



## Office of Governor Christopher T. Sununu Press Conference Thursday, November 5, 2020 at 3:00 p.m.

### Governor Sununu:

Afternoon, everybody. Good? I'm getting waved off in the back. Governor, don't say anything. Well, good afternoon, everybody. Thanks, everyone, for joining us on our weekly update. It's obviously very good to be here.

I just want to make a couple of brief comments and then I'm going to turn it over for a Public Health update. But, here, in New Hampshire, I think a big thanks to Secretary of State Bill Gardner and his entire Team, Attorney General Gordon MacDonald and the entire Team at the Department of Justice, our Town Clerks, our Moderators, Supervisors of the Checklists. So many folks really came together to make sure that our elections in New Hampshire went off without a hitch. And they did. And it was a great night. And given all the extra absentee ballots, the PPE provisions, all the different pieces in place, I want to kick things off by first saying thank you to all of them for making sure that we really remain an impeccable standard for the rest of the country, frankly. Job well done to all involved.

And I think we can all agree that we would like to know the winner, especially on the national election. But the race, as of right now, is clearly too close to call and neither side should obviously be declaring victory prematurely.

And while New Hampshire does it right, I don't know the voting processes and laws in other States, except to say that all ballots that were cast in accordance with those State Laws have to be counted. And without question, it may take a little time. But that's their process. And so, we just hope that all the individual States follow their process, stay true to it. And with a little luck, we will have a winner on the national level shortly. With that, I'll just kick it over to Dr. Chan for a Public Health update.

### Dr. Chan:

Great, thank you very much. And good afternoon. We have a brief Public Health update for the numbers. So, we are announcing 252 new people diagnosed with COVID-19 in New Hampshire. 204 of these are testified positive by PCR. And 48 testified positive by antigen.

Just a quick note about the high numbers for today, there was an issue with the automated electronic laboratory reporting at one of the National Reference Laboratories a couple days ago. So actually approximately about 50 of these new infections that we're announcing today should have been reported in yesterday's numbers. So the actual number of new infections today is probably closer to about 200.

Still, in the last week, we have averaged around 150 new infections per day statewide. Currently, there are 1,546 people with active infection. And the 14-day statewide rate of new infections is at 123 per 100,000 population. The PCR test positivity rate is 1.8%.

And regarding hospitalizations, there's one new person hospitalized with COVID-19 that we are announcing today, and 44 people currently hospitalized statewide in our hospitals with COVID-19 in New

Hampshire. Sadly, there are two new people that we're announcing today that have died of COVID-19. Neither of these individuals is associated with a long-term care facility. And unfortunately, the total number of deaths related to COVID-19 currently stands at 486.

We continue to see increasing community transmission throughout the State in all areas of the State. There are now seven different counties that are at a substantial level of community transmission, including the counties of Coos, Grafton, Belknap, Strafford, Merrimack, Rockingham, and Hillsborough Counties, which includes the Cities of Manchester and Nashua. And the remaining three counties in the State -- Carroll, Sullivan, and Cheshire -- are at a moderate level of community transmission.

We know that as community transmission increases, the risk to people, schools, businesses form COVID-19 is also going to increase. And the primary means by which we have to control spread of this virus and to protect ourselves, and our families, and our communities continues to be the community mitigation measures that we continue to stress and emphasize. And with that, I will hand things over to the Commissioner. Thanks.

### **Commissioner Shibinette:**

Good afternoon. Just a quick long-term care update; we are opening two new outbreaks today: one at St. Anne's in Dover, who has eight residents, seven Staff, for a total of 15; and Woodlawn Care Center in Newport, with eight residents and three Staff for a total of 11. We're also announcing an outbreak at Mount Prospect Academy, which is a residential program for youth in Plymouth that have nine residents and 11 Staff, for a total of 20. That's all I have to report.

### **Governor Sununu:**

Great, thank you very much, Dr. Chan and Commissioner. Obviously, we're going to continue to see this rise in cases, something that we've always discussed. We've been predicting it since back in May. Just as a reminder, we do monitor this data really on an hour-by-hour basis through the incredible work of our Contact Tracing Team. What Commissioner Shibinette has been able to in terms of managing the outbreaks at long-term care facilities continues to be just fantastic.

And again, although we've seen the rise in cases, we are testing more. But we do have the hospital capacity, God forbid we should have to see that number really continue to rise at an exponential rate. We obviously just know a lot more about the virus, how it moves. We have more resources at-hand.

And so, given the guidance documents we've put into place, we definitely will continue to work with those industries to be very specific about where we can go, restrictions and all, and things of that nature. But right now, even though the numbers continue to rise, we're very confident and we feel like this is something that can and will be managed.

But, again, a reminder to everybody that we all have to take that personal responsibility, wearing masks, social distancing. I would ask everyone to be on the extra cautious side when making their plans for the holidays or Thanksgiving, whatever might be coming up.

Couple quick updates on CARES Act funds, as we kind of get towards the end of the year. The CARES Act money all has to be officially spent by December 31st. And so, the ability to not just create funds but really kind of finish up these final funds is really what a lot of us are focusing on now, because that's the opportunity to get this money out into the communities, really where it belongs and can do the most good.

We obviously have heard from businesses on the Main Street Relief Fund, the success fund. As a kind of an update, we did Main Street Relief 2.0. I think we had just over 4,000 total applications. Many of those weren't eligible for certain reasons. Maybe they were a brand-new business. You had to be in business for at least a year. Or they may have been really based out-of-state. And out-of-state businesses obviously can't apply.

So when you kind of pull out those that were truly eligible, still about 3,000 businesses that applied were eligible. Those kind of move onto the next step, where there's a bit of an analysis in terms of what the need is. And then, a formula's created. And hopefully we will start getting those relief funds out very, very shortly.

