



Office of Governor Christopher T. Sununu
Press Conference
Thursday, May 13, 2021 at 3:00 p.m.

Governor Sununu:

Right before I came out, I asked the Commissioner, Shibinette, how I looked, if the hair was okay. And she just said, get out there. And that's probably the best answer for everybody. That's running through my head. I love a Commissioner and a Team that just gives you the straight answer every time.

Lot to talk about today and actually a lot really transpiring even in just the past couple hours out of CDC, what's happening here in the State, all, in many ways, opportunities for us to really examine about where we're going, as we really come out of the backend and the tail end of the pandemic. So, before we jump into it, let's start with a Public Health update from Dr. Chan.

Dr. Chan:

Great, good afternoon. So, in terms of the numbers, we are announcing 222 new people diagnosed with COVID-19 today throughout the State. Our numbers continue to go down, which is good news. In the last week, we have averaged between 150 to 200 new infections per day. And we continue to see the average number of daily cases decrease. Currently, statewide, there are 1,450 people with active infection.

Our test-positivity rate also continues to decline. We're currently averaging a test-positivity rate of about 3.0% over the last week. Hospitalizations are also declining. 62 people are currently hospitalized statewide with COVID-19.

Unfortunately, four new individuals that we're announcing and reporting that have recently died from COVID-19, bringing the total number of deaths during this pandemic to 1,326. Now, none of these new deaths are people associated with long-term care facilities. But this highlights the ongoing risk that community transmission poses to our most vulnerable populations in New Hampshire and why we continue to stress the importance of vaccination for everybody who's eligible to receive the vaccine.

COVID-19 vaccines remain widely available throughout the State with open appointments. We strongly -- we continue to strongly recommend and encourage people who have not yet been vaccinated to sign up for the earliest available appointment to receive their COVID-19 vaccine, and continue to stress the importance that anybody who has received the first dose of either the Pfizer or the Moderna vaccines, which are the two-dose series, to absolutely get the second shot. Studies have shown that full and complete vaccination provides the highest level of protection and the longest duration of protection, even higher antibody levels than natural infection alone can provide. So even people who have been previously infected with COVID-19 should still get the COVID-19 -- or one of the COVID-19 vaccines.

Getting vaccinated is low-risk and of very high benefit for protecting oneself, one's family, one's community. And ending this pandemic requires us all to be vaccinated, or to have as many people as possible vaccinated to protect against COVID-19. With that, I will hand things over to Dr. Daly. Thanks.

Dr. Daly:

Great, good afternoon, everyone. I have a vaccine update for you. To-date in New Hampshire, we have administered 1,267,000 doses of vaccine. This includes 750,000 people who have received their first dose. And that is 55% of the total New Hampshire population. Of those, 555,000 people have been full vaccinated, which is 41% of the total population.

We continue to receive around 50,000 first doses of vaccine each week, between the doses that are allocated to the State and those that come in through the Federal Programs. This week, as you've probably heard, the Pfizer vaccine was approved and recommended for use in children 12 to 15 years old. Parents can now register their children 12-and-older for vaccination in VINI at vaccines.nh.gov. We have already had 6,000 12- to 15-year-olds register out of the 60,000 people in this age group.

Between 12- to 17-year-olds can only receive the Pfizer vaccine, we do have a list of locations that provide Pfizer on the website as part of VINI. So, please be sure to register for a site that has Pfizer. The sites are listed here. And this includes all of our State fixed sites, Walgreens, and then several different hospital locations, as well. Additionally, our Regional Public Health Networks are working with school districts to set up vaccination clinics for children 12-and-older.

Now, some people have asked why it's important for kids to be vaccinated. And it's true that children are more likely to have mild symptoms or no symptoms at all. However, some children can get severely ill and require hospitalization. Over 3 million children in the United States and 15,000 here in New Hampshire have had COVID-19. And among these infections, there have been around 500 children who have died from COVID-19, including from Multisystem Inflammatory Syndrome in Children, or MISC, which you'll recall having heard about before.

So even though children are at low risk for severe infection, getting vaccinated will help keep them healthy and in school. And it will help to protect the people around them who may be more vulnerable to severe COVID-19 infection, including their parents, grandparents, as well as any children who are around them who have medical conditions that put them at-risk for a severe COVID-19 infection.

We have seen even young, otherwise healthy people get hospitalized or have weeks or months of breathing problems that impacted their ability to play sports or exercise. So we do encourage all parents to make that choice to get their child vaccinated.

At this point, about 66% of the people in New Hampshire who are age-eligible have already made the choice to get vaccinated. And we think this is a great start. But we need more people to make this choice. We have thousands of open appointments available at hundreds of locations across our State where you can get vaccinated. We also continue to go out into the community and have mobile clinics to make vaccine as accessible as possible.

Along these lines, we have been working together with Elliot Health System to host a vaccination clinic for people who are deaf or hard-of-hearing, and their family members, and their caretakers. This clinic will be held on Saturday, May 22nd, in Manchester. And they will have onsite ASL Interpreters. Appointments are required. So, to sign up, we want you to contact us by May 19th. You can contact us by video phone. And the numbers are here on the slide: (603) 546-7882; by voice at (603) 271-9097; or email at equityvaccine@dhhs.nh.gov.

And then, finally, we also have partnered with the State of Vermont to conduct a New Hampshire/Vermont clinic. This will be a drive-thru clinic. We will offer the one-dose Johnson & Johnson vaccine on Friday, May 21st. And you can sign up for that clinic at vaccines.nh.gov and search for

Lancaster. So, please do go ahead and make that choice to get vaccinated to help protect you and the people around you, and help us all get back to normal. Turn it over Commissioner Shibinette.

Commissioner Shibinette:

Good afternoon, just a brief outbreak update. We have no new outbreaks to announce. We do not have any outbreaks to close. So we remain at two institutional outbreaks in New Hampshire: one at the Federal Correctional Institution in Berlin; and one at Sullivan County Healthcare.

