



Office of Governor Christopher T. Sununu
Press Conference
Thursday, February 4, 2021 at 3:00 p.m.

Governor Sununu:

Well, good afternoon. Good to see everybody. Thank you for joining us. Before we start today, just a couple different things to update. Obviously, we will have our -- Dr. Chan's going to give us our Public Health update, a few different things to talk about. We know folks have probably a lot of questions, as there's just a lot going on, especially as it pertains to COVID.

Just a few minutes before I was able to come out this afternoon, I was on a call with the CEO of Pfizer and a handful of other Governors, just discussing logistics. We know that the Federal Government, through the previous and now current Administration has made different stages of promises, in terms of what may be delivered, in terms of vaccine, especially over the next three months. That's really where we're most focused right now. And if anything about Washington and the Federal Government is they tend to overpromise and underdeliver.

So, a few of us Governors decided to go right to the source. And we had a great conversation. The good news is that things seem to be very much on track, especially with Pfizer. We hear the same through Moderna, as well. And right now they are on track to meet, if not exceed, potentially, their commitment to delivering the doses and the vials of vaccine that they've committed to the Federal Government through Q1, which is really through the end of March.

And that gives us a lot of confidence when we look at building our model, expanding our potential sites, making sure that we are not overpromising anything, that we can actually meet the expectations of the citizens, as we work through Phase 1A and 1B. So it was a very productive conversation. And I'm happy to answer any questions about that. But, let's kick it off with a Public Health update from Dr. Chan.

Dr. Chan:

Thank you, Governor. Good afternoon and excellent news about the vaccine supply. So, a numbers update, we are reporting 433 new people who have been diagnosed with COVID-19 in New Hampshire. 303 of these people tested positive by PCR, and 130 were positive through antigen testing.

In the last week, in the last seven days, we have been averaging between 400 to 450 new infections per day, which is down significantly from even a few weeks ago. And our current number of people with active infections stands at 4,099, which is also down, compared to even last week.

Our test-positivity rate for the last seven days has averaged 4.6%, which continues to show a decreasing trend, which is also good news in the testing date. In terms of hospitalizations, there are 209 people currently hospitalized statewide with COVID-19. That has been a stable and down the last few days, as well.

Unfortunately, we continue to identify people that have died from COVID-19 or complications of COVID-19. And so, we are reporting today 9 new people that have died related to COVID-19, 6 of whom

are associated with our long-term care facilities, our most vulnerable populations. This brings the total number of people that have died during this pandemic from COVID-19 in New Hampshire to 1,085.

In the last week, in total, 63 people have been announced as having died from COVID-19. And so, we continue to average about nine individuals per day who we're identifying and reporting out as dying from COVID-19.

As we work over the coming months to increase COVID-19 vaccination, putting needles into arms, so to speak, it remains critical for everybody to continue to follow the mitigation guidance and wear masks over their nose and mouth when in public locations, to practice social or physical distancing, and avoid group and social gatherings.

We also continue to recommend and stress the importance of avoiding nonessential travel, especially with the increasing identification of different variants of concern, or variants of the Novel Coronavirus which are being found to be more infectious or more easily spread person-to-person. Thankfully, none of these variants have yet been identified in New Hampshire, but they have been identified certainly in other parts of the globe and in other parts of the United States. This is something that New Hampshire and other States around the country are stepping up surveillance to try and detect if and when these variants are introduced into our populations.

But it continues to be important for everybody to follow this guidance, including people who may have previous infection, including people who may be fully vaccinated, especially as we learn more about these variants and find them more easily spread, and potentially less easily controlled from immunity due to prior infection or even vaccination.

So, again, we're still learning about these variants. But, vaccination combined with our community mitigation measures continue to be the primary way to control spread of this virus and to bring the pandemic to an end. And with that, I will hand things to Dr. Daly for a vaccine update. Thanks.

Dr. Daly:

Good afternoon, everyone. I'm just going to provide some quick updates on vaccination numbers. To-date in New Hampshire, 148,000 doses of vaccine have been administered in our State. This includes 110,000 people who have received their first dose and 38,000 who have received their second dose.

This week, we received 20,375 first doses of vaccine, which is a small increase above what we received the prior week. And then, next week we expect to receive 21,475 first doses of vaccine, which is, again, a small increase above what we received this week. As the Governor mentioned, we expect to continue to receive these incremental increases in vaccines over the coming weeks.

In terms of an update on the long-term care facility pharmacy partnership program, between our two pharmacies in our State, CVS and Walgreens, an additional 27 facilities received their first doses of vaccine over the last week, which brings us to 203 facilities that have received their first vaccine doses through this program. This is more than 22,000 people who have been vaccinated through the program.

And a new Report from CDC released this week on vaccine update, as part of this program, shows that New Hampshire has the highest proportion of long-term care facility Staff choosing to be vaccinated at more than 60%, and that we are among the highest in resident vaccination rates, as well, at greater than 80% in that population.

In terms of Phase 1B, to-date more than 300,000 people have registered to be vaccinated in Phase 1B. These new registrations have slowed down over time. And now, we have just a couple thousand people registering to get vaccinated each day. We now have more than 170,000 of these individuals scheduled for their first dose of vaccination in the coming weeks and months at one of our 19 sites across the State.

In the last week, thousands of people were able to start building immunity through vaccination. And we will continue vaccinating people as quickly as possible, as much as our vaccine supply allows, so that we can protect as many people as possible against COVID-19. Thank you.

Commissioner Shibinette:

Good afternoon. Just a quick outbreak update for long-term care; very positive trend that we've been seeing over the last couple weeks continues this week. We have eight outbreak closures to announce today: Bel-Air Nursing Home; Calumet Transitional Housing Unit; Community Bridges; Harbor Care; Meredith Bay Colony Club; the Northern New Hampshire Correctional Facility; Pleasant View; and St. Francis. So all closed in their outbreaks, effective one day in the last week.

We have two new outbreaks to announce: one at Applewood Rehab Center in Winchester with 18 residents and 9 Staff; and the Sullivan County Department of Corrections, with 20 residents and 4 Staff. That's all I have. Thank you.