But I think the important point is there's about 3,000 businesses. Some are new into the fund, and some actually have also applied through Main Street Relief part 1. And there'll be a two-phased process, in terms of how the relief is administered. Those that are new kind of get first bite at the apple, if you will. And then, any remaining funds waterfall down into those who have already received some awards at some time. So we're just glad to see that it is working.

I want to talk a little bit about housing. I heard from some folks earlier this week just asking us to remind folks of the housing relief programs that are out there. As a reminder, earlier this summer, we did allocate \$20 million in initial funding for housing relief program which was designed to keep people from losing their housing and just to be able to secure permanent housing, specifically through the COVID crisis.

Households unable, I should say, to pay rent due to the COVID-related issues are eligible for these funds. The funds are still open. And we want folks to apply as soon as possible, not wait until the CDC might lift the moratorium on evictions. Just because there's a moratorium, doesn't mean, A, that landlords aren't still due their rent and their payment. That moratorium may be lifted. But if it's after December 31st, these funds cannot be applied. So we would very strongly encourage both the renters, themselves, and the landlords to take advantage of the fund.

To-date about 2100 people have applied and received funds totaling about \$5.6 million. So there's still a lot of financial opportunity out there for renters. It's a very, very easy program to work through. So if you are either assisting individuals with housing concerns, maybe you're a Case Manager or a Service Provider, Staff in a City or Town's Public Assistance Offices, please encourage folks to go through their CAP Agencies so that they can apply for the funds. Or you can even come directly to our website, which is [goferr.nh.gov\apply](http://goferr.nh.gov\apply). That's where all the funds are.

But this is the housing relief fund, in particular, with over \$15 million still available for folks to help them pay both forward rent and back rent, as well, so even if there's back rent due. And landlords can work with their renters directly to make sure those applications are processed. It's really one of the ways we're trying to assist landlords in making sure that they're part of the relief efforts, as we move forward.

Finally, one additional item and then we will open it up for questions, is around school funding. We announced a few weeks ago that the State is opening up additional school funding for school districts, up to \$200 per pupil, once the districts apply for and receive what we call their FSR (ph) funds. To-date, about 75% of school districts have fully budgeted for their FSR funds, and that does make them eligible for this \$200 for pupil award. And that equates to about \$25 million extra that will be going to school districts with likely more, as additional school districts become fully budgeted.

So there's a few, maybe a couple dozen districts we're working with. They have until tomorrow -- That's why we're talking about it today -- until tomorrow to get their final budget into the Department of

Education through that process so that they, too, can apply for that \$200 per pupil. You cannot receive that award unless you fully expend and budget for all of your FSR funds. So you have to -- it's a stepwise process.

And a couple dozen-or-so districts that have yet to provide their paperwork, we're trying to work with them as closely as we can, one-on-one, making phone calls so that they can -- we just don't want to see districts leave money on the table. We want to make sure that everyone can participate. We created this as an opportunity for cities and towns, schools, kids, the taxpayers that get to benefit from this, frankly, from offsetting other taxpayer burdens that might come on the local property tax level. So we're just really encouraging folks to get their paperwork in, in the next 24 hours, so that this additional school funding dollars can go to exactly where it's needed. I guess, with that, we can just open it up for questions. Hi, afternoon.

## **Q&A Session**

*Governor, good afternoon to you. This is kind of a two-part question for both Dr. Chan and for you. What do you think is behind the spike in numbers that we're seeing right now? And is there anything in particular we can do beyond what we know about guidelines? And given that, is the State considering or reviewing any of our current guidelines, considering any further restrictions, whether on travel or businesses opening or closing?*

### **Governor Sununu:**

Yeah, so I'll kind of take the first part and then I'll have Dr. Chan kind of fill in the blanks, if you will. So let's talk. I'll kind of jump into the last part of your question first, in terms of the guidance and guidance documents.

So, our Reopen New Hampshire Committee continues to meet with stakeholders, working with Public Health, looking at our numbers. They're the ones that really help design and kind of do that first step on the guidance documents. And they're always bringing recommendations, but not just to open things up, but also where to potentially find better structure around where there could be a direct outbreak, and industry-specific issue that might be sparking up.

And so, the fact that our contact tracing is so specific allows us to be very, I'll use the word "surgical", if you will, very precise about where we can, I think, tighten things up or just create more opportunity. The best example to-date was probably hockey, right? We said, okay, well, we could see a lot of outbreaks, specifically in that industry. So we looked at the guidance documents there, pulled back a little bit, took a pause, reworked the guidance documents, and, again, kind of rereleased them. Get their season going again in the hopes of allowing that to continue in a safe and healthy way for the kids and the parents, and all those that are involved.

In terms of the numbers going up, there's a variety of reasons for that. It's everything from it's the fall. We always talk about in the fall the flu, the cold, COVID. The viral spread is just going to move a little faster and more aggressively in the fall, as our immune systems become a little more suppressed. I'm always very serious when I say, look. Look at whether it's taking additional doses of Vitamin D, or Vitamin C, or whatever, Zinc, I mean, all those things that help boost our immune systems during these kind of smaller -- or colder and shorter days part of the year, when you don't get that much sunlight. We're not out as much.

Obviously, as we go indoors more, we're just spending so much more time indoors. That clearly is playing a factor. The fact that schools and universities, and just there are more gatherings for one reason or another. And again, that's why we're constantly telling people, wear their mask. Maintain the social distancing. Wash your hands, good hand hygiene, most important tools that we have in the toolbox for all of this. And we're going to keep that at an elevated level.