Under our Homebound Program, we have vaccinated 4,048 homebound individuals for COVID-19. We have 301 individuals remaining to be vaccinated, and are still scheduled to complete our homebound vaccination project by the end of May. Thank you.

Governor Sununu:

Great, well, that's fantastic. All good stuff, a lot of opportunity out there. So, a variety of things to talk about, so a little bit of an expansion as we talk about obviously the 12-and-up as having the opportunity to get vaccinated. And you could go to the website. And eight or 10 different locations across the State really focusing on the 12-and-ups.

But as we work to make the vaccine available to all who want it, we're finding frankly just new ways to make it easier for those who might be vaccine hesitant. This is why next week we will be opening up our State-run vaccine sites to walk-ins, no appointment needed. You can walk right into the State sites.

Each site, we're going to set aside at least 50 doses a day for walk-ins, specifically between the hours of 3:00 and 6:00 p.m., for people coming home from work or returning from school, whatever it might be. But if you haven't been able to sign up in VINI for whatever reason, or you're feeling like, you know what? I just want to get it done. You can absolutely walk into our fixed sites and you can see all the different locations across the State that are going to provide that opportunity. So, we're starting with a walk-in appointment process at our State sites next week.

Second-dose appointments for those individuals will still be scheduled the exact same way, as we have in the past, where individuals will receive a card with their second-dose date and come right back to that same location for their second dose. We're starting next week to allow for our 12- to 15-year-old population to get into the system. We're ramping up those operations, as Dr. Daly discussed.

We're going to have both Pfizer and Moderna available at these walk-in sites, so that those who are under 18 can receive the vaccine. So there will be Pfizer available at these sites, just in case someone comes in that is under 18 and requires the Pfizer. But Moderna will be available, as well, for the adult population.

And again, this change really helps the State's goal at limiting vaccine wastage, right, because a lot of times, especially now, we're going to get more and more vaccines in vials that contain up to 14 doses per vial. And so, anything we can do to help minimize the wastage, we don't want to throw that out. And allowing walk-ins to come into our sites to use those remaining doses is a huge opportunity for our citizens, and hopefully just encourages folks to take advantage of the moment, right? When the thought strikes them that it's time to get a vaccine, they can literally walk in and get it done.

We continue to be one of the fastest States in the country for vaccine administration. And this is kind of the opportunity that we can create. We were one of the first States in the country to offer it to

out-of-staters. We're going to be one of the first States to ensure that anyone can walk into our State sites, as well.

I want to take a moment and talk. There's been a lot of discussion over a lot of the financial opportunity within the State of New Hampshire and coming to the State of New Hampshire, aside from the budget. That process is moving along just fine.

But as we discussed last week, we have set out initial plans on how to spend the funds coming through the so-called American Rescue Plan, the \$1.9 trillion that was authorized and passed in the Legislature a couple months ago. We're very pleased that finally -- it came on the last day, but at least it came. They technically made their deadline. But this past week, we were pleased to actually get the guidance, all the different rules, over 100 different pages of rules and regulations that will guide how the States can spend those dollars. And as it essentially allows and permits all the programs, the good news is it allows and permits all the programs that we were mostly already planning for: investments into clean drinking water; mental health; state parks; wastewater treatment. These are all things that we've been discussing with the Legislature, really been trying to tee up, so as soon as we get the funds, we can go.

It appears that we have some flexibility, not as much as the State would like. We never have as much flexibility as I would like, as a lot of folks have come to learn. But any flexibility is a positive step, to be sure. And we will continue to push the U.S. Department of Treasury, who puts out these guidance documents, to ensure that New Hampshire has what it needs to make the investments where they can most benefit Granite Staters.

We did apply for the funds. We were one of the first States to actually get our application for the funds in. And we expect that the first half of the money -- the money is going to come in two separate halves. We're one of the States, because of our very low unemployment level, they've created a rule that says, if your employment [sic] is really, really low, you only get half the money this year and you'll get half next year. Well, our economy is right now one of, if not the strongest in the country. And so, unfortunately, we only get half of our money this year and the other half next year. Some of our surrounding States will get all of their money upfront.

But that's okay. We're going to dig into the details of how to spend it. We already have a nice list we've been working with on potential projects, working with various Departments. Senate President Chuck Morse and Speaker Sherm Packard, and their Teams have been working with us from a leadership level to make sure that we're all on the same page, in terms of the opportunities that we can invest in. And any opportunity that is allowed is going to be put on the table to get something, which is really, really great.

The fundamental goal of these dollars, from our perspective, is to invest them such that we reduce financial burden at a local level. Reduce financial burden on cities and towns, whether it's for drinking water, infrastructure needs at a localized level that takes the burden of additional property taxes and things like that off of the citizens of the State. And so, it's not about creating more State Government here in Concord. It's about making those infrastructure investments in your hometowns. Everyone agrees on that and I think that's why we're all very excited to get these dollars moving forward. We expect that first half of the money to come as early as next week.

Another update on something that was mentioned last week surrounds the ongoing discussions with the Treasury Department regarding the recoupment of funds for businesses that received State grants as part of the CARES Act. This is the money from last year. We've put out a lot of money, more

than any other State, actually, for our small businesses across New Hampshire. But there were many of those businesses who thought they were going to lose revenue but didn't lose revenue.

After the press conference last week, I wrote to Secretary Janet Yellen at the Department of Treasury, clearly explaining how our program is written and why, and obviously asking for the flexibility that we need to, again, allow businesses to either keep those funds or not have to recoup them. We don't want the money back, to be sure.

I spoke directly later on in the week. I spoke directly to Deputy -- the Deputy Treasury Secretary and their Legal Counsel to the Secretary to secure some additional details surrounding their public statements to the -- that the Treasury Department supposedly made to the media. They obviously first apologized. Obviously the Treasury Department is not -- they understand that they're not supposed to be replying to media responses before they actually talk to the States. So, they apologized for that.

But it was a very productive conversation. The Treasury Officials did indicate that they would like to identify a path forward that would waive the current Treasury Rules and stipulations in order to allow New Hampshire businesses to retain their grants, regardless of revenue loss. So, we are very hopeful that they can actually see that to fruition.