Governor Sununu:

Great, well, thank you, Commissioner and Dr. Daly, Dr. Chan. I think that we will dive a little bit into the second-dose issues. Obviously, that's been the issue of the day. And I know Perry Plummer and his entire Team that's really been managing the logistics around the vaccination and the second dose, obviously it's been a very frustrating week for a lot of our citizens. We apologize. We understand it. We have literally been working around-the-clock to correct it.

As we've said, it's -- this VAMS System is a Federal registration system, wasn't primarily designed to be a scheduler, but can handle scheduling. Frankly, it just can't handle it at the speed that New Hampshire's moving. And so, in terms of moving folks up, providing a better opportunity to get that second dose, trying to upload all that information quickly into the system caused very severe problems and unfortunately somewhere between 10,000, 20,000 individuals across the State found out that they were being pushed out with that second dose.

So, here's the solution. Over this entire week and into the next couple days, the Team has been constantly uploading by hand new second-dose appointments. If you were pushed out for your second dose, you can go into the system either today or over the next couple days and look to find a spot to move you up within a week of your scheduled date. That is the guarantee that we're really making to the citizens of New Hampshire.

There's no reason -- no one, to-date, has gotten their second dose beyond an appropriate timeframe, being a week within their scheduled date. And no one should have to get their second dose beyond that. So all those new appointments are being uploaded.

If you've been pushed out on your second dose, go back into the VAM System. If you've received your first one, obviously, it's going to let you schedule your second one. You can go back into that system

over the next couple days. And if you don't see a spot today, try again tomorrow. Somewhere over the next few days, all the remaining second-dose scheduling times will be uploaded into that system.

So, going forward, we've said that we're going to move away from that VAM System, and that's exactly what we're going to do. We are developing our own site. But even before that site comes up, as of this Sunday, if you are someone, as of this Sunday and going forward, when you go to get your first shot of vaccine, you'll get your first shot and you'll be handed a card, not just identifying which vaccine you received but an exact date and time of when you're going to get your second dose.

The citizens of New Hampshire should not be asked to come back into this very difficult system, frankly, to reschedule. So we're going to take care of that for you. We're going to be right on top of it. Of course, if you want to change that for some reason, you'll still have the opportunity to go in and change it. But we're going to set that up and make sure that that is in the system as you're leaving the site, nothing that you have to do. You just have to show up for that first shot and we will take care of scheduling the rest. And then, obviously come back to the location and time that it indicates on that card.

As we get bigger with our sites, as we roll out more and more vaccine, some of our current sites where we're offering vaccination, they may change a little bit, because we're going to frankly move a lot of these indoors. We can actually increase our thruput if we put it indoors. We know weather is a factor. So, as it gets to be a little tougher on the weather scale potentially in February, we want to make sure that we can account for that. And also moving indoors will help kind of give that assurity (ph) that the system will have the thruput that we're expecting.

So, it might not be -- your second shot might not be in the exact location as your first shot. But it will indicate on that card the time and location. And the good news is, we just don't want to ask the citizens of New Hampshire to worry about that anymore. We tried it the Federal way. That's not working. This is New Hampshire. We're going to jump right on top of it and just find a better solution for our citizens. So we do apologize. We own that very, very aggressively. But we're also going to do everything we can to own the solution for the people of the State, as well.

Someone asked me just before I came out here about -- if you haven't heard the news, we got this great opportunity, changing speeds a little bit. Kind of a good-news story that came out this week was we know the Super Bowl is coming on Sunday. And I think a lot of folks will be glued watching Tom Brady going against the Kansas City Chiefs.

But, I did get a call from the Kraft family last week and they offered tickets for at least four individuals, Nurses that have been on the frontlines working hard. They wished -- obviously, it's something we wish we could offer to the thousands of Nurses and individuals in our long-term care facilities, in our hospitals that have been doing some really, really incredible work.

But that was a really nice gesture. And so, they're going to have quite a day. I think they're going to be flown down on the Patriots' private jet and have quite a day watching the Super Bowl. There's all this other stuff they're going to be doing and then flying back. So that was just, I think, a great story, and it's the least that folks can do just to say thank you to those who have been working so hard for nearly a year now on the frontlines of this pandemic. And obviously Sunday's game will be something to see for all of us. I'm picking Tom Brady by six points, myself. But, I guess, with that, we can open up for questions. Adam?

Q&A Session

Governor, can you describe the process by which you chose VAMS? It sounds like a lot of other States took a look and ran the other direction.

Governor Sununu:

So a lot of other States -- again, we were the last State to actually have a vaccine registry. Virtually I think every other State had a vaccine registry before we did. So, our vaccine registry was allowed, as this whole crisis was hitting us. So that's one of the reasons we ended up kind of falling into the VAMS System. It was kind of the Federal fallback, if you will, because we had never been authorized to do a vaccine registry. So that was one of the reasons. It did have a scheduling aspect to it.

We have been working on developing our own system. It's just a matter of really accelerating that to make sure that we can get it up-and-running a little bit faster, so we can get ourselves, the backend of the program, off of the VAMS System. VAMS will still keep track of who has had the vaccine. But it's really using it as the scheduling module that we're trying to get away from.

So, Governor, you'll have a scheduling module for the State of New Hampshire, instead of using VAMS. Is that fair?

Governor Sununu:

On the scheduling side, yes.

And do you know when that will be up-and-running?

Governor Sununu:

I'm not 100% sure. The good news is that folks that can register for the vaccine, that being in Group 1A or 1B, the vast majority are already in the system. So that's good. And the frontend of that system worked pretty darn well. It was really the second-dose piece that kind of got screwed up.

So, whether it's in the next few weeks or at least before Group 2A comes out, we will definitely get up-and-running. But, because most people are already in the system, that's great. We can kind of just make sure that, as they get that first vaccination, we will take care of the second one for them. And then, we will phase in the State system, as we need it.

So, in speaking about that card that you're talking about, that starts for people getting their first dose on Sunday?

Governor Sununu:

Sunday, yeah.

And they won't need to do anything on the website any differently?

Governor Sununu:

Nothing.

When they show up, they're going to get their appointment card?

Governor Sununu:

They'll get the appointment card. They don't need to do anything differently. We will take care of the rest. They just need to show up for their second shot.

Okay. And when you say the people who have already tried to schedule their second dose and they've been pushed back, and you're saying that they should get their vaccine within a week of their scheduled date?

Governor Sununu:

Of their scheduled date, so if you're...