As we move forward, I can say if we were -- because we can be so precise, we can be very precise not just as an industry, or a school, or whatever it might be, but we can also be precise by a region, right, if we see numbers spiking up aggressively in Hillsborough or Rockingham, or one county or the other. If we had to take additional steps, we can also, I think, because we just know more, have more tools in the toolbox, as I always say, we can be more precise regionally about any additional measures that we may take.

I think, at this time, we're always looking. We're always reviewing everything, in terms of when the numbers come in, in the morning. I take a look at it. I work with my Staff. We work with Public Health a bit in terms of where the numbers came from, if there are patterns, if there is history from -- are they mostly long-term care facility-based? Are there congregate setting -- additional congregate settings? Are they in the schools? Are they in the universities?

Contact tracing does a tremendous job of really outlining for us internally where all those numbers are. And if there are patterns and numbers building up beyond what we think is manageable or expected, then, of course, we can take additional action there.

But that's my long way of saying hat's off to our Team for being so good about being able to follow up with a lot of this, getting us the data so we can see those potential trends and anomalies, in terms of what was expected. But I'll turn it over to Dr. Chan.

### **Dr. Chan:**

Yeah, thank you for that question. And let me say that we know how this virus spreads. And we know how to prevent this virus from spreading, right? We still believe that this virus primarily is transmitted between people through close contact to a person's respiratory droplets.

And so, what we have seen over the course of this pandemic is actually the epidemiology. The risk factors have also transitioned, right? Early on in this pandemic, in March, April, May, many of the cases, many of the infections that we saw were associated with either travel or with outbreaks, particularly outbreaks at long-term care facilities.

And what we're seeing now is that the transmission and the spread of this virus has largely moved out of those facility outbreak settings and into the general community. We're seeing more people that are being identified who have been in close contact as a risk factor for contracting/acquiring COVID-19. We're seeing more introductions of COVID-19 into various settings, which is keeping our Contact Tracing Team busy.

And so, I think the bottom line is that we know that this virus spreads through close person-to-person contact. We know how to prevent it from spreading. But it requires people adhering to the social distancing recommendations, the close facemask -- or facemask recommendations.

But more than that, this is a virus that likes to take advantage of crowds, groups of people gathering in close contact in indoor spaces. And it's those settings, in particular, which are going to increasingly pose a challenge, as we enter the colder months. People are gathering indoors more. People are getting tired of the pandemic, wanting to get out and socialize, be with family and friends.

And so, it continues to be a struggle, I think, putting the message out there and having people hear that they need to continue to limit social interactions and avoid getting -- or being in situations where there are groups of people in close contact, in indoor spaces, where this virus can spread very easily. And I think that that's one of the major challenges that we're going to face, going into the winter months.

*I have a question for the Governor.*

**Governor Sununu:**

Yeah.

*Good afternoon and congratulations on your win.*

**Governor Sununu:**

Hi, how are you? Thank you.

*I'd like to talk to you about the impact of Massachusetts changing their activity levels, as of this weekend, and also Vermont and its decisions, relative to their ski season. Right now, if we had snow and we could ski, no one in New Hampshire could go to Vermont to ski, nor anyone in Massachusetts or Connecticut, or New York. Those people would be funneled, perhaps, to New Hampshire, in the same way that Massachusetts folks may decide to come up here on the weekends, because they can't go do things. Has that been factored in more toward the winter and long-term impacts on how you might change our regulations?*

**Governor Sununu:**

Sure, so I can't speak completely to Vermont. They have their own system over there. It is a county-by-county system where they look at the external counties outside of Vermont, look at the rate of infection, and then determine whether a travel measure is -- a ban should be put into effect or not.

Right now, we're just taking kind of New England as a whole, trying to appreciate the regional aspect, frankly the centralization that New Hampshire plays. We have so many folks, whether it be for work, or family, whatever it might be, that are crossing back-and-forth over the borders.

So right now, we're not looking to implement a system on the same way Vermont does. It's just a very different system. I'm not criticizing it at all. It's just the way they're doing it, versus how we're looking at it. We will continue to look at the data and look at the numbers.

All of New England is rising. It is. Some of the southern States of New England, being Rhode Island, Connecticut, Massachusetts, are rising at definitely a slightly higher rate than New Hampshire, Maine, and Vermont.

But right now, we're kind of looking at New England, as a whole, knowing that we're on relatively the same track, relatively, for the most part. But we can make changes as we go. Like I said, we look at the numbers every single day. And we make these considerations every single day. So, what isn't in place today could be in place down the road. But right now, there's no plans for that.

*And a follow-up, the mandatory masks, if the new President is Joe Biden, he has said that he will call for a national mask mandate. How do you feel about that and whether...*

**Governor Sununu:**

I'm not sure how he would do that. Like, how would that work? Is that part of the National State of Emergency? Is he going to look for legislation? So, how they try to do that, if they were to do it, we'd obviously take a look and see.

But I'm a big believer that, in terms of handling the pandemic, relief efforts, virtually everything out of Washington, frankly, should be State-driven, right? Every State should have the flexibility, in terms of how to spend dollars, how to manage their relief efforts. That flexibility, I think, is what drives a lot of the success, because when you have a top-down, one size fits all, big Government, Washington approach, that rarely works out best for everyone.

So, I'm not sure exactly what that mask mandate -- he's talked about closing things down. He's talked about restricting the economy. I got to be honest. I think that makes a lot of people very nervous and rightly so.

But I think we still have to figure out who's President first, frankly. And then, we can kind of get to the hows and whys of what they're doing and see how it truly impacts. I just don't know what that would look like to comment on any more than that.

