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TRANSCRIPT: MAYOR DE BLASIO HOLDS MEDIA AVAILABILITY ON COVID-19

Mayor Bill de Blasio: Good afternoon, everybody. We are obviously doing something very different today and something we haven't had to do previously, which is to have this update remotely and we're doing that to protect everyone and to show New Yorkers how important it is to practice social distancing. We're all getting used to this. We're all trying to make sense of it. I just want to say my fellow New Yorkers, anyone out there who's scared, anyone who is confused, anyone who feels like we're dealing with something we've never dealt with in our lives, you're right. This is in many ways the great unknown, but I'm also confident we can get through it and I'm going to talk about that in a moment. I'm confident we can overcome it. In fact, my confidence in New Yorkers, my confidence in all of the organizations in the city, the hospitals, health care providers, my confidence in the working people in New York City, and my confidence in our government couldn't be stronger. I'm going to talk honestly and bluntly about what we need from our federal government and how crucial that is in the equation.

City of New York is working constantly to protect our people, I know the State of New York's doing the same thing, and we are coordinated and share goals and strategies, but we all are waiting for federal help that still is not arriving and that is the central challenge. We have to talk bluntly about that and I will today, but to everyone who's dealing with this confusion and these challenges, I feel it. My family feels it just like you. We're all trying to make sense of a new reality. What I'm going to try and do every time I give you an update is tell you the blunt truth and I'm trying to do very hard to make sure I tell you what we exactly know and when we're not sure about something, we need to be clear about that too. It would be a mistake to tell you something certain if we're not certain, it would be a mistake to hold back things that you need to know and it certainly would be a mistake to sugar coat this very, very painful reality.

I think New Yorkers want real talk. I think New Yorkers like it straight and we're going to do that. So, I'll be talking about several things today that are really painful and troubling and I want everyone to understand that. I am not here to give you false reassurance. I have a lot of things I'll say that should cause you to be confident about what we can do in this city. Confident, particularly in the fact that we have the finest health care institutions, the finest doctors and nurses, and all the people that work in our health care facilities, the lab techs, everyone who works in our facilities. This is – there's literally no place on earth with a stronger and better health care sector than New York City. Nowhere on earth and we are going to ask of our colleagues in health care so much in these coming weeks, they are already heroes, but they're going to have to work in battlefield conditions, their strength, their courage, their resilience are all going to be needed. We're all going to be depending on them, just like we depend every day, not only on their work, but on our first responders and so many of our public servants. Everyone

is going to be needed. Everyone needs to answer the call. Everyone needs to step up for the good of everyone else.

But despite my tremendous confidence in our people and our ability to serve them, I also have to be very clear about the extent of this crisis. It is unlike anything we have seen outside of wartime, with the possible exception of the Great Depression itself. It – we can make obvious and powerful painful parallels even to things like 9/11, the days and weeks after that. But this crisis is even more unknown in many ways because we don't understand the exact trajectory we're on and we know it will reach very deep into our communities. That is not a reason to be hopeless by any stretch. Because remember, every single piece of evidence we have continues to tell us that this is a disease that for 80 percent of those infected will have very little impact. So I want people to think about this. I'll tell you a lot of things that are tough and sobering, but I want you all to remember this side of the equation. There will be many New Yorkers who never get this disease and there will be many New Yorkers who get this disease, approximately 80 percent who get it and will feel very little and experience very little. But those 20 percent who experience a much tougher time with this disease, people in particular who are older and that means particularly folks over 50 and especially over 70 and it means those, of course with those serious preexisting conditions we talk about so often, lung disease, heart disease, diabetes, cancer and compromised immune system. For those people particularly at they're over 50 we're worried and we need them to take extraordinary measures. We need you to take extraordinary measures. If you're in that category of people, we need you to live differently and we need your families to adjust as well. You're going to hear from Dr. Barbot in a few minutes and she's going to talk to you as the city's doctor and give advice directly to New Yorkers in the light of a ever-growing crisis.

But I heard from a friend in Brooklyn from the Midwood community just yesterday and he said something I thought really captured it. He said, and they're very knit extended family over decades and decades of would've been unimaginable to keep his older parents away from their grandchildren. But he said, now he understands because of coronavirus and his older parents who have vulnerabilities of their own, they have to understand this is not the time to visit with their grandchildren because we just can't run that risk. It's time for getting on the phone with your loved ones. It's time for getting on FaceTime, but it's time to make adjustments that wouldn't have been imaginable in other situations, because we've never dealt with this situation before. This is literally unlike anything we have seen in our memory. It will not be the same as the 1918 flu epidemic because for one thing, the health care capacity of this city and this nation are tremendously better public health ability, the information flow, it's night and day compared to a 100 years ago. But in terms of the extent that's the only other parallel we can make in terms of recent health care history, it's going to be an epidemic, a pandemic that reaches deep into our communities. We got to be honest about that. We've got to make more changes in the way we live and we got to do things we wouldn't normally do.

I also want to emphasize this is a crisis that has an end point. As I said, it will play out in unpredictable ways and it'll play out for a period of time and that's what makes it different from some other things we've been through. It will go on for months, but it will not go on forever. At some point in the coming months, this crisis will start to abate and we'll be able to start the work of getting our lives back to normal and getting our city back to all the things about it that we love

so much. But it will be months, so it will be a long battle. I don't think it serves anyone to be told, get ready for something easy. I think it is much better to tell people get ready for something difficult and something that'll go on for a long time, but also have confidence that we can get through it. And that's what I truly believe.

The numbers all go over with you today are nothing short of staggering, but they are not just numbers. I'll tell you the statistics that I have trouble even conceiving of myself, but I don't want you to think of them as statistics. I want you to think of them as your fellow New Yorkers, every number means another person has been affected by this disease and another family and that's what I feel watching a crisis that is really, really affecting the lives of our people, and putting a lot of people in danger. So, I'll tell you the honest truth and I'll go out of my way in the weeks ahead to always level with you. But I'll also tell you what we can do. And that's a lot. And I will be very honest about what we need our federal government to do because I have to be clear with you. We alone, even if we're the greatest city in the world and we are, we alone cannot solve this crisis. And I need people to hear that, not to create fear, but to level with people.

In the next few weeks with the extraordinary resources, New York City, we will fight this battle no matter what. But as we get into April, the farther we get into April, the more we will need the help of the federal government. It must arrive in time and there is time for that help to arrive but the federal government does not do all in its power immediately. It's as simple as this. There'll be a lot more people who get sick who didn't need to get sick and there'll be people who die who didn't need to die. It's as simple as that. So, we need to act now, and I know our federal government has the capacity. We have the finest military in the world, the largest by far, extraordinary resources, unlike the City or the State. And I always say it very bluntly, the federal government literally prints money. They can create any credit line they want to save the lives of Americans, but we're not seeing that, not even close at this point. So, I'll go into some very specific information now and then you'll hear from Dr. Barbot and then we'll open up to questions from the media and we'll be doing all of this remotely. It's the first time we're doing it. I want to just say to all my colleagues in the media, we'll try and get it right, but it may be a little difficult the first time, but please bear with us as we try and perfect this new system. This is something we'll be having to do for quite a while to keep everyone safe.

I've given you a framework to think about this situation with - and I'll be updating you regularly, but again, it will not be all bad news. It often will be tough information to hear, but not all this bad because in the middle of this fight we have the extraordinary heart and soul and spirit of New Yorkers and here's an example for you. Just on Tuesday I put out a call to retired health care workers and those who work in private health care offices to come forward and join up to serve in the fight against coronavirus. I ask people who have already given so much of their lives to others to step forward and to come out of retirement. I asked people who are earning a living and are not obligated to join public service and I asked them to join nonetheless in the name of all New Yorkers. That was Tuesday. Today, Thursday as of today, 1,746 health care professionals have stepped forward to augment the ranks of those already serving at the front line in our hospitals and clinics. That's something all new Yorkers should be very, very proud of and I am certain those numbers will grow.

This is going to be one of the most difficult moments in New York City history. I ask everyone who has health care training and who can help us to please step forward now and anyone who's willing to volunteer, please go to nyc.gov/helpnownyc, nyc.gov/helpnownyc, H-E-L-P-N-O-W-NYC. And I want to express my tremendous gratitude on behalf of 8.6 million New Yorkers, to all of you who have come forward and are ready to serve to protect all of us and what you are seeing from those retired health care workers and those private sector and health care workers you're seeing in many other ways. The extraordinary efforts of our colleagues in our public hospitals and clinics and all of those at the voluntary hospitals who are already doing so much. Our first responders, the envy of the nation, all that they are doing to protect us. Our social service workers who are helping people through all of the challenges they're confronting now. Our sanitation workers who are doing absolute crucial work to keep the city clean while we encounter a health care crisis.

On Monday, I talked about a very, valiant, noble group of workers. School cleaners and custodians and food service workers who went to school to make sure kids had meals even though school was not in session. Those workers showed up at their post to help our children and have enough food to eat. I want to thank our school safety agents and food service managers, including members of Teamsters 237 who have answered the call, stood up to help our children and those families who need food. I want to thank our school crossing guards who have been protecting our children who went to get food. We're going to keep talking from now on about all those who are standing up, unafraid, willing to fight, willing to help others. And I say unafraid, that's not to say they're not human beings, they're not worried like the rest of us, but I say unafraid because they showed up, they stood up, they did the right thing to help others and I thank all of you for that.

Again, all I ask of our federal government is to be as good as the people of the United States of America. Look at these everyday New Yorkers that I've mentioned to you and these are just the health care professionals and the public service workers who are all at their posts doing what is needed. There are thousands of stories every day and New Yorkers helping each other out. I've called on New Yorkers to help the people in your lives, your family, your neighbors, those you worship with, the folks that live on your block or in your building who might be disabled, might have a serious health condition or seniors who can't get around so well, to help them out. Help them with their groceries, help them get the medicines they need. We've been getting wonderful stories from all over the city, New Yorkers stepping up, making things happen right there where the need is greatest. There's so many people helping each other right now. Again, I've just asked our federal government to do its job, help all of us, and that's eventually going to be this whole country. It's New York City today. It's places like Seattle, but we certainly saw what happened in Westchester County. We see other places developing around the country, but make no mistake, it'll eventually be everywhere. So our federal government needs to right now go where the need is greatest and there is no place where the need is greatest in New York State and New York City.

