinforces that on weekends and on holidays, people tend to come together. And so, it's really important that if they choose to do that, that they try not to gather in large groups, that they maintain their social distancing. And then, recognizing that if you do choose to have those types of gatherings and someone does test positive who's attended that time period, when they have been infectious, they could end up being quarantined then.

Could either you or Dr. Chan expound on, are there any common denominators in the parties that did have outbreaks versus -- I guess you're not investigating those that don't. But was there anything that linked these parties? Or is it just luck of the draw, someone shows up with COVID?

Dr. Daly:

It's luck of the draw, someone shows up who has COVID. A lot of times, they don't know it. And because we look at the two days before someone is symptomatic, or two days before they test positive, and some people are asymptomatic and never develop symptoms, I don't think people are intentionally going to gatherings and spreading COVID. They think that they're fine, or it's your family member, or your close friend. And you think that they're not going to have COVID.

And a lot of these gatherings are small family gatherings, friend gatherings, just general social gatherings that we all like to have and want to get back to. But unfortunately they are resulting in transmission.

Can I ask a question about the number of times that people would be called by Contact Tracers? Like, I missed a call from a State Agency and I worried that, oh, I might have missed it. What do you do to make sure that I am not trying -- that I'm contacted?

Dr. Daly:

Sure, we have a well-oiled machine that's facilitated by technology. And so, if you do not answer your phone the first time we call you, you go back into our queue. You get up to four calls that same day. If we don't reach you and you're someone with COVID-19 on that first day, we attempt to reach you the next day. And then, we will actually send someone for a home visit to check on you, make sure that we do, in fact, reach you.

And we follow the same procedure for close contacts, as well. So we will call you many times. We also will eventually text and email people, if we can gather that information. And it's really important to us that we notify everyone who may have been exposed. We take that obligation really seriously. Yeah.

Using all this data -- this is probably more of a question for the Governor, policy-related -- looks like you've already used some of this data to relax some of the restrictions around restaurants.

Governor Sununu:

Absolutely, yeah.

Are you looking at other industries, like retail, using this data to relax some more restrictions?

Governor Sununu:

Yeah, I mean, I think we've done a great job in terms of flexing restrictions. I don't know how many more restrictions we're looking to flex now, because, again, the economy's moving forward. People are getting hired.

One thing we didn't talk about today was our latest unemployment number. We're now well-below 5% on unemployment. We have, I think, 36,000 people that are currently filing for unemployment. That used to be close to 120,000.

So, I think we've taken the right steps. But we always use data to make those decisions. We're always looking. Kind of the Reopen New Hampshire group, the Reopen Work Group that we've put together, I think, has done a great job. Patricia Tilley from Public Health is part of that and I think has a great voice in terms of the data and the science behind that. We have Legislators on both sides of the aisle.

So they've really done a fantastic job. And every week, they bring me some slight different recommendations, some of which we take, some of which we don't. The one that came up this week was, hey, can we play darts again? And we said, no, not right now. I think that's a small sacrifice to make. I think it fundamentally impacts the business. And still, we just don't want to get too relaxed with things so that we're creating those clusters of illness, if you will.

On retail, it's something that we are looking at. I know there's been a request to open up retail from 50% to 100%. And that's definitely something that we're looking to do. I don't know if they took

that up today as part of the -- did they take that up? Okay. So it looks like we're going there. I mean, again, the group took it up. It looks that they discuss it today. I'll see kind of how the recommendation might have come back. But again...

They're suggesting that businesses can go up to 100%, if they want to, but they could also maintain at 50%.

Governor Sununu:

Sure, so they always have the option to keeping at 50% if they want to. Yeah.

Because some like 50% and that's working for them, but they were also noting that the number of people who -- or the number of online retail sales are going up by 20%, skyrocketing, and they're worried.

Governor Sununu:

No, sure. So, thank you, Paula. You're reporting the data and the news to the Government. It works both ways in New Hampshire. We love it. Media works. Yeah. So a couple issue there that come up, it looks like they are going to make a recommendation back up to our office and I'll review that, and see exactly what the stipulations are. Looks like there are some retailers that are probably very happy staying at 50%; I think that's part of the consumer-confidence thing.