*But with regard to the election, Governor, how are you feeling about the prospects of another Relief Act, given what's happened on Tuesday, with all the unknowns we still have?*

**Governor Sununu:**

Well, yeah. So the question is: how do I feel about the prospects of another relief or recovery program, or stimulus package, as it were? Similar to last week, I don't think anything has changed in my thought, regardless of who is in the White House. They're going to have to work with Congress one way or the other. And I think a relief package or stimulus package is likely in early 2021.

It's after the election. Politics doesn't come into play. I would hope that that would spur some action. Obviously, I think I've been very clear about my frustration of inaction of Congress to this point. But hopefully the new Congress will have heard that message loud and clear from 50 additional Governors and move something forward, at least.

So I feel that regardless of who's in power, there's an equal chance. And I think it's a pretty good chance that there's some type of stimulus package. What it looks like and what it includes, I'm not sure. But as I was just referring, we will be making every effort in every opportunity to make it clear that we have to have flexibility.

*Two Policy questions: firstly, with numbers going up, are there any areas that you're considering pulling back or instituting more restrictions at this time like you did with hockey?*

**Governor Sununu:**

Not at this time.

*And then, winter sports, when could we see some guidance on that: basketball and related sports?*

**Governor Sununu:**

For like additional guidance that would surround -- well, right now, we do have guidance documents for youth athletics and activities. So right now, that remains in place. I suppose we could take a look if additional winter sports guidance would be necessary beyond -- we've done one for skiing. We have the hockey guidance that is in place right now.

If you're thinking your basketball and volleyball, I guess we could look to see what the data says, what those risk factors are, and any additional changes that maybe have to be implemented as part of the youth sports guidance that is already implemented. So, we can take a look at that. But there is a base guidance document currently there to allow for it.

*Do you plan to renominate the Attorney General for Supreme Court? And if so, do you have anybody in mind for the Attorney General?*

**Governor Sununu:**

So, I think I would love to go for the renomination of Gordon MacDonald to the U.S. Supreme Court -- or to the, sorry, the State Supreme Court. I think he'd be good at the U.S. Supreme Court, too, frankly. I talked to Gordon and I said, look, think about it. Obviously, I think the State would be lucky to have you.

And I got to tell you. I think it was such a brutal process last time. I think anybody would want to make sure they want to go through that process again. But I feel very confident with the new Members of the Executive Council, I think the citizens have made it clear that all that political rancor, there's no place for that. And I have a lot of confidence that the process could proceed smoothly and with the level of respect that it deserves. So, I'll be talking to him later this week and see if he's interested again.

*And also on another election that's coming up being the Secretary of State, I did hear you praise the Secretary of State in terms of how he handled the elections.*

**Governor Sununu:**

Who wouldn't praise Bill Gardner at this point? I mean, look at the rest of the country and look at New Hampshire, in terms of how we handled our elections. Who wouldn't want Bill Gardner at the helm right now? You'd be crazy not to. Sorry, I want to add my two cents. I mean, really just what a mess the rest of the country's in. It's unbelievable.

*So when the, it looks like, Republican-backed Legislature comes in, will you have any input or influence on whether he gets another term?*

**Governor Sununu:**

Well, I don't know how much influence I'll have. But I'll definitely have input. I'll just make it very clear today, tomorrow, and the next day that I think Bill Gardner has done a terrific job. If you're talking about individuals, whether it be the Governor or the Secretary of State, or whether the position might be, you got to get results, right? He's gotten results. He's gotten phenomenal results to the point where we've become such a great standard for everyone else. So, I can't imagine why you wouldn't support Bill Gardner as Secretary of State again.

*Governor, the weekly White House COVID report said the States should maybe consider rapid testing at schools. Why hasn't there been widespread surveillance testing efforts to get a good understanding, based on the amount of spread at schools?*

**Governor Sununu:**

So, I'll have Commissioner Shibinette answer that a little bit, as well. But to say that we do have the Binax cards, we make it very available for folks. We encourage everyone that wants a test to go get a test. We have over a dozen facilities across the State. So we make it incredibly available. If we would do a -- to do a surveillance program would probably be either with -- are you talking about the students or the Teachers, or both?

*Both.*

**Governor Sununu:**

Both, potentially. Something we could definitely look at down the road; right now we're focusing our surveillance program on First Responders. We continue our very aggressive sentinels and surveillance program in long-term care facilities. But that's something that we could look at, as well. I don't know if -- yeah, it's a possibility.

*Did you find anything out from the hockey data? I know you talked last about the fact that so many people in the hockey world, if you were, needed to be tested by November 6th, or this week. If they were positive, it sounded like you said you would know those hockey folks and perhaps glean some data or information from that. Anything new on that?*

**Dr. Chan:**

So the question is about any new hockey data. And there was a lot of testing that occurred because of the requirement to test -- or to be tested in order to return to hockey or any other indoor ice arena sport. So there was a lot of testing that occurred.

I don't have numbers on that now. That can be something we can try and bring back at some point. I think partly investigations are still going on. There have been additional cases associated with hockey, additional investigations of teams related to people turning up positive. But I don't have updated numbers on that for right now.

*In Massachusetts, the Governor basically blamed hockey in that State for causing the spike that they're going through. Do you share that concern, or do you think that there is a factor where these hockey incidents that went out to 24 schools -- and can you see the ripple effect on hockey?*

**Dr. Chan:**

Yeah, so I can't speak directly to what the Governor in another State said. Obviously, the numbers of infections we were seeing in people associated with hockey and ice sports was concerning. And it can go both ways, right? If there's increasing community transmission, that increasing transmission can get into different organizations and programs like hockey.

