



Office of Governor Christopher T. Sununu  
Press Conference  
Thursday, February 18, 2021 at 3:00 p.m.

---

**Governor Sununu:**

Well, good afternoon, everybody. It's great to see everybody. We have a bit of a crowd today. That's always a good thing. Very cognizant that Ellen is coming on at 4:00 and New Hampshire's own Elliot Perry is going to be on there. So we all want to watch Elliot. So we will be very cognizant of time. So, with that, let's kick it off with a Public Health update from Dr. Chan.

**Dr. Chan:**

Great, thank you. And good afternoon. So just a brief numbers update for today: we are announcing 461 new people diagnosed with COVID-19 in New Hampshire. In the last week, we continued to average around 350 to 400 new infections per day. And in fact, the last few days, the daily number of new infections that we have announced has started to slightly increase.

Part of the reason for this increase, actually, is that we are actually seeing more infections in the last few days at some of our colleges and universities, which I'm sure many of you are aware of. And in fact, out of these 461 new people today diagnosed with COVID-19, 141 of those are associated with colleges and universities. And so, in the last week, we've been average probably about 90 new infections per day at colleges and universities throughout our State. And so, we continue to work with our educational institutions to do the contact tracing and the investigations to figure out why we're seeing some of the increases and to implement measures on these residential school campuses to try and break the chains of transmission, and continue to be able to host in-person learning, and continue with the educational objectives.

There are 3,048 people with active infection. Our test-positivity rate continues to average about 4.4%. Over the last week, this has been stable in the last several days. So while it's substantially down from in weeks past, in the last week-or-so it has been hovering around 4.5%.

And thankfully, hospitalizations are down. We're at 126 people hospitalized with COVID-19 statewide. And just of note, this number, 126, was the number of people hospitalized at the peak of our first wave of the pandemic back in April and May, so an improvement from where we were, but still high levels of hospitalizations, high levels of community transmission still throughout the State.

And then, unfortunately, two new people who have died from COVID-19 that we're announcing today. Both of these individuals are associated with long-term care facilities, bringing the total number of people that have died during this pandemic in New Hampshire to 1,150.

So, we continue to recommend and encourage people to please get vaccinated when it's offered to you. But please also continue to practice the social distancing. Avoid the group and social gatherings. And please wear facemasks when in public. In fact, there was a new study put out in the last week by the CDC which showed that if two people are together in an enclosed space and both individuals are wearing

masks, and both individuals are wearing masks that are multilayered and well-fitted, that if one person has COVID-19, the other person's exposure could be substantially reduced by more than 95%.

So, masking continues to be one of the key, or the core, mitigation measures that we have to prevent spread of COVID-19. And this study highlights the importance of everyone continuing to wear facemasks when in public locations where other people may be present. And I will hand things over to Dr. Daly for a vaccine update. Thank you.

**Dr. Daly:**

Good afternoon, everyone. I'm going to provide an update on progress with our vaccine administration. To-date now we have administered 228,000 doses of vaccine here in New Hampshire. This includes 156,000 first doses and 72,000 second doses of vaccine. That means, at this time, 11% of New Hampshire's population has received one dose of vaccine, and 5% of the population has been fully vaccinated.

This week, we received a slight increase in vaccines, 22,475 doses. And next week, we will receive another increase to 27,740 first doses. So this is an increase of over 5,000 doses for next week. In addition to our State allocation, additional vaccines are coming into the State through the Federal Retail Pharmacy Partnership with Walgreens.

And in terms of the Long-term Care Facility Pharmacy Partnership, all of our facilities that have enrolled with that program have had at least a first-dose clinic. And 75% have also had their second-dose clinic. So they're schedule to complete all of those second doses by the end of this month. These pharmacies do go in for a third visit. It's a catchup visit where they can vaccinate anyone who started the series at their second visit. And all of these visits should be completed by the end of March.

Our Regional Public Health Networks have been conducting clinics for long-term care facilities that did not enroll in the Federal Program. 19 long-term care facilities have had their first-dose clinics through these Regional Public Health Networks. And five have also had their second-dose clinics. The rest of those second-dose clinics are all scheduled.

In terms of an update on the Equity Allocation Program, it continues to grow, as our Regional Public Health Networks engage their partners that serve vulnerable populations. Since the beginning of this program through this week, 44 vaccination events have been scheduled with plans to administer 4400 doses of vaccine, which is about 71% of all the vaccine that we've allocated to this program to-date. Many of these events are serving lower-income senior housing.

Our State and hospital-run clinics continue to operate and are administering more than 4,000 doses on most days. We still are scheduling first-dose appointments for anyone who registers new in our system. And those appointments are available in April.

And then, we also have plenty of second-dose appointments for you. So if you are due a second dose and do not have an appointment, please reach out to us at 211 so that we can make sure that you get that second dose. Thank you. I'll turn it over to Commissioner Shabinette.

**Commissioner Shabinette:**

Good afternoon. We're going to continue to look at the positive trends in long-term care outbreaks. I am pleased to announce we are closing 13 outbreaks today. They are listed on the slide. And we are only opening one new outbreak at Mt. Carmel Nursing Home in Manchester.

This brings us to a total of 11 institutional outbreaks, eight of which are in long-term care. So, over the last several months, we have seen this continue steady progress in our outbreak numbers in our institutional settings.