If you remember a few months ago, we talked about, for example, a small general store or something like that, where you could be at 50%, 60%, 70% capacity, and you're shoulder-to-shoulder sometimes in those smaller locations, depending on how they set up their products in the store. And again, a lot of consumers will see that and not want to go in. So, maintaining a smaller capacity can allow those stores, I think, to give that customer confidence that they can go in, be able to maintain 6 feet amongst individuals.

But some stores that are bigger, that are wider, a lot of the larger department stores, something like that, where there's just tons of space in there, obviously some flexibility to open up there is always a possibility. So, thank you, Paula. Do we have some questions on the phone? Hi, Holly.

Holly Ramer with the Associated Press:

Hi there. I have two questions: one related to COVID and one related to the elections. The first one, a couple weeks ago you talked about registering as remote-learning centers. And I was just curious if there's any update on how that's going, how widespread that is, how many folks are going that route. And the second question is I would be interested in hearing your thoughts on President Trump's comments earlier this week, in which he was refusing to commit to a peaceful transfer of power, if he loses the election.

Governor Sununu:

Sure; so the first question has to do with the remote learning pods, or remote learning groups that are registering at the State level. I have to be honest. I don't have a number of how many have registered. But we will absolutely get that immediately following this press conference and be sure to get that out to the entire press. It's a very good question. I think we started that process about three weeks ago-or-so.

So we will see how many have. And we tried to get the word out. So, hopefully people are utilizing it and kind of signing up, and, again, just registering themselves.

The second question you had pertained to the President's comments about a smooth transition of power, should he lose the election. I would just say very inappropriate comment. Obviously, there's a winner of an election and a loser of an election. And if a current incumbent where you're the President or on the Planning Board, there has to be a smooth transition of power. I think everybody should understand that. And that's the expectation up and down the ballot.

Rick Green at The Laconia Daily Sun:

Yes, it was previously reported that one person who attended Motorcycle Week tested positive for COVID-19. Have any further positive tests come in, or people related to that person? Or generally, have there been any clusters associated with open-air rallies here recently?

Governor Sununu:

No, there are no additional cases -- or no additional positive cases of COVID associated with any rallies or Motorcycle Week, or anything of that nature. They were all held, I think, with the right stipulations, the right guidance. They went off very successfully. And again, we're very proud, another example of New Hampshire, I think, being a model of doing it right.

Michael Graham at the New Hampshire Journal:

Yeah, I've got a couple. It might be easier to do them one at a time. I got one for each of the people today.

Governor Sununu:

Let's do one at a time, if you don't mind. Thank you, Michael.

Michael Graham at the New Hampshire Journal:

Yeah, so let's start with Dr. Chan. You mentioned the hospitalizations. How many of the hospitalizations are ICU hospitalizations? And if they're in the ICU, is it because of the need for the treatment, or, as we're hearing reports at New Hampshire Journal, some hospitals are simply using the ICU as the safest place to put COVID patients to isolate them from the rest of the hospital?

Dr. Chan:

I'm sorry. Can you repeat the second part of that question? I think I missed the second part of that.

Michael Graham at the New Hampshire Journal:

Are the COVID patients in New Hampshire who are in ICU, are they there because they're, in fact, so ill, as a matter of medical need, or rather because it's the hospital's -- we're hearing the hospitals are simply using parts of their ICUs as a form of quarantine. It's the safest way, easiest way to segregate COVID patients from the rest of the facility.

Dr. Chan:

Yeah, so I think a hospital's setup for how they manage somebody that needs hospitalization for COVID-19 is probably going to vary hospital-to-hospital. So I'm not sure that I can probably comment on the second part of your question.

What I can say is that people that need hospitalization are hospitalized. And that may or may not be in the Intensive Care Unit. There are people that may just need what we call supportive care, for example supplemental oxygen to be given. We know that this is a virus that infects the respiratory passages and even the lungs. And so, people with pneumonias, whether that's a bacterial pneumonia or a viral pneumonia that can be caused by COVID-19, some people need supportive care, including oxygen, but may not require Intensive Care Unit-level care, for example, mechanical ventilation, artificial breathing, and that sort of thing.