But on the flipside, if there is a particular group, or population, which we're seeing high numbers and high rates of infection, that can go the opposite way. And that can lead to further spread within communities and schools, and in businesses, because the virus can spread very easily within families. And then, parents, guardians, adults, friends can pick it up and spread it to other locations.

That's part of the reason why, even if somebody is not concerned with their own individual health, in terms of they're not concerned about getting infected with COVID-19, themselves, they can go on and spread it to other people in the community who may be more vulnerable, who might end up in the hospital, who might end up even dying from COVID-19. Somebody with COVID-19 can spread to a number of other people, leading to increasing community transmission.

So it's hard to say whether the number of infections in hockey, for example, was a symptom of what was going on in the broader community, or fueled -- helped to fuel some of the community transmission. Likely, it was some of both.

*Dr. Chan, if we saw output regarding with hockey, how it could go into schools, community transmission, etc., how should families, schools, and youth programs, how should they all be kind of approaching this, as we get deeper into winter months? And how do you kind of balance being open while also taking precautions?*

**Dr. Chan:**

Yeah, so I think there's responsibility on the part of the individual and the families. And there's also responsibility on the part of the businesses and the organizations, right? There's guidance out there that we have created for hockey, for other sports, for schools, for all different types of businesses. And we want people to continue to review that and adhere to that guidance, because that is still in play. That is still the guidance that is going to help us prevent and control COVID-19 from spreading.

At an individual level, I think each person, each family needs to make decisions on their own tolerance of risk and whether, for example, playing in a sport is acceptable. But, at the end of the day, we know that this virus spreads very easily when there are groups of people in close contact to one another. And so, there are some activities that are inherently more risky.

And so, we continue to stress the fact that people need to adhere to social distancing, need to try and avoid those group settings to the extent possible, be wearing facemasks. Hopefully, the businesses and the organizations are adhering to the guidance to help build in processes to do that with whether it's sports, or schools, or businesses.

And then, there's testing. We have made testing widely available. And so, if people are having any symptoms of COVID-19, we do ask that they go and get tested for early and rapid identification of COVID-19.

*Maybe another quick question for you, but also for Commissioner Shibinette; I'd like to get an update on what is happening in Coos County and particular Colebrook. A week ago, there were no cases in Colebrook. And it seems that it has spiked very dramatically. And I'm particularly interested in hearing what the story is at the hospital, the Coos County Nursing Hospital. And do you have any contact tracing information on how that fire got lit?*

**Dr. Chan:**

Well, so maybe I'll start and see if the Commissioner wants to add anything to it. I don't have a lot of details at the moment. What I will say, speaking very generally, is that in the first wave of this pandemic, back in April and May, the majority of the transmission and the infection was seen in the southern tier of the State. So it's sort of the southern and southeastern counties.

But we know that this is a virus that can impact even more rural, less population-dense communities. And I think that's partly what we're seeing in the North Country, Coos County and other more rural counties, is that once this virus takes a hold in certain locations, it can spread very, very easily, especially in settings where people may be gathered in crowds, when there's close contact.

And so, it's not necessarily surprising that all areas of the State are seeing increasing spread of COVID-19. But it is unfortunate. And we do need to have increased vigilance to this and be adhering to the community mitigation measures, no matter where you are in the State.

**Commissioner Shibinette:**

Thanks for the question. So Coos County right now, we've been watching the data and where the cases are coming from, in general. And there's not one specific area that is responsible for kind of the crop-up of these cases in Coos County. We see a couple from -- the Federal Prison had a couple of cases. We've seen some restaurants and bars, things like that, have trickles of cases here-and-there. Coos County Nursing Home or the Hospital up there, and that is one of the two Coos County Nursing Homes in the North Country.

So not one area that's responsible for all these cases we're seeing. As Dr. Chan has said, when you see increasing community transmission, it's going to touch various areas of the community: the nursing homes, the restaurants, the Prison that's up there. And that's exactly what we're seeing.

*But do you think, Commissioner, just to follow up on that, is that the new normal for the balance of the winter, do you think? In other words, for so long, this virus was heavily concentrated in Hillsborough and Rockingham Counties. And obviously now, it's not. Could this be temporary and we go back to it being dominant in Hillsborough and Rockingham County? Or is this kind of the course?*

**Commissioner Shibinette:**

It could have been that it just took longer to get through the Notch, right? But, no, I don't think that it's temporary. I think that what we have found is that once it becomes seeded in the community, that it's very difficult to reduce that community transmission back to nonexistent, which is what Coos County was up until a couple weeks ago.

You're always going to see higher rates in our population at areas, which is Hillsborough and Rockingham County. I think you will always see them with a higher rate of transmission than our really rural counties.

But, it can get in, in a pocket, whether it's through a business, or a nursing home, a school, wherever it may be. And it spreads from there. So I don't think this is a blip. I think that we're seeing substantial community transmission in a lot of our communities now, both rural and population centers. And I think that is probably what we expect to see through fall/early winter, until we have a vaccination come through.

**Governor Sununu:**

Do we have some questions on the phone?

**Holly Ramer with the Associated Press:**

*Hi, thank you. I was wondering if there's any update on whether any of our positive cases have been tracked back to President Trump's most recent rally about a week and a half ago.*

**Governor Sununu:**

No, no. Oh, that was it? Okay. Sorry, I thought there was a follow-up. Thanks, Holly.

