



Office of Governor Christopher T. Sununu
Press Conference
Thursday, April 29, 2021 at 3:00 p.m.

Governor Sununu:

Well, good afternoon, everybody. Thanks for joining us. Another Thursday update, as it pertains to COVID; somewhat of a rainy Thursday. But I think we're all getting to it okay. Spring is definitely here. As usual, we will kick things off with an update from Public Health from our own Dr. Chan.

Dr. Chan:

Great, good afternoon. Actually, before I jump into the numbers update for today, I just want to highlight that all the numbers that we report out here on a weekly basis can be found online on our website. People can go to nh.gov/COVID-19 and follow the links for Interactive Data Analytics Dashboard.

On a daily basis, we also publish and release a daily update that highlights a lot of these numbers. And I just wanted to highlight the fact that this is going to be undergoing a change going forward. Some of the numbers that typically have been reported out in that daily update will be taken off that daily press update, particularly some of the testing numbers, which are less relevant, so that we can focus that daily update more on some of the key metrics that we've been following and reporting out on a weekly basis here.

So just be aware that the format of that daily update is going to change. But all the numbers can still be found online, on our Data Dashboard, in particular the testing specific webpage of our Data Dashboard.

So, with that, let me jump into the numbers for today. We are reporting 298 new people diagnosed with COVID-19 in New Hampshire. In fact, in the last week, and in the last several days, we have averaged between 250 and 300 new infections per day. And so, the daily incidence of new infection continues to trend down over the last week. Currently, there are 2,610 people with active infection, which is also a decrease from last week.

Our test-positivity rate -- that's the percentage of all tests that are positive for COVID-19, both PCR and antigen tests combined -- also continues to trend down. And we're currently at about 3.8% of tests that are positive for COVID-19.

Hospitalizations also continues to trend down, which is good news. There are 87 people currently hospitalized statewide with COVID-19. Unfortunately, five new individuals that we're reporting today that have died, as a result of COVID-19, one person is associated with long-term care facilities. And this brings the total number of people that have died during the pandemic to 1,301.

So, as noted, the majority of these COVID-19 numbers are trending down in the last week -- or continued to trend down in the last week. But, to be clear that the spring and April vacation and the travel that is potentially occurring could pose a risk for our numbers going back up again. And so, we continue to stress the importance that people wear their facemasks when in public locations, practice

social or physical distancing, and avoid large group gatherings, as ways to bring the numbers down further. And certainly, people should get vaccinated if they haven't already, to protect themselves, protect their family, and protect their friends against COVID-19.

We have three different COVID-19 vaccines available, including the Janssen vaccine, or the J&J vaccine, which has been reaffirmed by the CDC and the FDA to be safe for use in people 18 years of age and older. And so, we continue to encourage everybody that's appropriate for vaccination to sign up for the earliest available appointment to be vaccinated, to protect themselves and their communities against COVID-19. And for people that may have only received one dose, please be sure to sign up for your second dose, if you've received either the Pfizer or the Moderna vaccine. The two-dose series of those vaccines is important to have the highest level of protection and the longest duration of protection possible. And with that, I will hand things over to Dr. Daly. Thanks.

Dr. Daly:

Great, good afternoon. I'm going to provide an update on vaccination. To-date in New Hampshire, 1,093,000 doses of vaccine have been administered in our State. This includes 687,000 people that have received their first dose, which is 50% of the total New Hampshire population. And of those, 446,000 people have been fully vaccinated, which is about a third of our population, or 33%.

We continue to receive around 50,000 first doses of vaccine each week, between the doses that we receive at the State of New Hampshire, as well as those doses that come in through Federal Programs. And at this point, 60% of the people in New Hampshire who are age-eligible, meaning they're 16-and-older, have already made that choice to get vaccinated. This is a really great start, and we'd love to see more people make this choice. We still have thousands of open vaccination appointments across our State at over 300 different locations now, where you can get vaccinated.

Most people in our State wanted to get vaccinated and signed up as soon as they were able to, but we know that some people might be unsure about getting vaccinated. And this is okay. It makes sense that you might feel nervous about a new vaccine.

So I wanted to talk to those of you who are unsure. And I wanted to address a few common questions that we get about the vaccine. First, while these vaccines were approved quickly, there were no shortcuts taken. They're made using the same scientific principles as other vaccines, and they underwent rigorous scrutiny by Scientists and Medical Experts.

Second, the vaccine cannot give you COVID-19, nor will it make you test positive for the virus. The vaccine is not made with living virus, so this is not possible. Third, if you've already had COVID-19, you should still get vaccinated. This will boost your immunity and help to protect you from potential reinfection, as well as infection with variant strains of COVID-19.

And then, lastly, some people have been concerned about the potential side-effects. You may experience these common side-effects, such as pain at your injection site, or feeling tired, or having body aches in the first days after vaccination. These are all normal and expected. And their side-effects mean that your body is responding to the vaccine and building that very important immunity.

These side-effects are better than getting COVID-19, which can leave you with long-term symptoms and potentially result in hospitalization and death. We have seen even young people get hospitalized or have weeks or months of breathing problems that impacted their ability to play sports or exercise, or live a normal daily life.

So even if you think you're at low risk for severe infection, getting vaccinated will help keep you at work or in school. It prevents you from having to quarantine after an exposure. And it will help to protect the people around you who may be more vulnerable. Please do make that choice to get vaccinated to help protect yourself and also help us all get back to living a more normal life. And with that, I'll turn it over to Commissioner Shibiinette.

Commissioner Shibiinette:

Good afternoon. Just a few brief updates; for an outbreak update, we have one new outbreak to announce today. Sullivan County Healthcare is a new outbreak with nine resident cases and three Staff. That leaves our total at three congregate living outbreaks: Coos County Nursing Home; the Federal Correctional Institution in Berlin; and Sullivan County Healthcare.

Just as a reminder for nursing homes and nursing home families, every nursing home in this State that is not currently in outbreak -- so we have two in outbreak right now, Coos County and Sullivan County. So any nursing home not currently in outbreak have full flexibility to allow visitors both indoor and outdoor at their facilities. This is nursing homes and assisted living.

We have heard from quite a few families over the last several weeks saying that they're still wanting their families in nursing homes and long-term care centers. There is nothing in State guidance that restricts visitation in nursing homes that are not in an outbreak status.

So, we will be updating our guidance in the coming week that is going to be completely inline with CDC and CMS, which means we are not going to have any type of State guidance for nursing homes, outside of referring people to the CDC and CMS guidelines that they release to long-term care. We want to make sure that there is no confusion moving forward, because the State has no restrictions on visiting in a nursing home that does not have an outbreak.

Just a brief update on the Homebound Program, so far in our Homebound Program we have provided 3,245 vaccinations to the homebound individuals in New Hampshire. Our goal is that all of our homebound individuals will be vaccinated by mid-May. Thank you.