Of course, I am heartened that the Congress passed an initial relief bill, but initial is the key word. It is a small beginning. It's far from what we need. I never look a gift horse in the mouth, but I can say with assurance that the first step taken by the Congress is just a small first step and we need a huge stimulus and relief bill immediately that puts money back in the pockets of

people who have lost so much. It helps local governments to keep going and doing the work we do and it really, it responds to the reality on the ground, particularly in providing health care for so many people so quickly. Right now, the United States government is not even close to where it needs to be, but I do thank the House and the Senate for the action they took. I am very thankful to the United States military for sending the ship that we've all been waiting for, the USNS Comfort with just a 1,000-bed floating hospital. And will be crucial to our efforts in this city and state to protect people.

The military, as I've said, I have no doubt in my mind stands ready to do all necessary to help their fellow Americans. I just wish they would get the order and they have not gotten that order. President Trump, I will only say to the President, I don't understand and I think there are millions and tens of millions of Americans who don't understand what you are doing right now. You are not using the tools of your office. This is one of the greatest emergencies our nation has faced in generations. Every tool must be brought to bear. For some reason, you continue to hesitate. I said it not to be flip, but to note the historical parallel. President Trump right now, you are the Herbert Hoover of your generation. You are watching and waiting and missing every chance to be bold and to act to protect our nation.

Herbert Hoover, his successor, Franklin Delano Roosevelt, determined that our nation needed urgent and immediate action and created the New Deal and transformed the effort to help our people and saved our country, literally. President Trump is not doing that now for reasons that are absolutely inexplicably to the vast majority of us. But there is still time, not much, but there's still time. The President yesterday invoked the Defense Production Act. I have no idea why the President waited until March 18th to invoke the Defense Production Act, which has been used repeatedly in recent decades. Seems to me, given what we knew about this crisis, given that the City of New York held his first press conference to announce our steps on coronavirus on January 24th, I think the President could have invoked the Defense Production Act in February or even January.

But he's finally done it and we know the history that that authorization allows for massive actions by the federal government to ensure that companies are producing needed goods and that they get to where they're needed most. However, the President has not ordered any of those subsequent actions, and this must change immediately. Through the Defense Production Act, the President can authorize the Department of Health and Human Services to order manufacturers to provide materials and services and to use their private facilities for manufacturing needed items. That has not happened. We have not seen the order from the President ensuring maximum 24/7 production of all items needed by our health care industry. And I would say it very plainly, every factory in America that can be converted to health care production, to the equipment and supplies that our valiant health care professionals need and they will need even more in the coming months. Every such factory should be ordered on a full production basis, on a level prioritized by the federal government.

And then those goods must be distributed and it cannot be distributed in a business as usual manner because as I said here in New York City, we are two weeks or three weeks away from running out of the supplies we need most for our hospitals. The only way those supplies can be provided in time, is through the full mobilization of the United States military. At this point,

there's never been a greater no-brainer in the history of the Republic. How on Earth is the finest military on Earth being left on the sidelines? That's what's happening right now and I guarantee you go interview our generals and our brave men and women who serve in the military, go interview the average American soldier and ask them if they stand ready to get the supplies needed to New York City and the other parts of this nation that are in such danger right now. I guarantee you two a one, they would tell you that is exactly why they are a part of our armed forces and they would not only await the order, they would welcome the order. But that order has not been given by our Commander-in-Chief and it is beyond comprehension. It is immoral that our President has not ordered our military to full mobilization because this is the great threat to our nation.

We have armed forces overseas who are protecting us against terrorism and foreign threats, but right now we have a domestic threat on a level we have never seen in decades. Our military is the only answer at this point. And if we expect those goods that are produced that we need for our hospitals to get there in time, there's only one organization that can guarantee that. And that is the United States military. When will President Trump give the order? That is my question. When will he give the order? Why is he hesitating? People are suffering now and they will be suffering so much more in the month of April. And the President gives himself an A grade and he congratulates himself and yet he will not act in the way we need it most. This is patently unacceptable.

Our military also, in addition to their extraordinary logistical capacity, our military has the ability to bring exceptional medical personnel directly to where the need is greatest. Our health care leadership here in the city has made clear that supplies and medical equipment are a deep concern. Physical capacity to build out an extraordinary amount of new health care abilities and beds is crucial. But the single most important factor is personnel. We're going to need all the people I've spoken about previously to do all they can do, but they can't do it alone. In our military, our extraordinary trained professionals are used to dealing with the most difficult circumstances and yet they are at their basis right now, all over this country. They are not at the front. The front is here in New York City. Let's be very clear. This is a different kind of war and the front is right here in New York City. How on Earth are some of the finest medical professionals in this nation who serve this nation, why have they not been activated and sent to New York City and New York State and California and Washington State where they could be helping right now? We need them. We need everything that the military can bring to bear.

I've sent two letters this week and I'll be sending many more. Trying to get action and letters are just a way of making a hundred percent clear what we're talking about. This letter to Secretary Alex Azar, Secretary of Health and Human Services, and Secretary Robert Wilkie, Department of Veterans Affairs. This lays out very clearly our request that the Veterans Administration facilities in this city, all available beds, all available medical personnel in our Veterans Administration facilities be activated immediately to serve in the cause of fighting the coronavirus. We know for a fact that our Veterans Administration facilities have excess capacity and we know we're in the middle of a national crisis. I know again that the medical personnel in these facilities stand ready to help, but they need the order from these two secretaries so they can provide maximum support to New York City. And the same would be true everywhere in the country. I sent this letter to Secretary Azar of HHS delineating the supply requests again. And

this is one of many requests we've made, but I'm doing it very publicly. We'll put this online for everyone to see. Here are the supplies that must be provided to New York City early in April for us to ensure that our health care system, public and private, can bear the brunt of the coronavirus crisis, and serve our people. We need three million N95 masks. We need 50 million surgical masks. We need 15,000 ventilators and 25 million each of the following items of personnel protective equipment, which are health care workers and first responders would use depending on the situation — surgical gowns, coveralls, gloves, face masks. We need these in great numbers. They may sound like daunting numbers at first, but given the extraordinary production capacity of this country, they are very much achievable. If our nation has put on a war footing and our President uses the powers he already has to coordinate and to prioritize through the private sector, the production we need. That's the kind of level of production we need, those specific supplies. We need to ensure that health care in New York City can continue on the level we need to fight this crisis.

Our Senator — our senior Senator, Chuck Schumer, has put forth a powerful idea. He calls it a new Marshall Plan. It's a Marshall Plan for our hospitals and I give him credit for this because he's using one of the great examples in American history, the Marshall Plan after World War II, which rebuilt, literally rebuilt the European continent that had been left in ruins after the war and re-established a thriving economy. The Marshall Plan, the original Marshall Plan made the United States the envy of the world and created tremendous gratitude for our nation all over the globe. And that was at a time when we had a lot less technology and many disadvantages just having come out of war ourselves. Senator Schumer's right, that's the right attitude, the right approach. A Marshall Plan for our hospitals for the entire nation would involve massive new investments to support state and local governments that already are doing so much to fight coronavirus. And that are struggling with the challenge in so many ways, to strengthen and build out our health care workforce. It would involve major investments in our strategic national stockpile and our Centers for Disease Control and it would allow for the large-scale infrastructure we need to fight this extended war. So, I want to thank Senator Schumer and I ask all the members of the House and Senate to include Senator Schumer's plan in the upcoming legislation you pass.

Now to the part of this update that I hate to give but I need to about the overall situation. And I will say we will attempt to give New Yorkers constant updates including ones we wish we didn't have to give and anyone who needs an update can go to nyc.gov/coronavirus. Anyone who needs specific information or has specific needs of course, can also call 3-1-1. We are seeing an explosion in the number of cases here in New York City. Now I will be clear that part of that is that we finally have more extensive testing going on. We have nowhere near the amount of testing that we should ideally have. We have nowhere near the amount of testing we should have had weeks and weeks ago to get ahead of this crisis. Nowhere near the amount of testing that a place like South Korea had. And they were able to use testing as a powerful part of a strategy to beat back the coronavirus. We're still far from where we should be, but we have a lot more testing than we used to have. And so it is natural that as you have more testing you will see numbers grow simply because the larger reality is being captured more effectively. But this number is nonetheless very, very painful. I'll tell you that the City of New York will be every day at 10:00 am and again at 6:00 pm putting together our numbers and providing updates as we are ready once they are confirmed.

So, based on the update from 10:00 am today, which is different from the State's update, which came from last night at midnight. So, this is, again, a different number than the State, the State had for the city — different number because it is a 10 hours difference. And this'll show you how fast this crisis is growing. At this point in New York City, based on a 10:00 am number 3,615 confirmed cases of the coronavirus in New York City. Again, each of those, a human being and a family represented and that number is undoubtedly gone up since 10:00 am. It's a painful, distressing number. I also have to report another even more painful number. There have been 22 deaths now in New York City directly related to the coronavirus. The breakout by borough — in Queens 980 cases, in Manhattan 976 cases, in Brooklyn 1,030 cases, in the Bronx 463 cases, in Staten Island 165 cases. I'm going to go through some specific issues before I turn to Dr. Barbot and I'll go quick here.

Unfortunately, we can report that we have the first instance of an inmate on Rikers Island testing positive. The inmate is individually in his early thirties. And thankfully at this moment health wise is doing okay. Is in isolation and has been moved to our communicable disease unit on Rikers Island, part of the health care apparatus on Rikers Island. This inmate was in a housing unit with other inmates. All had been checked for symptoms. Eight had been identified with symptoms and moved also to isolation in the communicable disease unit. Question came up several times last few days about those incarcerated and if there were instances where anyone should be released because of particular health vulnerabilities and because their status put them at low risk of re-offending or being any kind of threat. At this point this is an ongoing effort, it will keep growing as we review more cases, the cases are being reviewed by the NYPD and the Mayor's Office of Criminal Justice and as they reach agreement on an individual case, we start the process to release them. Forty inmates, forty inmates have been put on the list. We are awaiting sign-off - depending on the case - from the relevant District Attorney and/or the State of New York and we intend to begin releases as early as today once we have that sign-off, we will continue reviewing other cases.

An update on testing availability. As we said a few days ago, the health and hospital system has greatly increased its testing capacity. They're now 10 new sites at hospitals and these sites will have the ability to serve approximately 150 people per day. Eight, again, I'm going to emphasize throughout, I know we're going to get this question constantly and we'll keep reiterating - on a priority basis, on a reservation basis, until we have much, much greater testing capacity everything must be focused on those in greatest need and everything will be done on reservation basis. People that walk-up or drive-up without a reservation cannot be tested. We have to keep the priorities tight here, but we keep, we keep working every day to try and expand the amount of testing to reach as far as we can.