**Donna Jordan with The Colebrook Chronicle:**

*Yes, good afternoon. Thank you. So needless to say, we're kind of busy up this way, as you guys have all been talking about. So I have three questions for you. The first question just real quick, Governor, I had asked you last week, when you were here visiting: do we know when the Live Performance Venue Grants will be announced? I haven't heard yet. And just in the interest of transparency, I am one of the Applicants for our local arts organization. But we have several arts groups here that are wondering when that information might be available. Second question: I have been talking this week with what is called our North Country Healthcare Incident Command Team. And they say that they consider the current wave of cases in Coos County as being our first wave, while other parts of the State and country are seeing what they called the second or even third wave. The Colebrook Hospital had been conducting about 10 tests per day over the last few months. But over the past two weeks, using both the rapid tests and the PCR tests, they have been doing 50 to 60 tests per day. As of yesterday, we had 27 positive cases just in Colebrook, 6 in Clarksville, 11 in Stewartstown, and several smaller numbers in surrounding towns, around 50-or-so total cases. What determines the point in time that a positive case is removed from the current case count, because they're no longer considered positive? Do they need a follow-up negative test? Or do you automatically remove those numbers at a certain point in time? And my last question, of course, is surrounding the nursing hospital in West Stewartstown, which is different than the nursing home, which is in Berlin. At the nursing hospital, last*

*night they were reporting 13 positive Employees and 4 residents. And those are tests just from the last four days at a facility that needs every Employee that it could possibly get. And the four residents have been moved into quarantine. And I know you kind of spoke to this, Dr. Chan, about how the spread has moved out of the long-term care facilities and into the communities. But it's been months now that we've known everyone goes into a long-term care facility wearing a mask, if they're even allowed in. All of these months later, all of a sudden, there's an outbreak when strictly everyone is wearing a mask and washing their hands, and that sort of thing. How could this outbreak have happened there so suddenly? And will this facility be announced at some point in time as an outbreak? Thank you.*

**Governor Sununu:**

Sure, so I'll take number 1 and a little bit of number 3. And I'll have Dr. Shibinette [sic] talk about when is a positive not a positive. So the Live Performance Grants will go out today. I believe they're being announced today. So at least the announcement will come today and then kind of the grants actually follow along hopefully very, very shortly.

The third question, was really about, I think, two things. You have a lot of Staff in some these -- in already facilities that are short-staffed in some cases, where we are detecting COVID. So, one thing I want to add there is we do have some opportunities at the State level to help with some of the flex in staffing. We have Contracts with individual Staffing Agencies that could help with the healthcare staffing, if needed.

And while everybody that does go into these facilities is required and I believe is wearing a mask, and doing what they can do to keep themselves and the patients and Staff safe, remember that the Staff goes home. And they go grocery shopping. And they can interact with the community just like everybody else.

A mask isn't an iron shield, by any means. It definitely reduces the ability for someone to both transmit and, at some level, even receive the virus. But it's really about all the other community interactions that those Staff may have throughout the course of their day, their normal lives, on the weekend, whatever it might be. And unfortunately, if one of those individuals gets infected, maybe it's through someone going to school, maybe it's just getting close contact with a family member, whatever it might be, they can inadvertently, especially if they're asymptomatic, bring that back into the facility. And then, it goes from there.

Long-term care facilities and long-term care works, the Staff, you cannot say enough about what they do, the incredible hours that they put in, the risks that they are taking, the very close interaction that they just have to have with their patients at sometimes hours on-end. They are really one-on-one, hands-on in terms of providing a lot of assistance to these individuals on all different types of facilities, whether it's a nursing home, whether it's assisted living, or long-term care. They really do amazing work there.

And so, unfortunately, the ability for the virus to be transmitted in those types of settings is quite high. The risk is definitely quite high. I'll ask Dr. Chan -- or Dr. Shibinette [sic], Commissioner Chan [sic], however you want to put it to talk about it.

**Dr. Chan:**

So, let's see. I think your first question for me was about when somebody is taken off the active case list, right? So we report the numbers in a variety of different ways. And one of the numbers that we report out and that I reported out even this afternoon was the number of active infections statewide. And that number currently stands at 1,546. But that's one of the ways that we report out the numbers.

And somebody's considered an active infection, or an active case, in epidemiology terms, for as long as they are on isolation and considered infectious. So for most people, they come off that active infection list after about 10 days, because those are the guidelines that we currently adhere to, both in New Hampshire and at a national level for when somebody can come off isolation and they're no longer considered infectious, after being diagnosed with COVID-19. It's 10 days after the start of their symptoms, or 10 days after their positive test, if they're found to be asymptomatic, meaning without symptoms. So it's about 10 days that somebody is on the active infection list, so to speak.

Regarding your other question about long-term care facilities, I think this has been a very challenging virus to control. We know that a large percentage, or a large proportion, of people who are infected will not have symptoms, at least not have symptoms right away, but can still spread the virus.

And so, we have to look at how we implement multiple layers of protection to try and prevent this virus from being implemented into a facility, like a long-term care facility. That includes active screening of residents and Staff coming in, and testing people aggressively, and making sure people are wearing masks, and trying to maintain social distancing and good hand hygiene, and cleaning, and disinfection. All of those are individual layers that can add to and help prevent this virus from being introduced and then spreading within a facility.

But there are no guarantees. Even when we implement aggressive testing strategies like we have, historically, and continue to do at the long-term care facilities, a test is only a single snapshot or a point in time. So somebody can test negative. Later that week, could come down with COVID-19 or be infected, and then bring it into a facility and spread it.

So we continue to work with long-term care facilities and other congregate living settings, and schools, and other high-risk settings to try and prevent COVID-19 from being introduced and then spread within a facility, or within a community. But there are no guarantees. And I think that this virus has shown the impact that it can have on these more vulnerable populations. And we continue to work and strive to protect the more vulnerable individuals in our population.

