



Office of Governor Christopher T. Sununu  
Press Conference  
Thursday, January 14, 2021 at 3:00 p.m.

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**Governor Sununu:**

Well, good afternoon. Nice to see everybody. Thank you for joining us. We have a bit of a presentation today talking about the rollout of the vaccine, in particular. There's a lot of things, actually. So, we will get to that. But first, let's start with a Public Health update from Dr. Chan.

**Dr. Chan:**

Thank you, Governor, and good afternoon. So, a couple of updates in the numbers update, and then some comments about some new quarantine updated recommendations that we have. So, in terms of the numbers, we are announcing 706 new people diagnosed with COVID-19 today. 518 of these people tested positive by PCR. And 188 tested positive with antigen testing.

In the last week, we continue to average about 750 to 800 new infections per day statewide. This number has been stable for the last several weeks. And currently, statewide, there are 6,728 people with active infection.

Our test-positivity rate is averaging about 7.7% over the last week. This is down from 8.7% last week. So that's some good news. And then, statewide, there are currently 270 people hospitalized with COVID-19 across our State. This number is also down now below 300 for the last 2 or 3 days.

Sadly, there are 12 new people we are announcing that have died from COVID-19, bringing the total to 897 total people that have died from COVID-19 during this pandemic. 9 out of those 12 individuals are people associated with long-term care facilities. And in the last week, there have been a total of 70 people that have died from COVID-19 in our State. So we're average about 10 people per day dying from COVID-19.

In terms of some updated guidance we have, we did release a Health Alert Network message earlier this week to our Healthcare Providers and Public Health Partners making the announcement that we are no longer recommending or requiring quarantine, after an exposure, or travel-related risk factor, for people who are fully vaccinated against COVID-19.

Now, full vaccination means that someone has received two doses of one of the currently available COVID-19 vaccines and is 14 days beyond their second dose. So, these individuals who are fully vaccinated are no longer required to quarantine after a close-contact exposure or travel-related risk factor.

Similarly, we are no longer recommending or requiring quarantine for people who have previously been diagnosed with COVID-19, either through PCR- or antigen-based testing, in the prior 90 days. Now, this does not apply to people who are clinically diagnosed, based on symptoms alone. And it does not apply to people who might have had an antibody test looking for antibodies, because antibody testing does not give an indication for when somebody might have been infected. But, for somebody that

is diagnosed by antigen- or PCR-based tests with COVID-19 in the prior 90 days, those individuals also are no longer required to quarantine after an exposure or travel-related risk factor.

Now, this is not a free pass to travel, nor is it a free pass to relax restrictions. And we continue to recommend against any nonessential travel. In fact, the CDC is currently -- or this week released some additional guidance for international travel, given some of the new circulating variants, or strains, of the virus that are being seen globally. So there continue to be recommendations around restricting nonessential travel.

And people need to continue to follow all of the other mitigation guidance, including avoiding social and group gatherings, practicing social distancing, wearing facemasks whenever people are out of the home and in public places, and continuing with all the other layers of protection we have recommended. All of this guidance continues to apply to people who might be fully vaccinated or previously infected.

The reason for this is because we know that no vaccine is 100%. We're still learning about how long protection lasts after somebody's vaccinated. In fact, vaccine studies are currently being undertaken to try and quantify how effective vaccines are at preventing asymptomatic spread or transmission. And as I mentioned, there are new variants, or strains, of concern that are circulating globally.

And so, while we relax the quarantine requirements for certain individuals who are fully vaccinated, or previously infected, we continue to need to take a multilayered approach to preventing spread of COVID-19 and still emphasizing the need for people to avoid nonessential travel, avoid the social and group gatherings, practice social distancing, and wear facemasks whenever out of the home and in public places. We're still very much in the midst of this pandemic and need to do everything we can to stop and control spread of this virus. And with that, I will hand things over to the Commissioner. Thanks.

### **Commissioner Shibinette:**

Good afternoon. I'm going to do the vaccine update first, and then follow that with our long-term care outbreak update. So, to-date, 86,275 first doses of vaccine have been distributed in New Hampshire, and 53,432 people have received their first doses of the COVID-19 vaccine. An additional 4,751 people have received their second dose of vaccine.

This week, we received an additional 17,175 doses of vaccine, which will be used to continue vaccinating our highest-risk Healthcare Workers, our First Responders, and our long-term care facility residents and Staff. We expect to receive a similar amount of vaccine next week.

More than 30,000 people have registered to receive vaccine at our State-run fixed vaccination sites. And about 15,000 people have been vaccinated at those sites to-date. These sites are currently open to high-risk Ambulatory Care Provider and First Responders. And as we move into beyond Phase 1A, we will start to let the public know when they're eligible to go to those sites. Between CVS and Walgreens pharmacies, 96 long-term care facility clinics have been completed to-date. And more than 12,000 people have been vaccinated through those programs.

For a long-term care outbreak update, we have 10 outbreaks to close today: Bedford Hills Center; Courville at Bedford-Carlyle Place; The Elm Center; Fairview Senior Living; Green Mountain Treatment Center; Hanover Hill; Lakes Region Community Services; Fairview Home; Mount Prospect Academy Seacoast Treatment and Stabilization Center; Residence at Salem Woods; and Warde House Rehab. and Nursing Center. So those are all closed effective today.

11 new outbreaks to announce: Birch Hill in Manchester; Carriage Hill Assisted Living; Dover Center for Health and Rehab; Greystone Farms; Keene Center; Kendal at Hanover; Lafayette Center; Langdon Place of Nashua; Meredith Bay Colony Club; St. Vincent's Rehab and Nursing; and Summer Hill Assisted Living. That's all I have. Thank you.