I'm going to shift gears away from COVID just for a moment to talk about pediatric psychiatric care. Over the last several weeks, we've seen the children's waitlist for psychiatric beds at historic levels. As of today, I've commissioned New Hampshire Hospital Leadership to dedicate 10 beds at New Hampshire Hospital to serve children with mental health crisis.

This is something that we have done for many, many years and just transitioned out of children last year. So we are going to allocate one of the units that we have in the building that was previously serving adults to serve children at least temporarily through probably late-spring.

Given what we understand about the acuity rate for the kids, we anticipate that the waitlist will be brought down fairly quickly, as we bring kids in to assess, evaluate, and discharge with an appropriate Plan of Care back to the community. This temporary move will be in effect until late-spring. We will continue to work with our community providers to execute our long-term strategy, which is something that we've bid out and procured over the last several months. And we're in the phase right now, where we're about to start awarding some of those contracts. So we will execute our long-term strategy to increase access for vulnerable kids, both inpatient and in the community.

In addition to that, Hampstead Hospital is working over the next several months and anticipates having additional beds become available in May at their hospital. And finally, we are working with our partners in the community to actually open up additional adult capacity to make up for the beds that we will be taking offline at New Hampshire Hospital to serve children. Thank you.

#### **Governor Sununu:**

Thank you very much, Commissioner and Dr. Daly, and Dr. Chan. Couple data tables, we haven't looked at data in a little while. And as everyone knows, we tend to be very scientific-based, databased, metrics-based, so folks understand very transparently what we're doing and why. So there's a few slides we're going to show here.

As Dr. Chan said, this is our percent-positivity. So the rate at which we are detecting positive cases of COVID across the State, you can see what happened here in the spring with our big surge. A lot of that was also due to the fact that we weren't, at the time -- didn't have the ability to even test asymptomatic individuals. Obviously, as we've been able to do that, the numbers get a little more accurate.

And you can see the second surge in positivity rate over on the right side of the chart there. You can see we actually have leveled out over the past few days over the percent-positivity. Frankly, that's the university system. And the good news there is a lot of those students tend to be asymptomatic or just have mild symptoms. But it is creating a real pressure on the university system. And as a lot of folks know, both UNH and Plymouth State have both gone remote. I think they're both in a fully remote-learning model right now, trying to make sure that we're also minimizing a lot of the social contact.

I know it's a shock that college kids like to be social. But it is creating a real pressure. And a lot of this is driven by COVID fatigue. I've been on the phone with the university system and both the Presidents and some of the Members of the Boards and the Administration. They still have, I think, very good protocols, aggressive testing protocols. That's terrific. But I think it's more just a factor of the students getting a bit of COVID fatigue.

But we all have to stay very disciplined, with social distancing, minimizing the social interactions, wearing our masks, and those sorts of things. And so, hopefully this little temporary plateau, which is also being seen across the country, you see university systems across the country having the exact same problem. We're not unique in this one. But like we said, the good news is the vast majority of those individuals are asymptomatic, or with mild symptoms. And so, hopefully it's something that we can remedy in the short timeframe.

Hospitalization, one of the key metrics that we look at is hospitalization and fatality. And this is the number, the daily count, our daily census of individuals in hospitals on any given day. And as you can see, we've peaked out at one point just about 350 beds in our hospitals were taken with COVID patients, just about a month and a half ago. And you can see this very steep, precipitous drop with the number of individuals with COVID-19, just over 100, about 125 today. And so, obviously, that is on a very positive trend.

And again, I go back to what I say all the time. This is all done to make sure we're not overwhelming the healthcare system, overwhelming these hospitals beds. The good news is, while we had the real spike here, a lot of hospitals were able to stay open, especially for emergency services, but even for some selective and elective procedures. And obviously, as that number comes down, hospitals have more flexibility. The whole system is able to function, as it really should, without that burden, if you will, of the COVID beds and the quarantining.

This also very much helps with workforce and staffing: Nurses, Doctors. A lot of those folks can be back into this atmosphere, because they were quarantined very much when there were more outbreaks and whatnot. But this allows more workforce flexibility, as well, which is always one of our challenges.

And then, unfortunately, this is our -- the seven-day average on fatalities deriving from COVID. So obviously, we had our spring surge here -- sorry, the -- yeah, last spring's surge and then this winter's surge, as you see over there. But, again, a very precipitous drop in fatalities, which is, I think, a combination of both the seasonality of this latest surge combined with the fact that vaccinations are going out.

We have a very high rate of second vaccinations in our long-term care, if you look at the number of vaccines we've given in our long-term care facilities. We are one of the highest States in the Country in terms of administering that second vaccine, well over 50%. Most States aren't even at 50. Have already received their second vaccination, which is a really, really great sign. And within the next couple weeks, that program will kind of go through their third iteration of offering a vaccine to individuals.

So, we've been doing a very good job there. And that's what this is all about, making sure our most vulnerable citizens and those that take care of our most vulnerable citizens are prioritized with the vaccine. And obviously, we're -- and we will keep watching these numbers. And as these numbers hopefully bottom out and we know that they can be stabilized, that allows us to create more flexibility with any of the few restrictions that we do have in this State. We can keep building on that flexibility.

And as I've been saying for the past couple months, I really think Memorial Day is a good marker for us to know that we're going to have a strong summer. I think we feel very confident that we will get through not just Group 1B but even 2 or well into the 2B group of vaccination. And those are our most vulnerable citizens, by far, that make up the vast majority of these fatalities and hospitalizations. And as we get through that, that's going to give us a lot of confidence to create more flexibility.