I will say that thankfully the number of people becoming infected from COVID-19 in long-term care facilities is dramatically down. But the virus is still out there. It's still circulating in our communities. It's increasing spread in our communities and that's going to put increased risk to individuals and families, and communities, and businesses, like long-term care facilities.

**Rick Green with The Laconia Daily Sun:**

*Two-part question: Mayors from every New Hampshire city sent you a letter today asking for help with homelessness, which has become worse during the pandemic. They asked for creation of a State Panel, similar to your Commission on Alcohol and Drugs. What support will you provide on this issue? And part 2: Dr. Chan mentioned Contact Tracers have been busy investigating community transmission in various settings, aside from long-term care. What typical settings are you talking about? Do they include restaurants? Do you all personally eat indoors at restaurants?*

**Governor Sununu:**

Okay. So I'll take the first part of the question having to do with the issues of homelessness. And as we've seen, obviously, the issues of homelessness become compounded through the pandemic, as a lot of issues have, whether it's mental health, SUD, the homelessness issue.

The State has put millions and millions, and millions of dollars towards this in just the past few months. About \$3.5 million, if I can remember correctly, of additional dollars went to assist shelters to support the additional capacity needs.

I was just at a ribbon-cutting the other day for another \$2.7 million down in Nashua of, again, a new homeless shelter that is being built right there in downtown Nashua, that's going to add a lot of capacity right there. We've put \$3 million or \$4 million into expanded outreach programs, so again going out into the homeless community, making sure they know the services and opportunities that are being provided, not just in Manchester but all across the State.

You have the CAP Agencies that have assisted literally thousands of households to make sure that they can pay their rent. There's the fund to help housing relief that we were talking actually about earlier today, still millions of dollars available in that fund so folks can pay their rent and provide opportunities.

So there's no quick fix here. But the resources and the amount of money put towards the homelessness issue is absolutely unprecedented in the past year. I mean, not even close, unprecedented to a variety of communities in a variety of different ways.

Those communities obviously have to kind of operationalize that financial support. And again, it has to be a partnership. It has to be a partnership across the board. One of the best things the State can do is provide those resources. We have. We have our folks in Health and Human Services that work on a day-to-day, one-on-one basis with a lot of the Public Health Departments in the local cities and towns.

And then, to the request of the letter, then, yes, I think the Legislature -- this is something that the Legislature can take up in a variety of different ways. And so, we will kind of lean on them a little bit, as this new Legislature comes back in, because they're the best tool to create things that are long-term, lasting, and permanent. And so, we can work with them to provide some of those opportunities, as well.

So, I think we have the right tools. We're on the right path. Obviously, this is an issue that has been drastically compounded. There's a lot of money in that system. There's a lot of money in all the cities' and towns' systems, frankly. When you look at the amount of money we put into schools that offset the cost that cities and towns may have to bear because of COVID, that provide additional financial opportunities for themselves with their own property tax, their city tax dollars, that's another opportunity.

So, it comes in a variety of both direct and indirect ways. Millions and millions, and millions of dollars have been pumped into this issue over the past few months. And again, we've going to keep working with all of those local cities and towns, all the Providers and the nonprofit community as partners, as we move the ball forward. I'll ask Dr. Chan to talk about the contact tracing.

**Dr. Chan:**

Great, thanks for the question about where we have investigated for -- in our contact tracing investigations. And I think the short answer is that we've investigated people who have been in all sorts of situations and businesses around the State, because of COVID-19. That includes schools and colleges, universities, long-term care facilities, assisted living facilities, businesses, retail, manufacturing,

restaurants. Yes, there have been a number of press releases in the last month announcing the exposures at restaurants. Nonprofit organizations, churches, etc., the list goes on.

And so, we know that when community transmission increases, that's going to increase the number of people that are potentially introducing it into various businesses and organizations around the State. And that's exactly why we keep coming back to this idea of community transmission is increasing. That increases risk not only to individuals but to the communities, and to the businesses and populations within a community.

And so, people need to be taking note of what's happening in their community, because that's going to impact them. It's going to impact their school. It's going to impact their business. It's going to impact their loved one that's staying in a long-term care facility.

Regarding your question of eating within restaurants, it's all a spectrum of risk, right? Eating indoors is probably more risky than eating outdoors, which is more risky than getting takeout and eating at home. But there are steps that businesses can and should take to minimize and reduce the risk so that people can feel comfortable eating indoors in restaurants. And that goes back to the guidance that we've already put out there and the social distancing, minimizing crowds, trying to prevent groups from gathering.

A lot of the announcements that we have had to make relative to restaurant exposures have actually been related to restaurant and bars, and bar exposures. And so, that continues to be one of the higher-risk settings, where exposure can occur and where transmission has been seen, not only in New Hampshire but really around the country. Thanks.

**Tony Schinella with Patch:**

*Oh, thank you very much. Governor, I'd like to follow up on the letter from the 13 Mayors concerning the housing issue that you received. And taken from a different concept for the question a little bit, not just concerning the homeless population, which, in Concord, it's a lot of mental-health issue. It's a Veterans issue. It's substance-abuse issues. It's a myriad of factors. What many of the people in the City are telling me -- and I've done a couple of stories on it -- is that the typical concept of the family living in a car because they can't afford an apartment isn't quite accurate with the homeless population. As you've said, and as was stated in the letter, the State has got Spoke and Wheel (ph). You've got mental health. You have Riverbend. There's a lot of resources going into dealing with a lot of those issues. But is it time for an overall Commission with the State that looks at the housing, in general, for not just people who are homeless, but people who are maybe on the fringes of being homeless, who may be families who can't find -- who are accessible in the, say, \$200,000 range, but everything is in the \$350,000 range? There are zoning issues. There's schooling issues. There's funding for the schools. Many of the towns are zoning to keep families out, even though they say they don't. They're only building 55-plus housing and everything else. There's a bigger issue here than just mental health, homelessness, schools, and families. It's all kind of interconnected, don't you think?*

**Governor Sununu:**

Well, I'd like to nominate Tony Schinella for leading up the Commission on Homeless. I got to tell you, Tony, you nailed it right there in how you asked that question that really gets to the heart of the matter in many ways. And I appreciate the reporting that you have done on not just the homelessness

issue around the State and specifically in the Concord area, but how they interrelate. And I think that's an important aspect to the homelessness issue.