Governor Sununu:

Great, thank you, Commissioner and Dr. Daly, Dr. Chan. A few things to discuss today; first, just to go over some data. Some folks are asking about some trends in data. This is a bit of a reiteration of what Dr. Chan and Dr. Daly were already talking about.

So this is a New Hampshire vaccination rate. You can see the trend we're on with folks that are receiving their first vaccine. Just over 50% now have received their first dose. And that's of our entire New Hampshire population, whether folks are choosing to get the vaccine or not, so a great sign that, again, we're able to provide a lot of flexibility. And we just want to thank first all those who are giving the vaccine at all those sites, the amazing customer service, if you will, that we've been able to provide, and also, obviously, the citizens of New Hampshire, because the uptake has been very, very positive. And again, that provides a lot of flexibility for us moving forward.

This, what you see here, this is just going back to September. This is really that fall surge. And then, you can see our little potential spring surge. This is the fatality numbers that we've seen really drop very precipitously, about 95% from the fatality rate we were seeing in early-January. That peak is that

early-January peak, where the cases were high. The fatality rate was high. The vaccine hadn't really been fully administered into long-term care in our most vulnerable population.

So, again, a lot of -- we talk a lot about the datapoints of the day. But we always want to put them into context in terms of kind of where we've come and the trends that we're seeing, because that really drives a lot of our decision-making. And like I always say, you can talk about the results of a good decision. But if you're not talking about the data, you're kind of missing half the story there.

And then, finally, our case counts; so, again, this is a bit of our fall surge here. You can see our spring surge on the righthand side there. And as Dr. Chan indicated, the last couple weeks, our seven-day average case count has been continuously dropping, which is, again, a very positive sign. I think they're going to be in this range or dropping slowly over the next few weeks.

We're not going to go down to zero. We know that, unfortunately. We may have COVID up-and-down a little bit for the next few months, for the next few years, whatever it might be, which is why the vaccines are so important, and the more we can encourage folks to appreciate its safety and the opportunity that it's providing. But all these are good numbers, not just today but the trendlines that we're seeing are all very, very positive.

So, a little bit, again, just to be a little bit repetitive on the Johnson & Johnson vaccine, as a lot of folks know, the FDA did pause but then resumed the use of the Johnson & Johnson vaccine last Friday. And just to repeat what Dr. Daly was talking about, the Johnson & Johnson vaccine, it's safe. It's effective. It helps us get back to normal. If there's a certain reason why folks might like just the one shot and done, if you don't like needles, like me, it's a good opportunity for you. And we do have vaccine to give, which is really good. The fact that we've gotten it out so fast creates opportunity and flexibility with our appointments.

The pause, itself, I think I made it very clear to the Biden Administration, the frustration with that pause, if anything simply over the messaging. It's hard to re-instill that consumer confidence, to encourage folks to come back in and be part of that solution, so specifically around the Johnson & Johnson vaccine.

But it is safe. It is extremely safe. The FDA took a pause but they reconfirmed how safe it was. I got the Johnson & Johnson vaccine. Commissioner Shibi, Commissioner Daly got the Johnson & Johnson vaccine. We wouldn't have gotten it if we didn't believe and understand, and appreciate not just its efficacy but its safety, as well, which brings me to the final point around the Johnson & Johnson vaccine is that appointments are available this weekend.

We have three sites that we are going to be having not a single mega site, but Johnson & Johnson popup sites this weekend. And that's this Sunday. So if you go onto VINI, if you're in the system or you're interested in getting it, go into the system and register. It just takes a few minutes. And we will be doing a site in Concord, Nashua, and another one in Newington. So if you put in any one of those zip codes, you'll be able to see within those radiuses the opportunities that are there this Sunday. There's about 4500 doses that we're hoping to provide. And this is really about allowing people either to come into the system for the first time or move up. If you're not scheduled for your first shot for this week, next week, or the week after, there's still a few folks in those categories. They can now move up and get the one shot of Johnson & Johnson vaccine.

And then, obviously, as we have discussed a few times, as we get to Memorial Day, we will start that transition period of anyone who's still awaiting a first shot, that'll be more towards the pharmacies or your Primary Healthcare Provider. The hospitals and the Hospital Associations will be working as

really the primary givers of the vaccinations, as we really rely on the healthcare services here in New Hampshire, which are really phenomenal, to take over the primary role.

And then, what you can see behind me is the job fairs. I mean, I just want to really put in a plug. As we come out of COVID, our economy is incredibly strong, not just regionally. We've always had the strongest economy in the region. But now, even nationally, we're just absolutely booming. And there's thousands and thousands of high-paying jobs available.

So there are 10 upcoming New Hampshire virtual job fairs. And if you go on the website you see behind me here, virtualjobfairs.nh.gov, there's going to be an opportunity. You can kind of see where the job fairs are and how to get on them. Some are done regionally. Some might be done by industry. But it's a really great website and we want as many folks to partake in that as possible.

A lot of folks have been reskilling. They've gone back to school. They've gone back to be retrained in maybe another career. It's kind of that transition, that inflexion period, if you will, that COVID provided. A lot of people just kind of reassessed, when they go back into the workforce, where they wanted to go or maybe make that career change. And that's just, in some ways, a great silver lining and an awesome opportunity to be able to take advantage.

But that final step is something like these job fairs to really see now what opportunities are out there for folks, or for all the folks that are moving into our State. We know a lot of folks are moving in, in droves. And if you're looking for work, this is a good place to stop. Our Team at the New Hampshire Department of Employment Security does a phenomenal job. So, again, that's virtualjobfairs.nh.gov.

And then, lastly, just a bit of a reminder also on the announcement we made last week, that, on May 23rd, which is still a few weeks away, we are returning to our traditional system of requiring those on unemployment to search for work. We had suspended that need for about a year. But we're kind of giving everyone a bit of a heads up a few weeks. Our systems will transition. But you do need to, at least, search for work. And again, with all the jobs that are out there, I just think there's a lot of opportunity.

Doesn't mean that folks are going to be kicked of unemployment or anything else, or lose their benefit, if they're unable to find work. But you do have to actually search for work, just like the pre-COVID system required. I guess with that we can open it up for a variety of questions.

Q&A Session

So, Governor, it sounds like we've got about weeks to a month left of fixed-site vaccinations.

Governor Sununu:

For first shots, if I may.

For first shots, sorry.

Governor Sununu:

We will keep the fixed sites open after Memorial Day for the second shot, but not for the first shot.

Will those sites ever transition in these last few weeks to like a walk-status? Would that be a thing?