So, right now, just to reiterate, statewide we have about 16 or 17 individuals currently hospitalized with COVID-19 throughout the State. That is a little bit of an increase from past weeks, where we've had 10-or-fewer. We have reported four new people hospitalized with COVID-19 today, or in the last day-or-so.

I don't have any information, however, on whether those new hospitalizations are what we would call general medical hospitalizations versus Intensive Care Unit hospitalizations. That data's not always complete in our dataset. We have asked hospitals to report to us when somebody is newly hospitalized with COVID-19. But to know whether they are hospitalized to the general hospital ward versus the Intensive Care Unit, or potentially moved between Units, requires following somebody throughout the course of their hospitalization. And we don't always have the exact information on where somebody is hospitalized.

Michael Graham at the New Hampshire Journal:

Great; my second question is for Commissioner Shibinette and the report of the 37 new positive tests. Are any of those positives from the testing being done by the University of New Hampshire? And if we go to the DHS page today and look at the rate of positives, the number of deaths, will those numbers include UNH? And if they don't, aren't those numbers wrong?

Commissioner Shibinette:

So the 37 positive cases today, there are no positives from UNH. But in previous days, our positive cases have included positives done by UNH testing. So we covered this extensively last week at the press conference that the way our dashboard is set up, it's a direct feed from our labs and our electronic reporting system into our dashboard. And UNH, because they're a new testing program, they don't have that connection yet.

So, the positives from UNH are reflected in our data. The negatives from UNH are not. So, yes, you're right that that our percent-positive is much lower than what it appears on the dashboard, which is a positive for New Hampshire, for sure. We've been working with UNH for the last couple of weeks. We expect them to be able to electronically report their negative tests into our dashboard within two weeks.

Michael Graham at the New Hampshire Journal:

And Governor, there's a Op-Ed in one of the papers today from Brendan Williams at the Nursing Home Association, really concerned about funding. And he says the funding's not there. They're not getting funding from the State. And he's echoing a message from some other -- you're saying the municipalities. You just talked about the money that you're setting aside for schools and schools losing FEMA funding. Would you be in a different position to help meet some of these needs if the Senate had passed the half-a-trillion dollar COVID Relief Bill that they voted on last week that was stopped by a Democratic filibuster?

Governor Sununu:

So, I'll simply say that the article that I think you're referencing in the Union Leader is frankly completely wrong. It was just completely inaccurate. I think the facility that they -- first, the facility that they referenced in there did not acknowledge -- and I don't think any of the article acknowledged -- all of the Federal funding that has come in for both hospitals, healthcare centers, and long-term care facilities.

The facility that was actually acknowledged in that article I believe has been made whole. That's one of the reasons why there's no additional State funding and grants going in there, because their losses have been accounted for, partly from the State and very much so from the Federal Government.

I'm not going to comment on that individual you mentioned that represents the Long-term Care Association. Frankly, we don't deal with him. We deal directly with the long-term care facilities, themselves.

And again, if you look at the amount of the funding that the Federal Government, the State of New Hampshire has put in to whether it's a hospital, a Physician, a Dentist, it's unprecedented here in the State of New Hampshire. We've done three rounds of funding for Physicians and medical facilities. We've done two rounds of funding for long-term care facilities. We've done multiple rounds of funding for hospitals. And we've done it all in about three or four months. And we've able to, again, account for so many of these losses.

That doesn't mean we've made them 100% whole. But a lot of the facilities have been made whole. A lot of the long-term care facilities, because of the Federal Government support, didn't even apply in for our grants because they wouldn't have qualified, because they don't have the losses to qualify for it.

So, again, I read that article. I was incredibly disappointed with it, because I got to tell you. Our GOFERR Team has knocked it out of the park when it comes to providing resources for long-term care facilities, medical facilities, hospitals, Dentists, everyone across the board.

A lot of the States couldn't do stuff like this. We could. And we didn't do it once. We did it, like, five or six times, when you add all the different rounds of funding for all the different types of institutions up.