You have all these other silos, if you will, or what were traditionally silos that we're starting to bring together and have not just a better understanding but operationalizing some of the tools for success in terms of SUD, substance use disorder, mental health, homelessness, DCYF and abused kids, the school issue and how those property taxes come in. That's kind of like a circle over here.

So they are very much interconnected and interrelated. I'm very open. I think the idea of some sort of Commission would be great. But the thing with the Commission is I'd probably engage Commissioner Shibinette and some others that are right on the frontlines of these issues. You want to give them the right mission and the right task, not just create a study, study something, and put it in a drawer. As you know, I don't care for that too much. I like to see action at the end of something. And we need something that can move fairly quickly. So a Commission, I think, would be great.

I think this also, if I may take it a step further, I think these issues really tie into something that we've been looking at within the Department of Health and Human Services, and is again not just bringing these issues that overlap and where they overlap to the citizens, that are regional-based approach. And we always talk about having no wrong door, right? You go through a door at a Government Agency, a local Division, whatever it might be. We want to make sure that we can guide you to the path that best gets you the services and help that you need.

But taking that even a step further, you always want a No Wrong Door Policy. But it would be great in some of these if you just had one regional door, similar to what we've set up with the doorway where it was treatment and recovery, and housing, and wraparound services around the SUD issue. Taking that and expanding that a little bit for mental health, homelessness, all of these other corelating issues, so that they are community-based, so that there's a single point of contact.

And therefore, you're also bringing in all the different workers, if you will, the frontline Social Workers and whatnot that all come together that also don't just live in this silo of mental health and that silo of homelessness, that are actually interrelating, which they're doing somewhat already but at a community level. They're interacting with each other to get those full wraparound services, whatever it might be.

We do some of it now. I don't think it's at the level that it could be and should be. And I think that more regional-based approach, where we've had some success in mental health, we've had some success in the DD community, we've had some success with homelessness. But really bringing those all together so there aren't three different statewide systems that overlap one another, right? The systems don't overlap. They integrate.

And I think that's where we really need to take the approach. It's something that we're looking at now, and maybe through the next budget process, in conjunction with a Commission like this, where that's really where we take it.

I got to be honest. I haven't thought all this through and I apologize for the very long answer for the audience. But I think that's one of the largest fundamental changes we can make as a State to both find efficiencies in our system and deliver a better product for the citizens that are relying on us for those services.

**Kyle Stucker with Seacoastonline:**

*Hi, thanks. My question actually pertained to that same letter now you've been asked about a couple of times. You've answered some of the questions I had for you, but wondering if you might just elaborate on why, Governor, you believe the Legislature might be best for some of the long-term solutions that the Mayors are requesting in this letter.*

**Governor Sununu:**

So the question's why is he Legislature the best for the long-term solutions? Because the Legislature -- I don't know a better way to say this. I don't mean to be condescending -- because the Legislature is the best tool for the long-term solution, they create laws that stay into place and could potentially into perpetuity. And they can operationalize funding opportunities that can go from one budget to the other. They are in control of the actual long-term budgeting process, working with the Governor and Agency Heads, of course. But they're the tool and mechanism to do that.

An Executive Order only lasts so long, potentially. Our State of Emergency, if you're talking about COVID, has its own limitations and stipulations. Our Rules, you can do things through Rules. But I really don't think this would apply in terms of a Rules environment. And it's probably nothing for the Courts to take up. Courts are never a long-term solution. It's really up to the Legislature to change that process, because they can marry Policy with financial opportunity. I thought he had a follow-up. Sorry. Okay. Okay, great. Paula?

*Actually, I just got a text from Donna Jordan who had another question. And Commissioner Shibinette, she'd like to know, when will you announce the nursing hospital outbreak that she just outlined?*

**Commissioner Shibinette:**

So, thank you, Donna. Sorry that I didn't get to answer that question while you were on. We will announce it. I am sure that the bulk of the testing has happened over the last couple of days to the last week. So we're still in the midst of the investigation on those cases. So we will be announcing those, once we've investigated the cases at Coos County Hospital.

**Governor Sununu:**

Great, well, great. It sounds like that's it on our end. I appreciate everyone hanging in there. The goal was to get the press conference down to 30 minutes. And we failed miserably. So I apologize. I really do. I apologize. But I think all good questions and good stuff.

I have to be honest. I was in the office all day. I walked out of the office at 2:45 to come over here and it is gorgeous out. So hope everyone enjoys the weather. They say it's going to be kind of warm for the next few days. I'm sorry to all the ski resorts that were hoping to make snow. That's probably not going to happen.

But let's get outside and enjoy the nice weather as much as we can, because winter is coming in a variety of different ways, both literally and metaphorically. We're going to be in the COVID pandemic for quite a while and we have to appreciate that. It didn't go away because of the election. It's not going to

go away on January 1st, because it's 2021. This is something, even with a vaccine, we're going to be in for a little while longer.

But hat's off to the entire Team. They keep knocking it out of the park in terms of management and creating opportunities, while finding that balance with the economy and our low COVID numbers. So we will keep at it. Thank you, guys. Appreciate it.