Governor Sununu:

That's not anticipated, no. We still want people to go through the system. That allows us to kind of track individuals, make sure they're filling out the questionnaire, making sure they qualify, and not just qualify what you'd think as a qualification but for health and safety reasons, too. We want to make sure that they don't have any allergies or are taking certain medications that might preclude them from getting a certain vaccine. So, going through the system is a very important part of the process, just to make sure that we're setting the appropriate expectations, and we're also providing enough vaccine to each of those sites for those individuals that want to come in.

And I know we've seen the hospitalizations trending younger. Fatalities are down, but I'm curious about complications. We heard Dr. Daly talk about that people are suffering from long-term effects from this. Could we hear from you and also Dr. Chan about some of the things we're seeing in terms of the long-term for the younger hospitalizations? Are there a class of people who are getting this and still suffering, not just the long-haulers, but getting something that they can't kick, even after they've gotten out of the hospital?

Governor Sununu:

Sure; I mean, I'll actually turn to Dr. Chan a little bit on that, in terms of the long-term repercussions of the younger population with those more serious symptoms.

Dr. Chan:

Yeah, thank you for those questions. It's a good question of what we're calling long COVID, or has been called long COVID. And so, there's a certain percentage of the population that gets COVID and will go on to have some long-term symptoms. And oftentimes, those symptoms include persistent respiratory problems, difficulty breathing. People complain of brain fog, or difficulty with concentration and memory, perhaps.

In terms of how common this is in New Hampshire and how it's affecting the younger population, we really don't have a lot of information or great numbers. Long COVID is not a syndrome that is being tracked. There's not even a good definition for when to include somebody as having long COVID versus not having long COVID.

So, this is a difficult thing to sort of get information on and track. We oftentimes don't get complete information from people with COVID-19 who are hospitalized and what their long-term outcomes are.

So, I know that there is interest generally in standing up medical services, not only in New Hampshire but across the nation, for trying to address some of the long-term complications from COVID-19. Even in New Hampshire, that is being looked at and set up in different areas around the State. But unfortunately, we don't have great numbers, in terms of how common that is for people to have COVID-19, particularly in the younger population.

So how would you assess the risk for a younger person? I mean, if you're counseling them, essentially you're going to say get the vaccine, I'm sure. But it's a notable risk, I guess, for someone to get those?

Dr. Chan:

Yeah, and this has been part of the messaging, I think, all along, throughout the pandemic, which is that anybody can get COVID-19. And anybody can go on to spread COVID-19 to others. And just because somebody is of a young age, while their risk for severe disease, hospitalization, and death may be less, certainly we've seen hospitalizations in younger people. We've seen deaths in younger people. We have the MISIC, the Multisystem Inflammatory Syndrome in Children that has been reported nationally and thankfully is uncommon but still does occur. And then, we have the possibility now of people developing long COVID, or long-term chronic symptoms from COVID-19. And all of that is preventable with the vaccine, as you point out. And this is partly why we stress the importance of the vaccine for everybody, old and young, to protect their own health and to protect the health of others around them, because even people that may not develop severe symptoms, even people that may not develop long COVID symptoms, may go on to spread the infection to other people who, then, have complications from infection.

Do you have numbers on how many young people in New Hampshire have died from COVID, people under 40 or under 30, or anything like that?

Dr. Chan:

Yeah, again, some of that data is available on our website, nh.gov/COVID-19. I don't have the exact numbers at-hand. I think last time I looked at the numbers, I believe there were zero people under the age of 20 who had died from COVID-19. And then, how the age breakdown occurs after that, some of that data's available online.

And then, real quick on the variants in regards to breakthroughs, we understand the CDC's asking States to analyze breakthroughs to see if they're variants. Are you guys doing that? And if so, what have you found?

Dr. Chan:

Yeah, so in New Hampshire and other States across the country, are currently investigating breakthrough cases of COVID-19. And we talk about breakthrough cases. We're talking about people that have been fully vaccinated and have still gone on to develop COVID-19.

Certainly, that's possible. No vaccine is 100% effective at preventing infection. We do know that the vaccines are effective at not only preventing symptomatic disease, but there's continual evidence coming out showing it's effective at preventing hospitalizations and deaths, and even asymptomatic infection. And so, continue to stress the importance of getting the COVID-19 vaccine.

But I think we have seen and should expect there to be breakthrough cases that are identified. I think the latest number I saw for this were that there were 88 breakthrough infections that had been confirmed in New Hampshire. The majority of these are not variants of concern. I think, actually, that only seven of them have been identified in people with -- infected with the B117 variant.

So, whether it's a variant of concern or not, we know that breakthrough infections can and do occur. But the vaccine continues to be important [ph] for limiting the burden of disease, preventing hospitalizations, preventing deaths, and preventing asymptomatic infection. Thanks.

Governor Sununu:

Great, thank you, Dr. Chan.

Governor, are you -- where's the level of concern with hesitancy and the Johnson & Johnson vaccine? Are those appointments not filling up this weekend or...

Governor Sununu:

We still have appointments available of the three sites that are going to be -- or the popup sites, as we're calling them, in Concord, Newington, and Nashua. And we definitely encourage folks to sign up and move themselves up.

But, yeah, I have a lot of concern on the hesitancy, which just gets me back to kind of the abruptness that they had caused, that they had kind of pulled this off the shelf. Again, it's really up to Governors to kind of re-instill that confidence. And the data came back and showed. They did a very thorough review of Johnson & Johnson and showed that it is fine. It is more than safe. It is just as safe as they imagined.

Obviously, there is a slight chance, a very, very minimal chance of some individuals getting blood clots. And they've identified that. But when you compare it to other vaccines and other things out there, it is absolutely safe. Folks should get it. They should know that it's safe to get. And we do have three other options out there.

So at this point, we just want everyone to sign up to get the vaccine that we can, anyway they can. It's not just Johnson & Johnson. Moderna, Pfizer, whatever you're comfortable with, sign up and getting the vaccine is the most important step.

But for a lot of folks, there are some folks who have been recommended by their Doctors, as well, to get the Johnson & Johnson for certain medical conditions. But that's really a decision between them and their Doctor. And we just want to make sure that folks know that that is available, and to move on up. If you're saying to yourself, gee, I'm not going to get my first shot of Moderna for another week, go get Johnson & Johnson on Sunday and be done. One shot and done, I mean, awesome opportunity.

Is there any plans to do any sort of messaging about if you get vaccinated, you'll be able to do more? If you don't get vaccinated, you may not be able to do as much, rather than just keep to your space and...

Governor Sununu:

Well, I think the messaging is about the vaccine helps everybody get back to normal. So it's not about a vaccine allows you to do X, Y, and Z, per se, because, again, especially in New Hampshire, we're going to provide flexibility for everyone, whether they make that choice or not.

But it is a way to get back to normal, and get back to normal faster. And because our vaccine has been so fast here in New Hampshire, the fastest in the country at times, that allows us to have these flexibilities that other States haven't been able to take advantage of yet. So, it's been great.