Although our conversation, it was encouraging, our priority is obviously a path forward. We put some ideas on the table. We now need to get confirmation from the Office of the Inspector General down in Washington, who is kind of the gatekeeper, if you will, of a lot of these rules, to make sure that these provisions and rules that they supposedly want to allow us to change can actually happen, and therefore allow more flexibility for businesses to retain those funds.

So, I know that's kind of a little bit of a convoluted path, other than to say that we're working really hard to make sure that whatever we do is legal. It's authorized by the Federal Government. And folks can keep their money. And hopefully we will have an answer from them directly in short order. We haven't heard anything back yet, but we're going to keep pressing for the flexibility.

Finally, a big topic to discuss today really surrounds mental health. And we want to go into -- there's a real opportunity here, actually, that has come. Take a step back, back in 2016, the mental health system was in absolute disarray. I always called it the unspoken crisis, something that we took head-on, very early on in my administration, put a lot of new ideas and new opportunities on the table, both the Republican-led -- with the Republican-led Legislature in 2017 and the Democrat Legislature in 2019.

We invested a lot of money and really made a lot of headway to the point where the number of individuals waiting in Emergency Rooms for mental health services was down to zero early on in the pandemic, just about just over a year ago. We had actually zero folks at one point waiting in our Emergency Rooms.

Not that that was the only metric of success, but considering where it had come, 60, 70 individuals at a time, we had really provided, I think, a pathway for a lot of these community-based services, working with obviously Commissioner Shibinette at the time, was actually running New Hampshire Hospital, and just did a phenomenal job. I always love to brag on the Commissioner, but not just as Commissioner, but what she and her Team, and all the Staff over at New Hampshire Hospital were able to do to fundamentally start transforming that system was just awesome. And we had made huge headway.

Unfortunately, then, we kind of hit the roadblock of the pandemic, and everything from workforce shortages in the community, at hospitals, at New Hampshire Hospital; the exacerbation of some of the mental health issues that folks were dealing with, given the stress of the crisis, not just for kids but for adults, for workforce issues in our community. It really was a perfect storm that really kind of pulled us back a little bit to where we were. And today, unfortunately, we are back in a position in just a year

where we do have a few dozen people waiting for mental health services. They're waiting in the Emergency Rooms.

So, we've never taken our eye off the ball. But earlier this week, the Supreme Court of New Hampshire handed down a Ruling affecting our mental health system. And instead of dismissing or fighting the Ruling, we are absolutely embracing it. It is an opportunity to finally break down barriers that we've been trying to break down for years but have been -- we've tried to pass certain pieces of legislation but hit a roadblock. We've tried to pass certain rules, but we've hit a roadblock.

But now that the Supreme Court has really weighed in, this is an opportunity to break down those barriers and get the services for our most vulnerable individuals, despite the traditional obstacles that have been in the way. Some of these obstacles have been there for decades and we're really just not putting up with that anymore.

There's an urgent need for the State to accelerate its work in increasing the number of available beds for emergency psychiatric patients. So, today, what does all this mean? Today, I am signing an Executive Order. It will allow the State to take immediate targeted and direct action to ensure those in mental health crisis have timely and appropriate medical care by directing Commissioner Shibinette and the Department of Health and Human Services to do a variety of different things.

First, to create Emergency Administrative Rules to immediately increase access to services in order to address the mental health crisis, Rules that currently affect hospitals, our community mental health centers. Right now, there are barriers in place that prevent some of the partnership, some of the communication, some of the opportunity there to make sure folks are actually receiving treatment, whether it be in a hospital or otherwise. We're breaking down those barriers with this Emergency Order today.

This Order will also review all mental health services across the entire State to determine if the Providers that we currently utilize are truly equipped and truly capable of meeting the needs of New Hampshire citizens. And we are going to be exploring additional opportunities, both in- and out-of-state in the private sector, and any opportunity we have to bring in the best and the brightest of Private Providers, whether they're here in New Hampshire, or out in California, or in Florida, or in Massachusetts. It doesn't matter. We're not letting anything get in our way from just bringing in the best individuals that we can find to provide the best care for our citizens.

We will be expanding the number of designated receiving facility, we call them -- those are our DRF beds -- on an expedited basis. And we're authorizing -- I've already talked to the Legislature about going to the Fiscal Committee, authorizing additional funds, as needed, opening up additional beds at New Hampshire Hospital in the very short-term.

We see opportunities in two areas that will open up beds at New Hampshire Hospital just within days. And the Team's already moving on that and has been over the past couple days. They're doing a tremendous job. Everyone is putting in extra hours to really take this head-on.

We're going to be looking at Contract Amendments with our Community Mental Health Providers that will ensure accountability, partnership, coordination with hospitals, making sure that there's a seamless system at the localized level. And again, there have traditionally been barriers in that aspect. And we're going to be breaking down those walls with this action, and, again, all driven really by the result of the Supreme Court's Decision, which allows us to move forward in a very aggressive way like never before.

So, again, not that this one Executive Order is going to make everything go away and just take care of all the problems, but it definitely breaks down barriers. And that's the best thing Government can do,

frankly, is breaking down barriers not just for our systems, but simplifying it and making it an easier pathway for our citizens.

At the end of the day, if you're a parent bringing in a child and seeing them sit in an Emergency Room for days and days without service, for one reason or another, it's just unacceptable. It's absolutely unacceptable, and I know I share that sentiment with everybody over at Health and Human Services. And so, empowering the hospitals, empowering the community-based Providers to all being part of that seamless solution, regardless of the situation, and ensuring that these folks aren't just sitting there without treatment in any way, we're just going to make sure that everyone is working together, not taking the eye off the issue.

Lots of opportunity to invest in new beds, invest in new systems; and so, we just see it as a huge step forward, potentially. And I just love to know that it's great to see that everybody's 100% onboard and already is putting in some long and hard hours to get it done. So, I guess, with that, we can open it up.