So, obviously I take some exception there. And if anything, because I can be a little defensive of our team, because our team is phenomenal here in the State. It really is. And I saw that article as a bit of a knock on the team about not even a question to our office or a question to GOFERR, or a validation of any of the data. They didn't ask the other side of the story. And let me tell you. The other side of the story is a really, really good story and it's something that everyone in New Hampshire should be proud of.

To the second half of your question, in terms of what additional support might have come if the Senate had actually passed that \$500 billion Bill, it's my understanding that there would have been supports for schools and municipalities, and a variety of different things. It shocked me when the

Democrats in the Senate said, no. They voted against that. I think they voted. If I remember one of the quotes was, well, we voted against \$500 billion in aid because it wasn't enough.

Well, last time I checked, \$500 billion is more than zero. And that's what the U.S. Senate has delivered to the State of New Hampshire and to this country in the last few months. So, you got to get something done, even if it's in phases, right? Even if it's you pass one Bill, you want something else, come back to the trough again. Try it again, right? Go after the second or third phase. I think we've had a lot of success doing that here in New Hampshire. It doesn't have to be all-or-nothing. That's why things don't get done out of Washington, D.C.

And yes, I've been very critical of Congress because I don't think they've actually passed or done anything having to do with the COVID crisis in months, right? March/April was the last time they passed anything. I'm kind of looking at the press. I literally can't think of anything that they have passed since the crux of the crisis began. And America's very upset with that. I'm upset with that. A lot of people are upset with that, because they made a lot of promises and haven't delivered.

Now, here's the good news. They got about a week left, right? They got about a week left to get something done before they go back for their recess. And my hope is that they do it. My hope is that they understand they got to come together, work across the aisle, get something, whatever it might be.

I'm still advocating very strongly for flexibility. I spoke with the Vice President earlier this week specifically about what opportunities we may have with additional flexibility out of the CARES Act, in terms of the dollars we have left, assuming Congress doesn't do anything. I hope they do. But if they don't, what other flexibilities could we have?

Unfortunately, the law has been written such that the date of December 31st is written in law and can only be changed by Congress. Most of the flexibilities we would have with CARES Act to spend it on non-CARES Act items, if we were to so choose, is set in law and can only be changed by Congress. So there's unfortunately very little flexibility the more we looked into it that the Administration has to providing us more flexibility with our CARES Act funds.

So we're going to keep advocating. And I'm still going to be the eternal optimist as I try to be. As much as we haven't gotten anything done out of Washington in about four or five months, there's still a week left. And sometimes they come through right at the end. They do, sometimes. And so, I'm still very hopeful and we're going to keep advocating for something to come to provide additional supports, both COVID and non-COVID-related issues that, again, there are a lot of indirect issues that have been impacted by COVID that still don't qualify under the CARES Act funds.

Harrison Thorp with The Rochester Voice:

Thank you. Good afternoon, Governor, everyone else over there. I'm very pleased and I'm sure Restaurateurs are all very happy that you are lightening the load on them, as far as how many could be in there. But I think you've left behind the barbershops and the hair salons. I've spoken to a lot of Barbers who say they can barely make a living because between taking messages for appointments and then the person doesn't show up, because they find another Barber to go to, having to stop a haircut 15, 20 times during the cut to answer the phone, going back-and-forth all day long about what time would be a good appointment, it all makes for an impossibility. Most of these barbershops are one and two Employees. And one Barber said, in Rochester, that 20 times the phone rang. She had to go get it during the haircut. So, they have waiting rooms that would allow for probably social distancing, the ones that you could be 6-feet apart with the mask on. One Barber wants a signup sheet, so people can come in there and just sign up for a certain

time. Right now, they're on their last legs. And I think that there should be some lessening in your guidance for barbershops and hair salons. And they do, too.

Governor Sununu:

No, I appreciate the question. Again, always willing to look at what options might be available, whether it's a barbershop or a hair salon, whatever it might be. And again, if that can be done safely and we can do something with flexing the guidance and with Public Health, happy to do that and happy to look at it. It has to be safe and it has to work. We understand everyone has to make sacrifices.