The second issue that I want to talk about before we open up for questions really builds on, I think, a lot of the aggressive proactive measures that the Department of Health and Human Services is taking

around behavioral health and mental health for children. So, on March 16th a year ago -- it's unbelievable to think that we're almost a year into this whole pandemic. On March 16th, 2020, the State did make a very tough decision of bringing all schools remote.

And then, as folks know, we -- Dr. Chan and his Team created a great set of guidance documents that allowed schools some flexibility, knowing that every school's a little bit different, so that they could come back to fully in-person, or a hybrid model of learning, or even be remote, if they so chose. And what we've found is that about 60% of the schools -- just shy of 60% of the schools in the State have some sort of hybrid model. The kids are at least coming in a few days a week, which is great. I think about 35%, 40% are in a fully in-person model. And there's still a few schools out there that are still fully remote.

In the coming days, I think probably tomorrow, I will sign an Executive Order that really says that all schools have to come back into at least a hybrid model of learning, at least a couple days a week, starting on March 8th. All K-12 schools must provide the option of in-person learning at least two days a week, starting on March 8th.

That is going to give schools at least a couple weeks, if not a little more, to really make sure that they are fully operational with an in-school model. Hopefully -- and I believe most schools that are even fully remote have been gearing up and preparing for this. I think they know that, at some point in the spring, that everyone had to open up and provide this model.

It isn't just so the kids come back and have a more fuller, robust learning model. It really is for the behavioral and mental health, the isolation issues that so many of our students have been bearing with. We see that number of kids in our Emergency Rooms waiting for a bed to get evaluated and worked through the community mental health system or other opportunities that they can have to deal with a lot of these issues.

But there's no doubt that the issues have been vastly exacerbated by COVID. And there's no doubt that allowing these kids -- everyone, everyone across the State to be in an in-person model is going to have beneficial effects for these children.

We will continue on our path, in terms of vaccinations. Group 2A is essentially the Teachers. And we were already working on a model to make sure that as soon as we're ready to go with Group 2A, we can get the Teachers vaccinated in a quick and safe way. But the data is all very clear. Whether it's the CDC, the State, everyone has said that there's no reason that these schools cannot open, even without a vaccination. And the model has been borne out time and time again.

And a big thank you -- I just want to take a moment to say a big thank you to all the Teachers and the Administrators who have made those sacrifices, who have changed their traditional model of education to make sure that they can stay open in some way. It is those individuals, those schools who have really provided a model of success for others to look to and copy to. And if you have any questions about how to do it, chances are the district right next to you is already doing it. So pick up the phone and talk to those folks.

And we have a great collaboration amongst our Superintendents and our School Boards. So, there's no reason that this can't be done. It can be done very successfully. And we're giving schools about two weeks-or-so to actually make it happen.

So, it can be a hybrid model. It doesn't have to be five days a week. But it has to be at least a couple days a week to get some eyes on these kids, get that personal relationship reestablished between students and their Teachers, which can really benefit the child and the kids in so many different ways. With that, we can open up for questions. Paula, how are you?



## Q&A Session

*Oh, hi. I was interested in what form of law -- or what you're using to mandate this, and whether other States have looked to this. And have you used another State Law?*

### **Governor Sununu:**

Well, prior to COVID, schools had to stay open. Prior to COVID happening, we're just going back to effectively that model. We're still providing some flexibility, but schools have to be open for kids. Now, if schools need to close for a day-or-two to clean or something like that, or temporarily, if they have a cluster of illness or an outbreak, of course they're allowed that flexibility. But anything beyond that would require the expressed written consent of the Commissioner and our office for any extended period of time. But we're just basically going back to the way it was, if you will, and using the same tools that we have in the toolbox to ensure that schools stay open for these kids in more of a traditional sense.

*And with other States, are there other examples in other States?*

### **Governor Sununu:**

Oh, there's States all over the Country that have said, yes, schools have to be open. Absolutely; we're not the first by any means. Yeah, we've allowed a lot of flexibility for our districts to gear up, time for them to gear up. The money, the resources, it's all there. I mean, most schools still haven't even drawn down on their additional COVID money that's -- I think of the first round of additional COVID funding that was provided, the \$37.5 million, I think, as of last week, maybe \$7 million had been drawn down by school districts. So there's still a lot of funding and opportunity there. And that doesn't even include the additional \$150 million in the second round that they've already approved. So there's a lot of resources and opportunity there to do this and do it right.

*Governor, with Massachusetts schools on vacation this week and New Hampshire next week, why not wait to at least see if there's a bump in cases after February break?*

### **Governor Sununu:**

Look, we've had 10 times the number of cases that we're seeing today and schools have still been open successfully. So if you're asking whether the hospitalization rate amongst children is going to skyrocket, no. That's not going to happen. We feel very confident. We've played that out for months and months. The data says that's not going to happen. So it's not just about cases.

We're going to be dealing with COVID and high numbers of COVID cases for years. I really believe that. I hope not. But I believe it. I think this is something that we're all going to have to manage through. Now, we will have so many more tools in the toolbox, with therapeutics, with vaccinations and whatnot to actually manage this in our everyday lives.

So, the one silver lining, if you will, of this terrible pandemic over the past year is it really doesn't affect children and younger adults like it does older. And so, the schools have shown that even when we do have -- college students this week are a great example. Most of those people -- kids are all

asymptomatic, or very, very light symptoms. The vast majority are going to be just fine. And so, we have that same confidence and have shown that model to be proven out to be very successful.