Q&A Session

Governor, can we hear from Dr. Chan on the breakthrough cases and variants, if there's been any greater connections or investigation into what might be driving the breakthrough cases?

Governor Sununu:

Sure.

Dr. Chan:

Pull out some of my notes here; yeah. So, good questions about variants and breakthrough cases; both of these are areas that we continue to actively investigate. Similar to the national trends around variants or variants of concern, we're seeing similar trends here in New Hampshire where we've seen an increasing proportion of the positive specimens that have undergone the genetic sequencing showing this B117 variant of concern. It's also sometimes called the U.K.-source variant, because that's where the variant of concern was first identified.

I think if you look on the CDC website, they're reporting out on some of the metrics nationwide and State-by-State on a biweekly, or every two-week basis. And I think the most recent data that they have from a couple of -- from two or three weeks ago show that about 40% to 45% of the specimens sequenced at a national level are a positive for the B117 variant. So, similar to national trends, and as predicted, we're seeing this variant of concern quickly becoming the predominant strain that is circulating.

Regarding your second question about vaccine -- I think it was vaccine breakthrough cases, we continue investigate cases that we believe represent infection after somebody is fully vaccinated, what we call vaccine breakthrough cases. Still not a -- it's still a small percentage of the overall number of cases. And when you consider that close to 550,000 people in the State of New Hampshire are now fully vaccinated, and we have -- I think the most recent count that I have is 178 vaccine breakthrough cases. That's people that have become fully vaccinated and then diagnosed with COVID-19 afterwards. 178 cases out of almost 550,000 people that are fully vaccinated in the State at this point, it's a very, very low, low percentage on less than 0.1% of infections in people that are fully vaccinated.

Is that an expected range, I guess?

Dr. Chan:

Yeah, and this is actually similar to what I've heard other numbers -- numbers from other States, as well, of, like, less than 0.1% of infections being -- or I forget exactly how it's worded or framed from other States. But this is consistent, I think, with what's being seen nationally, and that we believe the vaccine is not only safe but very, very effective.

No vaccine's going to be 100%. We are going to see vaccine breakthrough cases. But it's at a very low number, when you consider the number of people that have been fully vaccinated. And the majority of these are actually not necessarily variants. I think nine out of these 178 vaccine breakthrough cases are people that have the B117 variant.

Dr. Chan, while you're up there, the Pfizer vaccine for 12-year-olds, why do you think the cutoff is 12 years old? Is there some sort of physiological difference between an 11-year-old and a 12-year-old? What?

Dr. Chan:

Yeah, a good question, why is the cutoff at 12 for people receiving the Pfizer vaccine? It simply comes down to that's what's been studied so far. Both Moderna and Pfizer are studying their vaccine down to people -- down in people down to six months of age. So, there will be more data emerging around use of these vaccines in the younger age groups. Johnson & Johnson is studying their vaccine. The most recent update I've heard is down to 12 years of age. So likely we're going to see other vaccines also being authorized for use in incremental steps in younger populations.

But Pfizer is the first to be authorized for use in this age group, because, right from the beginning of their Phase III clinical trials, they included people of 12 years of age. So that's where the data is now first emerging. We do expect that, over the coming months, certainly by the end of summer, beginning of fall, there will be additional data emerging about the use of these vaccines in even younger populations.

And what do you think of the CDC's guidance today about not having to wear a mask and you can be together, if you're fully vaccinated?

Dr. Chan:

Yeah, so, to be honest, I'm a little bit unhappy with how CDC has rolled out their guidance. These are big changes that are -- and decisions that are being made in the CDC guidance at a national level. In these types of situations, we oftentimes like to hear from the CDC in terms of planned guidance changes and the rationale behind the changes in the guidance.

The first that I heard about this actually was through the media and through the press conference that they had. So, I think we're all in a position now of having to respond to these types of questions that are coming up, without really having read or understood the CDC guidance or the rationale behind their recommendation.

I think there's a couple additional points to make is that, one, yes, we do have great confidence in the vaccine to be able to control this pandemic. This is where we're going in the pandemic is pulling back on these types of recommendations.

The difficult choices have always been around what the correct timing is. And so, I think the key question here is: is now the correct time to pull back on some of these recommendations? Or is it some point in the future? And we've always said that it's a factor of two different things.

One is the number of people that have been vaccinated. And statewide, we're around 50% of age-eligible people in the State that have been fully vaccinated. That's a lot of people that are still susceptible in the communities. And the second piece of this is also the level of community transmission. And if you look at the CDC website, at least last I checked one or two days ago most States around the country, by CDC's criteria, still had "substantial" level of community transmission.

So, we're still in this transition phase of vaccine ramping up. There's still a large percentage of the population that is susceptible to infection and unvaccinated. And we're still at a point where there's still COVID-19 and risk in our communities.

This is where we want to head. The question is: is now the right time? And we have to go back and read the CDC guidance, because we haven't had a chance to do that and fully understand the rationale.

I will say that there is data directly from the CDC which suggests and -- that suggests that both high vaccination rates combined with continued use of mitigation measures will drive the numbers down faster and keep the numbers lower. And so, the question really is: is now the right time to take that step, given where we are with vaccination and where we are with level of community transmission?

So, unfortunately, I can't make an informed, direct comment on their guidance. We have to go back and review. But haven't had any type of preannouncement conversation with the CDC about their guidance.

I know you have to review the information. But it doesn't sound like you think now is the right time.

Dr. Chan:

I have concerns about pulling back on some of the recommendations at this time, because of the issues that have been highlighted. Again, there's also a lot of logistical questions that come to mind with this type of guidance change. And this is a big change.

So, when -- anytime CDC puts out this type of guidance, we never just simply adopt it because CDC has put it out. We've always, throughout this pandemic, taken the time to review it, understand it, look at our own numbers, look at our own situation, make decisions based on our own local context. And we will do that in this situation, as well. And one of the things we always try and look at is, what does this mean for our businesses and our organizations, and our community partners? How are they going to differentiate fully vaccinated people from non-fully-vaccinated people? And is it simply a recommendation?