### **Governor Sununu:**

Perfect; thank you, Commissioner. So, today, we're going to use the lovely board here for a little bit of a presentation and to outline the process by which our citizens may register to receive the vaccine, as it becomes available with our phased rollout.

Here, in New Hampshire, we continue to administer vaccines at a higher rate than most States. I think we're currently ranked about 12th on the CDC chart, in terms of administration. And as was just outlined, virtually every bit of vaccine that comes into the State, within a matter of days is distributed to the hospitals and the long-term care facilities, as it has been requested.

So, I do want to take a moment. We will take a little bit of a step back and just review the phases that we talked about last week: the 1A, 1B, 2A, 2B phases. So, it's a little hard to read, but we're in Phase 1A, as a lot of folks, I think, know and understand. And those are our high-risk Health Workers, our First Responders, and, of course, the older adults living in residential care settings where a lot of the outbreaks and really the highest and most vulnerable of our citizens are and have been -- unfortunately, been getting COVID.

Over the next couple weeks, we're going to really start -- we're currently in Phase 1A and will remain in 1A over the next few weeks. But we are going to start moving into Phase 1B, which we outlined a little bit earlier.

Phase 1B are individuals. Previously we had identified that it was going to be individuals 75 years or older. And the significant change we're announcing today is, per the CDC recommendations -- and I think my understanding, talking to other Governors, where most States are going, and I think this makes sense -- we're going to move that. If you are 65 years or older, you are now considered not Phase 2A. But you're Phase 1B. And just in a matter of a couple weeks, we're going to outline how you can register to obtain the vaccine.

Also, individuals that are medically vulnerable or at significantly higher risk, including, if I may, family Caregivers of children that are also medically vulnerable or of high risk. Again, the vaccine is not authorized for children under 16-or-under -- or I should say under 16. So we want to make sure that we're kind of building that shield, building that buffer of protection for those individuals. And any family Caregivers of those children also qualify under Phase 1B. Staff and residents at IDD facilities, and then Corrections Officers and Staff, as well, again making sure that we're providing that bubble, if you will, that shield for some high-risk individuals.

Over in Phase 2A, in the coming months, when we get to 2A, again, that will include school and childcare Staff, so our Teachers really will be added to that, as well as the next round of individuals between 50 and 65 years old. Phase 2B, we really start getting into just an age-based phases at this point, 50 to 64 years old. And then, Phase 3A and 3B again, now we're getting into the under-50 range of individuals that don't have underlying health conditions.

So, it's really about making sure 1A and 1B, our State's most vulnerable citizens, when you look at individuals 65 and older -- or I should say, unfortunately, when you look at the fatalities from COVID-19, the hundreds of individuals we have lost in New Hampshire, about 95% of them are 65 years old and

older. So, our hope is, and the importance of what we're discussing today is, as we get through 1A and then hopefully we get through Phase 1B in the coming months, that really helps protect 95% of those individuals that are of the highest risk and unfortunately have been the victims, really, of the COVID-19 pandemic.

So, we will go to the next slide, if we could. So, Phase 1A, again, high-risk Health Workers, we talked about this a little bit. About 110,000 people within this population, 56,000 have now received their first shot already. We've received about 86,000 doses of the vaccine. So we are really moving it out as fast as the Federal Government can give us.

I think our Team is doing a great job. Perry Plummer has come in and really helped manage a lot of this process on the vaccine side. And I think they've been doing a tremendous job. A lot of help from our hospitals, and that makes it available to our First Responders, and of course the more federally-driven program with the partners, the Federal Government, and CVS. We give them all the vaccine they need to distribute it to the long-term care facilities. And they've all been signed up. They're all registered. And CVS is kind of going through that process. And it looks like they'll be able to meet the schedule that we originally laid out to get folks both their first and second shots.

So, we will be in Phase 1A ongoing through the end of February, maybe even in a little into early March possibly. But, the good news is, is that we're on schedule to take care of our most vulnerable individuals.

As we go into Phase 1B, let's bring that up. This population size is a little larger. It's about 300,000 individuals. We have about 1.35 million people in this State. So you're talking about just under 25% of the State-or-so will make up Phase 1B. It's large population. So we want to make sure we have a system in place to make it simple, to make it easy and effective for individuals to get their vaccinations.

So, of course, we discussed the medically vulnerable at a significance risk, and those family Caregivers. And again, those will be individuals that have at least two of the medical conditions identified by the CDC of being of high risk. It could be cancer, could be COPD, things of that nature.

We have the Staff and residents of the IDD facilities, Corrections Officers and Staff, populations that experience health disparities. So we talk a lot about we have populations all across New Hampshire, but primarily frankly in our inner cities, that just don't get the same access to healthcare as many other folks do. So, we've set aside a portion of our vaccine. And we will talk a little bit about how that's going to roll out. But that will be starting at the end of January, as well, as part of Phase 1B. And then, of course, kind of this new change is making sure that individuals over 65 -- 65 and older, I should say, can start getting their vaccinations.

So, how are we going to do it, right? So, what's the next step? We've really worked hard to put -- and we're putting a lot of pressure on the Team. And I think they're doing a phenomenal job to make sure that we are going to be prepared.

Everything we discussed today is how to sign up and how to register if you're part of that 1B population. How do I register to get my vaccine? The most important thing I want folks to take away is, first off, the registration is not open today. It'll be open on January 22nd.

The reason is, is that, as we kind of finalize and make sure the system is up-and-running, Doctors and some of the Medical Providers are going to be part of this process. We've really simplified it. We've made it very, very simple. But we just want to make sure that we get all the information out. And when folks go onto the website beginning on January 22nd, with vaccinations starting, themselves, actually on the 26th.

So, let's talk about the first group of individuals, your 65-and-up. Anyone 65 and older can now get a vaccination, as part of Group 1B. So, identify yourself as more than 65. Hopefully, everyone knows that.