The 10 sites, again, will serve 150 people per day – approximately - initially. Again, in every case, we'll look to increase the numbers as much as we can. Eight are already open at Bellevue, Elmhurst, Harlem, Jacoby, Kings, Lincoln, Woodhall, and Queens hospitals. Two will open next week at Coney Island and Jacoby. There are seven new sites at Gotham clinics. Each can serve and test 50 to 75 people per day. All will be open this week and they include Belvis, Cumberland, East New York, Gouverneur, Morrisania, Sydenham, and Vanderbilt. Four new

testing centers each will serve and test 100 people per day, approximately two are open at Coney Island and Jacoby, two coming up shortly at Kings County and Queens Hospital.

This is all separate from the State operated drive-through testing center in Staten Island and separate from the five new testing centers that are coming soon in coordination with FEMA that will be set-up in New York City. We'll have details on that as they get solidified. All appointment only, all prioritizing of the sickest and most vulnerable, remembering that 80% of all coronavirus cases will be mild – thank God for those who have them. And again, if you are younger than 50 and you don't have a preexisting condition, those are exactly the people who are coming through overwhelmingly pretty well through this challenge and we want those people – especially - if you get sick to stay home and wait three or four days to see if your symptoms get better or worse. Only if they get worse do you call the doctor at that point.

In terms of our businesses, I want to thank all the restaurant owners, bar owners, cafe owners, all the people work there. You've been put through so much these last days. I'm sorry for that, but this was something that had to be done for the good of the people in New York City. But there have been so many great instances of people who own these establishments working with the new rules, keeping those takeout and delivery options going, trying to take care of their workers and we understand what a strain that is. We understand there've been real layoffs and it's very, very sad, but thank you for everything you're trying to do to keep getting people food that need it and keep your businesses alive to the best of your ability.

I want a note for all those who doubted the ability of New Yorkers to deal with this new dynamic. Over the last few days, we have sent out the NYPD, the FDNY, Department of Buildings, and the Sheriff's office to enforce, to ensure that restaurants and bars that serve food were closing at the appropriate hour, that they were not allowing customers to dine-in. We have seen overwhelming compliance by those who own and work in these establishments. There have been as of yesterday I believe this number is 8,150 inspections that yielded only six violations. That's about as close to perfect as it gets in human life and I really want to thank everyone and thank these inspectors who are doing such important work to ensure everyone's safe by avoiding the social distancing that goes with what we used to know as social life only a few days ago. That helping people not continue the habits we used to have that unfortunately only led to the spread of this disease - these inspectors are doing such important work, I want to thank them all.

On telecommuting, the State issued the new guidance, which I approve of 100 percent, taking 75 percent the number of workers who should be out of their offices even for those businesses that continue in their physical locations. We are working with the State on a proper enforcement mechanism. To everyone, if you still are not yet telecommuting, you must, it's as simple as that, and we need every employer to understand that. And any employee who still has to go to a work site and is not an essential employee, please, if you have an idea of how you could telecommute or some alternative talk to your employer, we need people to be creative here. Anyone who believes that there is a problem with their work site that can be addressed call 311 and we will try and help. Our Department of Consumer and Worker Protection or our Commission on Human Rights can step in if someone is being kept at a work site that does not need to be and is a non-essential worker. We want to make sure that employers really get the message that everyone needs to be home who can be home.

And as to the city workforce, which is about 380,000 strong when you factor in all elements of the public sector at the city level. By Sunday, all nonessential personnel across all of our agencies will be working from home in some form or fashion or will be waiting for a specific assignment. Many of course can do telework. Some we're going to come up with a new way for them to work at home even if it doesn't exist right now. Some may be mobilized to address a food issues or other issues at the community level. The estimate at this point, and we'll have a better number for you by the beginning of next week, but the estimate is 250,000 city workers will be out of their traditional work sites and working from home unless they are given a very specific assignment in the field. As part of fighting this crisis that is approximately two thirds, two thirds of our workforce that no longer are working – or no longer will be working at their traditional work sites. You're going to see a lot of city offices are just shut down because we came up with an alternative and for all city workers with symptoms of coronavirus. As you're going through those three or four days waiting to see if you get better or worse as you're going through this entire process, we will not— take away sick time for anyone who has symptoms and is waiting for clarity about this disease. We will not— take that off your sick days.

Few last points, questions early in the week about food stamps and public assistance. Want to clarify; there are no more in person interviews for food stamps or public assistance. All of that has been converted to online and – phone interviews and processing. Very specific issue, this is something I have to say to people, and it's painful to say it, but I've gotten concerns raised by community leaders. We understand that people at this point cannot in general go to their house of worship. We understand how painful that is for people of all different faiths, what a pillar of their lives, their faith is, and how important their visit each week or more often to their house of worship is. But we are in a moment of tremendous danger and we have to deal with that reality. We have to protect each other. So, I know that clergy all over this city, and I've talked to clergy leaders. I had a call with members of our clergy leadership just a few days ago and there were unified across all faiths, led by Cardinal Dolan unified in recognizing that many, many people will have to forego traditional religious services and clergy had been leading the way and telling people to stay home who need to stay home and then reducing services or closing them down altogether where needed. But what we have heard in some communities is that in the absence of traditional services, some individuals are choosing to create home-based worship services. That per se might not be a danger except when it means in so many cases that large numbers of congregants are being crammed into a very small space, which immediately violates the concept of social distancing. The rule is to try and keep six feet apart or as close to that as humanly possible. Worshiping in a living room with numerous people immediately violates that idea and makes everyone vulnerable. I think something that unites all faiths is the desire to protect each other, uplift each other, respect each other. It is not helpful. It is not safe. It is not faithful to gather large numbers of people in a small space for informal services that would only serve to cause this disease to spread and you know who will then be in danger. Our seniors and those who already are dealing with serious healthcare conditions, I don't think there's any faith on earth that would condone that. So, please, to all of you who are doing this or considering doing it, please stop. Simply forego traditional services don't try and recreate them, if you feel you must do a service that needs to be just a small handful of people, socially distance, six feet per person apart or else you're creating a risk to all those involved.

Close with a reminder, thank God we see that for younger, healthier people, this is a disease that they can see through – and come out safely, overwhelmingly. So, let's keep the focus on those in need those who are most vulnerable and let's help them out. Anytime you can help your fellow New Yorker in need, I know a lot of people have been stocking up on groceries and all sorts of household goods. If you know someone who needs help, come on, don't keep it all for yourself. Share with your fellow New Yorker, that's how we're going to get through this. This will get worse before it gets better, we've all heard that phrase, but this is probably the most blunt example we're going to see in our lives of the notion that this is going to get worse before it gets better. We have to brace ourselves for that, but it will get better, it will get better in the end, and we will see it through

A few words in Spanish –

[Mayor de Blasio speaks in Spanish]

With that, I want to turn to our Health Commissioner, who I know has a message of real urgency and she'll say it in English and Spanish both. But remember Dr. Oxiris Barbot is the City's doctor. For those who have a doctor, she's also your doctor, for those who don't have a doctor she's your doctor. She is going to tell you now the truth you need to hear.

Dr. Barbot –

Commissioner Oxiris Barbot, Department of Health and Mental Hygiene: Thank you Mr. Mayor. And I actually, I want to start where you left off in terms of things will get worse before they get better. And actually, what I have been saying is that things will get worse before they get bad and how fast things get better will depend on all of us. This is a sober moment that we are in with regards to the City's health and as the City's doctor. I take pause when I look at the speed with which we are identifying new cases and I take further pause when I put that against precious resources that are quickly dwindling and I call upon all New Yorkers to take this seriously. This calls into action, our personal responsibility, our civic responsibility to ensure that we take every measure possible so that we minimize the potential risk and harm to New Yorkers. Those that are most vulnerable to this virus, those that are elderly, have underlying chronic illnesses and who otherwise would not be able to access care.

Over the course of the last several days, I have been conveying messages to New Yorkers about how they can protect themselves. Those messages hold true, ensuring that we are diligent about keeping up with hand hygiene, covering our mouths and our noses when we cough, and when we sneeze, but the reality is that at this point in the outbreak, we need to do more. We need to do more, if we are going to stay off the onslaught of potential cases that are facing the City and doing more means staying home. If you are not an essential worker, I need you to stay home. If you are developing symptoms, I need you to stay home and stay away from individuals who are at risk for bad outcomes such as those that are over 50 and have chronic illnesses such as those who may have disabilities and not be able to isolate themselves. I need you to ensure that you stay home and you don't worry about whether or not you have a test. I want you to think about you've already been exposed and having a test doesn't really make a difference. The important thing is that you stay home. You stay home for at least three to four days, and that if you're

getting better to stay home for seven days or 72 hours after your fever has gone away and if you're not getting better after three or four days, that's when you should reach out to your doctor.

One of the most important ways in which we as New Yorkers have an opportunity to slow the spread of covert 19 is by staying home. Social distancing is the single most important tool that we have to reduce this potential onslaught of COVID-19 infections. It's the best chance that we have of ensuring that our health care delivery system isn't overrun with individuals who are coming to the emergency room or coming to the doctor's office because they're worried, and in reality they have maybe minimal symptoms. This is an opportunity for New Yorkers to step up and to stay home if they have no symptoms or minimal symptoms.

The best chance that we have to reduce the number of people who may ultimately die because of COVID-19 is if we take our personal responsibility in this seriously and if we all take that covenant seriously of civic responsibility to each other's health. There will be, as the mayor has said before, people who will succumb to this illness. But the reality is that if we don't protect our health care system, there will also be other people who die of other reasons because they haven't had the, didn't have the opportunity to access the vital health care that they need.

So this is as much about protecting our resources to treat COVID-19 as it is to protect those precious health care resources so that folks who may develop heart attacks, who may have ongoing needs for cancer treatment, can get secure ongoing access to those important healthcare services.

The last thing that I want to ensure that I share with New Yorkers is that as the city's doctor, my job is to make recommendations that may not be popular, and I don't take those recommendations lightly. I know that asking people to socially distance creates hardships. And as the mayor has said, has said, we are putting measures in place to try and reduce those hardships. But the reality is that unless we take those serious steps to socially distance ourselves for the foreseeable future, we may find ourselves in a place that overruns our health care delivery system and overruns other systems.

So, I need New Yorkers to take this opportunity to only get tested if they're not getting better. To look out for our elders and ensure that they have all the resources that they need to make it easy for them to stay home safely, and to only reach out to their doctors if they're not getting better.

And lastly, though we're asking people to socially distance, physically distance, this is a time for us to come together emotionally and spiritually. I want to remind New Yorkers that we have a tremendous resource in NYC Well. I encourage people to call or text, reach out to NYC Well. The news that people are hearing every day is sobering. And today, I hope it's clear that we are changing the tone. I am changing the tone and that may create anxiety. It may create feelings that individuals need help working through. This is the time to really access NYC Well.

I want to now just make some remarks in Espanol.