I think one of the concerns is, are we simply very quickly moving to pulling back on all mitigation measures? And so, I think we need to understand better how -- the rationale behind this and how CDC sees this being implemented at a local level, taking into account the effect that this is going to have on businesses and organizations.

Thanks.

Dr. Chan:

Thanks.

Dr. Chan, while you're up there, perhaps, can I ask a question about what parents need to know about getting their children to be vaccinated? What kind of paperwork do they need when they get there? What kind of assurance they have that this is safe for their children? And I'm just wondering if you could...

Dr. Chan:

Yeah, so, great question. First off, these vaccines are safe. And certainly, when you're talking about the younger age group, we're talking about primarily the Pfizer vaccine. There were no unusual, serious, adverse events that were noted in the clinical trials that led to the authorization of the Pfizer vaccine in this age group. So similar to use in other age groups, very, very low rate of serious side-effects, and high vaccine efficacy, high vaccine protection.

In terms of the process, again, I think, as Dr. Daly mentioned, people can go online to vaccines.nh.gov to register. For people that don't have internet access, they can call 211. When people go through that process, there will be a series of questions that they have to answer. And then, they will be sent an email that they can then click a link on to register for a specific appointment on a specific date, at a specific time, in a specific location. And through that process, they're going to be given some additional information, like the FDA fact sheet that's required to be given to people and parents, and guardians who are receiving any of the COVID-19 vaccines.

When people come, the parent or guardian needs to bring their own identification, usually a Driver's License. And then, the child needs to bring -- I believe the recommendation is either like a Passport or a Birth Certificate to show that they are of the appropriate age and able to receive the vaccine. And then, you simply show up at the site and you get walked through the process. You're going to have to show some identification. There's -- when you sign up online, there's a email and a QR code that people can bring to the appointment. But the process online should walk people through that process. Thanks.

Governor, will the State sites stay open now longer, because 12- to 15-year-old groups can join there?

Governor Sununu:

No, we're not planning on keeping the State sites "open longer". The schedule is, I think, to allow first shots through Memorial Day. And we still have a couple weeks to get -- for -- they can do walk-ins. They can make appointments, however. A lot of the schools are doing their own clinics, which is really productive and helpful, in conjunction with our Public Health Networks. And then, following Memorial Day through June, we will do the second shots. But that's still the original schedule, as planned.

How do you get vaccines to Pediatricians and Primary Care Doctors? Is the State going to help provide storage for those vaccines or...

Governor Sununu:

Well, ultimately, it'll happen just like they get vaccines now. So, I know that there's some -- with the Johnson & Johnson especially, there's more flexibility, as the vaccines become more readily available. And the third vaccine, especially the one-shot Johnson & Johnson, has come on the line with more flexibility with things like deep-freezing and things of that nature.

But ultimately, the pharmacies and the Pediatricians, and the Doctors in this State will get it just like they get their vaccine now. We're making a transition. We have a whole Transition Team in process, and we will slowly move everything over to those in terms of what the State is getting, making sure that that's distributed primarily through the Hospital Associations and the Hospital Networks that are currently existing. Most Doctors are connected to a Hospital Association one way or the other. And we will use that network as kind of the foundation for making that transfer.

I have a question about teenagers that are homeless. I was surprised to learn that if you are 15 years old and you go to a homeless shelter, you can't get in. You have to be 18 years old. I don't know if the State has considered a homeless for teenagers scenario, or what the barriers and issues are. But I would imagine that if you are a homeless teenager, you're more likely to be predisposed to criminal activity surrounding you without being in a shelter.

Governor Sununu:

Um-hmm, I'm sorry. Okay. So we're talking. This is a non-COVID question?

Well, no, COVID's shined the light on the fact that there is no place for these kids to go.

Governor Sununu:

Sure, well, look, the State contracts and works directly with Providers like Waypoint, is a great example. They do tremendous work in the City of Manchester, specifically around homeless kids, homeless youth. And there are hundreds across the State at any given time. And we do our sleepout every year. We try to bring awareness to it. We try to talk about those issues.

So, there are opportunities and programs there to protect and, again, bring kids in to give them whether it's shelter, programs, services, protection, whatever it is. But, in terms of how that relates to COVID, I apologize. I don't understand the...

Well, I guess I was speaking with the folks at Wayfair -- or Waypoint.

Governor Sununu:

Yeah.

And they had said that they were noticing there were more issues with a teen homeless population because of pandemic, because their housing situation had changed, or their life situation had somehow changed.

Governor Sununu:

Oh, I see. So, if I may, you're saying that the pandemic has caused additional stresses on home situations, which is driving an increased number of homeless youth?

I think so. And I think maybe runaway situations and things like that.

Governor Sununu:

Yeah, well, look. I mean, we have lots of resources out there. We have lots of good Providers. And the folks at Waypoint are -- I'm just using them as an example. We have other Providers, as well. But they're kind of the key example, right, in Manchester, that's providing a lot of these services and issues.

So, we've never taken our eye off the ball in any way. But obviously you don't want kids mixing with an adult population, per se. I mean, there's a reason why you don't want kids going in without any sort of supervision into a traditional adult-driven shelter. So we have different programs and different services for them.

But not necessarily a teenage homeless shelter specifically for teens?

Governor Sununu:

I don't know if we have a specifically -- I don't know if we have a specific teenage -- yeah, those are more respite-type beds, as opposed to an official shelter. I mean, by all means, if there was ability to create one and the opportunity, there's nothing that prevents that, to be sure.

Yeah, is there also any new update on the situation at Tilton Veterans Home?

Governor Sununu:

An update on the situation in Tilton, what situation being...

I guess last I know you were going to do a study that was going to look at what...

Governor Sununu:

Oh, in terms of the outbreak?

Yes, the outbreak.

Governor Sununu:

Yeah, sorry. So, yeah, we did a review and a study a couple months ago. That was released. We did a study based on the CDC guidelines. We followed all the CDC guidelines and that Report has been made public.

Okay.

Governor Sununu:

Yeah.