You're simply going to go to our registration website. It's called [vaccines.nh.gov](http://vaccines.nh.gov), and we will put up the website a couple times over the process here. And you're going to register for an appointment online. So you go right on there. You register for your appointment.

You'll then receive a confirmation email back that will allow you, with a link, to pick your location and your time. So I register. I get a confirmation email back. I use the link. I just pick my location and time. You go to another website that gives you where you're going to get it, what time works best for you, and then you show up. And you just make sure you show up with some sort of proof of ID with your birth date, or whatever it might be, to ensure that you're 65-and-over, and that's it. It's really -- we're really trying to make it that simple. And that's the vast majority of folks within that 300,000 population of 1B. We've really tried to narrow it down to that simplicity. So, on January 22nd, you can go to [nh](http://nh) -- or I'm sorry, [vaccines.nh.gov](http://vaccines.nh.gov). Follow the instructions to register and you're off and running.

So, there's another population here that we talk a lot about, which we consider them medically vulnerable, individuals that have medical conditions that put them at significant risk. They may be under 65. But they have other conditions that put them at significant risk for the vaccine. Also, family Caregivers of kids that also might have these vulnerabilities.

So, the first thing we're going to ask you to do is simply pick up the phone and call your Doctor. Contact your Doctor and you're going to receive -- you could call it a referral or just some sort of certification, if you will, from your Doctor that confirms that you do have a couple of these conditions that have been outlined. And then, either going directly through your Doctor, or your Doctor will notify the State, and you'll receive one of those emails to pick your location and pick your time, and you're off and running.

So, it's just adding that one extra step, very simple, of calling the Doctor. The Doctor confirms that you have the conditions. And then, you're off and running in the system where you're picking a location, picking a time, and receiving the vaccine at your convenience.

The other groups that we talk about are Corrections Staff. So there are folks that might be working in our State Prisons or in our County Jails. The local Public Health Networks will directly contact those facilities to make sure that they schedule and allow access to those individuals who come under this category of Corrections Staff in Phase 1B. And so, there's not a -- the Public Health Network will proactively reach out to those folks, as well as individuals that might have intellectual or developmental disabilities and residing in a congregate setting, and the Staff in those settings. They'll be contacted, as well, by the Public Health Networks to, again, schedule a time when they can come in -- or someone can come in and provide the vaccination. So, again, probably sometime in the February to March timeframe there for the first vaccinations, but they'll be scheduled obviously in just the coming weeks and months here.

And then, finally, we talk about the disproportionately impacted populations. These are folks who, through a variety of different reasons, just don't have the ease of access to healthcare that a lot of folks have. Sometimes it could be a language barrier. It could be a variety of different things. Predominantly, you see this disproportionately affected population in our small cities of Manchester or Concord, or Nashua. But it could be anywhere across the State.

So we've already started this process, really. We've done training and outreach. That is well underway. We've done training for, I think, well-over 100 individuals, really getting that messaging



campaign out there: how to access it; the safety of the vaccine; what the individuals need to know to understand it and feel comfortable about getting the vaccine.

The regional Public Health Networks are coordinating all of this and will be distributing through mobile vaccination clinics. That's how we're going to start this process, again, primarily in the Manchester, Concord, and Nashua area. And that vaccination process will begin on or about January 26. So that process is well underway. And again, just really making sure that no one is left behind in this entire process.

Oh, so these are just, I guess, just to kind of sum up a little bit. Appointment registrations will open on January 22nd, January 22nd. That is next Friday, I think, correct? I hope I got -- I think -- yeah, I have that correct. So, in about eight days, you'll be able to go onto the website, vaccine.nh.gov [sic].

And then, of course, if you have questions, our 211 hotline is being staffed up. I'm sure there's going to be a lot of questions. We ask folks to be patient. Please be patient as much as you can. You can always go to our nh.gov\COVID-19. That's been our centralized website for lots of different pieces of information.

But, again, patience is going to be key. We can only distribute it and sign folks up as we know the vaccine is coming in. So, right now, on average, we might get 17,000 or 18,000 vials of vaccine. So we have confidence that the number won't go down. We've been promised it will go up. But one thing I've learned from the Federal Government is don't bank on that 110%.

So, as more vaccine becomes available, more spots to register yourself for the vaccine will become available within our system. We don't want to basically overpromise and underdeliver. So, our system, you'll be -- we will have enough spots to sign up as we're assured that vaccine will be coming in over the next couple months. And then, as more vaccine, if they start ramping up production for us, that would be great. We will be able to add more vaccine in.

So, we want folks to be patient. You could go on, on January 22nd, 23rd, and register. And you might get pushed out two, three, five, six weeks because we can only register those for the amount of vaccine that we know are coming in.

Again, the Team's done a great job moving it out. I feel I have a lot of confidence in seeing what has happened in these first few weeks that the Team can ability perform, get these, whether it's through fixed sites or other opportunities. Make sure that the locations are distributing and administering the vaccine, as anticipated.

So, I think, hopefully this is good news. We know there's going to be a lot of questions. We've really opened up for about 300,000 people now to be part of that Phase 1B vaccination process, if they so choose. There's no mandate here, of course, if they so choose to do it. And in the next week-or-so, they can go onto the website and start the process. Or if need be, pick up the phone and call your Doctor, if you qualify as part of the medically vulnerable population.

One last thing I want to talk about a little off of the topic of vaccine, just because obviously the last couple weeks there's been a lot of news. I'll just put it that way, both locally and nationally. There's just been so much going on.

So I do want to give a brief update on the potential, frankly, for civil unrest, both here in New Hampshire and across the country. It's something that has, I think, glued a lot of us to the news channels and to the television to see what's happening out there, as not just the inauguration of President-Elect Biden comes up, but also some of the threats that we've heard locally, as well.