I got to be honest. To ask the Governor to change the safety regulations because they're having trouble managing the phone calls, I don't know if that's reasonable, frankly. There's a variety of different ways that people can utilize technology or phones, or an answering machine, or whatever it might be to help manage the calls that could come in and the requests to make those appointments. A lot of the vast majority of shops in the State have been able to manage that.

I know we've done two or three rounds of flexibility for barbershops and salons, since the initial guidance came out. First, I know they wanted to use blow dryers and things of that nature. And we waited a few weeks. And I think we got that done. Then, I think we started to allow them to see multiple people at once. We got that phase done.

So we're always willing. And we've made, I think, some pretty big steps with that industry, to be sure. I don't know if it's the Governor's place to mandate how they handle their phone calls. But, again, if they want to bring something, or the industry wants to talk to the Reopen Commission and the Guidance Commission that we've set up, which, again, has done a fantastic job, it has to be done in the realm of health and safety first. It really does. And we've been able to take those steps, always willing to take more. But health and safety does have to come first.

Rick Jurgens at the Valley News:

Okay. Thanks. I wanted to ask about the decision to redirect the sentinel surveillance system from the State coordination to being done at the individual nursing home level, especially around the economics of it. As I understand it, the State plans to reimburse \$100 a test. Some Nursing Home Operators say that they're paying \$175 a test, and they don't feel like they have the bargaining power to go up against the laboratories. Meanwhile, the contract that the State has currently for the current program with Dartmouth-Hitchcock is priced at \$65 a test. So it seems that, in terms of cost, the program is moving in the wrong direction. So, my question is, explain to me why that's not moving in the wrong direction. And secondly, are there any concerns that ending the sentinel -- or changing the sentinel surveillance program at this point might be premature, given the success that it's shown in helping to stop the prevalence in the nursing homes?

Commissioner Shibinette:

Okay. So the first part of the question, we actually are contracted with several labs, Dartmouth being the one that you're talking about for \$65. We also have contracts with NorDx, which is doing part of our surveillance programs, and Quest. And our average, not just the Dartmouth program, but our average is about \$100 a test is about what we're paying, which is why we picked that number for reimbursement is because that's the average right now.

I think that most facilities can go out and negotiate with the commercial labs for about that amount. So I don't think it's cost-prohibitive. And I think that part of the reason for wanting to move to a self-directed testing program, surveillance program, is because right now we only have assisted living facilities in Hillsborough and Rockingham County on a surveillance program. We have the whole balance of the State, and over 100 assisted living facilities in the rest of the State that we would like to move onto our surveillance program. So it wasn't just a cost decision to move them more towards a self-directed surveillance program. It was trying to add different populations into the surveillance program.

As for it being prematurely, as I've said, the rest of the country went to self-directed either right from the very start, and the State never ran a surveillance program, or they moved to that back in July. And honestly, just with a very basic search, I'm having a hard time finding any State that's running the surveillance program for their long-term care facilities at all. People have reached out to us and asked us how we are doing it.

Our surveillance program's been phenomenal. We've had great success with it. I think that surveillance program is responsible for -- or at least partially responsible for the reduction in the outbreaks that we've had in long-term care, for sure.

But as we look at the data, it informs our decisions. And we've talked about this. The Governor's talked about it several times. We look at the data. And I'll give you a for example. For example, our surveillance program tests 10% of residents in the facility. The vast majority, if not 100% of our early positive test results come out of Staff and hardly any have come out of residents. So we are unnecessarily putting the residents through that process when we're not getting the results from that testing.

So really moving to the facilities are going to be testing every single week, random samples, and then 100% all PCR, we're letting them use their antigen machines that they were provided by the Federal Government. They can use those to supplement. They can use those for any symptomatic people that are in the facility. I think there is a lot of different options they have to make sure that we are testing at a level that is sufficient to keep our residents safe in long-term care facilities.

Governor Sununu:

That's great. And am I wrong? I think the Federal Government says that your long-term care facilities should have sentinel testing about once a month, at our rate. It's about once a month. But I think, in actuality, we do multiple times that rate of testing. Once every 10 days, we're testing.