Governor, question about the mental health plan you have, maybe it seems like the Stone Age. But when your father was Governor...

Governor Sununu:

Oh, that is the Stone Age.

Yeah, there were a lot of designated receiving facility beds: Concord Hospital; Elliot Hospital; Androscoggin Valley.

Governor Sununu:

Yeah.

And once again, you folks are stepping up with New Hampshire Hospital. And I know the Commissioner's worked with the child and adolescent community to place beds at Hampstead Hospital. But, the permanent solution going to require some hospitals or Health Providers in the community locating some of these beds, so that folks can be easily moved not very far away from that Emergency Room where the person is sitting to a facility bed.

Governor Sununu:

Bingo, you're spot on it. Community-based services are the best services that you can provide for the vast majority of individuals that need some type of mental health services. A lot of folks that might come into an Emergency Room may need to be evaluated. They might not need a permanent resident bed up at New Hampshire Hospital. There might be other services.

So what we're really doing here -- to take a step back, because you're talking about designated receiving facility beds, we put millions of dollars in Contracts out couple years ago. We were told we need more beds. Provide the funding. That's exactly what we did.

You know how many organizations, hospitals, or community-based mental health services bid on those Contracts? Zero, none. We had millions of dollars and no one stepped up to the plate. I can't tell you how frustrating that was for all of us.

So, those are the types of things where we say, okay, we're going to now drive better solutions at a community level, making sure those folks that are working in an Emergency Room that might be where an individual, or a child, or whatever, might come in, in a time of crisis, making sure that those Contracts and partnerships with their community-based Mental Health Providers are there, where there's a guarantee that those services can and will be provided, whether they're by the hospital, or their local community mental health center. One way or another, those services absolutely have to be provided.

We will do the assessments. We will make sure that we have the beds at the State level, as well, if we need them. But those community-based beds and services are really very much at the heart of the matter.

We're going to put a lot more money back out to this issue. We're going to look at stipends, I guess enhancements, or something to just increase hopefully the willingness of a lot of these partner programs to invest in these beds, whether they be hospitals or otherwise. We're going to look at outside partners, outside Private Providers that could very much come into this State and be part of a solution where others just aren't willing to.

The time of sticking to the old way of doing it, as much as we've tried to break down those barriers over the past few years, we always seem to hit a roadblock. And I think what the Court said very clearly is, no more roadblocks, no more excuses. And that has really empowered us to take advantage of this opportunity and just drive ahead with the solutions we know that we can get. And again, it's all been exacerbated by COVID.

While we hope that this surge we're seeing is temporary, as it is driven by COVID, we need to build a system for the long-term, not just to deal with the COVID influx. So we're kind of taking an approach of kind of temporarily patching up the system as best we can, at the same time building long-term solutions for an infrastructure to create stability that our citizens can really rely on.

Just a quick follow on that, Governor. This has been something you've been working on for a while. Can you explain what it was about the Decision, I guess why you weren't able to do these things last week, or two weeks ago, or earlier in the summer versus now?

Governor Sununu:

Well, I think by the Supreme Court's Decision saying you must, right, it kind of gives us the backing to say, well, we must. So here we go. And we don't want to hear from the Lobbyists saying it can't be done. I don't want to hear from the Providers saying, sorry, we like the idea but here's our -- we must. And a key, there is a we. It has to be a partnership, whether it's the hospitals or the community-based Mental Health Providers, other emergence -- there's other mental health hospitals and facilities in the State, bringing all those Providers to the table and saying, we're doing this. Don't give me 10 reasons why we can't do something. Let's impress our citizens with what we can do, because they deserve that level of attention, that level of need.

This is a crisis. And we've done a great job with it up until the pandemic. Pandemic exacerbated it. Now we've got this Court Decision that gives the we must. And that's exactly where we're going with it.

Understanding that the pandemic has put a bigger spotlight on mental health, is there any sort of common threads that Healthcare Providers are telling you that they're seeing, as far as what people are dealing with within the last year-or-so?

Governor Sununu:

Oh, that's interesting. I don't know. I don't know if I'd be able to answer that about common threads. I don't know if the Commissioner, a little more on the frontlines.

Commissioner Shihinette:

I think largely what we've seen is an unprecedented needs for adolescent and child behavioral health. I think that's probably the most remarkable thing that we've seen through the pandemic. When we look at our waitlists for adults and children, our adult waitlist has been pretty steady. It's been pretty consistent.

The children's waitlist has not. We saw an unbelievable spike coming on in -- through spring and fall of 2020. And when we talk to Providers, a lot of people will tell you is that when the kids aren't in school, they lose their very natural support systems and their peer support systems, which puts perhaps an adolescent or a youth that is feeling depression and/or anxiety into a crisis mode. So that is the most significant difference that we've seen.

But I think that this Order gives us the opportunity to look at things a little bit differently, to move a little bit quicker. I think that for the last several years, we've done the 10-Year Mental Health Plan and said, how are we going to change the system over the next 10 years to account for and to be able to handle the capacity for the future? And it takes 10 years to do a 10-Year Mental Health Plan, right? It doesn't take a year to do it.

So we've been working, taking piece-by-piece along the way to try to fix those things. And now, we are just moving full steam ahead. And we have already put several things in place and in motion in the last 24 hours that hopefully will open up capacity in the next 5 to 7 days.

Governor, what's your message to parents who are hesitant to get their child vaccinated?

Governor Sununu:

It's safe. It's safe and it's part of a community solution, not just for your family, right? You want to be able to protect your family. You want to make sure that your -- well, we just know younger kids can be less symptomatic.

But there are a lot of examples of kids that get COVID. Maybe they're not hospitalized. Maybe they don't have the fatality. But they get these long COVID conditions that can -- as Dr. Daly was talking about, it can impact your ability to participate in athletics. It can have long-term issues.

This isn't just a two-week flu-like symptoms you're working through. We know that it can strike anyone at any time. And one of the most fascinating things with seeing who gets affected by COVID is sometimes there's just no rhyme or reason of it.