[Commissioner Barbot speaks in Spanish]

Mayor: Thank you very much, Commissioner. Okay, we are going to now turn to questions from the media. Want to emphasize to our colleagues in the media, please ask your question, if there's an obvious follow-up, I'll certainly take that, but want to try and get to every member of the media who has a question as we do, even when we're in person. So, I'll entertain a first question. I'll entertain a follow up if there is, but then we're going to aggressively move to the next person to get through everyone. And I know Olivia from our press office will be managing the flow of the questions. So, Olivia, please start the questions.

Olivia Lapeyrolerie: First up is Alejandra, from AM New York.

Question: Hi, Mr. Mayor. Speaker Johnson proposed a \$12 billion relief plan for our city businesses and workers impacted by the pandemic. Can you share your thoughts on that?

Mayor: Could you repeat the specific figure? I couldn't hear you.

Question: \$12 billion.

Mayor: Yeah. The reality right now, we obviously — there's tremendous need for relief for our small businesses and working people, but that has to come from the federal government. Right now we have to be very mindful that our city government is paying for a lot of extraordinary expenses. And while dealing with real revenue challenges, we're going to keep serving New Yorkers no matter what. But those really big bailouts have to come from the federal government. And that's exactly what Senator Schumer's talking about right now. And he's one of the people leading the way. Federal government is a place that has that capacity. They need to do it.

Question: Thank you.

Mayor: Thank you.

Lapeyrolerie: Next up is Alex Zimmerman, from Chalkbeat.

Mayor: And just say it a little louder. It's Allison?

Lapeyrolerie: Alex Zimmerman, from Chalkbeat.

Question: Hi, Mr. Mayor. Two quick questions. One is just I know the City had said that they -- that there are about 300,000 families who are in need of devices to access remote learning. I'm wondering whether the City thinks it will have all of those in family's hands by this coming Monday?

Mayor: Okay. We have a special chair, well distanced from me for some of our key leaders of this administration. Chancellor Carranza has now joined us and he will give you the answer.

Schools Chancellor Richard Carranza: So, we're not going to have 300,000 devices by Monday. That's, we never said we would. We do have a plan for having those devices in the hands of our students in the coming weeks. There are 25,000 devices that will be distributed over

the next week to families. We are in the process right now of collecting the survey results that teachers and principals have been sharing with families over the course of these last three days that they've been at their school sites. We are prioritizing students in public housing, students that are homeless, low-income, Title I students as priority to get those devices right off the bat. But we will, we are committed to having devices for all of our students. Also, important to understand that schools have laptop carts, schools have laptop computers. Many of the schools are assigning those assets that they have in their schools to the students as well. So, it's not just purely devices that are being purchased, but also schools are assigning devices that they have in their schools as well. The good news as well, is that while we are ready to go in remote learning mode there are a number of resources that are still in-your-hands kind of materials that families over the next few days we'll be picking up as well. So we're going to be transitioning in this way, but those devices will be here in a matter of weeks.

Mayor: Stay there for a second. Alex, did you have another?

Question: Yeah, just a quick follow up on that. Do you know how many, what the gap will be on Monday? Like how many more you'll have to go by then or, or what the number currently is?

Chancellor Carranza: Yeah, we don't know that.

Mayor: But we'll keep updating as we get more information.

Chancellor Carranza: Yeah, we're getting information in real time. So we'll update as we get that information.

Question: And the second question was just I know in the past the City has been confirming positive cases on, you know, like there would be releases if a member of the school community had tested positive. It seems like that stopped and I'm just wondering, like why the City has stopped confirming positive cases given that there have been teachers in the school buildings for the last three days?

Mayor: Well, it's a couple of different things. I'll start and the Chancellor can jump in. I mean, first of all we said you guys, it seems like a century ago, but I think it was last week that we were not going to be able to go over individual cases the way we used to in any way, shape or form. And the number here is staggering obviously. There will be specific situations where we have information we think is crucial to share on a particular case. But I think that that will be a rarity, honestly. In terms of a school communities, well, obviously the vast majority of school buildings are shut down except for that food function this week. And that's going to be reset next weekend to something different where we still manage to get a lot of food out, but it will not be in a all school buildings. We're working on what that looks like. There will be a small number of specific learning centers for children of essential workers. And that's being engineered as we speak too. And everything's happening in real time because none of us have ever done any of this before. We're creating constantly. So I think the fact is that the reality of updating you has fundamentally changed. I think obviously two things. One, going forward as we have ongoing facilities like those learning centers for the children of essential workers, we are obviously going to be very mindful, if any person in that building gets sick, they're going to be immediately

isolated and we'll work in every way to make sure anyone else needs to be isolated will be. But we've entered such a different realm here. I think that Dr. Barbot should emphasize this, that we simply can't do what we used to do even just a week or two ago. But now what's been replaced by general rules for everyone to follow. And this is based on an assumption and it's a painful one for us all to understand, but that coronavirus is now widespread in our city. And so we have to approach it differently. So Doctor, just taking this example, if in one of our feeding stations or one of our learning centers, someone who worked there you know, was symptomatic or later tested positive, how we're going to approach that situation and how people have to kind of live by some general rules now that are different.

Commissioner Barbot: Absolutely. So as I've said in previous press conferences, at this point in time with the degree of community spread that we have individuals who developed symptoms of fever and a cough, shortness of breath, sore throat should assume that they have been exposed to COVID-19. And they should take the appropriate measures of isolating themselves, staying home for seven days from the onset of symptoms. And if they have fever, to stay home three days after the fever is gone, whichever of those is longer. But the reality is that when on a daily basis we have new cases that are in the triple -- double digits and the triple digits it becomes, and I'll be blunt here, really meaningless to go through a case by case accounting. What's important here is ensuring that we focus on vulnerable populations, focusing on protecting the health care delivery system. And imploring New Yorkers to do the right thing, to stay home and to not overload our emergency departments. I think we need to be ready to see that kind of volume and to redirect our thinking away from individual cases and how it is that together as a city, we are protecting our health care workforce and we're protecting our most vulnerable.

Mayor: Thank you. Who's next Olivia?

Lapeyrolerie: Next is Andrew Siff, from NBC New York.

Mayor: Andrew. Andrew?

Question: Yes, I'm here. Can you hear me? Okay, Mayor. The question is about this San Francisco style, some call it a shelter-in-place, but I know you and the Governor have been having a little bit of a verbal disagreement about what to call it. The question is, if you're going to issue a directive or a recommendation or an urging that people stay at home, like they've done in San Francisco, why not do it right now? Why no -- why wait until Friday or Saturday or Sunday or Monday? What are you waiting for?

Mayor: Thank you Andrew. Let me try and lay out a couple of facts I think will make it clear. First of all we are working with the State of New York. I spoke to the Governor yesterday. I'm going to speak to him later on today. We need to be coordinated with the State of New York period. That's the right thing to do in terms of being effective for our people. That's the right thing to do according to the law. We will be coordinated with the State of New York and the State of New York has to make the ultimate decision here. I respect that. I respect the Governor. It doesn't matter if we've had disagreements along the way. Right now we're in a crisis together. And I would note that I actually think the Governor has handled this crisis very well. That I

agree with the decisions that he's made, that there's -- I cannot think literally of a major decision that I disagreed with.

So, in this instance, I think that definition really matters and I want to be clear and I think I thought it was understood and clearly it wasn't. That's on me, that when I first made this point, it was as we saw San Francisco make its announcement. It is there, a public health order and they use the phrase shelter-in-place, but with a variety of steps to ensure that essential services would continue. And that people could still get basic goods they needed, food, medicine, et cetera. I think that San Francisco model is a clear sort of humane, smart version of shelter-in-place that really keeps the essentials going but gets rid of everything non-essential. I think it's a smart approach. And anyone who's not clear on what it is or what it isn't, it's not hard to find. Just go on the City of San Francisco website and it's a couple of pages and you'll see exactly what they're doing.

But you know, for the City of New York and the State of New York, the decision has to be made by the Governor looking at all the factors. And I've given him a sense of what we're seeing and what I think we need here. But I also understand he has to think about the entire state. He has to think about the interconnection of the city to surrounding counties. There are real issues. So this is something -- he feels urgency. I feel urgency. It has to be decided quickly what additional steps will be taken. He did something I think, very good today by taking that level, the 75 percent for businesses to clear out their employees and get them home. And I know the Governor's taking a series of other actions to reduce nonessential activity, which I agree with. So that conversation will happen later on today and then I'll certainly have an update for people by tomorrow. Who's next, Olivia?

Lapeyrolerie: Up next is Brigid Bergin from WNYC.

Mayor: Brigid can you hear me? I don't hear Brigid. Brigid can you hear us?

Lapeyrolerie: Brigid we can't hear you so we'll come back.

Mayor: So we'll come back to Brigid.

Lapeyrolerie: Up next is Erin Durkin from Politico New York.

Mayor: Erin, can you hear me?

Question: Yes, I can. Can you hear me?

Mayor: There you go, loud and clear.

Question: Okay, great. I'm just wondering, is NYCHA Housing taking any particular steps to prevent the spread of coronavirus there? And are there any confirmed cases among NYCHA residents?

Mayor: On the question of confirmed cases -- I have not been told of a case among NYCHA residents, but I also want to note that with the numbers growing it's harder to specifically confirm exactly who is where, obviously. But I have not been told of anything among NYCHA residents. In terms of steps, I know I've spoken to the Chairman and the General Manager, they've done a lot of outreach you know, flyers and, and robocalls and electronic messages telling their residents how to approach this crisis. They have done lots of extra cleaning. Obviously, and we know this from Sandy in the years since Sandy and I know Emergency Management Commissioner Criswell is here, works with NYCHA to keep track of any residents who have particular medical needs, who need medicines, or who are incapacitated need help. So they're aware of who to check on and see if they need anything special. Those are the basics. But I can get you a more detailed update on NYCHA. I'm looking to Freddi. We can have that for you. Get you some of that later day and have more for you tomorrow as well. Is Brigid back or not?

Lapeyrolerie: No, we're going to go to Gersh next and then we'll come back to Brigid.

Mayor: Okay Gersh.

Question: Can you hear me?

Mayor: Yes indeed.

Question: I may be a journalist, but I first want to say, I hope you and your family and your team are well and safe.

Mayor: Thank you Gersh and you are — that's very much appreciated. I hope you and your family and all your colleagues are safe.

Question: Well who knows. Anyway, there has been —

Mayor: That was not reassuring. We hope you're safe.