I mean, I got to tell you. When it comes to testing, other States are asking us how we're doing it. When it comes to getting PPE, other States are asking us how we're doing it. When it comes to financially supporting our Providers, as one of the questions earlier -- long-term care, Doctors, Main Street Relief Fund, contact tracing, what Beth Daly and her team has done with contact tracing -- we're rocking it. And the people of the State should be very proud of what we're doing.

It's pretty awesome when all these other States call you to figure out what the magic formula is. And we're happy to share, right? We're always happy to share how we're doing it. And hopefully those other States can replicate some of our successes.

Governor, with regards to the general elections, last week the Town Clerk's Association sent a letter to you asking to consider relaxing some of what they're able to do prior to election day with these absentee ballots, to make more notations so that the job will be easier on November 3rd. Obviously, we're going to have maybe two to three times the number of absentee ballots in November than we had in September. Are you considering that request?

Governor Sununu:

Yes, absolutely. So, the question's about the request from some of the Town Clerks about allowing a couple additional steps in terms of handling absentee ballots. One of the things, just to give -- if everyone can bear with me, take a step back. Knowing that we were going to get a lot of absentee ballots during the primary, which went off very, very well, I think, as everyone can understand, we allowed them to open the outer envelope a little earlier and I think we even allowed them to do it a little earlier in terms of the timeframe, without actually opening the ballot, itself.

To your point, and it's a very good point, Kevin, that we will likely get two or three times the number of absentees in the general election as we got in the primary, and we have full confidence it can be handled. But the volume's just going to be greater. So you're going to have a lot more ballots coming in. You still have one day to get the count in.

So I'm very open to the idea of providing some of that flexibility. I know we've been talking to the Secretary of State and the Attorney General to see exactly what's being requested, what some of the pros and cons of that might be.

I really try to defer to the Secretary of State. We have, again, one of the best Secretary of States in the country, when it comes to integrity around elections. And so, we will defer to their office. But we are working with them to see if there are some flexibilities we can provide, while keeping the integrity of the election and ensuring that the results can be achieved that night. Paula, sorry, and then I'll come to you.

Ski areas, ski industry, you'll also be getting guidance on your desk relative to the winter. And it looks like you're going to get to buy your ticket online at home. You're going to get to put your ski boots on in your car. You're going to actually eat your lunch in your car. The idea is to direct people sort of away from the lodges, as the guidance is coming out, and to try to maintain outdoor facilities. The fact that your family owns a ski area in New Hampshire, do you need to distance yourself from that? Or do you feel that you can comfortably weigh-in on guidance?

Governor Sununu:

No, I mean, look, I'm going to weigh-in on all the guidance across the State. I'll say that I believe this guidance was put together with the Ski New Hampshire. And there were a couple folks within that industry that I think took the lead.

To your point, I think buying tickets online, which I think most you can do now; some places might have certain stipulations for season-pass holders or those who use tickets midweek to weekend. But again, that's going to be on the ski resorts.

I think what they're putting forward is really how to manage those indoor facilities, the lodges, especially, knowing how crowded a lodge can be, the turnover that you'd like to see, how you handle food service. And it's my understanding that they do want to see some activity in the lodges. You really have

to in some way. You can have a freezing cold day. You want to be able to allow folks to at least come in, if their kids are getting frostbite or something like that. So you have to have some sort of stipulation, but probably with a limited capacity.

And so, I haven't looked at the guidance that they've put forward. I'll review it with Dr. Chan, like we do with everything. And again, like most of the guidance documents, it's being put together by the leaders of that industry and our Department of Public Health. And we will just make sure that whatever they're looking to do, it can be done in a health and safe way. It doesn't necessary -- I just want to be clear. You don't necessarily have to eat your lunch in your car.

Yeah, it's not required.

Governor Sununu:

Yeah, not required.

It'll probably be more likely that that would be your experience of the day.

Governor Sununu:

Maybe, yeah.