Right, what's a scheduled date?

Governor Sununu:

Scheduled date would be the 21- or the 28-day buffer that the vaccine requires.

Okay.

Governor Sununu:

So let's say, for example, you take the Pfizer vaccine, which I believe is 21 days, right? So, if I get the Pfizer vaccine, let's say I were to get it on February 1st, let's say.

Yeah.

Governor Sununu:

By March 1st, 28 -- or I'm sorry, 21 would -- by the 22nd to the March 1st, that would be a 7-day window, we're promising that there will be a spot for you in that window. You shouldn't have to wait six, seven, eight weeks out to get that second shot. And I know the scheduling system pushed people out there. And what we're opening up now, for those who have already received their first vaccine, is all those second-dose appointments.

So you should still go into VAMS. If you've gotten your first dose already, you should go into VAMS, if you haven't already. Reschedule that second dose; there'll be more and more opportunities to do that over the next 24 to 48 hours.

Most folks have already been able to switch and change it. So a lot of the problems has been taken care of. But I have no doubt there's a few thousand people out there that haven't come back onto the system to try to reschedule. They should. And if they can handle that in the next couple days, this is this kind of rough window, these folks that really got pushed out unnecessarily. Those are the ones we're trying to make sure come back into the system.

And if you don't, if there are folks that, for whatever reason, don't come back in to change it, we're going to do everything we can to reach out proactively to them and make sure they know there's an opportunity. I think that's off to Perry and Beth, and Dr. Chan, and Commissioner Shibinette, the whole Team at HHS. We're trying to take a very customer service, proactive approach. We don't want people to go through these struggles anymore.

One last thing on that, we spoke with several people who have their vaccine appointments about 50 days out from their first dose. And they're nervous right now to cancel that. They're being told they have to cancel in order to rebook.

Governor Sununu:

Yeah, that stinks.

Should they be nervous about canceling that?

Governor Sununu:

That's one of the things I hate about this Federal system. We're telling you to cancel and don't worry. It'll be sooner. And when we did that, we didn't meet that commitment. That Federal system could not handle that commitment. And that is what -- I think all of our heads almost popped off, frankly.

So, we're saying go back in. I know it is a bit of a leap of faith. But go back in and cancel. You'll be able to reschedule up. And if you can't, just try again another day. We need another couple days to get these last of the appointments in. But within the next couple days, everything should be in there.

And if, for some reason, after all this, you're still stuck, do not hesitate to call 211. Our Team can absolutely take care of it on a one-to-one basis with folks. This has been the -- this thing has gone really smoothly up until this week. And so, I think it's a four- or five-day bump in the road. But, for us, that's a lot. That's a lot. We kind of have some pretty high standards here. And so, again, if folks can be a little bit patient, if they still can't get in for some reason, call 211. We will take care of them and we will make sure they aren't waiting 50 days, that they're going to be within a week of that scheduled date.

Governor...

Oh, go ahead, Kevin.

Governor Sununu:

Oh, okay.

Governor, with regard to the discussions you had with Pfizer's CEO and the other Manufacturers here, as Director Daly said, next week we're looking at 21,000. If they do hit their metrics a month from now, what kind of dose volume could we be seeing?

Governor Sununu:

I think we will be double -- approximately double. Yeah, I think that's generally what we're hearing from them. And that math works out, if you will. So we're 0.4% of the country's population. So let's do some rough math.

At 100 million doses, that's about 400,000 just from Pfizer, by the end of March. That would take care of 200,000 people, because you need two doses per person for that first and second dose. If Moderna meets their goal of 100 million, that's another 200,000 people.

So if they're meeting their goals, then we should get most of Phase 1A and 1B fully vaccinated by March or April, which is why I know folks are nervous if they see April and May on the schedule. We have a lot of confidence that everyone's going to be able to be moved up. And again, after Sunday, they won't have to worry about how fast they get moved up. We're going to move it up for them. We're going to have those scheduled times guaranteed for them. It takes it right out of their hands. And all they have to do is show up for that second shot.

But, it was a very promising conversation. And to hear it from the actual Manufacturers who are in those factories who understand all the pushes and pulls, look, a factory could get hit with an outbreak. There could be bumps in the road. They were very clear to say they've been very fortunate not to have anything slow their process down, as of yet. But, if everything stays on schedule, I think, as Governors, at least, we all walked away more confident from that conversation than any conversation we've had with the Administrations, either one.

In regards to the second-dose scheduling, was there any thought to maybe make this decision earlier, make it last week before all this, or...

Governor Sununu:

Well, again, as of last week, we had no reason to believe the system wasn't going to be able to handle the second-dose scheduling. It was only on, I think, late-Monday night, early-Tuesday morning. And I say that as if there was a break, but I know some of these folks were up literally all night long for a few straight days. That's when we realized that the system just couldn't handle it. And then, we said, okay, let's find out a plan. We're always going to have Plan B and Plan C ready to go. And we did. And we're able to talk about it just a few days later.

If you could, we've heard from about trust with seniors and the internet. We've heard from a lot of them that once they canceled that appointment and then they couldn't get that second appointment that they don't trust the system. You mentioned leap of faith. Could you just speak to those seniors about why they should...

Governor Sununu:

Yeah, so, again, I completely understand folks having that fear factor. If we could, we talked about the whole idea of canceling and rebooking after-the-fact weeks ago. We knew that this was going to be a bit of a problem weeks ago, because it just didn't seem -- even if the system worked completely as it should, it was still going to be a bit of a leap of faith. And then, it didn't work. And so, we definitely sympathize and understand the anxiety, the frustration, the whole thing. And it's very much understood. And that is on us. And we have to own that, to be clear.

But, going forward, we do have confidence in that, as we have keyed in these news appointments, we are hearing it is working. So, I heard today from a variety of folks saying, hey, I tried to move my appointment yesterday. I couldn't get a better time. I got those calls today saying, hey, wait, I tried again today and the times opened up in my area. That's great.

So, it does require a little patience. It is a bit of a -- maybe leap of faith isn't the right word. But trust but verify, I know. And if, for some reason, it doesn't work, we're not going to let you just hang out there. Call 211, or if there are folks, we will do our best to proactively reach out to them, as well.

And lastly, what do you say to the people who are still trying to schedule their first dose and having trouble, or their first dose still seems too far out there?