Question: But I have to be honest. Anyway, my team is separated, so that's fine. So last week when you urged New Yorkers to bike to work if they could, there has indeed been a huge surge in cycling. And now new NYPD statistics just released today showed that there has been a 43 percent increase in injuries to cyclists even as injuries to drivers and pedestrians are down by double digit percentages. And you know that cities around the globe are expanding their cycling networks during the crisis. Bogota, Columbia is adding 47 miles of new routes and you've been asked by Transportation Alternatives and by Manhattan Borough President Gale Brewer to provide those safe routes. When will you act on this?

Mayor: Well, the first I heard honestly – and Gersh, I think you understand, I know you have an area of particular focus. I respect that. I think you understand we're trying to address many, many issues simultaneously. The first time I actually heard it was from the Borough President late yesterday and I think it's an important proposal. So, we will get a sense quickly from our Department of Transportation of where we think there are areas that we can do that in real time. I think it's a very fair point. Wherever we can do a fast expansion, we will. I think there's going to

be some obvious limits as we deal with so many other challenges in this crisis. But we want people biking who can. So, I'll have an answer for you on that tomorrow.

Question: Okay. Thank you. Thank you.

Mayor: Who's next?

Lapeyrolerie: Gloria from NY1.

Question: Hello can you hear me?

Mayor: Yes. Go ahead Gloria.

Question: Mr. Mayor, I wondered if your administration has done any follow up on the reports of a cluster over in Brooklyn as we see them numbers increasing there? And if you have any update or any new information, I know you noted in your remarks, your message to people about religious gatherings, but I'm wondering if part of the reason you did that is because you are seeing an increase in that kind of activity in that particular community? And if your health care officials have any update about the possibility of there being a cluster in that area?

Mayor: So first let me say, I spoke to some leaders. As I mentioned earlier in the week, I spoke to a broad range of faith leaders led by the Cardinal. Spoke yesterday to a number of leaders in the Jewish community who did note their real concern about those in-home crowded services. So I wanted to be very, very clear, but it's not just for the Jewish community, it's for all communities because anybody who in pursuit of their faith understandably wants to keep their services going. I fully understand that, but they can't do it in a way that's dangerous to themselves and others. So that's where I'm being very, very explicit. You cannot have those in-home gatherings that crowd people together. I've asked our Health Commissioner just in the last hour or so whether there are any, what we call clusters anywhere in New York City, the answer remains no. There are areas all over the city where we're seeing major increases. We can say -- the Commissioner and I both would be very quick to indicate if we thought someplace was going through an extraordinary situation. Commissioner will speak to why we think there is some particular focus in Brooklyn, particularly around borough park that is not indicative of a bigger problem than anywhere else but just a different dynamic. But no, right now we are seeing growth in the disease and with some consistency across the five boroughs and that part of Brooklyn is not any more endangered than anywhere else. So Commissioner, why don't you explain why we're seeing some of that concern?

Commissioner Barbot: Absolutely. And as you said, and I want to emphasize, we are seeing widespread community transmission in all of our boroughs. And concerns about quote unquote clusters really at this point in the outbreak just indicate widespread transmission. When we have particular institutions that may be more aggressively testing individuals, we may see what we think of as quote unquote false signals. But this is an opportunity to remind New Yorkers that we need to have access to testing for the people that need it the most. People that are in hospitals and intensive care unit and not getting better. People who have been at home and getting worse and where their doctors feel that it is having a test result is necessary for their treatment plan. We are

not recommending that there be widespread testing because again, when you've got widespread community transmission and you have symptoms, I want New Yorkers to assume that they've been exposed to COVID-19 and I want them to follow doctor's orders to stay home until they are better. Seven days or 72 hours after their fever is gone, whichever is longer.

Mayor: Go ahead.

Question: Can I ask a follow up?

Mayor: Yeah, absolutely, go ahead.

Question: Thank you Mr. Mayor. I just — I wanted to -- you cite incredible numbers about what the City is going to be in need of 50 —you're talking about numbers in the millions, if the federal government does not step up and you're talking about two weeks timeline. With how — the speed that we're seeing things move at, how confident are you that the federal government will step up in the needed time and what are you going to do? What is the city going to do if the delays continue and we run out of these supplies in the next couple of days?

Mayor: It's not the next couple of days that we're worried about Gloria. I want, please I thought I was very precise and I want to say to my colleagues in the media, you have a sacred responsibility right now and even more so than last week, we are going into a full blown crisis such as we have not seen in generations. You have a sacred responsibility to ensure the information that you portray to the public is accurate. And I would ask you please to be very, very careful not to provide misinformation by accident. I said very clearly that for the month of March, we have the supplies that we need. The City has very strong reserves of the kind of supplies that I talked about. There are places where there may be shortages specifically and we're going to work to get those shortages addressed, but it's not because we don't have strong overall supplies to get through the immediate need. It is going into April that I'm worried about. I don't have a perfect day for you. We're assessing all the time, but it is a day, two weeks from now or three weeks from now where we must by then have had a very substantial resupply. I think the simple way to think about is the federal government has essentially two weeks to get us major resupply or the people in New York City are going to be in much greater danger.

Where do I have confidence? I have confidence in our State government and in Governor Cuomo. I have confidence in our National Guard here in New York state. I have confidence in the United States military. I mentioned two days ago I spoke to the Chairman of the Joint chiefs of Staff, General Milley, and we reviewed the kind of capacity that the military has to bring to bear in this crisis and what options they might have, and it is a very, very encouraging reality. But the military must be given the order to mobilize and that order has not been given. It's as simple as that. I – Gloria, I don't understand why on earth, I even have to say this sentence. I don't know. I don't think any president in American history would have hesitated to mobilize our military in this kind of crisis when we're not in war time in the sense of a threat to our shores. And we have such extraordinary military capacity available to us. And the crisis is growing intensely and there's a global pandemic. I don't think this is even close. So if our military is mobilized immediately, even elements of our military being mobilized immediately would make all the difference. And if with the Defense Production Act, those assembly lines, those

production capacities are immediately activated, we could get a steady stream of supplies that will keep us moving forward.

There's clearly time, but there won't be time, you know, a week or two from now. And so if, and I had this conversation in detail with Senator Schumer earlier today, I went through the exact numbers with him. I understand how personally and deeply he feels his crisis he has put forward this Marshall Plan idea. The word is spreading. We'll ask our entire congressional delegation to fight like hell to get this done. But let's face it, the great irony, Gloria, the fate of New York City rests in the hands of one man, and he is a New Yorker, and right now he is betraying the city he comes from. We are the front line. We are going through more than almost any place else in the country. By pure numbers this state is going through the worst of any state. How on earth is the president sitting idly by and not activating the forces that could help us. So if he acts today, if acts tomorrow, if he acts in next few days, we can and should get what we need. If he refuses to act, we are going to have an extraordinarily difficult situation at some point in the first half of April.

Lapeyrolerie: Yeah, back to Brigid.

Mayor: Brigid, can you hear me? Brigid, Brigid, what's up with your phone?

Lapeyrolerie: We're going to go to Gwynne Hogan from WNYC.

Mayor: What did you say again, I'm sorry?

Lapeyrolerie: Gwynne Hogan from –

Mayor: Gwynne, can you hear me Gwynne?

Question: Can you hear me?

Mayor: Yes.

Question: Okay I got two questions. One just logistical. Can you give us a breakdown of how many cases are hospitalized? How many people are in the ICU and how that squares up with our current hospital capacity?

Mayor: Gwynne, I have a report that is helpful but not perfect, so just bear with me because the last confirmed numbers for hospitalization ICU where as of 5:00 pm yesterday. We're trying to get these numbers to tighten up. You can imagine there's so much of an information flow, we're trying to get everything aligned better. But as of 5:00 pm yesterday, when obviously the overall number of cases was, you know, substantially lesser we had 554 hospitalizations and 169 ICU cases. That was against the base of about, and I say it, you know, approximately about 2000 cases at that point. So, 554 hospitalizations of which 169 were in the ICU. We are going to try and constantly update those numbers and get them closer to real time as quickly as we can.

Question: Okay. And is there any update on increased hospital capacity at that point? Or how does that – what does that out of total hospital beds that we have emptied –

Mayor: The reality – Gwynne, as the executive order that I issued related to ending elective surgery, as that has been fully in effect in almost every hospital now has turned off their elective surgeries. There's just a few that are finishing up now, but basically elective surgeries have been ended across the city. That has opened up a lot of capacity. Early discharges as we talked about. The next phase of course will be building new health care capacity, those tents and other build-outs, but to handle the incoming that has been achievable because so much space, so much personnel and supplies were being devoted to elective surgery that that's not the case anymore. So the system is certainly able to make that adaptation. Dr. Katz told me about his visit to Elmhurst Hospital earlier today where he saw in a place where there's been a number of cases, but he saw the obvious positive impact of getting the elective surgeries out of the way and opening up a lot of space and capacity for the incoming coronavirus cases.

So that I think is our reality at this hour, today. We have to radically expand capacity in the next two weeks, and I think it's hard for us all to fully understand the exact trajectory and we are very careful about telling you what we know and what we can confirm versus what is speculative. But I think if people think about that two-week, three-week kind of dynamic and let's be conservative and just call it two weeks. For next two weeks we have in our hospital system a lot of capacity we can bring to get bear, a lot of adjustments. I'm looking at Dr. Katz right now. Anything he wants to add, he'll come up. And just the power of getting rid of the elective surgeries and getting the early discharges and surging in personnel is helping us immensely. Again, we do have a reserve of equipment and supplies, but after two weeks – just to finish – after two weeks that situation would be a lot harder. So we have to use these two weeks to build out all the capacity we can in hospitals and in new facilities really quickly and we'll get you updates on that over the next couple of days as that is all coming to bear and again desperately need that federal resupply while we're doing that.

Question: Great. Thank you, Mr. Mayor. And just, just one question about enforcement. You mentioned that the NYPD was doing some enforcing. Is that of the closure of bars and large gatherings?

Mayor: Yes –

Question: You know, my question is really – it has to do with like all the stores that are open. There are toys stores open, there's clothing stores open, you know, in neighborhoods that I've seen, it's like business as usual except for restaurants and bars. I was just at a factory in Sunset Park where a bunch of workers who walked off the job because they're not reducing staff there and they don't have any personal protective gear and somebody has gotten sick at there. So I just, who is enforcing this at this point?

Mayor: So let's – you said several different things. I'll respond quickly. The restaurants, bars for example, as I said, NYPD, FDNY, Building, Sheriff, all participate in different ways. Lots of activity because it was so important to get it right in the first few days. Clearly, we're seeing tremendous adherence to the law. I think everyone understands how important it is. We'll keep

an eye on that. But we have to do new enforcement in different ways all the time as the state is issuing new rules. And again, I agree with those rules. We're going to help enforce in every way we can, by the way. All those agencies have to do what they normally do too on top of that.