And so, as the FBI has warned, States should be prepared for protests and potential threats at all 50 State Capitols starting this weekend through the inauguration of President-Elect Joe Biden. I've been

assured by our New Hampshire Department of Safety that we are prepared to ensure that any protestors are able to freely express their right to demonstrate, provided obviously that they're safe and they comply with State and local guidelines.

State Officials are constantly communicating with our Federal and our local partners to review all the intelligence and to understand the potential impacts on New Hampshire, and obviously plan accordingly for whatever information may be out there. We will have our National Guard on standby to be deployed, if needed. But we feel very confident that, if anything should arise, our Team has always done an exceptional job of handling any potential unrest. And we don't expect anything to be different, as we move forward. So, with that, we can open it up for questions. Oh, and there's the website there, [vaccine.nh.gov](http://vaccine.nh.gov) [sic]. January 22nd, that's when you can go there.

### **Q&A Session**

*Governor, how does someone register if they don't have internet access?*

**Governor Sununu:**

So you can call. So, two things, if you're medically vulnerable, you would call your Doctor to be referred. And the Doctor can essentially sign you up. If you don't have internet access, you could use the 211 hotline and they could potentially help, again, get you access to the system.

*Will somebody call them back? I guess, is that just going to -- they're going to be connected with help or...*

**Governor Sununu:**

Yeah, so, I mean, if you're 65-and-over, right, really that's the population that we're talking about. If you're 65-and-over, it's just a matter of registering. You're kind of self-attesting that you're over 65, and you bring proof of that when you show up. You might bring your Driver's License or whatever it might be.

So, yes, so if you don't have a loved one or Caregiver, whatever, that can get you internet access, again someone could be at the phone. Someone can help you sign up. But you still have to show proof that you are over 65 when you show up for the vaccination.

*And as you know, we're an older State, Governor. And as Commissioner Shibinette pointed out, 17,000 vaccines; so what if you're approaching this point, the 65? What if just the middle of March you're going to be 65? And I might not get an appointment for six weeks, when I reach out and try and get one.*

**Governor Sununu:**

Yeah.

*So do I wait until after my 65th and call in? Do I call in? What would you suggest?*

**Governor Sununu:**

As soon as you turn 65, you can go onto the website and register. Yeah, that's probably the best thing I could recommend. And again, we are asking folks to be patient. My guess is you're not going to get necessarily an appointment for the next day, or maybe even the next week. There'll be a lot of demand out there, as is practically understood.

But we think, again, if 18,000 vials are coming in, minimum, over the next 10 weeks, that's a lot of opportunity for folks. It doesn't quite get us to the full 300,000. We also have to finish out our long-term care. We're going to have second doses coming in.

We've heard a lot of very positive talk from Washington that they are sending more. And I had a call with both the Vice President and Alex Azar earlier -- Secretary Azar earlier this week. And we heard a lot of positive things -- I'll just keep saying that -- that more is coming.

Again, I don't want to say I'm doubting it other than to say I think we all appreciate we will believe it when we see it. And then, we will have a system that can adjust accordingly. We just always want to make sure we're meeting the expectations of the population.

*Governor, if you've got somebody who's over 65 but is in within that three-month window of having had COVID and the antibodies, can they sign up? Can they get the vaccine, if they're still within that 90-day period?*

**Governor Sununu:**

That's a great question. I believe so. Yeah. Oh, yeah. Sure, Dr. Chan.

**Dr. Chan:**

Yeah, it's a good question. The short answer is yes. People cannot get the vaccine if they are still supposed to be on isolation due to infection. But once they're off isolation, they can get the vaccine at any point, once they're not infectious anymore.

The only caveat to that is that if somebody has gotten one of these therapies, one of the monoclonal antibody treatments, there is a caveat that people who have gotten this therapy, the monoclonal antibodies, shouldn't get the vaccine within 90 days. So, there's sort of two groups here. One is people with COVID-19 can still get the vaccine, as long as they're not on isolation. If somebody has gotten one of these medical therapies, the monoclonal antibody therapies that are out there, then they have to wait a full 90 days.



*Governor, regarding the protests, are you aware of any specific threats? And overall, where's your concern that something similar that what we saw at the U.S. Capitol could happen here in New Hampshire?*

**Governor Sununu:**

So, I can't discuss of anything too specific, other than to say we're very prepared and can handle anything that would connect to any of the intelligence that we do have. I'm always very concerned. I would never sit back and say that what happened in Washington can't happen here. It can happen anywhere.

And so, we're going to be prepared for that. So, for that contingency, if, God forbid, it should happen. But, I think protesting is fine. Having a voice is absolutely fine. State House grounds are there. They're open. And if folks want to come up and have a voice, that's absolutely the right place and the right time to do it, provided that they're safe and they're following the guidelines and regulations of safety that we expect from folks.

*Given the fact that -- sorry -- that Granite Staters can carry guns, does that heighten the level of concern, or...*

**Governor Sununu:**

No.

*No? You feel like people can be responsible?*

**Governor Sununu:**

They always have been, yeah, for the most part, yeah, with very few exceptions. But, yeah, it's not an issue. Sorry, do you have one?

*Yeah, well, I've kind of forgotten it. Sorry.*

**Governor Sununu:**

That's okay. We will come back. We will come back. I do it all the time. Sometimes I forget the answer, right? You just forget the question. That's okay.

*It was really good. I'll keep working on it.*

*Some Medical Providers at some of the Zoom meetings about the medically vulnerable population have mentioned just -- and you've got that separate referral there. Is that going to be time-consuming?*

**Governor Sununu:**

Well, can you go back to the slide, just if we can just to make sure? Yeah.

*In other words, we've heard from some Doctors. Am I going to have to...*

**Governor Sununu:**

The 1B process.