Governor Sununu:

Well, the first dose can be scheduled. There's enough appointments for folks to schedule the first dose. And it will be a bit far out, because, again, as we go from 17,000 to 20,000, 21,000, maybe in the next couple weeks we get to 24,000 or even 30,000 in the next few weeks, again we will be able to move folks up in that scheduling system.

Governor, can you just clarify when it was you knew it wasn't going to work? You were saying last week. And because it seems like some of the problems were...

Governor Sununu:

No, no. It really wasn't. I want to say Monday night. I think it was Monday evening is when we looked. Yeah, Perry, why don't you come? Perry was really on the frontlines in terms of when it really started to hit us.

Commissioner Plummer:

So, it's a great question. About 10:30, 11:00 that -- the night before it was rolled out, we saw some glitches. So people stayed all night to try to fix those glitches. And we thought we had it fixed for that 8:00 rollout. We got all the appointments reentered and it was ready to go.

And then, at 8:00, they -- right before that, they tested it. It worked fine. And then, at 8:00, they turned it on and it was a problem again. Another glitch had come in it. So, that night, we knew that they had some appointments that were problematic in there. So we rebooked them in there, worked all -- we had Staff stay all night long to try to fix that. We thought we had them fixed and we literally tried it 15 minutes before it went live and it worked. So, that's unfortunately, when it went live, it did not work.

We know we have about 4,000 people that we have to hand-schedule still. That's down from about 25,000. And we're hoping to work through all those this weekend, as well, to hand-schedule all those people that have had troubles for other reasons, whether they had their own computer problems or those types of things, or did not have technology. But that's down from a list of 25,000 down to about 4,000 right now, as of this morning. And they've been working through those all day.

And Governor, do you mind? Sorry, just explain it again. So, the lack of a State vaccine registry left you with few options in the initial aspect. But some States went out right away and said, we're going to do our own website. Can you take us through your decision process when that was and why you decided to go with VAMS and not try to stand up your own website, and how the lack of a State vaccine registry impeded you, if it did?

Governor Sununu:

Sure, it absolutely impeded us. A lot of States have had their State website and vaccine registry up for years. Some of them actually years, and so they were able just to kind of revamp what they already had. But they had that backbone infrastructure in place, able to really revamp it to be very specific to include scheduling and whatnot.

We had nothing as of this past summer. So we quickly started designing our own site, building our own site. And again, I think maybe about 10 States have been relying on the VAM System. They're all having the same problems as we are. I can't speak to what their solutions are going to be.

Ours are simply to say we're moving off the system, or, at a minimum, we're moving to a system where our citizens don't have to rely on VAMS. At a minimum, we will be able to manage VAMS and take care of it. We're not abandoning it altogether. But we are going to make sure that the citizens don't have to interact with those potential problems going forward.

We heard from several people who say they actually have called 211. They've called many of the numbers on the State's website and they can't get through, or it's been an hour-long wait, or it's been -- and for some of these seniors, they're sitting there waiting, hanging by every second.

Governor Sununu:

Sure.

And an hour is forever.

Governor Sununu:

It is. It is. So we have anywheres (ph) at any given time 200, 300, 400 people in our call center. But when 25,000 are trying to get through -- and each call, we put that -- we don't want you to talk to a robot. We want to put that one-to-one customer service, as best we can, to help people through the system and allay those anxieties. Those calls can take not just 2 minutes but sometimes 5 or 10 minutes. So it does add up.

And I know we're asking folks to be patient. We're going to keep our call center fully staffed, fully loaded. We have, since this whole process started. And those that get through, it's been very successful. But we do understand. That's why I keep going back to that word "patience". We do understand. And we are asking folks to be patient, knowing that they may have to call back or be on hold for an extended period of time. We're just working through all of them.

The good news is, is that, while we had about 25,000 that we had to hand-key in, that's down to about 4,000 now. So we're about 80% of the way there. So those call wait times should be less, hopefully. And if folks just keep trying, if you're on the website and you can't get through, try again tomorrow if you don't see a site. Over the next couple days, you should be able to find a time that meets the criteria of making sure you get in, in a reasonable time, and be able to move you right up very, very easily.

And that's really going to -- that really affects those that would get their second shot in late-February or potentially even early-March, right? It's those that have gotten the first but are still waiting the second. There's that small window of about a week-or-two of individuals, those first two weeks of Phase 1B, that it's really affecting the most. But the -- about 80% of them have been -- of the new appointments have been put in. The last 20% will be put in over the next day-or-so.

Governor, is there anyone tracking customer satisfaction with the 211 Operators? That is people we've talked to sometimes have a negative experience. Is there a way? I mean, are you working to improve, when you do have obstacles with certain Operators? And a follow on that, are there -- the Operators doing other jobs at the same time? Or are they dedicated to 211 fulltime?

Governor Sununu:

The Operators are fully dedicated. They're everything from men and women of the National Guard. Some folks in the private sector are donating their time. But they are fully dedicated when they're taking calls. They're not off taking a few calls here and working on something else over there. They are fully dedicated with eyes on the system. I've been to the center. They got a couple screens in front of them. They have all the information at their fingertips. I don't know if we're tracking customer satisfaction as part of the process.

Commissioner Plummer:

Do you want me to speak to that?

Governor Sununu:

Yeah, sure, go ahead. I'll bring Perry up again.

Commissioner Plummer:

It's a great question and we started building out a customer service survey. And quite frankly, the call center was a little overwhelmed and we had to reassign those Staff to actually answer calls. So, that is on our radar. We do want to do that.

And we do want to say that, throughout this process, some of the frustration with the 211 was the fact that the 211 people answering the phone could not go into VAMS and manipulate VAMS for them. So they had to work through that. So, a lot of times, they walked through everything possible that was wrong with their computer or answer other questions and that went really well.

Where the call people got dissatisfied with 211 is when they couldn't navigate VAMS and that email was stuck in their computer, or something our call taker could not navigate that for them. So we had to elevate that to a higher level, which was obviously a smaller group of VAMS Administrators to try to do that, and they were backed up.