You're going to have food trucks outside so you could buy food. But you might want to go back to your car and sit there and eat it. Or maybe you should start building little benches all over the mountainside.

Governor Sununu:

I can tell you. I've talked to a few of the folks in the industry, not at Waterville Valley but some of the other folks in the industry that have been working to expand their outdoor seating with heaters, heating lamps, and things of that nature, just to expand that outdoor seating capacity and experience. So, I think that the lodges, themselves, and the ski areas, themselves, are trying to be innovative in how to manage it, knowing that there will be a limited number of people that can probably use those services. And if there is going to be food service, make it grab-and-go, things of that nature. So, I have not seen the guidance document, though. But, like anyone, I'm obviously going to take a look. I really don't have any association with Waterville Valley anymore.

Governor, you said on Good Morning America, you wouldn't fill the Supreme Court seat that's open here in New Hampshire, because it would just get too political friction. Do you think Republicans in the U.S. Senate should do the same thing?

Governor Sununu:

I apologize. Do I think Republicans in the U.S. Senate should not?

Do you think they should...

Governor Sununu:

I got to tell you. I'm going to take a bit of a 30,000-foot perspective on this. And I think it's the perspective that everyone in America has. Whatever it is, the rules have to be followed. It has to be constitutional. And most importantly, it has to be civil. It really is so critical. Washington has not done a very good job of that.

So it's my understanding the President will make a nomination. And then the Senate really has to find a way to come together and not make this completely partisan. I mean, here's the ultimate hypocrisy, right? Four years ago, you had all the Republicans saying that we should wait and all the Democrats saying, you got to go forward with the nomination. And four years later, because the politics are different, everyone has a completely different opinion.

The American public sees right through that. And speaking as part of the American public, that's frustrating, right? There are rules. There's a process. But get together. Find a way to get it done and get it done the right way.

And whoever this nomination is, I mean, if the Nominee is not qualified or shouldn't be approved, then don't vote for that person. But do it on qualifications, not on politics. Do it on the merits of that individual and not just because your Political Party thinks it'll be better.

I got to tell you. They're talking about packing the courts next year if this individual gets through and all of that. I don't think anyone in America wants to see that. Just because it doesn't work out politically for you, doesn't mean you go and change all the rules around the process. And so, that, in itself, is creating a bigger divide and a bigger polarization.

I think over the next six weeks, Washington has an incredible opportunity not to blow it. And if they were to come together, I think people in America would stand up and cheer, and have a lot more confidence in the system and a lot more faith, I guess, at least, at a national level that folks really are listening to what they want.

I want what everyone else in America wants: civility and everyone coming together finding common ground. You can't get everything you want. If the Bill doesn't have enough money in it, it doesn't mean you necessarily kill the Bill. It means maybe you come back and try again. You got to find a middle ground.

I think we do a great job of it here in New Hampshire. I really do. I know that the process here with our Executive Council, I said long ago it got very politicized. And I don't think anybody wants to see that fight. It would just get uglier and uglier, and uglier. And I've had individuals come to me and say, Governor, I know you're considering me for a nomination to be a Judge. Please don't put my name forward. I don't want to be part of that Executive Council process, because of the politics that they were playing.

And I don't want politics to be put in. I've never asked a Judge what their political background is. I just don't do that. I don't believe in litmus tests like that. I don't think it should be single-issue litmus tests, or because you're Republican or because you're Democrat, we nominate you or don't. I've nominated Republicans. I've nominated Democrats. I nominate the people best for the job. I think, again, we kind of set a gold example here. I hope Washington takes a page out of our playbook, I suppose.

Okay. So we're all set on the phone. Anything else here? Well, great. Well, thanks, everyone, for joining us today. I'm sorry it went just a little bit long, a lot of good and exciting stuff. We will be back

next week. Stay safe. It should be great weather. So there's still another great weekend, to be sure, before even the leaves turn. I think we will have a lot of folks up in the north country out and about.

So whatever we do, let's just be safe. Wear your masks. Maintain social distancing. And if we do that, our numbers are going to stay low. Our economy will stay flexible. And I think we can keep bringing a lot of success through the end of the year. Thank you, guys, very much.