*Consult charts and to confirm this, or is all this already on a medical...*

**Governor Sununu:**

Yeah, oh, no. The next one, so the medically vulnerable, there you go. So if you are medically vulnerable, again you have to have two of these conditions. And the conditions are fairly severe. My guess is you wouldn't necessarily have these conditions without your Doctor potentially knowing about it, or easily identifiable.

So, yeah, it's just like if you were -- it's similar to a referral, frankly, if you're going to get bloodwork or something. Your Doctor would want to make sure that maybe a prescription that you're getting that the medicine isn't going to conflict with anything that you might have. So, yeah, it might require folks working -- or checking your chart, or your file.

The population here, this is a ballpark number, 80,000, 90,000 individuals, potentially, something like that. That's a very rough guess, please. So, again, it may take a few weeks to work through that process. And I understand that there could be a lot of folks calling their Doctors. And again, I appreciate the Doctors will have to do a little bit of extra work here.

But if it means getting someone who's medically vulnerable to the front of the line, someone that has cancer and COPD, and should be in the front of the line, then, yeah, check the chart. Make sure they're there, and then it's that simple. You just -- you sign up and you go.

It's just a confirmation from your Doctor. And again, Doctors have a lot of flexibility. We're not keeping them just in this very tight box. They will have a lot of flexibility with making that determination on behalf of their patients. So even if something technically isn't on the list, or they feel, as their Doctor, that someone is of a severe condition and a severe risk, I should say, for COVID, Doctors have the discretion to allow the process to move forward for those that do have medical conditions.

*Got my notes straightened out this time; how do you respond to this criticism that arose over Members of the Ski Patrol being able to go before Teachers?*

**Governor Sununu:**

Ski Patrol are providing emergency medical services. They're essentially frontline medical -- providing frontline medical services like an EMT. A lot of them are EMTs. So, Teachers don't provide emergency medical services. And we're not -- aren't required to.

So, it's like a School Nurse. They get to go earlier, too, if they're providing emergency -- potentially providing emergency medical services, regardless of what your job title is. Those are the folks that we vaccinate, yeah, because those are the ones that may have to rush in and take care of someone that is very vulnerable. Yeah.

*Do we have a status update on the Valley Street Jail, as far as how that's going, how many cases?*

**Governor Sununu:**

In terms of number of cases, I don't know if the Commissioner has.

**Commissioner Shibanette:**

So, Hillsborough County House of Corrections with 104 resident cases and 24 Staff cases. New Hampshire Department of Health and Human Service, Public Health, is now working with the Hillsborough County House of Corrections twice a week onsite to provide them in-person guidance and consultation to help trend down their outbreak right now. So, very active in that outbreak.

*Commissioner, while we have you up there, do you mind commenting on where we had talked about a couple weeks ago about the rate of rejection among Healthcare Workers? Has that improved at all? What's the status right now?*

**Commissioner Shibanette:**

It has improved. And I think what we're seeing is there are people, no matter what the new treatment or the new technology, where people are out front saying, yes, I will take this. And then, there's laggards, right, that will say, I'm going to watch my Coworkers take it. And if they're okay, then I'm going to take it.

And that's what we're seeing now is Healthcare Workers that may have been ambivalent or hesitant in the first week-or-two are now stepping up at further clinics and saying, okay, I want to get it now. So we are seeing that rate of acceptance going up in the healthcare field, yes.

**Governor Sununu:**

Okay. Do we have some questions on the phone?

***Holly Ramer with the Associated Press:***

*Hi, thanks. Following up on the earlier questions about the process when we're in the next phase, Healthcare Providers, Primary Care Doctors, and others have also expressed concern about just having enough of a workforce to handle all of these calls and verifying that people meet the eligibility. And they're concerned about just all the hours that that will take. Is there any plan to use any -- to provide any extra funding to those Providers to cover those kind of costs?*

**Governor Sununu:**

No, no. Look, are we asking folks to call their Doctor's phone just to confirm that you have two of the very severe medical conditions? Yes. A lot of those will be immediately confirmed, because the -- I don't know how many folks who have cancer or going through cancer treatment and their Doctor doesn't immediately know about it. So, a lot of it will be pretty easy, frankly.

There could be patients, I suppose, that Doctors don't know as well. And they have to go through and look through a chart. And I suppose that could take a little extra time. But, look, we're talking about the biggest public health crisis in the State's history. And if, over the next few weeks, Doctors have to spend a little extra time going through and just double-checking that those that are most medically vulnerable are first in line, as they should be, I think that's a very appropriate system and it's actually a very simple system. And all they do is say, yeah. They check the box and they put them in the system to get registered. I can't think of anything simpler.

If to do it the other way, you're essentially opening it up to everybody in the State, if there's no verification that you -- that we're saying that those are most medically vulnerable should be going first. But there's no way to verify any of that. There's no checks and balances on that system.

The risk is that everybody piles in. They self-attest to whatever they want. And those that are most medically vulnerable, because of the limitation of vaccine from the Federal Government, are pushed to the back of the line. That's not fair. That's not right. That's not going to get our fatalities and our risk level down the way it should be.

So, of course, yeah, we're asking. Look, everyone's putting in some extra hours here. Everybody is. And I appreciate that, I guess, there could be Doctors with a few hundred phone calls over the next couple weeks. It's going to be a little extra work. I totally get it. I appreciate it. And yes, we're asking them to do that work on behalf of their patients, on behalf of those who need to go first, who need their lives protected because they are so vulnerable. And we've seen the fatality rates so high for those individuals that can be medically vulnerable.

***Paul Hayes with The Caledonian-Record:***

*Hi, we're coming up on MLK Day. And I just wondered if you could point to any specific examples of progress since Minneapolis.*

**Governor Sununu:**

I'm sorry, examples of progress concerning social and cultural diversity, concerning what we're doing with our LEACT Commission and Law Enforcement, in particular, because you mentioned Minneapolis?