We think that this move with separating ourself from the frontend of VAMS, public-facing side of VAMS, will fix that, too. Right now, our wait times are in the 20 minutes, 15-minute range. So -- but we recognize that, when we have a surge, there's wait times. And they queue up. But we keep adding Staff and training Staff as much as we can to do that. We've had surge Staff in there, unfortunately, to train them. And VAMS took a long time. So, we're training more people up. But if it was a VAMS-specific problem, it frustrated people.

Perry, real quick, in regards to scheduling the second appointment, should you have just given people that second appointment when they booked their first appointment? Was that not an option for you guys, or did you...

Commissioner Plummer:

It's not an option in VAMS. And one of the problems that we had early on -- we would have opened up second appointments earlier. But, as most of you know, with the VAMS System, it opened up a bunch of clinics that were not ours for view.

Now, that had nothing to do with us. We couldn't see those. But whether it would be hospital Employee clinics that they had for their Employees that weren't supposed to show up -- or the expectation was they wouldn't show up in the Federal system, or even some Federal sites that were restricted for Federal Employees.

And so, we had about 3,000 of our citizens register with us, went perfect, opened up the site, saw that Federal site, and said, I'll go to Pease. They clicked on Pease. They got an appointment at 8:30 the next day and they're as happy as can be, only to wait a few days and have some Administrator go in and say, wait a minute, you're not eligible, because you're not our Employee, and cancel that.

We had no knowledge of that. We had no visibility on that, because it's not our site. We found out when they started calling 211 saying, how come I got canceled? And we're looking at our system and saying, well, you didn't get canceled from our system. What happened?

And so, we found these sites across the State that they were able to enter. So, what happened is we had to fix 3,000 people. Last Sunday, we went in and were able to do impromptu clinic and get 1900 of those fixed. The hospitals did some others. So, most of those are fixed.

But if we had opened up the second appointments to view them, we were scared that that was going to happen again and make it worse. So that's why we didn't book first and second at the time, because, quite frankly, we were scared that someone would take both of them. It was a limitation of the software. So now we're just trying to fix that. And it -- the bottom line is, we just want to take it off their plate and make it so they don't have to worry about it.

How would you characterize what happened with the second doses with seniors being leery of the internet and then canceling their appointment? I mean, would you say it was a disaster, or how would you characterize it?

Commissioner Plummer:

Well, I mean, anything that's not -- in my eyes, anything that's not perfect for our citizens is a disaster. But with that being said, the people that couldn't go in, or got booked their second appointment way out, they were seeing first-dose appointments, because we didn't put our second-dose appointments up there. So, we could have communicated that a little better. Yes.

But the truth is that nobody missed their shot. People were frustrated because there's a lot of anxiety. I want to make sure that, in three weeks, I get my appointment. Now it's April and that timeframe isn't what I want. But nobody missed their shot. It was more anxiety than anything else. And I understand that. The consequences of not getting a shot for them is high. They're locked in their homes. We want to get all of New Hampshire back to normal, so as quick as we can. And we're working on that.

But, you can't roll out something. I mean, if you look across the State, every State has their idiosyncrasies, even the States that are labeled as the best of doing this, or best of doing that. They've all had their idiosyncrasies. We had a bump. It was bad. It was unfortunate. We own it. And -- but we're fixing it as quickly as we possibly can. And I think the Governor is right on when he says, our fix is to take it off their plate and do it for them, so they don't have to worry about it.

Governor Sununu:

Maybe we can some questions on the phone?

Holly Ramer with the Associated Press:

Hi, thank you. Did you bring these problems with VAMS to the CDC's attention? And if so, what kind of response did you get? And then, also, beyond all the confusion and frustration that residents experience, do you feel like the State wasted time and money using that system, given that you now have to build a whole new one and get all the call center workers and everyone else up-to-speed on how that will work?

Governor Sununu:

No, so great two questions there. Yes, we've been working with the Federal Partners at the CDC, the folks that manage VAMS on the Federal level through this entire process. The response has been, yeah, we're seeing similar problems in other parts -- in other States and other parts of the country that were using this system for the same type of scheduling protocol that we were using. So, that, unfortunately, meant that we weren't unique. I guess that's somewhat comforting, but not really, because you still have 25,000 citizens that were getting pushed out unnecessarily through the system.

In terms of, did we waste money? No, we've always been -- it's always been our thought process to design our own registration system. That's something that has been authorized through the Legislature and the Executive Council. So we were building that system. We're just kind of accelerating the process and we're looking to get it up-and-running maybe a little faster than we originally anticipated. We've always planned on having a call center. We always planned on having a process in place. So I don't believe there was any wasted money.

As Perry said, this has created more of an anxiety problem than anything. That's severe. I mean, folks already have anxiety over COVID and over getting a vaccine. And this kind of exacerbated that. The real good news here is that nobody has missed their appointment for a set first shot. No one has missed their appointment for a second shot. We haven't missed or failed on that commitment at all, and we don't expect to, going forward.

So, it's a scheduling issue. It created a lot of anxiety. It was unfortunate, to be sure. But the Team has gotten right on it. And we're moving forward with a couple different solutions, both short- and long-term solutions, so the citizens shouldn't have to worry about that any further.

Nancy West with InDepthNH:

Yeah, good afternoon, Governor. Thanks for taking my questions. I've got a couple here that I'd like to ask you. And we keep hearing so much about these new mutations of the virus that some people are saying, we're really in a race to get these shots in arms. And I'm wondering when are all the people in Phase 1B going to be fully protected with both shots? And my second question is: a lot of reports are saying that only 60% of the doses that we've received have actually been given to people. And I'm wondering, what's the holdup there? And also, one last thing: would you mind going over the vaccine update? I couldn't quite keep up with all the numbers. Is that anywhere online that we can keep an eye on how many vaccines are being given out each day? Thank you.

Governor Sununu:

Sure, let me answer. Oh, sure, let me answer a couple of that. There are at least three new mutations that have been identified. And it's something that we've talked about with Dr. Chan. It's something that I brought up with the CEO of Pfizer this afternoon. There are -- they are actively looking at how the current vaccine can treat, or protect, against those mutations, and looking at trials even in variants of those vaccines going forward.

So, right now, it appears that those new mutations, as Dr. Chan explained, there definitely seem to be more transmitted, a more aggressive strain. Doesn't necessarily bring on more severe symptoms, there's no direct evidence of that just yet, but it -- these mutations may be much more aggressive.