What are your thoughts on people having to prove that they've been vaccinated for anything? Flights or certain stadiums now are doing vaccinated-only sections. What are your thoughts?

Governor Sununu:

I'm very hesitant on anyone that has to prove they've been vaccinated, or prove they have a health condition, so to say. I mean, you're really walking very, very murky waters, when we're getting down the path of the Government saying that you've been vaccinated.

If you're talking about from a government perspective, obviously I've been very clear that we should not be going down the path of vaccine passports or anything of that nature. As of right now, private businesses can do what they want to do. But vaccine passports and proving that you're vaccinated is really about the haves and the have nots. And I just don't think that we need to go there.

People have had the option. They've had the choice. They've made that choice for themselves or their family. And everyone's living with those decisions. We're moving on with that flexibility of individual responsibility.

Are we overall seeing -- sorry, Adam -- are we seeing the demand less now? Are we seeing to plateau at all?

Governor Sununu:

Yeah, I mean, I think a lot of folks came into our system. We're definitely seeing the demand kind of plateau and I don't want to say peter out, but it's definitely slowing down. It's not the urgency, because so many of us, with over 50% of the population having their -- at least having their first shot, and knowing that we're trying to get to maybe 60% or 70% -- I mean, trying to get to 100%. But 60% or 70% is probably a pretty realistic goal. We're kind of there. So, every day, we see a few more people come into the system. But it's not like the thousands and thousands per day we were seeing just a month ago. So, still encouraging it.

It was reported last week we're hitting a wall.

Governor Sununu:

We're slowing down. Yeah, I don't like the term "hitting a wall", because that implies that you're stopping, right? But we're not going to stop. We're going to keep it going. But things will slow down and eventually a lot of folks are getting it. And that's why we're encouraging, if you're on a border, if you're living in Methuen or Haverhill, or Tewksbury, Mass., whatever it might be, we have opportunities for you, too, because they're shopping in our stores. Their families are working in our businesses. So we want to provide them that opportunity, as well. And so, we strongly encourage, if you live on a border town, or Maine, or Vermont, or Massachusetts, and you're having trouble getting vaccinated in your State, come on over. Be part of our system, because you're part of our community.

Governor, I guess the Employees at the Fish and Game Department have been told to expect to all return back into work inhouse May 7th. I think other Agencies are doing this in phases. Are you letting every Agency decide how its State Employees should return? And do you have a target for when all Employees should return?

Governor Sununu:

The target is May 10th. Yeah, I think May 10th is a Monday, if I'm correct. And so, we've been very consistent with our message to all Agencies with a -- all Agencies are getting the same message. So I just want to be very clear about that. We're not picking and choosing certain Agencies, or Divisions, or Departments.

We've allowed them three weeks-or-so for the remaining Employees -- most are already back in, but the remaining ones that might be working remotely -- to start transitioning back in, because they've had access to the vaccine. And so, we expect to be fully operational, not that we weren't fully operational, but fully operational and in-person, with buildings open, open to the public for public access for the business transactions that has to happen, one-on-one.

You can still make appointments. You can still use our online systems. Those are awesome and we very much encourage folks to do that. But if individuals want to come in for services one-on-one, that opportunity's going to be there, as well, as well as, to your point, the State Employees being back at work, as well.

And with regard to the Best Practices document, as you know there were, I guess, about eight or nine different groups -- sports programs, the retail -- that wanted an Addendum to the Best Practices to spell out a little difference in there.

Governor Sununu:

Yeah.

Are you okay with that?

Governor Sununu:

Yeah, so I apologize. They wrote here, Governor, don't forget to talk about Best Practices, and I totally forgot. So I apologize. So, if I could, Kevin, let me take a step back. We do have a Universal Best Practices. Oh, there it is. We even have a slide on it. I'm sorry. I apologize.

We do have a Universal Best Practices Guidance document that is being released today. And what we've really tried to do is keep it truly universal. So whether it's restaurants or retail, or whatever it is, I know there were a lot of requests to have their own sections, but to keep it -- I'm a big believer that when you keep -- if you want someone to use a document as a tool for yourself or your Employees, you have to keep it readable and simple. You can't give them 100 pages and have them hopefully sift through it to figure it all out.

So I think Dr. Chan and his Team did a phenomenal job really kind of breaking it down to simple recommendations. We're not mandating. We're not saying you have to be vaccinated, nothing like that.

We're just kind of reemphasizing the most important parts of the guidance mandates that we previously had in place, right?

So whether it's social distancing and some recommendations on hand hygiene, recommendations on cohorting, good communication in your business practice, these are the things we're recommending. And the good news is this. Every business in the State has had to kind of look at guidance already and mandated guidance already. They know all the good things that they can do already.

This is, if you will, a bit of a reminder, going into the long-term, about how to keep some of these practices up for the best health and safety of their Employees. So that document will be released this afternoon.

We do have a separate document, obviously, on schools. That lives on its own, as well. Those have always been just recommendations and flexibilities. And so, schools will still be using that document. And then, we actually also have a third one for a very -- it's one of the only areas that we did single out, because it's so unique. It's guidance for -- boy, I'm going to get the title -- I don't know if we settled on it -- overnight -- when kids sleepover, so overnight congregate settings, so summer camps is really what we're talking about, or it could be for any type of reason.

The main reason we separated kids out and overnight stays is because as of right now kids can't be vaccinated, right? It's the only population where you really cannot vaccinate. And so, we do have a whole separate Best Practices document for them, as well. But that is really driven around the overnight summer camps and things like that. It's just a very unique population. So we have allowed them.

But those are really the three key documents. And then, there's other that we reference in there for health and safety, for backup CDC documents, and things of that nature. But we do have a Universal Best Practices, the education document, and then this overnight cohorting for kids. I don't think we called it that, but I apologize. I don't have the exact name. But you can find it on [COVIDguidance.nh.gov](https://www.covidguidance.nh.gov). I can promise you that.

But like arts venue had asked for, and the Task Force had recommended to you, for them to stage -- they basically don't think they could possibly make money with 6-feet apart of people in the stands. So they would like to go down, I believe it was by the end of May, within 3 feet between seats, and, by July, no restriction on seating.

Governor Sununu:

There's no restriction on seating as of May 10th. And however those venues -- because every one thing we looked at -- we looked at that. Every venue's very different, right? What happens at the SNHU Center in Manchester might be very different than the Bank of America Pavilion and Meadowbrook. So, some are indoors. Some are outdoors. Some already have spacing. Some have how they deal with food service might be very different, right?

So, again, it's all best practices. But they have complete flexibility as of May 7th, technically. And again, if they want to phase things out or limit their spacing, or limit their tickets, I think that's a great idea, and feel comfortable in doing that.