*Sure; is there a concern health-wise, with schools vacations with New Hampshire and Massachusetts these two weeks? Is there a concern that there could be more cases?*

**Governor Sununu:**

Yeah, anytime I think that where there's a vacation, it could be over a long weekend, or we saw a little bit of the Thanksgiving bump, a little bit of the Christmas bump, I imagine there'll be a little bit of a vacation bump, as well. But, again, within this population specifically, even if there's a bump in cases, it's nothing that can't be managed and no reason to keep schools in a fully-remote option long-term.

*You've heard, as you know, the Teachers Union saying the Teachers need to be vaccinated before all schools can be open. I know you disagree with that. What can you...*

**Governor Sununu:**

Most everybody disagrees with that, by the way. Thank you.

*I wonder if you could update us on what's the best guess on when that next phase will start.*

**Governor Sununu:**

I think early-April. That's a rough guess right there. Sometime in the April timeframe, I hope it's early-April. Well, there's no promises on that.

*Right.*

**Governor Sununu:**

And we're looking at a couple different ways to do that. There's approximately 50,000 Teachers, Administrators. And we will make sure that Group 2A does have -- covers everybody, not just Teachers in the classroom, but Administrators, Janitors, Substitute Teachers, School Bus Drivers. Those are all going to be included in that group.

And again, there's a couple different ways to do it, because that's all of 2A right there. So we could do it by school district. We could set up our own internal sites by district. We could direct them directly to our already-open sites across the State. So we're looking at a couple different ways to do it, just to make sure that we're efficient and we get them their vaccines as well as we can, so we can get to the group, 2B, as quick as we can.

*What do you think of the new Administration's messaging on this? I don't know if you saw it.*

**Governor Sununu:**

Confusing, yeah.

*Elaborate.*

**Governor Sununu:**

I think the Biden Administration has been very confusing, because they came out with the right message. And it is the right message. When the CDC Director, and they say, yes, of course kids can be back in the classrooms. Teachers don't need vaccinations to open up those classrooms. The President has said that. The CDC Director has said that. And then, I think politics got in the way and they tend to back away from that. So they've let politics kind of confuse the issue on their level.

But we don't look at the politics. We look at the data, the science, and the successful models that we have not just here in New Hampshire, but all across the Country. And so, we're just asking folks that the very few districts -- I want to say there's like four or five, maybe a half-dozen schools and school districts that have not opened yet. It's very, very few here in New Hampshire. And so, we're just asking them to look at those models and pick the path that best suits their needs and most importantly their students' needs to be successful.

*Governor, we're still hearing from some people in Phase 1B who are medically qualified, who have had the Doctors send in the information. They've been waiting for the call. They've not received the call. And they call 211 and 211 tells them to wait for the call. So, how many people are still in this situation, is your estimation? And what should these people do if they're still stuck in that limbo?*

**Governor Sununu:**

Very few; I mean, I appreciate there could be some out there. But of the over 300,000 that qualified as Group 1B, I feel very confident in saying that's a very small percentage. So, again, if there's individuals, they should contact us, whether it's through 211, through the website, going onto VAMS and just registering themselves, making sure that the Doctor has truly given all the information.

A lot of times Doctors will preregister them, but they don't have their email, or the Doctor didn't have the best phone number for them. So when they preregister them, maybe their information has been out-of-date. We've found a lot of folks that, oh, I don't use that phone number anymore. I gave that phone number to my Doctor a few years ago. So we're trying to call them, but we're calling on a number that the Doctor gave us but that hasn't been in service for a while.

So, there could be a variety of reasons why that happens. But it really is a small percentage of folks. So, we'd just ask them to reach out and contact us as best they can. And again, we will work with 211 to make sure the messaging is there and we can get folks registered as appropriate.



*Should they believe they've checked all those boxes, they know the phone number's correct. But they call 211 and they're told to wait. So, I mean, I guess we have one case in particular where somebody's hit this wall and they just don't know where to turn.*

**Governor Sununu:**

Gee, I mean, let us know. I mean, let us know. Again, one of the benefits of being here in New Hampshire is we're happy to put kind of a lot of one-of-one information on it. So, I can't -- I don't know that case in particular. And I'm not saying there aren't any out there. Of course you're always going to have random cases here-and-there.

But, overall for the 300,000 folks that have got in, we obviously had -- a couple weeks ago, we had the scheduling snafu. But those issues and those bumps in the road have really been minimized. And I think we're just trying to put the best effort we can on it. So, yeah, just let us know if there are individual cases out there.

*To reach herd immunity, are we getting there?*

**Governor Sununu:**

No.

*No?*

**Governor Sununu:**

No, look, what is herd immunity? Even Dr. Fauci talks about herd immunity at 80%, at 60%, at 70%. Even if we had vaccination for everyone in this State, are 70%, 75% of people in the State going to take the vaccination? Probably not.

*But within the 1B category, you said there's 300 [sic] people that have signed up. There were 325 [sic] in that cohort. That's a very large -- or there's an indication that they're -- a very large percentage of those people want the vaccination.*

**Governor Sununu:**

Of the 300,000-plus that qualified under 1B, how many -- I'm looking at Perry -- how many do you think we actually have that have chosen to register for a vaccination?

**Commissioner Plummer:**

So, there's a lot of double registrations.