In terms of getting everyone in Phase 1A and 1B fully vaccinated, to be clear when we say everyone, it's everyone who's going to choose to take the vaccination, because it is not mandated, will not be mandated. So, depending on what the uptake is, and given that both Moderna and Pfizer think that they can commit to their 100 million doses in the next two months, there's no reason to believe that somewhere in the March-to-April timeframe, we can't allow everyone who wants that first and second shot of the vaccine to get it.

So, that's not a promise, by any means. But the rough math says we should be able to get there. Now, if things change, they change. But that gives us a lot of hope that our initially designed timeframe, we will be able to meet and move into Group 2A sometime in the early spring.

You talked about only 60% being administered. Please remember that a large portion of the doses that have been allocated but not administered is in the second shots that are currently held by the PPP program, that being CVS and Walgreens. We gave them all of their first and second shot allocations within the first couple weeks of this program. And they kind of have been holding onto it.

It can be a little frustrating, but the whole point was to make sure that they had what they needed no matter what Phase 1A, especially in long-term care, was going to get, their first and second dose. That was a requirement of the Federal Government. So we had to basically give them about 60,000 first and second doses early on. And not all of those have been administered.

They're kind of going through their process. They're going through their scheduling. The vast majority of the first shots are out. A large portion of the second shots are out. But they're still hold -- there's probably 20,000 doses right there that they've been holding.

Anything else that might have been, again, allocated but not administered yet, it really could just be doses that we've either allocated to our fixed sites, allocated to the hospitals, or maybe even allocated to the congregate facilities that have been scheduled but have not been administered yet. So, for example, if you have a home that has a lot of elderly that might have developmental disabilities, they are a congregate setting that we have allocated first and second shots to that we are scheduling them. But, again, we haven't actually gone in and administered yet, for different scheduling reasons. There could be a variety of reasons there.

So, no State has administered all of their vaccine, because you're always going to have a bit of a buffer, given the amount. 17,000 or even 20,000 doses came in this week for second shots that are just getting administered now. So you're always going to have a bit of a buffer. So there's a variety of reasons why no State will ever be at 100%.

Obviously, we are sending out as many -- putting out as many shots per week as vaccine as we get in. That's about as good as you can anticipate. And then, as we get through that PPP program, as that Group 1A gets finalized, I think the amount that comes out and goes in -- or I should say the proportion that has not been administered yet will shrink, because, again, it will have been -- the largest part of that proportion is sitting in the PPP program.

And finally, in terms of the vaccination numbers, we have administered 148,000 shots to-date. 110,000 of those are first doses. And 38,000 are second doses. Is there a location? There'd be a little lag in terms of what you can see on the website, because from the time the dose is administered, it gets into the system. There'll be a couple days' lag for the time, in terms of what you're seeing on the website, to, for example, today's data.

Dr. Daly:

They go in our Friday update.

Governor Sununu:

They go into our Friday update of the website.

Dr. Daly:

And eventually they'll be on the dashboard.

Governor Sununu:

Eventually, they make it on the dashboard. So, every Friday we update the website. And then, eventually, they'll be updated through the dashboard, as well.

Michael Graham at the New Hampshire Journal:

Thanks so much. I've got one question for the Health Professionals then one for the Governor. First, to Dr. Chan and the Team, yesterday and again today the White House Spokesperson said that, even after receiving the vaccinations, people will still need to socially distance and wear masks. It will be essential. Others have said it will be required. Is that true that once you've had your full regimen of vaccinations, one or two shots, etc., that you're still going to need to behave as though you are unvaccinated? And are you concerned that that message will discourage people from getting vaccinations who were on the fence in the first place? And then, I have a question for the Governor.

Governor Sununu:

Okay. Yeah, I'll have Dr. Chan come up and talk about that.

Dr. Chan:

Yes, thank you for that question. And I think that's an important point that the currently available vaccines that we have, the Pfizer-BioNTech vaccine and the Moderna vaccines, are estimated to be about 94% to 95% effective at preventing COVID-19. No vaccine is going to be 100%. And now we have these new circulating variants that are of concern for being more infectious and more transmissible.

And so, the vaccine will be the primary way in the future by which we control spread of this virus. But, until we have very high levels of vaccination throughout the population, even people that are fully vaccinated, even people that have previously been infected need to continue to wear their masks when they're out in public, need to continue to avoid social and group gatherings, because no vaccine is 100%. And so, it's always possible that people can be fully vaccinated, or have immunity from prior infection, and still acquire another infection, or have a very mild case of COVID but still be able to spread it to other people.

Obviously, once we have very high levels of population vaccination, that becomes less of a concern. But until we reach those very high levels of population vaccination coverage, the recommendation from the Federal Government, from the CDC, from New Hampshire Public Health continues to be that people need to take additional precautions, on top of getting vaccinated, to continue to control spread of COVID-19.

And that was why, in my initial remarks, I have been trying to stress the point that vaccination combined with the normal community mitigation guidance continues to be important for controlling the spread of this virus. Thanks.

Governor Sununu:

Thank you, Ben.

Michael Graham at the New Hampshire Journal:

And then, Governor, yes, the -- there's still -- there are parents who are very frustrated that their schools are either in classroom closed entirely, or on minimal amount of classroom activity. I spoke to a woman today who felt she had to get her child into a classroom setting and her family's struggling financially to pay for the private school. She says they've even faced eviction. And so, two questions. One is: with the CDC saying yet again yesterday that classrooms are safe for Teachers without vaccinations, what's your message to the Teacher? And then, can you explain to parents, if the educational freedom account legislation that the House is considering this week -- has considered this week, were in place, how it would impact parents who really have no choice but to have their children in school somewhere? That's my question.

Governor Sununu:

Sure, so a great question. It was -- I guess it was reassuring, I think, to see President Biden's Administration and his CDC Director come out very aggressively yesterday and say there is no reason kids can't be back into school safely. There's no reason Teachers can't be back into that classroom safely.

The vast, vast majority of parents are frustrated. The vast majority of people agree. These classrooms need to be open. And I've been very vocal about that. I know the Union Leadership might disagree for various reasons. Those reasons simply are not good enough.

These kids need to get back into the classrooms. From the Federal Government-on-down, there's obviously nothing political about this. You have the Republican Governor and the Democrat President saying in unison, open these classrooms and get these kids back in. It is so important to their overall health and wellbeing. They are safe.