***Paul Hayes with The Caledonian-Record:***

*Social justice causes.*

**Governor Sununu:**

So, I just want to make sure I'm answering your question appropriately.

**Paul Hayes with The Caledonian-Record:**

*Right, I mean, social justice causes, in general. I know the Police Commission's one. But if you could sort of point to some other aspects of making progress in those general areas?*

**Governor Sununu:**

Well, I got to say, our LEACT Commission, the Law Enforcement Accountability Commission, was the -- without a doubt the most progressive you're going to find and one of the best-managed processes you're going to find across the country. The fact that we did it with such speed, we did it with such inclusion from Law Enforcement to those asking for and demanding, and rightly expecting some sense of balance in the system, some more you'll call it social justice in the system, some more accountability with Law Enforcement, whatever it might be.

And the fact that we put forward so many recommendations, all of which were unanimous amongst that group, and I mean, I could go through and start listing every single piece of that. But, there was so much there.

It touched local Law Enforcement. It touched our Judicial System. It touched our Department of Safety, all aspects of it. It touched parts of our cultural aspects of our community, diversity we want to see simply within our communities, themselves. So, that Commission was really all-encompassing, which is why I think it did such a phenomenal job.

So, I don't mean to be -- give you the brevity of the answer other than to say all the different recommendations built into that, I think, were tremendous. And then, just raising that heightened awareness for all of us within the Department of Justice, within our schools, whatever it might be that we have to take our discussion to the next level. We have to have an understanding of it. We have to make sure all sides have a viewpoint. We're not all going to agree on every viewpoint and every action item going forward.

But the fact that so much of what we're moving forward with is unanimous in agreement, a lot of it is legislatively-driven. Some of it's Executive Order-driven. Some of it is just recommendations and funding we will put forth in the communities. So there's a lot of meat on the bones, so to say. And that's just the first step, right?

And the whole point is, let's start getting some of this done, some of that, wind under our wings. And then, we will make it a living, breathing document. We will revisit it again in six months or a year, or whatever it might be. See what works. See what didn't. Maybe put some new stuff on the table. But, I think New Hampshire's taking some very progressive and appropriate steps in all manners of that issue.

**Nancy West with InDepthNH:**

*Yeah, good afternoon, Governor. I have a couple of questions. I understand that you have to mute each questioner after they're done asking the questions. So I'll ask them all upfront. And unfortunately Paula Tracy, who does such a great job covering the press conferences, is unavailable today. So I'll just try to (inaudible) for a bit.*

**Governor Sununu:**

Give me what you got. I'll write them down as you go. I'll write them down. Go ahead.



**Nancy West with InDepthNH:**

*Okay. I should have written them down. Let's see. I hear from the folks in Coos County that they're concerned because they have to drive such a distance, even the First Responders, to get the vaccination. There are no vaccination sites -- the emergency vaccination sites in Coos County. Is that going to continue when the bar is changed, so that people 65 and older can get it? And also, do we have a shortage of vaccines? I mean, if we had more vaccines, couldn't -- could people be vaccinated quicker? What could speed up the process of getting more vaccines more quickly to New Hampshire? I think the other thing folks in the Coos County region were concerned about is the lack of communication. Even the people who are part of their COVID Team, their Response Team in the Berlin area have no idea, no clue what to expect in the coming days, weeks, and months. And I'm also wondering if the Doctors will be told what is now expected of them. And also, I'd like to get back to the Teachers for a minute. Perhaps Teachers, luckily, will not be providing medical care, hopefully, to students. But they have very close contact. So why are they so far down the ladder on getting the vaccine, when I think a lot of families and a lot of Teachers would feel a lot more confident about keeping all the school and getting all the schools reopened, if the Teachers were able to get the vaccine sooner? The last question: if the amount of vaccine remains at what you suspect, or it's nice to hope for more, but around 18,000 doses a week, how long will it take to vaccinate everyone who should get a vaccination -- people, I guess, 16 and older? How long will it take? What are we talking, late next summer?*

**Governor Sununu:**

Okay. Nancy came ready. Here we go. So, I wrote down as fast as I could. And I will do my best. Concerns in Coos County about the distance that some of the First Responders are having to travel to get the vaccine, again, Group 1A was our highest-risk population as well as First Responders. We opened about, I think, six fixed sites across the State. Or we have those open now? And we will be adding more.

So, the quick answer to your question is: yes, as we expand the populations that will need vaccination, we will be expanding our fixed sites, as well. There may be some hospitals that open their own fixed sites.

So, it's really a function of the amount of vaccine we're receiving and the availability. So as we go into 1B, as we're really expanding it to another 300,000 individuals, we will definitely be expanding the number of sites across the State to make it easier and more accessible, of course.

So, do we have a shortage of vaccine? We use every bit of vaccine that comes in, goes right out. We really don't hold onto any of it, other than maybe a day-or-so, just to get it to where it needs to be, if it were to come to the State. Most of the vaccine actually is shipped directly to either CVS and Walgreens for our long-term care facilities, or the hospitals directly in the future.

So, the shipment and logistics actually work very well. The Federal Government simply provides us our pro rata share, pretty much equal to every other State. So every State really gets about the same amount, based on their population. And we get that out as fast as we can.

And again, we're, I think, ranked 12th as of today. That can move up and down for any number of reasons. But I think we're ranked 12th in the country in terms of getting it out quickly. And that's administration. That's actually shots in arms. Distribution, we've distributed almost everything. Shots in arms, I think we're ranked 12th. So that's a good marker, but we want to keep it up. We'd always love to see things go a little faster, if we could. But, the main 90% of our factor is simply what the Federal Government is providing to us.