But to your point, I do think there's a lot of things still happening. That again, a week ago, I was certainly trying to see everything I could do to keep employment going and keep people having a livelihood and felt very, very deeply concerned about the dislocation that occurred. I feel that still, I feel humanly, you know, deep pain for the families that are running out of money, don't have a livelihood, but I'm even more worried about the lives that are on the line right now because a coronavirus and that's where I want to see us take every step we can take to limit anything non-essential and we will do all the enforcement in our power to make that come to life. So I think there's more that still can be done and that's what we're working on right now.

Question: Is the NYPD empowered to right now enforce the workings or the only 25 percent of – is it any business to staff? Can, it has to be, can be on site, is that factories –

Mayor: The State rule on the businesses, which was just issued by the State, updated the 75 percent. That specific enforcement mechanism, we're working with the State right now to figure out how State and the City can play their own different roles to support each other on enforcement. What NYPD has been doing is the kinds of things we already talked about, the restaurants and bars, and the other things related to immediate health and safety. And I think, you know, as this is going to change, I mean, I think everyone – look, New Yorkers are very, very realistic people. This situation is going to change. What we're talking about today is not going to be the same in two weeks or three weeks. The NYPD is going to be an extraordinary savior here. We need our men and women of the NYPD to adapt to this situation and help us through anything and everything we go through and I know they are the best in the nation. They'll answer the call, but we just have to understand it will change constantly as the rules change, as the realities change.

Lapeyrolerie: Excuse my pronunciation. Next up is Hansi Lo Wang from NPR. Hansi, you're up.

Question: Thank you very much. Mayor, can you confirm report that 20 members of the NYPD have tested positive for COVID-19 and what is the city doing at this point to ensure that first responders are protected and not exposing the public to any potential a coronavirus infection, given that they are in the role of enforcing a lot of these new requirements?

Mayor: Yeah, we need our first responders. We need our health care workers. So many people are essential. I cannot confirm that number simply because I have not been given that update. I remind you there are 36,000 men and women in the NYPD. That's just the uniform side. There's, you know, another, I think 15,000 or so on the civilian side. So they're part of our communities too. They're our fellow New Yorkers, so a lot of people will be infected by this disease. Thank God a lot of members NYPD overwhelmingly, of course, are younger, healthier folks who should not have too much of a challenge. But I'm not belittling it. We are desperately concerned to protect them. That's why we need that protective equipment. We have given from

our Health Department a lot to the NYPD. We're going to give them more of – constantly give them more because they need it, they deserve it, but we have to get that federal resupply.

So I would say that all the members and NYPD, all of the members of the FDNY, all the members of our Health and Hospital system, our voluntary hospitals. The city, and I know the State feels the same way, we will do everything we can to get every conceivable supply of protective equipment from anywhere in the nation that we can on the private market and get directly to you. But President Trump has to give the order for the federal government to get you what you deserve. So, I just ask everyone to join in – in issuing the call to the president to release the supplies that the federal government has already, to order the production of new supplies on an expedited basis and ensure that our military distributes them to New York City and other deeply affected areas. Immediately.

Question: I apologize for interrupting earlier, Mayor, how is your office keeping track of confirmed cases amongst NYPD ranks as well as the first responders, given that they do play a big role in how the city is responding to this crisis?

Mayor: It's exactly the same way. And again, the fact that I don't have the latest update is different from the question of how each agency handles the work. I've talked to our Police Commissioner, our Fire Commissioner even long before this crisis. I'm quite aware of what they do. These are a really large, sophisticated agencies with huge amount of personnel. They can always bring more personnel to bear by keeping people on a shift or by using overtime. They're very agile. They're very sophisticated. They have been through situations, the most horrifying situation you can imagine, 9/11, where our fire department, our police department suffered horrible losses and yet made immediate adjustments and kept the city safe. They are right now making adjustments day to day to ensure that everyone's protected. And remember for the vast majority, I'll say it and our Health Commissioner can add if she wishes, for the vast majority of our uniform service members, if they get sick, they will get well quickly because they are overwhelmingly younger, healthier people.

We are concerned for every one of them. I don't want to see a single one get sick. I am concerned for their families. I know they are. There may be some individuals who have particular conditions that make them more vulnerable, but the vast majority of our first responders are people who have, God forbid they got sick, they'll be out of commission for a limited period of time. Then they'll get well then, they'll be back at their post. And so that is something that our Fire Commissioner, our Police Commissioner understand and they'll make adjustments as they go along.

Commissioner Barbot: I think Mr. Mayor, you covered it all. I don't have anything else to add.

Mayor: I accept, okay. Thank you. Who's next?

Lapeyrolerie: Henry is up next.

Mayor: Henry –

Question: Hi, how are you doing? Can you hear me?

Mayor: Yes, Henry, go ahead.

Question: I actually have two questions. Totally unrelated. But I want to go back first to Gloria's question about what is happening in Brooklyn. Because as you know, there's a history of some of these communities resisting public health measures, resisting inoculations for measles, and these are communities that are intensely religious and very tightly knit. And it would seem to me that it's almost counterintuitive not to think that there's a cluster going on given the closeness of these communities and the history of skepticism that they have toward public health rules.

Mayor: It's a very fair and knowledgeable question, but I'm going to tell you a couple of things. One, I spoke with a number of community leaders who I know very well, and I think you know, Henry, I know the community deeply. I represented it in various ways over the years. Very directly. I heard things I never thought here in my life from leaders of the community who made very clear how many shuls have been shut down, how they were urging the shutdown of those remaining and how much agreement there was in so much of the community to do it. Because I think what we cannot ignore here, this is not the measles which was a very difficult time for all of us, and you know, we had to all work together with the community to fight it back. This is a global pandemic a disease that no one on earth fully understands, has no cure, no vaccine. The Jewish community and all communities have been affected by that understanding. So I think you're seeing things happening here that you would not see in normal situations.

I mentioned the example of the gentleman had told me he's keeping his parents away from their grandchildren on purpose and what never did that before in his life. I think a lot of people are waking up quickly to what Dr. Barbot said. I just hope everyone's listening to Dr. Barbot when she says we have to change what we're doing right now to protect ourselves and our families. So, I understand your question, but I'm telling you, and I've asked my own liaisons who worked with the community to confirm this. We are seeing things we have literally never seen before. Shuls closing, people only socializing with their own family, not with neighbors, not going to religious service with their neighbors. We're seeing things that are very, very different. And as to the facts about the numbers of cases, Dr. Barbot, I've asked her probably five times in the last week cause it's come up so many times, she pours over the numbers all the time. There is nothing happening at that part of Brooklyn that is meaningfully different than what is happening in parts of the rest of the city. It's just a fact.

Question: Okay. My second question has to do with the fiscal impact on the city. The Comptroller's come up with his estimate. Is that an accurate estimate? I think it was something like \$1.4 billion or around there –

Mayor: It's way too early to make that assessment in an ever-changing situation. Say a few things. We intend to in about a month's time we will do the Executive Budget. We intend to keep it on time. We will have to of course account for what's probably very substantial changes in revenue and very new expenses. I also want to believe and I think even within the course of a month we might see a stimulus bill and a bail out for localities on a level we've never seen before in decades. We should see that. I don't know for sure if we will, but I think there's a lot of

movement in that direction. So we need to look at the whole picture. I think we're going to have a tough time, Henry. I think we are having a very tough time. I think we will find a way and the big X-factor will be how much of federal support comes in directly to New Yorkers, money directly in their pockets and directly to localities and obviously then the reimbursement levels for localities after the fact. All of those issues need to be factored in and we'll do that through the budget process.

Question: Okay, have you made a request to the feds on this issue yet?

Mayor: We have made a request to the feds on everything that we need right now to ensure our hospitals operate and, and all those frontline needs, and we have a guarantee which has been stated in many different ways, including from the president to the nation that there would be reimbursement. In terms of immediate local support, we've been working with Senator Schumer on what will be included in that next stimulus and relief bill. So that's where I think we have an opportunity to get something done.

Mayor: Okay. Thank you.

Lapeyrolerie: We're going to go back to Brigid.

Mayor: Do I believe you?

Lapeyrolerie: Hopefully third time's a charm.

Question: Oh, hi, Mr. Mayor, can you hear me?

Mayor: Yeah. Brigid, if you didn't want to ask a question, you should have just said so.

Question: Oh my goodness. Thank you. First of all, thank you so much for doing this virtually and thank you for your patience with both my tech challenges. I wanted to start by asking a follow up question related to Rikers Island. You said that the city had identified 40 cases, 40 inmates who could potentially be released. I'm wondering if you could give us a few more details about how you're identifying potential inmates for release? What's the criteria? And do you have an estimate for the number who could be potentially released or reviewed?

Mayor: It's literally individual by individual. So, that number will be after each case that's pertinent is gone through – we'll get to a point we say, okay, we reviewed all pertinent cases, here's our final number. And, of course, it could change over time, but the basic approach is the FDNY and Mayor's Office for Criminal Justice literally go through each and every case. It's 40 now, we certainly expect more. Those have to be signed off on by the relevant DA and/or the State depending on the situation, whether, for example, it's related to parole violation or some other situation. And the goal is to get releases starting today if those sign offs occur and then we'll keep updating you on the numbers. What we are looking for is – we, of course, don't want anyone to be older with preexisting conditions, but anyone who is older with preexisting conditions, we obviously would prefer to get out of the facility if we can. And we want to see those who are at low risk of offending. And obviously, we're talking about a more minor charges

because we're talking about those awaiting trial at Rikers and those who have been held as a sentence which means less than a year sentence and for therefore lower-level offenses. This would not be the case, for example, if we thought someone was a threat to the community, a high risk of re-offending, a more serious charge. So, those are the ways we're looking at it.

Question: And then, separately –

Mayor: I'm sorry. I am told – forgive me, the acronyms overcome me sometimes. Freddi said, I said FDNY when I was supposed to say NYPD, my apology. I did not realize that. NYPD and Mayor's Office of Criminal Justice are doing that individual by individual review. Thank you, Freddi.

Question: Thank you, Freddi. And then, separately, as you talked about how the work – the City's workforce is going to scale back and that perhaps some City offices may just shutter, you know, do you have – can you tell us about, you know, which for people [inaudible] and, you know, want to find a file building permits or trying to go to the marriage bureau, can you tell us the places that made [inaudible] closed come Monday?