In terms of the education freedom accounts that are being proposed, again those would provide the opportunity for folks to take a portion of the funding that follows the -- that should be following the child and use it how they want to use it, to direct the funding to the best path of education for their children, whether it be an issue around COVID, school closures, just a more integrated programming, maybe more focused programming to the skillset and I should say the learning style of their child. It could be a variety of reasons why people might choose to use the State's funding for their child as they wish, instead of being forced into just a one-lane system.

And obviously that legislation is designed to simply provide opportunity. That's it. It's just about saying, as a family, as a parent, as a child, you have some choice now. You have some say in the pathway.

And I have no doubt that, given what has happened with COVID, a lot of frustrated families in Manchester and Nashua, especially, that are desperate to get their kids back in, they're desperate to get back to work fulltime. And some of them just to get back to work at all, some of these parents are simply out-of-work because their younger child has to be at home, and someone has to keep an eye on that child. And for a variety of reasons, they can't get back to work.

So it's a real significant domino, especially in those communities, that has to move forward. There's absolutely no excuse not to move it forward. And I think those Superintendents, those School Boards, those Teachers, whatever it might be, have to start having real tough discussions about not just if they're going to open but when. And I think the when is right now. President Biden thinks the when is right now.

They have to start looking to ramp up, because we are getting vaccinations out there. Outbreaks are coming down, outbreaks not just in long-term care, outbreaks in the school. We've had very, very few. But what few we've had, we have even less now.

So, we're on a really, really good path here. The school systems can't just sit on the sidelines. And I've talked to Superintendents directly that are as frustrated as anyone that some of their own systems are closed. They're fighting that fight to get some of the school districts open. I know Concord and other cities, some of the Management Team there is working very hard to try to get those schools open but keep hitting that roadblock.

Every argument's there to open them up. There's very little argument not to. And so, I think it's just -- it's an important issue. And it's an important issue for families. It's not political at all. It's just an important issue for families and to get these kids back in, some of which haven't been in school for almost a year. Think about that. Some kids haven't been in a classroom in almost a year. Now, that is not a good thing. It's really not. We had to do what we had to do early on. But there's no reason not to at least open up with some flexibility, given the successful models we've seen all across the State.

Todd Bookman at New Hampshire Public Radio:

Thank you. I have two related questions. The State has recorded five additional deaths since December for people aged 20 to 39. Could you comment on the circumstances of those deaths? Were they Healthcare Workers? Were these people living in institutional settings? And then, second, we know that three Healthcare Workers have also died of COVID-19 since November. Is the State able to share any information about those fatalities? Were these Doctors? Were these Nurses, Home Health Aids, any information on that?

Governor Sununu:

Those are very -- you're asking about eight very specific cases out of, boy, approximately 400-or-so. So, we can look into that for you, to be sure. But unfortunately, we don't have those details at our fingertips here. But, we will have the Team look into that and try to get back to you, Todd.

Alexander LaCasse at Seacoastonline:

Hi, Governor. And I'm not sure if this question's more appropriate for you or Perry. When you say that this -- and this is back for the second-dose issue -- when you say that this is kind of just a bump in the road in terms of scheduling, what assurances do you have from the CDC that they're -- you won't run into other glitches, and then you're here having a similar conversation, and just the level of anxiety among people waiting for

that second dose is that might heightened? And then, you stressed the importance of having a Plan B, Plan C. In your mind, what does that look like, in case you do run into more glitches?

Governor Sununu:

So, a couple things here. I'm not asking the citizens of New Hampshire to take any sort of assurance from the CDC. I don't take any assurance from the CDC. That's exactly why we're changing. We're already going to Plan B and C, as we were laying out earlier in this press conference, in terms of what that looks like.

That looks like having our own system. It looks like making sure that the citizens are the ones that don't have to go in and schedule their second dose. It's automatically scheduled. It's handed to them on a card. So they -- once they are registered the first time, they don't have to go in and mess around anymore.

Over the next couple days, we are asking some of the folks that were caught in this really funny zone over the past week to still go in and register their second shot. But, as of this Sunday, they'll be handed a card. And we will take care of the backend for them.

So, I would never ask the citizens to have -- say, don't worry, the CDC says it's going to work. I would never say that. I ask them to trust our Team, what we're trying to do and the changes that we're making to handle it as the New Hampshire system, right? Anything we've learned is, again, the Federal systems just they can't be relied upon. So we're going to take it upon ourselves, have a New Hampshire-driven system, and be able to kind of patch the holes a little bit, if you will, and to move forward so that, again, most importantly, people are not going to get their second shots in any sort of extended timeframe, within a week of that date, of that Pfizer or Moderna date. And that's as good as anybody can ask for. And that's the guarantee that we're making as a State, not through the CDC. Okay, all right. What else do we got?

Just to follow up there, Governor.

Governor Sununu:

Sure.

Just to clarify, you kind of pile it on the Federal system here, but you chose it, right? So who's ultimately responsible for what's going on?

Governor Sununu:

Oh, we chose it. No, look. I've said it three times. We own this problem. The State absolutely owns this problem. And we're fixing this problem. We're walking away from the Federal system. We put our faith in it, didn't work out. We're not waiting. We're not telling citizens, look, just trudge through it for a couple more months. We own the problem. We apologize for it. We're moving on. We're going to build our own system and we're going to count on the people of New Hampshire, and the Team here in New Hampshire to get it done.

And most importantly is, again, I -- we know it's created a lot of anxiety. This has not been a disaster. It would be a disaster if people weren't getting their shots. It would be a disaster if the whole system completely failed. People are getting their shots. This is a scheduling issue. Don't want to minimize it, because it creates a lot of anxiety, but we're jumping right on top of it. And it's something that can be fixed.

Disasters can't be fixed. With Perry Plummer, the Team at HHS, they can fix virtually anything, because if push comes to shove, we will go to Plan B and C and we will do it ourselves. That's exactly what we're doing.

Does the New Hampshire system need VAMS to function at all? Or will it function totally on its own?

Governor Sununu:

That's a good question. I mean, VAMS will still keep track of who has gotten the vaccine. We will take care of the scheduling upfront.