**Governor Sununu:**

Yeah.

**Commissioner Plummer:**

People didn't get their email (inaudible). So they've registered three, four, five, six times. So we're cleaning that up. And I'll definitely have the numbers a little bit better. But...

**Governor Sununu:**

250?

**Commissioner Plummer:**

Probably less.

**Governor Sununu:**

Probably less; so I'm going to be conservative and say maybe 250,000 of the 300,000 in that group. But if you're talking herd immunity, you're talking about statewide or really large-swath immunity. It can't just be -- you don't just get herd immunity in the 65 years old-and-up and call it a day, because they interact with the community.

Herd immunity, on a scientific basis, is really about not allowing the virus to be transmitted at all. In theory, if you have the right herd immunity -- and I'm pretending to have Dr. Chan's job for a second. So he'll come up and correct me. But, in theory, the virus loses its ability to be transmitted. You don't just have the are-not value under one. It really gets dropped precipitously.

As we get further and further out with the 50-and-up, the 40-and-up, the healthy 20-year-olds, are we going to have 75% of healthy 20-year-olds take this vaccine? I wish. I hope we do. And you should all get the vaccine. But right now, probably not, we have to be realistic.

So, it's really about making sure that we're offering it to as many people as possible. In the long-term, I mean, we hope as many people take it. It's safe. It's been proven at time over. It's completely effective against removing folks from the risk of hospitalization or fatality. That's terrific. I mean, they all work really, really well.

But we've already seen just the numbers in the most vulnerable population still aren't at the 80% or 90% range, right? So, I think it's just logical. And to say, well, we're not going to keep restrictions on until we get to herd immunity, I don't know. There's a chance we never get there.

*If you get an appointment and you get a better appointment, do you have to call and cancel it? Or does it automatic -- is the system automatically set up to...*

**Governor Sununu:**

We're moving folks up. Yeah, we're the ones moving folks up for the better appointment. So, yes, we would cancel that appointment.

*So you don't have to call back and say, hey, I already got the vaccine?*

**Governor Sununu:**

No, because we'd be the one calling you to move you up.

*But if you go to a public health clinic like the...*

**Governor Sununu:**

Oh, I see what you're saying. See, that's a very good question. So those are some of the -- in essence, that's a temporary duplication that we would have to go in and manually remove from the system. So that could take a little time, as well.

*So if you get an opportunity to go to one of these low-income sites, community health clinics...*

**Governor Sununu:**

If you qualify and have an opportunity, yeah. A lot of people kind of double-qualify. I'm over 65 but I'm part of a homeless population and there's a mobile site coming. Yeah, of course. Get that vaccine and we will take care of it at the other end.

*But you should call the VAMS or...*

**Governor Sununu:**

If you can, yeah, it'd be great to know that.

*So you'd have an extra spot?*

**Governor Sununu:**

Yeah, yeah. Am I saying that right, Perry?

**Commissioner Plummer:**

Yeah.

**Governor Sununu:**

Yeah, okay.

*I have another one on the Executive Order.*

**Governor Sununu:**

Sure.

*Will they be required full days or -- because I know there are some districts that are doing half-days...*

**Governor Sununu:**

At least two days, I mean, we're not going to set an exact you have to be in for a certain number of hours. But, kids have to have in-person learning at least two days a week to qualify as a hybrid model.

*Okay, so technically it could be like a couple of half-days that add up to two full days?*

**Governor Sununu:**

I suppose. That would be horribly inefficient and really missing the point of actually opening the doors. And like I said, the good news is, you're really only dealing with maybe a half-dozen districts that are not open at least in some fashion.

*Governor, how quick -- and I know some of this is contingent on vaccine supply. How quickly can you get through that population of 70,000 Teachers and Childcare Workers? I guess what's the goal? How quickly can they get vaccinated? Will they be done presumably before the end of the schoolyear?*

**Governor Sununu:**

Oh, yes, absolutely. No, I mean, I think we could probably do it in a few weeks, a month, something like that. Yeah, maybe. I mean, that's why I kind of put the rough April to early-May timeframe. But, yeah, given the amount of vaccine we're getting, the amount of first doses we get on any given week, it's now -- is it over 20,000? It's over 20,000 on any given week. So the math says that we should be able to work through that population, if they all choose to take it, by the way. And it's not going to be 100%. But, yeah, we should be able to work through that population in a few weeks.

*Can we hear from Dr. Daly about the percentage of people in long-term care who received the two doses of vaccine, versus of percentage of clinics completed? I mean, with the metric that was given, I'm just curious what percentage of the long-term care population has actually been inoculated.*

**Dr. Daly:**

Okay. Do you want me to come up?

**Governor Sununu:**

Yeah, why don't you come up for the microphone?

**Dr. Daly:**

So, the question is: what percentage of the long-term care facility population has been vaccinated at this point? So when we look at these data -- and you probably have heard that New Hampshire has one of the highest rates of vaccination in our long-term care facilities for both residents and Staff. And so, that is true. About 77%-or-so of the residents are getting vaccinated in these facilities. And all of the facilities at this point have had that first-dose vaccination opportunity. And then, most of those individuals also go onto complete the second dose. I don't have that data with me today. But it's very high.

*So it's getting close. I mean, if 80% is a considered threshold for a possible herd immunity, we're on our way there. Yes/no, in long-term care?*

**Dr. Daly:**

We're in good shape in long-term care. But, again, the vaccine's not 100% effective, nor do we have 100% of people vaccinated. So, it won't -- it's not going to completely eliminate this virus.