So everyone just has to find the best path for their venues or their business, or their restaurant, whatever it is. And there'll be that balance, right, of having some good practices in, making your customers feel comfortable and safe, and then I think as we get more to the summer, I think there'll just be a general sway of things. I think things will truly -- people, as nature, will understand that this is a

transition period back to normal. And you're going to see the flexibilities that we've already provided really come a little more to fruition in those businesses. But we will see. It's up to them.

Governor, on the Johnson & Johnson clinics, if I'm understanding this correctly, people will know that they're signing up for that essentially.

Governor Sununu:

Yes, yeah. They are identified on there. Yes, thank you.

Even in that instance, you're probably maybe going to get somebody who's like, oh, my God, I didn't realize this was Johnson & Johnson, maybe. What happens to that, if somebody shows up and they are suddenly like, well, wait a second, can I get something else?

Governor Sununu:

We can refer them. Like, for example, if you were in -- we had a few examples of this, actually, when we did the Speedway. And we'd refer them right down the street to the Steeplegate Mall and say, well, you can go down there if you're not comfortable with Johnson & Johnson. And we've had people show up for Moderna and Pfizer and say, I thought this was Johnson & Johnson. No, that's being given over here. And for the most part, we can refer them over.

We have, again, a very -- VINI allows for a lot of flexibility. So -- and again, those three sites are identified as Johnson & Johnson sites. You should only be signing up for those sites on this Sunday. I think they're some of the only sites that are even available this Sunday. But put in the zip code. They're there. But it's really specifically for Johnson & Johnson.

A question on the vaccination numbers, so it might be a Dr. Daly question, the difference between people getting their first dose and being fully vaccinated, that number is -- the stretch between those two is getting larger. Is that just a quirk in the numbers? Or is that people not getting their second dose? Or what's happening?

Governor Sununu:

Yeah, that's because, over the last three or four weeks, we've been offered so much more vaccine than, let's say, seven or eight weeks ago, right? Seven or eight weeks ago, we were getting 30,000 doses of first shots. This past week, we had pharmacies and Federal-qualified health centers, and all this other stuff, all these other programs that are now available. You have 50,000-plus or more of first shots being given. So naturally that number grows every week that goes by. The number of people awaiting their second dose grows. But the number of people getting their second dose also grows, right? It kind of works in proportion. So, that's the bulk of the difference there. And it's a three- or four-week gap.

Yeah.

Governor Sununu:

Yeah, so we will leave it there. I mean, hopefully with more Johnson & Johnson now being administered, that number actually starts to shrink a little bit. And as Adam pointed out earlier, just less and less people, unfortunately, are looking to get the vaccine. So we want to keep encouraging it, but knowing that less people are looking for it. And as we get closer to Memorial Day, those State fixed sites, post-Memorial Day, will only be for second shots. And so, again, it will be a very, very manageable number.

After that, you can just go to your Primary Care Physician or your pharmacy directly as more of a walk-in-type program for your vaccination. And we can -- I think we have a bunch of questions on the phone.

Holly Ramer with The Associated Press:

Hi, thanks. I have two hopefully quick questions. How do you envision things working, in terms of allocating New Hampshire's share of the American Rescue Plan money? Will it go through GOFERR and with the Legislative and Stakeholder Advisory Boards again? And my second question is to follow-up what you were saying about State Workers being back to work in-person by May 10th, should a State Agency, or Office, mandate masks for their Workers, or members of the public coming in? And if not, could an individual Worker still decide like I think I feel safer wearing a mask? Could they still make that choice?

Governor Sununu:

Sure, two great questions. So, first is what we call the Biden Bucks, the \$1.9 trillion that was voted on and passed out of Washington a couple months ago. Two things: first, we're still awaiting guidance. It's actually quite frustrating. We are ready to administer dollars. We haven't received the money yet. We don't have the guidance for the money yet.

Just to put it in perspective, when we had the CARES Act, within a month we had -- last year -- we had the guidance and the dollars in our bank account. And we were going. And we were going really quickly with that, which was phenomenal.

We don't have any of that right now. So we are waiting. So, in the meantime, we've been doing couple things. We're working with the Senior Leadership in the Legislature in both the House and Senate about bringing the vast majority of these dollars, because so much of this money, the vast majority has nothing to do with COVID. It's providing money for water projects or wastewater projects, or broadband, or all this other stuff. And so, that will go through a traditional Fiscal Committee process.

There's a certain section of the money that is COVID-related that might be for testing or vaccinations, or more Health and Human Services-related. That will still keep going through GOFERR, just to make sure that we're ahead of the game on that. All the FEMA reimbursements that may be available because of that Bill again will also come through GOFERR.

So we really try to separate it out in terms of emergency need, as it relates to COVID, and the less emergency-type issues, more of the infrastructure-type stuff and the programming dollars that come in. Those will go through the Fiscal Committee. And that's kind of how we do that one.

On your second question, as of -- there is no Mask Mandate today. So as folks come in, we're transitioning to say the Employees do not have to wear masks. We're not going to mandate masks for Employees. But obviously, we always want them to feel safe. That's always an option for them to have. But the lack of the statewide Mask Mandate will pertain to the State Employee Offices, as well.

But, obviously, we encourage anyone to wear a mask, just like we will be following those Universal Best Practices like anybody else. If you want to wear a mask, wear a mask. If you can socially distance, socially distance. We will try to maintain good communications for folks and be sure we're providing the flexibility that individuals may need, if they were to get COVID. And hopefully they can manage through it.

Teddy Rosenbluth with the Concord Monitor:

Hi there. Thanks for taking my question. I have two quick questions. First, I was wondering if you had a timeline for when all the State Employees who have been working from home will be required to turn to in-person work. And then, my second question is, you're saying you're aiming to see between 60% and 70% of our State vaccinated. I'm wondering if herd immunity is still our end goal. Dr. Fauci has suggested herd immunity might be between 75% and 80%, or whether that's just not realistic anymore.

Governor Sununu:

Sure, so State Employees, we want to make sure that, as I reiterated earlier, they're going to be back at work with all opportunities for our citizens to come in and have in-person connection with our State Agencies and offices on May 10th. I believe that's Monday, May 10th. And a lot of our Agencies are making that transition now.

In terms of herd immunity, one of the challenges there is no one really knows what the number is, right? We've heard 60%. We've heard 85%. We will probably end up with our population vaccinated somewhere in between.

So, I wouldn't say -- I don't like saying that herd immunity is a goal, because that implies that, if you get to a certain percentage, then you're done. I don't think any of us will be satisfied until we really get everybody to want to take the vaccine who's willing to do so. And so, whatever that number is, not that we don't care, it's important to have a sense of it. But we're just going to keep encouraging folks to get vaccinated, making sure they know that it's safe. And hopefully, over time, those numbers get to the point where we see COVID really start dissipating, and we get to a place where COVID isn't even a number anymore. That would be great not to see any COVID.