You can have folks that are athletic and healthy, and young, and never an issue before. And they're dealing with it. They're in the hospital for two months fighting symptoms. And then, you can have folks

that are elderly in a very vulnerable population, and lifelong smokers, and all of that, and they get COVID and they barely get a symptom.

So, it can really happen to anyone at any time. And this is a very easy, very effective, very safe, precautionary measure, that bubble of protection, if you will, to put around your kids. And so, we just want to encourage everyone to be part of that global solution for the State.

And then, lastly an unemployment question for me: are you planning on ending the extra \$300 bonus that people have been getting?

Governor Sununu:

We are definitely looking at the effects of ending the \$300 stipend that currently goes with unemployment, the Federal stipend. One of the things I talk about is there's a little bit of a domino effect in terms of it's not just removing it, because it does have an effect with our more traditional unemployment system. So we have to make sure that those Is are dotted and Ts are crossed, and making sure that we can make that transfer easily.

We already have incredibly low unemployment here in New Hampshire, 2.9%, 3%. I don't know what the latest number is. So, the number of people that will likely be incentivized to come back into the workforce, it's not tens and hundreds of thousands that you might see in other States. So you're talking 5,000, maybe 10,000 people.

So, every individual matters, because we are so desperate for workforce. Our economy's just so strong. Everyone needs a workforce right now. But it's not going to be a gamechanger, per se. But we are absolutely looking at it. And one thing I can tell you is the Federal Government wants the program to go all the way until September. That's not going to happen. We will most certainly end the program a lot sooner than that. We're already looking at that possibility, but don't have any dates in mind, per se. But it's something we are aggressively looking at.

So you will end it before September?

Governor Sununu:

Yes.

Okay.

Governor, with regard to Federal guidance you were speaking about, you want to cut some taxes. You proposed some in your budget.

Governor Sununu:

Yeah.

Both the House and Senate were looking at that, as well. Are you confident the Federal Rules about COVID grants are not going to cause you to be not able to cut taxes as robustly as you'd like?

Governor Sununu:

Yeah.

What can you tell me about that?

Governor Sununu:

Oh, yeah, great question. The guidance, I think, did provide the flexibility we were looking for to be able to continue with the tax cuts that I've proposed across-the-board, because a couple reasons: number 1, I proposed those tax cuts way before this Bill was authorized, signed, and even proposed in its fulfillment. So we've shown that we don't need a penny of this Federal money to cut taxes. And not a penny of this money will be used to cut taxes or backfill and manage budgets, and all that kind of stuff.

So, we proposed a balanced budget with tax cuts well before this. And all those tax cuts, and maybe even more, are definitely on the table. We have revenue coming into the State at a very strong level right now. And we're going -- the whole point is to give it back to the people of the State, give it back to the cities and towns. If we have extra cash, we want to send that money back to cities and towns to offset property taxes.

If we can cut taxes and provide an opportunity with -- I mean, people have talked about cutting the interest and dividends tax for decades, decades, way before the Stone Age that you'd mentioned with my father. And we're doing it. We are doing it. And that's going to create an awesome opportunity for maybe retirees or folks on fixed incomes, whatever it might be, to be able to not have to pay that 5% penalty every single year. We're going to start rolling that back.

Meals and rooms tax, business taxes, that can all get cut with the opportunity that we're creating in New Hampshire. And frankly, if the Federal Government did have an issue with it, we're doing it anyway. We're just doing it New Hampshire's way. I'll fight the Federal Government to protect our tax cuts any day of the week. That would be a fun part of the job, frankly.

Kathy McCormack with The Associated Press:

Hi, thank you. Governor, does your Executive Order on mental health address at all the availability of Psychiatrists to evaluate people such as Prison Inmates, a subject that's been brought up recently by County Attorneys, who've been challenged by a 90-day deadline to have those done?

Governor Sununu:

It does in an indirect way. So, what the Executive Order really does is ensures the partnerships. It's not about not having the Psychiatrists and the skillset to do those evaluations. But what we find in many instances is whether you're -- whether it's Law Enforcement or a hospital, or someone waiting for services, the partnership isn't there. The guarantee isn't there that those evaluations are going to be done. And so, what this Executive Order really does is tell all of these entities, you have to have those

agreements in place. You have to have the assurance that, in those situations, that those evaluations can be performed appropriately.

Annmarie Timmins with the New Hampshire Bulletin:

Thank you for taking my question. This Executive Order on the mental health changes is pretty big. So I'm trying to process it. You spoke a lot about barriers. And then you said you feel like the, I think, mental health centers have given you lots of reasons why they can't do anything. But I think they've been saying we want to. We just don't have the workers. We can't make these rates work. So am I misunderstanding that? Do you feel that's where the problem is, or has been? And then, secondly, have you gotten input with them on how to fix this problem?

Governor Sununu:

Sure; so, again, it's not just about the community mental health centers. There are hospitals that will tell you, sorry, we're not going to provide mental health services to that individual. We're just going to maintain them until, New Hampshire, you come and take this individual. And so, look, when you go into an Emergency Room, there's an expectation of medical care. There's an expectation of services.

Now, of course, we just want to make sure that individuals, because of this Order, aren't just being put out, aren't just being let go back to the street where they can be a danger to themselves, or others, or whatever it might be. So we're telling the hospitals, you have to be part of this solution. We're telling them either you have to provide the services, you have to -- or have an agreement with the local community mental health centers to allow their expertise to come into play in a timely manner. That simply just has to happen.

There are some community mental health centers in the State that do a phenomenal job. They do a great job. There are some that simply don't. And for those that don't, I'm more than happy to go find other Providers who will do it. And so, we're going to do a full assessment of all the community health centers. We're going to do a full assessment of all the Medical Providers who may be in these situations where individuals are coming and simply saying, we need help. We are in a point of crisis. And I just don't accept folks in that field saying, not our problem, not our fault, not our issue.

We've heard that too much. And I'm not calling out names. I'm not calling out specific individuals. But there are groups out there in all aspects of our services where we just hear that a little too often. And so, this Executive Order says you have to be part of the solution. And by the way, the Court is saying New Hampshire has to have a New Hampshire solution and everyone needs to be part of that.