*And I guess given the number of outbreaks are so significantly down, can long-term care, can they look to relaxing some of the restrictions with more visitations?*

**Governor Sununu:**

It's down. Soon, I don't think we're there yet. I mean, obviously we want as much visitation as possible. If you're not in an outbreak and you don't have any -- yeah, okay. I think Commissioner Shibinette knows I'm about to screw this answer up. So I'm going to let her.



*Thank you, Commissioner.*

**Commissioner Shibinette:**

Thank you. So a lot of the restrictions in long-term care come from our Federal partners, not necessarily from our State partners. So what we're doing right now is we're working with our Federal partners to really utilize what we know today and maybe edit what the restrictions were in the spring, because our information today is better than what it was in April or May, when these restrictions were put in place. A lot of it is definition and open to interpretation. So, right now we are actively working on editing what we have in New Hampshire and working with our Federal partners.

*Commissioner, one follow-up for you. What happened with the Philbrook Building, related to the children in the ER boarding? I know that was just a solution that was discussed in September of last year. Was that capacity just immediately filled?*

**Commissioner Shibinette:**

So, the Philbrook Building was built out to be transitional housing for adults. And we completely -- yeah, we are full 100% of the time, 100% of the beds. It opened in September and we were almost immediately full. So those 16 beds there, they're 100% occupied. So that was additional capacity that we built out.

We also built out additional capacity on what was the Children's Unit. And basically what we're doing is we're taking one side of the kids' unit -- what was the kids' unit that now housed 10 adults and we're converting that back to children's services just for the time being.

*Just out of curiosity, ballpark, how much more capacity would the State need for there not to be an issue in the ERs?*

**Commissioner Shibinette:**

For kids?

*I guess, globally.*

**Commissioner Shibinette:**

Oh, globally, I don't believe it's a bed issue. And I've talked about this numerous times over the last couple of years is that, at the same time as we have 40 people waiting to come into New Hampshire Hospital, we have 60 waiting to go out. And we have a lack of community services.

So, our strategy is around building supported community housing in the community and enhancing the community supports that we give people to live and live a good quality of life in the community. So, I don't necessarily think we need additional beds. I think we need additional inpatient beds. I think we need different types of beds: supported housing beds; transitional housing beds; affordable housing beds. Those are the types of beds we need, not necessarily in the hospital.

*Governor, this is pretty exciting. The Fisher Cats announced that May 11th they'll be doing their season opener. Does that mean that we will start to have some events indoor, SNHU, or outdoor, to be able to have whatever kinds of events and...*

**Governor Sununu:**

Yeah, I think that's the hope. I think a lot of people are gearing up for that, as I believe they should. I think this summer could be a great opportunity. I think hopefully by this fall, especially when you get to fair season and things like that, that those opportunities are happening. But those take months to plan. And so, I think folks are doing right by at least planning and assuming that these trajectories that we see and these data trends that we're seeing, the success of the vaccine all leads to things being much more relaxed and with a lot more opportunity.

So the Fisher Cats' announcement was great. That's a terrific organization in Manchester. It's run very well. They've got a great relationship with Major League Baseball. It was unfortunate to see across the County, you had certain Minor League Teams have to close up their stadiums, but not here in Manchester and in New Hampshire. And we're very proud of that, partly because there's a lot of great attendance there. It's a very well-run organization and provides a lot of support, not just to our community but they do a lot of community support, as well. So we're just thrilled that they're going to be open and they're going to be playing ball in May.

*Continuing on that question, there's probably a lot of brides out there wondering about their summer, as well as concerts, all sorts of open venues and summer camps. Will you be revisiting some of the restrictions related to COVID-19 in the coming months, especially those specific to the summer?*

**Governor Sununu:**

I think we all anticipate revisiting all those restrictions that we've put on. Again, you can have weddings here and all of that sort of thing. You can even have the summer camp going. We did last summer.

But, hopefully, we can provide some more flexibility and restrictions. But it all has to be data-driven. It isn't because I want it to be. It isn't because we hope it should be. It really has to be because, again, we do the right things: keep wearing the masks; social distancing; keep the numbers down. Hopefully as more folks take the vaccine, it works, especially in the vulnerable populations. And the hospitalization really can plummet.

*Is there a key metric that you'll be looking at in that?*

**Governor Sununu:**

Hospitalization and fatality, absolutely. That's -- I mean, that's it. And the demographics of that, not just the overall number, but the actual demographics surrounding that. I'm not saying we're ignoring the number of cases in the State. But that becomes much, much less of an issue because we know that the cases can be high with still -- without creating -- without having people get the very severe symptoms that would require hospitalization or even cause the fatalities. And that's what it's all about.

I imagine. I don't know. I guess I assume at some point we're all going to get some form of COVID, right? But the vast majority of us will be able to have those symptoms. It'll be minor. There'll be therapeutics in case it gets too severe. And then, obviously even if we need boosters every year, hopefully that'll become available. But we will see how all that plays out. But right now, I think everyone knows we're on a very, very good track here.

Sorry.

**Governor Sununu:**

No. Yeah, then we will go to the phone.

*Should colleges and prep schools, and other housed education be allowed to let their students leave with quarantine restrictions to go home, if they...*

**Governor Sununu:**

If they're in state, then we do allow them to go home. But they should not be put on public transportation to fly home, if they're from out-of-state or public buses. Of course, we reemphasize that all the time. And I think that the university systems have been very good about trying to manage that as best they can.