So, the third question was a lack of communication, in terms of what to expect in the coming days and weeks. I just gave you 20 minutes of exactly what to expect, exactly who will be in the phases, and exactly what to do, as a citizen, if you qualify as one of those phases, from who to call or what website to visit, what you can expect and why, the dates, the times, the emails that, when folks register into the system, they'll get a confirmation email. That'll take them directly to a site where they pick their location and they pick their time, based on availability. So, that's it. We're really trying to make things very simple.

I think we will also be getting, between now and the 22nd, we will keep communicating with Doctors. Making sure they get their Health Alerts Notifications in terms of -- is that Health Alert Notification? Is that what they're calling it? In terms of what is expected on their end, if they have any questions, who to contact; how to make these certifications or referrals, if you will, into the system and allow folks to just have access that are medically vulnerable.

So we will continue to talk with them and work with them. And again, that's why you won't be able to register really for another week. We want to make sure we dot the Is and cross the Ts, and make sure everyone's ready to go. And we can meet the expectations of our citizens.

Teachers; look, I appreciate that Teachers are in close contact with kids. But getting the vaccine right now has to be about those that are of the highest risk of fatality, those of the highest risk of being put in a hospital, and those that care for those that are of highest risk of having a fatality or being in a hospital, because of COVID. And so, that's this first 400,000 individuals.

By all means, if the Teachers meet any of the medical conditions, if a Teacher's over 65, they're in it just like everybody else. But, this all has to be about lowering the death rate and managing the hospitalization rate.

Teachers, other than Healthcare Workers, are really the only other workforce that has been outlined and identified as having a specific place in the process. We got letters and requests from virtually every industry you can imagine, from the Radio Broadcasters to the Meatpackers, everyone making a case why they should be first. And I appreciate all of that. I really do.

But, for all -- and so, I'm going to go broader than the Teachers, if I may. Let's take folks that work in a grocery store. They come in contact with people all the time. We appreciate that. It's not the Worker in the grocery store, per se, the healthy, 40-year-old Worker, working in the grocery store. It's not them that has to be prioritized today. It might -- but it's their parents, or it's their loved one, or neighbor, that has a medical condition. They have to come before that Worker. And then, we will get to that Worker, just like me, fairly healthy, 46 years old. I had to actually look up the other day that I was 46. I keep saying I'm 47. I'm still 46, apparently. And there'll be a time for my demographic, as well.

So we know a lot of industries come in contact with individuals, whether it's Teachers or otherwise. But we have to put those individuals of highest risk even before them. That only makes logical sense.

So I appreciate the -- no one wants to get schools open. I think pretty much every school can be open across the State, without a doubt, and safely. And I'm very frustrated that there's a lot of pushback from folks. I know the Teachers Union has been very clear. They don't want to open certain schools. I think it's an absolute disservice to kids. And I think that's why Democrats and Republicans alike, I don't care what your Party affiliation is, parents across this State are begging for schools to open up. And they should be open.

But, again, it's not the Teachers, per se. It's making sure that those that are most vulnerable, those that are of the highest risk get to go first. That's frankly only fair. And that's what managing this crisis is all about.

And what do we do if the vaccine amount doesn't change, if we're only getting -- I'm going to round a number -- ballpark 20,000 vials of vaccine a week into perpetuity? Yeah, we will get it out as fast as we can. We're going to stick to our prioritization. And we will work through that prioritization as fast as we can.

But, sure, it would take a long time to get through 1.35 million people. Now we know not everybody would take it. Maybe you'd get 70%, 75%. That's a ballpark number of individuals across the State that might want the vaccine, maybe less. So you're still talking about having to vaccinate 600,000 or 700,000, 800,000 people. And at 20,000 vials a week, knowing that everyone needs at least for these first initials, two doses, that would take quite some time.

But, the most important part is those -- I'm going to say for the -- I don't mean to be ad nauseum about it -- the 400,000 people that we've -- we're talking about in Phase 1A, Phase 1B, that make up the demographics that comprise 95% of the fatalities, Teachers, in themselves, don't make up 95% of the fatalities. Grocery Store Workers, in themselves, don't make up 95% of the fatalities. 65-and-over, that's 95% of the fatalities and that's why, as fast as the Federal Government will give it to us, we're going to put those needles in arms. And that's why those folks have to come first.

And when that happens, when those first 400,000 individuals have their first and second dose of the vaccine, I don't know how you wouldn't see a massive drop in hospitalization, a massive drop in fatalities. That's only the next logical step, unless the virus were to mutate again, or something like that.

But we feel very, very confident this is the right way to go. And this is exactly how we get out of this situation faster. And that's what it's all about at this point. We know there's that light at the end of the tunnel. We want to get out as fast as we possibly can. Okay. I think I got all five there. Yeah, let's do it. You bet.

***Jordyn Haime at New Hampshire Public Radio:***

*Yeah, I was wondering if the State is going to be taking any actions against the Webster at Rye, this nursing facility that prioritized Board Members alongside frontline Healthcare Workers and residents. Is there any plan for addressing things like this that happen, if they may happen at other facilities, to make sure it doesn't happen again in the future?*

**Governor Sununu:**

No, the State has no plans to take action against that individual facility. I think we all were pretty shocked when we heard that they had put individuals ahead of other folks that probably shouldn't have been prioritized as part of the vaccination. And we just hope it serves as an example to other facilities across the State. They got to play by the rules like everyone else. It seems to have been an isolated incident and we hope that it remains that way. Okay.

*Can we hear from Dr. Chan about whether or not we've seen any of the new variants of COVID pop up yet here in New Hampshire?*

**Dr. Chan:**

Yeah, thanks for that question. Question's about the new variants, or circulating strains, of the Novel Coronavirus, and the short answer is no. We have not identified yet any of these new emerging variants of concern that are being seen in other places of the world, like the U.K. and South Africa, Brazil, and also now identified in other places within the United States.