We're going to make millions of dollars of investment. We're going to create additional stipends and funds to incentivize these DRF beds to be created. Commissioner Shabinette, in the past couple days, is already creating lots of capacity.

We're going to invest and expand the New Hampshire Hospital in one way or another. We're going to invest and expand in our bed capacity all across the State. We're going to do our part at the State level. But it's not just a State solution.

It has to be, if you want better community-based mental health, then you have to have the right partnerships, the right, I think, community spirit, if you will, about making sure that the only goal is better outcomes for the citizens. That's all that matters. That's all that matters. And so, whatever we have to do to get there, that's the point of this Executive Order.

Alli Fam with New Hampshire Public Radio:

Great, thank you. I have two today. So, first off, regarding the new mental health beds that you spoke with this Executive Order, can you provide any specifics on how many beds are going to open at the New Hampshire Hospital and why they weren't open already? And then, I'm also wondering, as vaccination rates have started to slow in New Hampshire, is the State doing anything else, other than the walk-in clinics? I mean, we've seen other States do things like free LL Bean cards, or scholarships for young people. And I'm wondering what kind of incentive the State is willing to kind of invest in to get more shots into arms.

Governor Sununu:

Sure; so, bear with me. Incentives for shots, I just want to get the -- so, to address the first question, the expansion of the beds isn't just at New Hampshire Hospital. We will be expanding New Hampshire Hospital in one way or another without a doubt.

I mean, off the bat, I think we've identified potentially putting 50 more beds in a variety of areas, not just at New Hampshire Hospital, but in a variety of areas of the State. We have funds to make those investments. And we're going to do so.

So, it's kind of a combination of different things. Already I think what's been very encouraging is we're working with our long-term care facilities, making sure that they can provide the services, as individuals that have already been -- that can get better services in their more community-based long-term care pathway, which is great. And they've been great partners just in the past couple days, really opening doors for us, and opening beds for us.

And so, Commissioner Shibinette comes with just -- I don't mean to keep bragging on the Commissioner, but she comes with those relationships, the understanding of those needs at a very specific level, patient-to-patient and Provider-to-Provider. And it's awesome to have someone at the top-level that really understands this from a constituent perspective, a patient perspective, a resident perspective. And so, that's already well underway. But the beds aren't just for New Hampshire Hospital. They're going to be all over the State in a variety of different opportunities. And we're spreading the money, spreading the opportunity around.

Oh, I'm sorry. There was a second question there. No, we're not looking at any giving away cards. I don't think we're looking at any of that right now, are we? Oh, are we? Oh, maybe we are. Maybe Dr. Daly's got LL Bean cards for everyone. I don't know.

Dr. Daly:

Great, so, yes, that's right. At this point, the supply of vaccine that we have is meeting the demand and we'd like to increase our vaccination rates. So we're going to be addressing this through a number of different ways.

We're working with our faith-based organizations around mobile clinics to try and get more mobile clinic opportunities out in the community, as well as working with different large Employers and worksites. Also, our strategy to start pushing vaccine out to Provider offices will help us get additional people vaccinated. Maybe those people who are hesitant or unsure, they can talk directly with their Healthcare Provider to get those concerns addressed from someone they trust. And then, that Provider can vaccinate them.

And then, we are looking at working with different businesses, with Commissioner Caswell and Perry Plummer, looking at what opportunities there are for us to set up popup clinics or mobile activities all around the State at different types of events, where there might be some opportunities for incentives. They're not going to be anything significant, but maybe you'll get a free hotdog or a ticket to something, or something like that. So we're certainly working on plans around that.

Mayor De Blasio with the burger and fries.

Governor Sununu:

What's that?

Mayor De Blasio, with the burger -- eating a burger and fries at his meeting today to show that you could get for free a burger and fries.

Governor Sununu:

So Mayor De Blasio's giving away a free burger and fries with the vaccine? I don't know if Public Health would go for that. I think you're creating some other health issues there. I don't know if that's the right message. Just saying, maybe a healthy granola bar or something. I don't know, but -- okay.

Well, needless to say, we will not be doing anything that Mayor De Blasio or frankly anybody in New York does. We're going to stay away from those models, to be sure. Those are the guys calling us to find out how we do it so well. What else we got? Okay. Well, that's great.

So, next week, I will note that I believe the press conference is going to have to be on Tuesday, at 3:00. We're going -- we just -- a couple things we're trying to move around, but we're going to go to a Tuesday at the press conference next week. Oh, Adam?

Can I get one last one, Governor?

Governor Sununu:

Sure.

You mentioned...

Governor Sununu:

Oh, is this a text? I see you reading your phone. This is not a text from Treasury, is it?

From WMUR, it's not out of the...

Governor Sununu:

Okay.

He's not relaying anything to me today. What's the message for parents who are out there trying to get mental health help for their kids?

Governor Sununu:

Seek services, if you are in a moment of crisis, first and foremost, you can call Headrest, or you can go to the Emergency Room, whatever it is. I mean, the most important thing is there are a lot of incredible services out there. Seek service, seek help.

Literally, what we talked about today with this Emergency Order, we're not talking about something we're doing down the road. We're literally doing it today, as we speak. Folks are being transferred out. Beds are being opened up. Investments are being made. So seek out those services.

We have a -- we really do have a good core infrastructure here. It's just about breaking down some of these barriers, braking down some of these agreements, breaking down some of these responsibilities that everyone has to share in.

So, I think that's the most important message. If you're an adult, or you're an adult with a child, seek out the services. And we're going to make sure that we are there for you. And again, the most pressing issue is making sure that folks -- we go back to where we were about a year ago, where folks just aren't waiting in Emergency Rooms anymore, where those services are being provided, and creating not just a short-term plan but that long-term plan that's going to be there. Okay, great. Well, we will see you guys next Tuesday. New Hampshire's doing great. Thank you, guys, so much for being part of all the success. We will keep rolling on and see you next week.