Governor, TSA Workers have expressed some frustration at not being put in line to get the vaccine. I know you've had a lot of requests, whether it's Airline Pilots or Appliance Manufacturers. But, are these folks -- can they make -- they're trying to make the case, we're First Responders. How come we haven't been able to get it done?

Governor Sununu:

Yeah, and TSA is not a First Responder. They're not providing emergency medical attention, potentially life-saving attention to individuals on the frontlines. They're not Law Enforcement. They're not Firefighters.

So, again, I wish we could give it to everybody. They've asked and I'm not trying to pile on TSA at all. But, they obviously are not First Responders. There are Members of TSA that are, that kind of work part-time and they help out in law enforcement, or they're part-time Firefighters. And they obviously all qualify. But just being TSA, in and of itself, it's not a First Responder and has never been identified.

And so, it is interesting. They're Federal Employees, technically. The Federal Government is vaccinating a lot of Federal Employees. I don't know why they weren't included with the Federal Employee program. But you'd have to ask them that. I don't know why they weren't included in that.

But they'll be able to register for the vaccine, like everybody else, as their time. One thing that we all agree on, and I think everyone understands now, is you got to put the most vulnerable first. That's just it. First Responders, Healthcare Workers, and the most vulnerable; and virtually every State is going down that path. And if you do that, you can get those vaccination rates up with those very vulnerable populations. That's how you see that fatality rate come down, the hospitalization rate.

One of the most amazing statistics that I personally think is going underreported is that, if you get the first and second dose of your vaccine, or what Johnson & Johnson is saying, with what you can happen with one dose, and then you allow for that 14 days for your antibodies to build up, the hospitalization and fatality rate will go to zero. That's their claim. That's their claim, not mine. That's a pretty amazing statistic and a pretty amazing incentive to get the vaccine. It works.

You still may have some symptoms. But the symptoms are not significant enough to allow for hospitalization or even death. Virtually nobody, that has been the case. So that's an amazing incentive. And that tells me, again, if folks get the vaccine, especially in these vulnerable populations, that's how we're going to take the pressure of the healthcare system, make sure people feel safe. Allow the masks and the restrictions to get back to normal, whatever that might look like.

And again, the blessing is it really doesn't affect the younger population as severely as some of the other populations. And that allows for whether schools be open or whatever you might see. We've seen other cases in history where children are just as affected as adults by different pandemics. But luckily that's not the case in this one.

Governor, on the issue of schools, last year you were all about touting flexibility. And now, it seems like you've taken a firmer position in terms of what you think should happen. Schools should reopen. Can you describe the evolution of your thinking there? And if this is really the goal you want, why not use more of your emergency power or change the guidance to make it happen?

Governor Sununu:

Yeah, so we obviously wanted to give schools all the flexibility in the world, depending on the level of COVID they had, and the fact that it was such an unknown. I mean, remember, March, April, May, it was such an unknown. We didn't know how it would affect kids. We didn't know how easily outbreaks might happen within schools.

We gave them flexibility in September. A large portion of our schools chose to open. And they've done successfully. So the change in thought is because of the change in data. The data says and the models show it can be done successfully and safely for both students and Teachers, even when you've had clusters of illness. The vast majority, if not all students, get better and they're back in the classrooms.

We've had a few cases of Teachers get COVID. They come back into the classroom. So overwhelmingly, it has been a very successful model. And we're just asking those closed schools to look at those models of success. And that gives us a lot of confidence, and why I'm more firm, and a lot of folks are more firm. The CDC is more firm. The Biden Administration is more firm that these schools and should open.

It's not just about the pandemic. It really isn't. It's about the whole health of these kids, the mental-health issues. This past week, we had an amazing young man, Charlie Olsen, who is the Kid Governor, right? Every year, we do a Kid Governor. And his focus, his platform, if you will, was all about childhood depression, the stigma around it, and the issues that get exacerbated by the remote learning.

A lot of kids deal with remote learning just fine. A lot of kids don't. And it's the isolation, not just with education but the isolation because of other recreational activities or social activities with their friends. It's a variety of things that can happen there.

And so, as you're going through that as a child, and you're home alone, you don't feel like -- maybe you can talk to your parents, but there's no one else to really reach out, offer an opportunity. That's a very big deal for a kid.

And Charlie spoke so eloquently on it and was so passionate, and so not just articulate but incredibly smart about his ideas. We're putting money behind it and we will announce that, as I've said, in the next budget, putting some real money behind these programs. I think it's one of the number 1

issues with all the new education funding that we have, the number 1 issues that schools can and must take up, whether it's through a socioemotional learning platform, additional money for Guidance Counselors, whatever it might be. Buddy Programs, that's something that Charlie talked about. So every kid knows that they have a buddy they can talk to, when they're feeling down, and to the point of not just feeling down but real depression.

These are realities for thousands of kids in our State now. And these are things that can help be dealt with, if we can get them back into the classroom. And I'm just imploring those who have been resisting going back into the classroom to understand the whole health of the child has to be considered when you're making that decision to open and close.

And yes, I think as we get more of the vulnerable population vaccinated, as we start looking at reducing any of the restrictions we have on businesses, obviously comes the flexibility we've given to some of the schools. There's going to be a much firmer push. We're trying our best. I think all the arguments are there. All the reason is there to open up. We're hoping that they do it on their own, so we don't have to come down with an iron fist.

But if I have to come down with an iron fist on behalf of these kids, you're darn well right I'm going to do it. But we think -- and I really hope -- that most of these districts understand how important it is and they start having a change of heart. It has to be about the outcomes for these kids. I don't mean to go on so long about it. But I can tell you it's really the number 1 issue this State is going to be facing over the next 12 months beyond the pandemic.

Okay. Well, great. Well, thank you, guys, very much. Two things, two quick announcements before we end. I think next Thursday I have my Budget Address that will be hosted live at 12:00, if I'm not mistaken. So, we will be doing the press conference next Tuesday at 3:00. We will kind of split those two things up. So, next Tuesday at 3:00, we will have our next press conference. I'll bring people up-to-speed as to how we're doing the vaccinations, testing, all of those sorts of things.

And next Thursday at noon, I'll be doing a brief presentation on the budget process, which, boy, that has evolved a lot over the past few months. But I think it's going to be some good news for a lot of opportunity for the State of New Hampshire. Thank you, guys, very much.