But then you add the variants in there. You don't want to get overly optimistic, because then you have to make sure that if you have any variants down the road and what that might mean. You could have a lot of variants without the very high fatality rate, and how that affects herd immunity is, I think, still remains to be seen a little bit.

Daymond Steer at The Conway Daily Sun:

Thank you very much. All businesses had a tough year with COVID restrictions last summer. And I think the Governor really wants a strong tourist season this year. But, at the moment, in Conway, which is probably the State's largest tourist destination, it's shutting down short-term renting and residential zones. And what's more, some people believe that short-term rentals offer tourists a way to come here but also keep

socially distanced and provide lodging options for transient Medical Staff. Do you have any opinion on this situation?

Governor Sununu:

Sure; so, I mean, specifically as it pertains to the Conway area, I'll just tell you I think limiting short-term rentals is problematic. We are a tourism State. We are a destination State. And I think, especially during high tourism season -- and it's going to be a great season, no matter what -- you want as much availability as possible to allow for a strong economic opportunity as possible.

That being said, it is a local decision. And so, we always encourage anybody who's dealing with a local decision, whether it's limiting short-term rentals, whether it's limiting affordable housing, whether it's limiting opportunities in a community, you always want the citizens to know that they do have a voice. They should stand up and be part of that process. And I mean, we will see where it goes. But it is a local decision. And we just want to encourage as many rental opportunities as possible, because it is such a kind of prime driver of our economy, especially as we enter the summer season.

Paula Tracy with InDepthNH:

Good afternoon. I have a couple questions about the vaccine. One, can I get a number on how much vaccine waste we may have encountered? Another question is, would it be possible for us to consider going door-to-door to get people vaccinated? And the final question is if you can give me a number for how many people have signed up for the J&J vaccines on Sunday at the three sites.

Governor Sununu:

Sure; so, a couple things, let me answer the third part first. I don't have an exact number of how many people have already signed up for the three sites of Johnson & Johnson. I don't think we have that information. People are literally signing up as we speak. And there are spaces available. And we encourage folks. We have thousands of spaces available, as of earlier this week, we did. And so, we want to encourage everyone to sign up for those.

In terms of waste, I believe we're still under 1% with our overall waste of vaccine. I'm going to add a little addendum onto that. I'm concerned, and I think on a national level, not just here in New Hampshire, where you're likely going to unfortunately see that number of the amount of vaccine being wasted go up slightly. And there's a couple reasons for that.

We were informed earlier this week that I believe it's either Moderna or Pfizer -- I think it's Moderna is going to 14 doses per vial. They want to get it out faster. So, you put more doses in a vial. The problem you have there is you need 14 people at a time to get vaccinated. And when you have that 15th person, you're going to open that vial. If you don't have another 13 people to take those doses, they could very easily and unfortunately get wasted. You only have a few hours, once you open that up, to be able to administer that.

So, I understand why they're doing it on a Federal level to get it out faster. But I am very concerned that, as our numbers start to dwindle a little bit, and more importantly as we want to give it to your Healthcare Providers to give the vaccine directly, every Doctor will have to, in theory, have 14 people ready to come in on that day to get their vaccine to be efficient about it.

So, I get why the Federal Government is doing this. But, at the same time, I think it could have the negative effect of driving potentially more waste. And so, we're one of the best in the country of managing our waste and the numbers show that. That's why we're one of the fastest at getting it out, because we can be so nimble about making sure that almost every vial is used.

The little bit of waste that we had, it was happening more because it was cold and you'd have some cracking in the very cold weather, and things freezing. But we did, I think, a very good job to-date because of the waste. And again, just a little concerned about it going forward, so we just want to keep getting it out as fast as we possibly can.

As far as the whole idea of going door-to-door with the vaccine, in some ways we already do that a little bit with our homebound population. We go into certain apartment buildings or centers where elderly communities -- and it's similar to going door-to-door. We're coming and we're just offering it to everyone in that building on a certain day. So that's kind of the equivalent of door-to-door.

Obviously with our Mobile Teams, as well, they're always -- by definition, they're being mobile. They're always moving around. We don't require people to just sign up to get that. We're going into folks' communities, making it available, and administering it as fast as we possibly can.

So, if we were a State that didn't have a very high uptake, might be a different story. If we were a State that wasn't getting it out very quickly, it might be a different story. But we're like the fastest and the Team is doing a phenomenal job. I mean, that's one of the reasons, because I think the Team is so good about getting into these very challenging populations, to allow them to get the vaccine very, very quickly without a lot of hassle.

That's one of the reasons we are literally on top of the entire country in terms of vaccine administration, because we tend to do that kind of stuff very, very well. And we will keep doing it as strong as we can, even though the demand for it is just naturally going to go down, as more people get it.

Anmarie Timmins with New Hampshire Bulletin:

Thank you. I have two non-COVID questions. The first is the Senate will take up the House Budget next week. There's language in there that would restrict funding for family planning to be those centers that'll be physically and financially separated. If that makes it in the budget that lands on your desk, I'm wondering if you would sign it. And on a similar question, there's legislation that would prevent the State from enforcing Executive Orders that relate to guns, restriction of access to guns. If that makes it to your desk, would you sign that one? Thank you.

Governor Sununu:

Sure. So, yeah, both of those issues are currently being debated. I think they're likely going to be amended a couple times between here-and-there. So, I don't want to say what I will and won't sign when I really haven't seen the final language of either of these Bills. And they're still very much in the middle of the process.

As it relates to the first issue around family planning, it's in the Legislature's hands. And we will kind of see where that debate goes. There's the two. The funding issue and the separation of the funding issue are actually two very separate pieces. And we will see where they go with each of those.

I do know there's some legislation as it pertains to the Executive Orders around the President has signed on the restrictions of firearms. And I'll tell you where I've always been is that, when it comes to

firearm and firearm safety, New Hampshire does it really, really well. We're very proud of our number here.

Doesn't mean we're immune and couldn't have a very tragic situation at any moment, and we're prepared for that unfortunately. You have to be in this day and age. But overall, with firearm safety in New Hampshire, we do it very, very well. And I've never proposed any drastic changes. And when they come as an Executive Order, while it does have the weight of law behind it, I think that it would be -- what you're looking at, in terms of what's happening in Washington, could be a drastic change to our system. And that's nothing I support. I think we have our system that does it really well.