Mayor: Not yet, but that is a great question. Give me until tomorrow to answer that, because I think the way to think about it is, Bridget, that there's a whole bunch of people we need to be exactly where they are – that's police officers, firefighters, of course, EMT, train – well, transit workers are obviously mainly the State – but health care workers of all kinds. And there are some folks who will have to be in community locations, for example, when we set up education and childcare for essential workers' kids, we will need all the people to staff that as necessary to make that a safe environment, an environment where there's education, where there's food, etcetera. So, we're going to delineate all of that, but what we've come up with is about 250,000 people who will end up working from home – or, again, we're going to – even if they don't know how to do it now, we'll create some new approach to it or some new assignment. I think what it means is anything that is not essential – that we don't need – if you're not essential, we don't need it at all right now – or, not essential, it can be done remotely, we're going to do that. But in terms of the services that will be affected, we'll get that list for tomorrow. I've used the example earlier of something like food stamps and public assistance that'll go on, but it will go on remotely for both the applicant and for the government side – that'll all be done remotely. So, that's an example of something where the service will continue, but you won't need to go to any office or go to any in-person interview. But let's get you a list of everything that will continue, even if it's in a different form versus things that might be put on hold or disrupted until we get through the core of this crisis.

Lapeyrolerie: Up next is [inaudible] – yes, we can hear you.

Question: So, I want to ask you a question, Mr. Mayor. [Inaudible] agree and disagree between you and the Governor Cuomo [inaudible] safety, as the Mayor, what's your point of view of sealing of the city – New York City. At what level will this measure be necessary? Like why the [inaudible] Wuhan, China?

Mayor: What I think is – it's not about quote “sealing off.” I appreciate the question, I think it's really important. And I have to be mindful – and I'll do my damndest to be thoughtful – again, the other day, when I talked about the San Francisco model of shelter in place, this was soon after San Francisco had announced what it was doing and called it shelter in place and it was a public health order. I honestly thought that that had spread so quickly as the most aggressive action of being taken in the country and obviously a major metropolitan area in our biggest state that I thought that was sort of well-known that that was happening and I was referring to that model and I should have been more explicit. I was not referring to closing borders. I was not referring to sealing off the city. I was not referring to closing the bridges. I never referred to any of that ever, nor when we went through the rumors last week where, you know, people were – I had some of the most sophisticated, educated knowledgeable people that I've known in my life calling me frantically saying, you know, what's this about the bridges being closed and all? And I said, there's no truth to it. We would tell you if something like that is happening, there's no reason for something like that happening. It's not happening. So, I repeat again – and I ask our colleagues in the media, I may be inarticulate sometimes, I may be imperfect, and I will take full responsibility, and I will apologize anytime I do – but I want people to know if I give you information, you can always ask for clarification. We've had rather elaborate press conferences – they're long, they're detailed – and then, anytime you can't reach me, you can reach my whole team. If anyone heard me to say, we're, closing the borders, I never said that. I never meant it. I never implied it. I don't say it now. I don't imply it now. I don't mean it now. I was talking about a model being used in a major American metropolitan area, which is a sharper, tighter version of restrictions – still humane, still allowing people to get what they need, but through the vision of – or, through the prism, I should say, the vehicle of a public health order. That's all I was talking about. Anything else would be in a very, very different kind of situation. And I want to say again, only the State of New York can make that decision and I respect that. And I'll be talking to the Governor again later today. And I also want to say with community spread – and again, if you want our health care professionals to speak to it, they can – community spread means that the notion of quote unquote closing off borders or closing bridges is a fallacy. Again, more educated people than I can fill in the blank. This disease is 50 States already. It is a global pandemic. You cannot seal off your community and expect it not to spread. It's something we all have to deal with. So, the better way to approach it is to deal with it, is to educate people, get people to really practice social distancing, prepare our health facilities and get our government, our federal government to do what it is there for. The federal government is supposed to protect the wellbeing of the people this country and, you know, the ultimate line of defense for all Americans and it's just not doing it now. It's not even close. That's where our energy should be. Not on a too much obsession with the ideas that are not even on the table. So, I hope that's clarifying.

Commissioner Barbot: Mr. Mayor, if I may add in the vein of having crystal clear clarity about why it's so important for us to be aggressive on social distancing. The reason why we're calling for people to stay indoors is because when we have person-to-person spread in community, we want to reduce as much of the, I would say, firewood as possible from the fuel so that we end up reducing the amount of transit mission and reducing the amount of time that we have such a front load of cases. And so, when I call for, you know, more diligent social distancing, it's to remove people from the potential path of transmission and continuing that transmission because that is

the most effective way that we have to stop ongoing community-wide transmission at the population level. It's critical.

Mayor: Okay. Who's next?

Lapeyrolerie: Javier from Queens Latino. Javier, you're up.

Question: Yes, I know that the City of New York is fighting the coronavirus for everyone, but what about the undocumented? They're more afraid because they have a reason to be [inaudible] speak English, they don't have the money, they don't have family and friends here. I see people in the streets really, really afraid. What is the City going to do to help them?

Mayor: Javier, it's what we do for everyone and we always have. I mean, this is a city that, for decades, has not asked documentation status, has provided people with education for their kids and support in so many ways. And obviously, our police do not ask documentation status and we're going to continue. But everyone's afraid. I think we're all in this together. So, there is no one who needs help who's going to be turned away. You know, we've started a process in the city of guaranteed health care for all regardless of documentation status. I hate to say it because this is such a painful situation, but this pandemic is telling us even more clearly why we need a universal health care system in America and why it is just a fallacy to think that you can have a health care system that excludes 12 million people who happen to be undocumented and yet everyone else is going to be safe. I think this horrible situation with the coronavirus waking us up to the reality of a global world, the reality of health care today in an ever-changing environment. If you want to protect yourself and your family, you should protect the health care of your entire community and your entire nation. So, everyone will be served. And anyone undocumented, please spread the word. If they need help, they can call 3-1-1 in a host of languages and get guidance on what to do. If they need health care and that's confirmed by one of our doctors, because, again, if they're symptomatic, they should be like everyone – stay home and wait those three or four days and see if it gets better or worse. But if they need health care and it's confirmed, they will get it and they'll pay only what they can pay and if they can't pay anything, they won't pay anything. I don't know what more we can do in this city to – I mean it as, you know, a statement of philosophy. We couldn't be clearer that our fellow New Yorkers are our fellow human beings. We will be there for them.

Lapeyrolerie: Up next is Jennifer from the Associated Press.

Question: I was going to ask, now that testing has increased to the level it has, is there any thought being given to testing groups of people symptomatic or not, who might be a particular risk such as health care workers?

Mayor: Dr Barbot?

Mayor: There's no indication for testing asymptomatic people. And, you know, it gives me the opportunity to really highlight the point that for every unnecessary test that we do, for asymptomatic people, it also squanders limited resources of necessary gowns, gloves, masks. And so, for every one of those, we not only squander a test, but we squander all of the other

critical personal protective equipment that is in short supply across the world. So, there's a double reason why we don't want to be testing asymptomatic people, even if they're health care workers. We have clear guidance that health care workers who are potentially exposed being vigilant for any potential symptoms that they may have. We actually issued a health alert to the tens of thousands of doctors that we have in this city and directed them to check their temperatures twice a day, to be vigilant about the symptoms they have, and to stay home. So that advice is the same advice we give all New Yorkers. It's however more instructive in terms of actually taking their temperature twice a day.

Question: Thank you.

Mayor: Thank you. Next?

Lapeyrolerie: Julia Marsh –

Question: I just wanted to say that I appreciate you recognizing the sacred responsibility that we in the press have. And in that vein, just before I get to my questions, I'd like to say – and I'm speaking for many in the press corps – we understand how busy you are, but we respectfully request that these briefings happening more timely manner as the delays are preventing dozens of frontline reporters even getting vital information to the public.

Mayor: Well, Julia, I respect that request, but there's two problems. The first is, we have an ever-changing situation. And we assess when we think we'll have the information we need and then a lot of times it changes, literally, while we're in the middle of preparing. So, I think we're going to do this – we're going to try to give you a very conservative time. And I'm going to say this with no disrespect, we're going to give a conservative time for when we begin. We catch information coming down from the federal government down from the State government and we have to make sense of it and we have to be ready and we have to be accurate. We'll give you a conservative start time. If you want to participate, participate. If you don't, you don't have to. But we cannot start until we had everything assembled and proper. And that's just the standard I'm going to hold. So, I hear you, but I have an obligation, 8.6 million people to get it exactly right. And I know there are many, many reporters who are ready to receive the information at whatever moment it is available. We'll do our damndest to make it as early in the day as possible. But this – I have never seen a more ever-changing situation in my life. So, that's the ground rule. Respectfully, that's the ground rule. Take it or leave it.

Question: Okay. Thank you, Mr. Mayor. And then I have a couple of quick follow-ups and then a question about the Veterans Administration. Dr. Barbot, on the Brooklyn cases, I'm wondering, were you trying to indicate that people in Borough Park and Williamsburg are getting tested who actually don't need to?

Commissioner Barbot: No, I'm saying that there are health care facilities that may be more vigorous in their outreach and we are encouraging providers – and we just sent out a health alert to doctors, reminding them that we want to reserve testing for individuals who are not getting better and who require hospitalization.

Mayor: Can I just friendly amendment that, because I want to make sure we're not miscommunicating. I thought Julia's question was, are there – does that particular testing location, for example, was it testing only priority people, according to your priorities? I don't think – I think the answer is no, unfortunately.

Commissioner Barbot: I have no way of confirming that and my concern is that they were not adhering to our guidance.

Mayor: Right. So, Julia, just to make sure we're all speaking the same language – and please, if you need to clarify, ask again – we know when we are seeing the priorities Dr. Barbot has laid out and Dr. Katz has laid out being followed. There's other times we're not sure they're being followed and that certainly raises a concern, because we need testing to be done on that same priority basis everywhere.

Question: Yeah. I just wondered if she thought that you're seeing – I mean, if you look at the breakdown and the borough of Brooklyn, 40 percent of the cases are in Williamsburg and Borough Park. So, I'm wondering if you thought that there were such a high number there just because more people were getting tested.

Commissioner Barbot: So, as I've said, we're seeing widespread community transmission. There are – we're hearing reports of parts of the Bronx where many of the clinics are being inundated with patients. We're seeing different hospitals across the city indicating increasing numbers of patients. And so, while there may be public reports about increasing testing in those neighborhoods, again, our data indicates that we have hotspots all over the place and that these places don't necessarily stand out above anybody else.

Question: Okay. And then, Mr. Mayor, Gwen Hogan asked you about stores that are still open. We also noticed numerous tourist gift shops in Little Italy and Chinatown, but it's my understanding that there's no directive that says those stores have to be closed. Is that correct?

Mayor: I am not kind of pretend to tell you I know every chapter and verse on everything that the State has put out in terms of how it relates to each industry and whether a gift shop, for example, fits under one rule or another. The team is obviously constantly updating what we're doing based on new State guidance. But I think it's absolutely right to say those are non-essential stores. And what I've seen is the State moving sort of sector by sector to tighten up, choosing areas that they believe are non-essential, shutting them down, obviously, limiting the number of people and workplaces – the 75 percent rule today. I think that's certainly the right thing to do.