I mean, look, if students are living off-campus and they take their own path, I suppose that can happen from time-to-time. But I know the universities have been very, very strong about making sure that that doesn't happen and trying to tell folks, look, just quarantine where you live. If you want to go home to your home within New Hampshire, obviously that's fine. But you have to maintain those quarantine provisions. And staying away from public transportation or large gatherings outside of your immediate family is very important. Let's take a few on the phone.

**Michael Graham at the New Hampshire Journal:**

*So, big announcement about reopening schools but a setback for your Education Freedom Accounts that you've been supporting in the House today when the Bill was not move forward. And it's one of the things you've talked about as a solution in the future when there's a problem with opening schools with giving parents more options. What's your response to that? And what would you say to the people on the Committee and in the House who weren't able to move it forward?*

**Governor Sununu:**

Well, again, that was not my Bill, per se. We really didn't have any direct input on that Bill. I know there were some amendments. I couldn't even tell you what those amendments were. I know there's another Bill in the Senate being moved forward. And so, there's still an opportunity to do it. So, like any legislative process, I think they're just trying to do it right.

But I got to be honest. The Senate and the House are the ones you really have to ask about that. I think it's a good idea. But obviously you have to do it in the right way. And you need to get the votes and hopefully some bipartisan support, if possible. And it does create a lot of opportunity. But, again, we

weren't really -- that wasn't my Bill. We weren't really driving on it. So I can't speak too much about the hows and whys. Oh, okay.

**Todd Bookman at New Hampshire Public Radio:**

*Thank you. I've got two questions. First, could you clarify what vaccination sites are supposed to do with any leftover doses at the end of the day that are on the verge of expiring? And does that guidance change if it's a hospital versus a community health clinic? And then, second, we've -- you mentioned the rise in cases in college towns. Is the State taking any additional action to work with colleges or college towns to try to keep these cases from spreading into the broader community? Thank you.*

**Governor Sununu:**

Sure; so, if there are cases -- and there usually are of a little bit of vaccine that has been essentially thawed out, ready to go, but isn't used at the end of the day, I think the vast majority of our vaccination sites have done a very good job just bringing people in. They always have a phone list that they can go to, where they can call folks and bring them in and make sure that none of that gets wasted, or at least a minimal amount gets wasted. And I think we've been very, very good. I think we're at or below, or around 1% of waste, which you don't want anything wasted. But that's a pretty darn good statistic.

In terms of the colleges, yeah, I've been on the phone and talking to both the university system. I know the Department of Health individuals have been talking to folks in the private college and the universities and just reiterating that we're here for them, whatever they need in terms of resources or whatever it might be.

I think they have been doing a very good with trying to maintain the guidance. It really is up to the students to adhere to it, right? It really is up to the students to, I think, have their best practices in place, in terms of masking and social distancing.

Masks work. I mean, there's no question. Masks absolutely work. Social distancing works. It's not a coincidence that there's virtually no flu. I mean, there's virtually no flu around America or in this State right now. Sinus infections are down. Ear infections are down. There's a reason, because what we're doing actually really does work. And so, the proof is there.

I don't mean to take us off on a tangent on the question. But I think colleges are doing a good job with their guidance, pushing the messaging. And unfortunately those schools who have had to go remote, I mean, the message is there. If you want to be in class, you kind of have to do the right things to make sure that that can be done in a safe and healthy atmosphere.

And so, we will keep working with them, make sure all resources are available. It's not a funding issue. They're still testing like crazy, which I think is wonderful. And we will just stay with them kind of every step of the way until they kind of get this under control and hopefully get those numbers down.

**Tony Schinella with Patch:**

*Thank you, Governor. Question about the Windham voting irregularities from the general election; if you're not familiar with the situation, there was a bizarre discrepancy found during the recount of the Rockingham District 7 State Rep race where four Republican candidates were shorted between 297 and 303 votes. A fifth-place finisher, a Democrat, lost 99 votes. And then, three other Democrats were found to have been shorted 18 to 28 votes. The Attorney General's Office is reviewing this case. But many are calling for a public investigation, including an accounting of the number of ballots cast in the community, an auditing of*

*the software of the voting machines, and at least one other hand recount in the race to find out what happened, or if there were any other problems. And there are no laws or provisions to provide for this type of investigation. So I'm wondering. Should you be taking a leadership role, say, by signing an Executive Order to force an investigation or some other action to find the underlying cause of what happened in Windham? And if not, why not? Thank you.*

**Governor Sununu:**

Sure, so there's a couple issues here. Number 1, the Attorney General's Office is doing a review. That's underway. And we should have kind of their internal review of what happened and why in a short-term.

I know there's a Bill being discussed in the Senate that would also provide for that audit process, whether it's a recount or just an audit of the machines. I haven't seen exactly. But I know that they're looking at that. And I think those are all very appropriate steps to take, absolutely. So, I think the State is coming at it from a couple different angles.

The only silver lining of any of this is the fact that, in a State like New Hampshire, we're talking about 300 votes. And that's not to be minimized. Every vote matters. But, you have States that are looking at issues with 300,000 votes. And the fact that we can get granular and focus on one or maybe two machines -- I'm not sure what it is -- or the hand counting around 300 individuals votes, I think that speaks to the immense integrity of our system, the incredible accuracy through all the different communities in the State. We're talking about one or two machines in one community.