Michael Graham at the New Hampshire Journal:

Yeah, a mask question and then an outreach question. The numbers nationwide for first shots have plummeted by 20%, the rate of first shots going out, falling by 20%. New Hampshire doesn't appear to be quite that bad, but it's still way down. In the 10 days leading up to April 17th, we gave out 134,000 first doses. In the 10 days since, we're down to 119,000. And we were adding 25% to the first-shot population every 10 days. Now, that's down to 18%. You were in first place by getting out 94% of your doses. Now, you're in first place at 89%. At what point does the decline in willingness or people showing up to get a first shot become a major problem? I mean, I don't want to say emergency. But, more -- you don't seem as nervous about it as I am, looking at the numbers. So I'm wondering about that. And the second thing is, how much is impacted by the messaging of having Dr. Chan claim falsely that you have to wear a mask and remain separated -- socially separated after you've been vaccinated; watching the President of the United States wearing two masks while he's outside, after he's vaccinated; watching the President wear a mask while he's on a Zoom call with World Leaders, the only person? Isn't it time for Leaders to show the benefits of the vaccines, rather than continuing to suggest, despite the science, that there is some significant risk of people who have been vaccinated of spreading, or contracting, the virus?

Governor Sununu:

Okay. So there's two different questions there. So the first one is on first shots. The demand for first shots is down about 20% nationally, not quite as high here. Am I concerned about that? Well, no. I mean, obviously we want as many people to get that as possible. But so many folks have gotten their first shots. I mean, so the number of people that are looking for a shot decreases every single day, by definition.

So, of course, the demand goes down. And that's naturally why we will see the demand keep getting smaller and smaller, kind of until we get to Memorial Day. And then, at that point, we can move those first-shot opportunities to Doctors and pharmacies that won't get overwhelmed. It will be a nice, smooth transition.

So, that's kind of how it was planned and designed. And because we've been so fast with it here, the uptake has been very high, which is great. But, it's actually the rate of vaccination is happening exactly as we predicted. And I think it's going much better than we thought. So, are we surprised by the demand going down? No, because, by definition, it should, given that you only have so many folks within your population to vaccinate. So, no, I'm not nervous about that at all.

In terms of the issue around masks, look, I think we've been very consistent, whether it's Public Health or myself. We always want to encourage folks to do what is safe, right, whether it's social distancing, or wearing a mask, or hand hygiene, or all these things that we talk about.

We don't have a Mask Mandate in this State anymore. But obviously we encourage folks to do so, when they can. I don't want to pontificate on other Leaders or the Biden Administration. There have been times, and I think everyone has recognized some tough messaging out of Washington, D.C. about masks and two masks, and wearing a mask into 2022 and all that.

I will say, over this past week, you've seen more flexibility with the CDC that has come out around masks and outdoors. So, I think it is being recognized that, as more people get vaccinated, it is kind of a path to normally.

Here, in New Hampshire, our path, we're just on a much faster track than most other folks. But, we're not mandating a mask here at the State level. But obviously if localities want to do that, if businesses want to do that, if individuals want to do that, it's all highly encouraged. And I think that's been a very consistent message, not just through the Mask Mandate, but even as we've come out of the Mask Mandate. We always want to encourage it. There's nothing wrong with that. And we support Public Health 110% in that endeavor.

Alli Fam with New Hampshire Public Radio:

Great, thank you so much. Got three; first one's super quick, which is just did New Hampshire get more Johnson & Johnson this week and how many? And then, my next one is, we've reached out to some of the pharmacies who are administering vaccines in New Hampshire about how they're handling ID requirements. And I understand those are Federal. It's through a Federal Program. But Walgreens told us that they don't turn away people who don't have an ID, unless it's specifically required by a jurisdiction. So, on that note, I'm wondering what guidance has the State given to pharmacies about how to handle IDs, and how the State weighs concerns about keeping track of who's been vaccinated against the potential barriers that ID requirements might pose for people, especially now that we've got this universal access for vaccines here? And then, my last question is, the CDC data shows that New Hampshire is farther ahead on its vaccine progress than the State Dashboard does. So, CDC data shows about 60% of the State has received one dose and 30% is fully vaccinated. And as of today, they also say that 99% of the population over age 65 has received at least one dose. And wondering if you have any insight into what the gap is and if those numbers are accurate.

Governor Sununu:

Sure, so let me do this. Let me take a shot at question 1. I may ask you to reiterate question 2. That was a little confusing. And then, I'll give the first half of the answer in question 3 and then I'll bring Dr. Daly to clean it up.

So, first, I believe your question was, how much Johnson & Johnson are we expecting this coming week? And I believe it's about 2200 doses this week. Unfortunately we didn't get a whole lot of confidence that in the next week that, while this pause happened, they were manufacturing a lot of Johnson & Johnson. I don't think they're manufacturing any, frankly, as far as we can tell. So we'd kind of have to ramp up again to get it to this week. There's only about 2200 doses coming into the State.

Secondly, I believe the question revolved -- and please correct me if I'm wrong -- around the requirement of identification, specifically in pharmacies, as it relates to individuals coming in, how that is subsequently tracked. So we obviously -- we have a great partnership with our partners, our partnership with our partners here in New Hampshire, specifically the pharmacies and Walgreens, and some of the independent pharmacies at Walmart, as well, the pharmacies there that are now giving out the vaccine.

And we obviously encourage them to use the exact same standards that we use, just, if anything, for a consistent -- I think our system works very well -- and a consistency for the consumer, for the customer, just to make it easy and simple.

It's worked very well. And the vast majority of locations across the State are using the same process that we use. While we don't -- if pharmacies have a different way to check identification, that's -- I guess technically that's on them. But individuals that do get vaccinated do have to be registered into the system. And so, however they're checking IDs and however they're verifying that, that's really on them.

We have provided certain pharmacies that didn't have enough Staff individuals to help with some of that backend administrative piece to make it as consistent as possible. And so, we don't have data gaps there. But, again, we just encourage them to use the same system that we're using, as far as identification. I hope I answered your question there. But if not, please feel free to correct me.

Finally, as we talked about last week, the CDC numbers that are reported federally are always a little bit different than the State. And there could be a variety of reasons for that. And I'll have Dr. Daly come up and talk about some of the specifics.

But, remember, the Federal Government has a lot of Direct Federal Programs that the State is not involved in at all, whether it's with the FQH, Federal Qualified Health Centers, what we call the FQHCs, the Veterans Program. They administered a lot of vaccine directly to Veterans that we don't really get involved with. They do a lot. Well, they weren't doing it fast enough with the Federal Prison, but apparently they are now, which is good. And so, that's a Direct Program. These are just some examples. Military could be one. These are just some examples of Direct Federal Programs that might not come directly through our system. And so, there's always going to be a little bit of a discrepancy there one way or another in terms of the numbers.

Also, our system takes a few hours to report up. So on any given day, we might be first. We might be fifth. We might be third. But if Dr. Daly -- no? I did a good enough job, I guess, there. So, yeah, that's really it. There's just a lot of Direct Federal Programs that we don't get looped into. It's unfortunate. And so, you'll always see most States, by the way -- in fact, virtually every State, there's a discrepancy in those numbers, at least a little bit.