I will say that there's an expectation that, as with any virus that circulates, there is going to be a certain rate of change, or mutation, in the virus. And I think what has been seen with some of these variants are that there are more mutations that has led to some concern about these strains being more infectious, or more transmissible, more easily spread between people.

There are efforts underway, not only in New Hampshire but also nationally, to increase the genetic sequencing of positive specimens that we have to try and identify if and when we have any of these variants identified in New Hampshire. And so, our Public Health Lab is currently working to try and increase the amount of genetic testing that we're doing on some of these strains. But we haven't identified it yet. And certainly, we will -- you'll be hearing more about it if and when we do.

*Governor, regarding the potential protests, last one, as for neighbors of the State House, businesses, residents nearby, have you had any sort of communication with them? If so, what has been your message?*

**Governor Sununu:**

I haven't had direct communication. But I know the Department of Safety doesn't just take the State House, individually. Obviously, there are other potential targets in the State and they're looking at that, as well. And obviously communicating to make sure that their presence is known and can answer any questions amongst the community; but I really leave that to the Department of Safety and the National Guard.

*Governor, do you have a sense of the breakdown, in Phase 1B, how many people will be getting their shot from a Primary Care Physician versus fixed locations? I guess is there a ballpark sense of how that's going to be distributed?*

**Governor Sununu:**

So the question is what ballpark percentage of how much will be -- where folks will essentially be getting it?

*Where they will be getting it, yeah.*

**Governor Sununu:**

I think the majority will likely come from most of these fixed sites. I think that'll be the easiest way to do it, or maybe a hospital. But I don't know if -- I know because the way the vaccine comes in, we get it. For example, is it Pfizer that we get about 1,000, about 900 in a shipment at once?

So, to take that and then to break it up and just to send five doses to Dr. Smith and five doses to Dr. Jones, that becomes difficult. And people would have to make appointments and go in to see their Doctor and all that, as opposed to one of our fixed sites, where we're just tearing them out a lot faster. So, to get the throughput we want to see, we will really try to push people to either hospitals, who might have their own systems set up, or our fixed sites, a variety of different options for folks, but all of which are designed for fast throughput.

*And who's going to decide when a certain phase is done? I understand you're going to move on at a certain point. It probably won't be 100% finished. So, where do we draw that line?*

**Governor Sununu:**

There's no line, really. That's a great question. So when are we done Phase 1A? We're really not, because technically maybe someone will go into a long-term care facility in May, or March, or April and then they become available for the vaccine.

So, the bulk of the fixed residents that we have now, or the Medical Staff that we have now that are receiving their vaccine, that's there and we will take care of the vast majority. And then, it'll be an ongoing process and it'll be kind of a maintenance, as opposed to the initial and the booster shot.

So, no, they don't really end. But they'll obviously -- most of the folks, eventually, as we enter March, will be primarily in the 1B Group. There could be still some 1As. Maybe some folks decide not to get the vaccine today. That's okay, even though they're up. Maybe they choose to do it two months from now. They can absolutely do that. If they're in Phase 1A today, the door doesn't shut on them tomorrow.

*So we had folks up this week who operate (inaudible) that said we've got ticketing systems. We could do this. In other words, we could be a fixed site to deliver vaccine for the State as this thing ramps up further and further. I'm sure you've seen Dodgers Stadium now. They could give as many as (inaudible). Gillette Stadium is going to be a site.*

**Governor Sununu:**

Sure, yeah.



*Is that an option here, going down the road, actually going -- a vaccination site system that goes beyond the fixed sites?*

**Governor Sununu:**

Absolutely, yeah. Look, we've talked about how to open up a massive vaccination site. I think, is Massachusetts using Gillette Stadium, maybe?

*Yeah.*

**Governor Sununu:**

Right now, we get about 17,000, 18,000 doses a week. You could probably move almost that much through in a couple days at one of those mass sites. That'd be a single site here. So we don't really get enough vaccine to ramp up to that level yet.

But we have that contingency. It's on the table. And we could open it up as a possibility. And it would be a great option, frankly, if we started rolling in 50,000, 60,000, 100,000 vials a week, something like that, having a giant site that can just really churn it out. That's always on the table.

*Do you believe Congress did the right thing by impeaching President Trump?*

**Governor Sununu:**

You mean in terms of the congressional votes? I was pretty clear when it comes to the actual -- just to take a step back, when it comes to what happened on Wednesday -- or a week ago Wednesday. And I really do believe, and I think most people would agree, that the President's words really incited the unfortunate actions that took place following that.

I got to be frank. I'm not trying to be dismissive of it. But, Congress -- I'm going to kind of defer to Congress to make those decisions. We got so much on our plate right now. I don't have a say in that process. I don't have input in that process. I'm trying to manage vaccines. I'm trying to manage a budget. I'm trying to manage COVID. We got a lot on our plate. Frankly, it'd probably be a disservice to the citizens of this State if I started focusing on Washington, D.C. and not what's really at home. So, I'll leave it there.

*Okay.*

**Governor Sununu:**

Okay. Great, all right. Well, thanks, everyone. Again, we will be back next week. I think we will have some more information, answer some more questions. And clearly the Team here in the State of New Hampshire has done a phenomenal job moving the vaccine out.

We have a plan. We want citizens to know what to do when. This information will all be -- that we presented today -- will all be available on our website. So feel free to go and kind of review. Again, the vaccines.nh.gov, that'll be up and running on January 22nd for those that are in Phase 1B.

We are going to have as many available slots as vaccine that we're going to get. And as the Federal Government gives us more, we will open up more of those time slots and make it more available. So we ask folks to be patient. We try to make it as simple of a process as we possibly can, just to allow that throughput to happen. And we all get through this COVID pandemic as fast as we can. So, thank you, guys, so much for joining us.