And of course, we're not going to let that slip by. We're going to attack it at all levels and make sure that we really get to the root of the problem to make sure that, even though it may have been a small problem, that it isn't systematic across anything. And that, again, just reassures folks, I think, that we have a great system in place to deal with these issues going forward.

***Karen Dandurant with Seacoastonline:***

*Thank you, Governor. Hey, I have two questions, actually. And they're both kind of related. I've been looking at the Beckett's Hospital Survey. And there's similar surveys done by the New York Times and the Washington Post basically rating States on how they're doing percentage-wise in giving out the vaccinations they're taking in. And New Hampshire came in 48th of the States, saying that doses distributed to the State were 321,625; doses administered 216,649; giving you a percentage of 67.36 distributed. So, I'm asking why that might be and wondering if it's because you're holding some back for the second dose, or if there's another reason. That's the first question. The second one is related to that. People that are concerned about this say that, with the variants, they think that getting one dose of the vaccine is better than getting no doses in regards to ending up with less severe cases if they do get COVID through one of the variants. And those are my questions.*

**Governor Sununu:**

Sure; so, I'm sorry. What was the second question? One is better than none, but I missed the question. I'm sorry.



***Karen Daurant with Seacoastonline:***

*Yeah; well, people are concerned that if you are withholding doses of the vaccination for some reason for the second doses, or whatever reason, that they think it's better with the variants if you're giving out people at least one dose, even if you can't get to the second one right away because of the variants.*

**Governor Sununu:**

No, okay. So, let's be clear. We are withholding nothing back. There's nothing being withheld.

***Karen Daurant with Seacoastonline:***

*Okay.*

**Governor Sununu:**

So whoever's saying that or whatever you're reading, that is 100% not true. The Beckett Hospital Survey, frankly, is massively inaccurate. I note this New York Times thing, it's really questionable about where they're even getting the data. I've seen it. I know exactly what you're talking about.

If you go to the CDC website, we're around the national average. We're ranked around 25th or something like that, in terms of administration. And that's about where we are. So I can't speak to the Beckett Survey, because that's a private individual survey. It's done with the newspaper. And nobody really knows exactly where they're getting their data. But we're not 48th. I can promise you that. Our system has just been working way too well and the numbers bear that out, to be sure.

In terms of the second question, look, one dose is better than none. But one dose is not effective against preventing hospitalization or fatality from this. So, you really need to get the second dose. So, yes, one is supposedly better than none, especially when it comes to the symptoms. But, for this vaccine to really work, you have to get the second dose for the Pfizer and Moderna. Obviously, there'll be a lot of opportunity when Johnson & Johnson releases theirs, as that looks to be a single shot.

And so, no, you really need to get the second dose. We're withholding absolutely nothing back. To be honest, both those questions are just based on bad information. I don't know a better way to say it to them. And we can stand by that 100%. We're doing very well here. Okay, great, excellent. Anything else here?

*I'm sorry.*

**Governor Sununu:**

Sure.

*AG, a note on the -- I'm wondering about who you are going to choose to be your new Attorney General. Have you made the...*

**Governor Sununu:**

No, I've interviewed them. So, the question -- sorry, that kind of took me by surprise. Who is going to be the next Attorney General? I'm not sure. We're interviewing. We have some amazing candidates. I'm interviewing a variety of different people right now. So, no, I'm not quite sure but I hope to have some type of announcement or nomination in, maybe even by the next Council meeting-or-so, something like that, in the next few weeks.

But, there's a lot of great candidates out there. It's a very important job. It's a 27-hour a day job. And Gordon MacDonald, he's left some very big shoes to fill, to be sure. But we got some great candidates that we're interviewing.

*As far as the scheduling snafu that you had, I know with Perry's help and Dr. Daly, you've gotten through this. But I know ideally you'd like to have the State System replace VAMS. What's the timeframe for that?*

**Governor Sununu:**

Yeah, so we have the option to bring a new State System on. We're going to do that to be sure. And we have a couple different options even there. We're looking at some options there. The vast majority of folks in 1B are already in the system. And so, I think we've made the decision we're probably going to run with the system that we have, and then we will kind of start with a clean slate as we open up either 2A or 2B, or those new groups, because that way folks come in. It's a one-stop shop. Otherwise you really have to ensure that you're transferring hundreds of thousands of pieces of data from the old system to the new. And there's very little benefit of doing that at this point.

So, very likely, by the time the next -- by 2A and 2B, we will get that up-and-running. But there's no rush to do it, because we really don't want to confuse the phases. We try to have a clean break, if you will, to move into this newer and much more efficient system.

Okay, great. Well, thank you, everyone, for joining us. I hope everyone stays tuned for the Ellen show. We have a New Hampshire hero that's going to be highlighted there. So that's very exciting. We will be back next week with another update. But keep wearing your masks. Keep with the social distancing. It is working. There's no doubt about it. That data doesn't lie. We're on a great, great track here.

The vaccines are coming out. Sign up; get the second shot, as well. But sign up, if you're in 1B. And we will keep moving people up by the thousands. Every week, we are moving more and more people that were scheduled in April. They're getting moved up. So pick up the phone, because we're probably calling. If you're scheduled out in April, we're probably calling to get you moved up, either within our system or the new Walgreens partnership. Huge opportunity, as more vaccine comes in to just accelerate the process and get through this as fast as we can. Thank you, guys, very much. Thanks, David.