Tony Schinella with Patch:

Oh, thank you very much. Three quick questions, Governor; previously some members of the media have asked about COVID-19 deaths and whether or not all of New Hampshire's fatalities have either been people with underlying health conditions or the elderly. Is this still the case in the State? That's the first question. Second, can someone from the Health Department discuss the 14 COVID-19 fatalities revealed this week from between November of last year and March? Were they discovered via Medical Examiner or autopsies, or some other process? And how come they weren't known previously? And then, third, there was a second death reported in the 20-to-29 age category, according to the Data Dashboard, earlier this week. That person has since been -- or the second person apparently has been removed. It's one again. Was this an error or was it an error to remove that person? And can someone talk about if that actually -- that second person exists? Can someone from the Health Department talk about, without getting into personal and private data, what was the person's health conditions and what was the contact tracing on how they caught the virus, because it is so rare? We've only had one previously in that category. Thank you.

Governor Sununu:

Well, I think Dr. Daly's going to have a fun time with all three of these questions. They're all very Dr. Daly-driven. I did my best to write them up there for you.

Dr. Daly:

Thank you.

Governor Sununu:

Can you read my chicken scratch?

Dr. Daly:

Okay. Well, this is a sad topic, because, of course, we've had lots of people die in New Hampshire. But I'm happy to provide some insight into the data. So, I think the first question you wanted to know about who the people are, in terms of age and medical comorbidity. And all of the deaths, except for one or maybe two, have -- are either 65-and-older or have underlying medical conditions.

In terms of the delay in death reporting, when we have looked at the interval between the time that someone dies and that we're able to confirm their death is COVID-19, on average this interval is only 6 to 7 days. So in general, we are identifying these deaths, more than 90% of them occurring within a week. We're able to confirm those, and that's because the majority of people are New Hampshire residents or die in New Hampshire. And we have a really fantastic vital records system here in New Hampshire that's very timely. And people are required to file their Death Certificates in a timely manner.

The ones that are typically taking longer are either those that were investigated by the Medical Examiner's Office, and so they do a range of different evaluations, including sometimes toxicology results that have to go out and can take weeks to come back. So sometimes the delay could be it's a Medical Examiner's Office case.

But primarily, many of these delays are because they were out-of-state deaths. And so, if, for example, a person dies in Massachusetts, it can take weeks and even months to have that Death Certificate go through their vital records system and come into New Hampshire's vital records system, so that we can confirm that death.

Again, the vast majority of deaths are being confirmed in a timely manner. But there are still deaths under investigation from several weeks or even months ago that we're waiting on Death Certificates for.

And then, I think the last question was around a second person who died in the 20-to-29 age group. Actually not familiar with the situation you described; when I had been on the Dashboard this week and looking at the age data, I saw the one death that you referenced.

If there were two, I'm not sure what that issue was. So I'll have to actually go back and look into that further, so I can understand that better. And obviously, I think you know we don't describe specific details of people who have died. But again, the people who are younger who are dying generally have underlying medical conditions. And if you want to reach out to our Public Information Office later to see if we have any additional information to share, you can do that.

Governor Sununu:

So, again, Tony, if we can get some more information, we will reach directly back out to Tony on that one. I think you nailed them all, good job. Okay, great.

If Pfizer is approved for 12-and-up, will you guys reopen the big public clinics again or no?

Governor Sununu:

Yeah, so we anticipate Pfizer being approved for 12- to 15-year-olds. It could be anytime now, correct? I mean, it could be mid-May. Yeah, within May?

Dr. Chan:

Maybe.

Governor Sununu:

So Dr. Chan says it could be mid-May. We've looked at the population there. So there's a variety of ways that could come out. People could -- likely our fixed sites for first shots will still be open. And there will be availability in those last couple of weeks of May, if it is approved by mid-May. That would be great.

A lot of schools, because we're talking about 12- to 15-year-olds, may hold their own clinic, similar as they were doing for the 16-and-up, as well, or similar as they did for Teachers. So you could have school clinics for vaccinations for those 12 -- the 12- and 13-year-olds are more in the middle-school range. The 14 and 15 are kind of those freshmen and sophomores, but having schools do it, as well. There's about 30,000 people or so.

Dr. Daly:

60,000.

Governor Sununu:

60,000 in that population, about 60,000 individuals in that population, and if you assume roughly 50%, 60% uptake, I mean, I think that's pretty aggressive for kids, in terms of the uptake. That's about 30,000 vaccinations that we may have to give out in a combination of fixed sites and the schools. And then, beyond that, they'll be able to go to their Primary Care Provider, their Pediatrician, or a direct pharmacy, if they like after Memorial Day. So it'll be kind of in that transition period. But we can probably get a lot of them done, frankly, before Memorial Day, if it's approved.

If I may, the 12-and-under, they are looking at now. If and when that will be approved, it's still unknown. We hear stories about maybe this summer. But we really don't know. I mean, that's a very different population. But they are, I think, looking at that in, I think, all three right now. Pfizer, especially, I think, is kind of the leading contender, because it's been looked at for kids. So, we will see.

How much longer do you anticipate doing these briefings?

Governor Sununu:

This briefing today, I know this is going a little long. That's a good question. I think at least indefinitely. Well, at least until a time period that I'm not willing to say right now. No, we will kind of keep taking it on a week-by-week basis.

I think, again, with vaccinations come out, with the fact that the 12- to 15-year-olds, there's still a lot of -- maybe not on the restriction side, but there's a lot going on with vaccine. And that's really the key to a lot of this. And there's a lot of information and data there. And so, my sense is at least through May and maybe into June.

As I think we get into the summer and you get to the point where the uptake of the vaccine is really, really low and everything is really open, maybe as we get into more of the summer months, we will think about scaling them back and all that. We don't want to waste people's time.

But at the same point, we do know a lot of folks do rely on the information. And we want to -- we've always taken a lot of pride in how transparent we try to be with all the questions. So, that's an interesting question. Do you want them to keep going?

The question was planted, actually.

Governor Sununu:

Oh, really?

Yeah.

Governor Sununu:

I'm curious as to what you think.

He actually wants to know. We're trying to make summer plans.

Governor Sununu:

Oh, summer plans, oh, no, that's a good point. No vacation for you, David, sorry. No, we will definitely keep doing it. I mean, I don't know. Just really quick, I think people tend to appreciate them and even if they're not watching, I know if you're not watching directly online or on WMUR, I think it does help with the information to get out there. So I find them valuable for the citizens. But you guys tell me. We're going to keep going at least for a little while longer.

All right. Okay. I think that wraps it up for today. Appreciate everyone, that was a lot of questions. I think we got through a lot of it. So, things are going very well and we will be back next Thursday, Adam. We will be here whether you like it or not. All right. Thanks. Thanks, David.