Question: Right. And then, just lastly on the Department of Veterans Affairs, I think you said that you're confident that those professionals there are standing at the ready to help out. But if you look at this City's VA system right now, there are 393 vacancies, that includes 30 medical support assistants, 31 nurses and 25 medical officers. So, it seems like they themselves don't have enough medical personnel to run the system.

Mayor: Well, I would be the first to agree with you if you said there are still issues at the Veterans Administration that need to be addressed more holistically, but I also would be the first

to say that we've known for a while there's excess capacity in Veterans Administration hospitals. So, I would just put the two and two together and say, if we know there's beds, we want the beds. If we know there's personnel, I would like to see, of course, the Veterans Administration work by the same rules the rest of the health care system has, which is that get rid of elective surgeries, do early discharges and open up as much space as possible. So, even if there's areas where they're short of personnel, I have no doubt they can still be extremely helpful in this effort.

Lapeyrolerie: Kyle Mazza –

Question: Hi, Mr. Mayor. Can you hear me?

Mayor: Yeah, hold on. We're just getting the volume up a little.

Question: Of course. Can you hear me now, Mr. Mayor?

Mayor: Yes, indeed.

Question: Great. Thank you for taking my question and thanks for doing this press conference, especially virtually – very helpful for us. So, my question is, will you – are you trying to reach out to President Trump regarding the shortage of supplies that you are seeing? Have you spoken with his administration? I know Governor Cuomo has been in contact with President Trump when they do the governor video conferences, but have you?

Mayor: I reached out to Vice President Pence. His team was very responsive, but they referred me to me Secretary Azar. I am, of course, like everyone else, trying to remember which day was which, but I think it was four days ago I spoke to Secretary Azar, and that was about some of the issues. I will certainly be speaking to him again. I have spoken to Senator Schumer who has been, obviously, our greatest advocate in Washington. I know he is speaking to Vice President Pence. So, as I've told you all, I've spoken to Dr. Fauci. I've made him aware of the situation. I'm sure he will make others aware of it because this is his hometown and he is doing such amazing work for this nation. So, I'm certainly going to try again to reach Vice President Pence, who the President's put in charge of this effort. I'll certainly be talking to Secretary Azar again. But my hope is, the combination of the efforts of Senator Schumer, the efforts of Governor Cuomo, the efforts of other members of delegation, and just the sheer public demand, because, let's face it, the more that the President and Vice President and there cabinet hear from the people, from leaders of all sectors – business community, everyone – that this is an unacceptable situation. When you're in the nation's largest city, and I'm telling you point blank that we have a real danger up ahead and we've codified it in letters to all, you know, top federal officials. I mean, there's a point at which you say, are people actually taking responsibility or not? So, I'm going to hope and pray that if we sound the alarm enough times someone will listen.

Question: Well, also, as a follow up, Trump also said, governors are supposed to be doing a lot of this work. The federal government's not supposed to be out there buying vast amounts of items and then shipping, you know, we're not a shipping clerk. But you also said earlier in your remarks that President Trump is betraying the city. So, I wanted to get your reaction first to what he said in his press briefing at the White House. And then I also want you to say, well, is it fair to

say that given the crisis that we're seeing – from your side – that he is betraying New York City where he came from.

Mayor: It's abundantly clear to say he's betraying his hometown. And he, unfortunately, is letting down his entire nation. I have worked in the federal government, I understand the different responsibilities, but this is a time of crisis. And the greatest example in American history was a great New Yorker named Franklin Delano Roosevelt during the Great Depression who ensured that the federal government would do things they had never done before to protect people and it saved our nation. That was a time that was much more shocking, if you will, when there was no roadmap in the least. There wasn't a kind of technology, communications, our government was very, very small at the time, and Franklin Roosevelt had the audacity to say we're going to build something entirely new to save this country. And now, we've got a president with a vast military, a massive government with literally endless resources effectively and he won't use them. And no, mayors and governors cannot make supplies appear out of thin air. I mean, we have powers but not the kind of powers to get factories in other states to have produce something we need or to get it from another state to here in a manner that's prioritized and guaranteed. That's what we need. We've got two or three weeks for God's sakes. The only way you know that goods are going to be produced on a huge scale and gotten where they need to be is to use that war production act to the fullest – I'm sorry, Defense Production Act to the fullest and to ensure the United States military does the logistics. It's only way you can guarantee at this point – you know, if the President acted two weeks, four weeks, six weeks ago when he could have, we might be having a different discussion. But wake up, we are really running out of time and the only way it works is if the federal government immediately uses all of its muscle to save this city and a lot of other places.

Lapeyrolerie: Katie Honan is up next.

Mayor: Katie, can you hear us?

Lapeyrolerie: Katie?

Mayor: Who's next?

Lapeyrolerie: Mark Morales, from CNN.

Question: How are you doing, Mr. Mayor?

Mayor: Good, how are you?

Question: Good, good. So, I just wanted some clarification. The number – back to Borough Park and Williamsburg, in that area, the number that's being reported is more than a hundred. So, two questions. What's that number at now? And, if that's not a cluster then, then why isn't it a cluster? Is it – is it lower than that number?

Commissioner Barbot: So, citywide, as the Mayor mentioned, we've got above 3,000 people.

And it's to be expected that we would have high numbers in all of our neighborhoods. And so, when we talk about a cluster, it is a situation where we can trace it back to an originating source. When you've got widespread community transmission, it is impossible to draw back to a single source, because there are so many opportunities for individuals to have gotten infected.

Question: Gotcha. Okay. So then, what's the number for Borough Park and Williamsburg now?

Commissioner Barbot: You know, we'll have to get back to you on that.

Mayor: Right. Again, it's a hundred cases, which no one takes lightly, but against what at that hour was 3,615 overall for the city, over a thousand for Brooklyn. But we will get you more.

Lapeyrolerie: Mary Frost, from the Brooklyn Eagle.

Question: Good afternoon. Shall I ask the traditional question? Can you hear me?

Mayor: Yes, Mary.

Question: Okay, great. This is a two-part question. The first is, we are hearing that younger people are actually being hospitalized in greater numbers than expected, even though they are not dying at the rate of older people. And related to that, a number of younger people are telling me that they feel compelled to work in the gig economy because they have student loans that apparently can't be deferred or they have all kinds of problems deferring them. Can you address these questions?

Mayor: Okay. On the younger people, I'll let Dr. Barbot speak to, -- we've talked about what we've seen globally and consistently about the impact on young people. No one has ever said there won't be some young people who don't go through a more serious situation, but overwhelmingly we've seen young people, healthy key word, healthy young people have very limited impact. I don't have a number in front of me for hospitalized out of that 554 as a 5 pm yesterday. I don't have a number in front of me of how many are under 18. But if you could speak to the larger situation?

Commissioner Barbot: So, we are looking at the data on a continuous basis. And by and large, the vast majority of people who have tested positive are above the age of 18. We are not seeing clinically anything that at this moment looks differently from what's being observed in other countries, which is that primarily the people who do end up hospitalized and who may have more severe cases tend to be older individuals and especially those with chronic underlying conditions.

Question: Excuse me. Well, this report is referring to the group between 18 and 46.

Commissioner Barbot: So again, the majority of individuals that we're seeing hospitalized with severe conditions tend to be individuals who are above that age. But that's not to say that we don't have people who are between 18 and 49 who have been hospitalized. But it's not out of proportion, again, at this point in the outbreak, in terms of what we're seeing, it doesn't seem to be out of proportion with what's being observed in other countries.

Question: Okay. Thank you. And can you can the Mayor, can you address something about the pressure that people in the gig economy are feeling from their student loans and debts?

Mayor: Oh, I think people in the gig economy are feeling this immense pressure. That gig economy is for so many people falling apart and they're going through a lot. Now I am not up to date on the federal or State actions on student loans. Obviously, that's not something the City regulates. My understanding is there's been some kind of relief or suspension around interest payments or something like that. I'm not, again, forgive me, I don't have all those details. But I, look at this point like everything else happening, we need extraordinary measures. This would be an ideal time to postpone all student debt in the middle of this kind of crisis because a huge number of people are in no position to pay it right now. We're talking about yesterday, I heard a federal official mentioned the possibility of 20 percent unemployment, 20 percent unemployment puts you damn close to where we were in the Great Depression — that's the only time in our country's history, to the best of my knowledge where we've ever been at that level. You're going to have a vast number of people who cannot afford to pay for a lot of things, especially student loans. So that should be part of any kind of bailout package to suspend those payments. Give people a substantial grace period until they can get back on their feet and be in a position to pay again. Who's next?

Lapeyrolerie: Matt Chayes.

Mayor: Matt.

Question: Thanks for taking my questions.

Mayor: Yes.

Question: A couple of them. First, to what extent does the Governor's executive order yesterday limit what you can do and to what extent does it limit what you can do under the orders you've already signed? And then at the top of the call you listed certain very important, vital items that you're running out of masks, coveralls, ventilators, etcetera. Approximately how many of these items that you listed do have right now? Assuming the feds do come through with this wish list, how long will the supplies last? And finally, will Elon Musk be producing ventilators for the city? I know there's been some back and forth on Twitter?

Mayor: With Elon Musk we were very happy to receive his offer of help. We're trying to assess what it means and how quickly it could make an impact. And, you know, I'm holding out the, you know, the hopeful idea that he could do something that's important here. But we have not been able to confirm what it means yet specifically. We'll get to more on that when we know. On the question of a timeline. I think I spoke to it earlier in this session. I'll just say it again. We will be supplied through the month of March and into the beginning of April. A few days ago, I don't have all of it in front of me now, but a few days ago I delineated the kind of reserves we had in terms of masks and other capacity, other supplies. Again, we have, thank God, the biggest, best health care apparatus anywhere in the country. And we do have what we need to get through the next, at minimum two weeks, hopefully even three weeks or more.

But it is time to be blunt and honest that we must be resupplied. And so that's what I'm saying here today. I have been -- I'm being abundantly clear for the month of March, we have supplies. It will take us into the beginning of April.

Question: And how long will that last if the feds come through? When will you need another restock?

Mayor: Again, respectfully, Matt, I think I've said this numerous times. We need to be, I've said two weeks is the good working rule. It could be more like three. The federal government must activate its capacity immediately so that we can start to get those supplies within the next two weeks. We don't need everything simultaneously, but we need substantial resupply in the next two weeks, maximum three weeks.

Lapeyrolerie: Last two, back to Katie.

Mayor: Katie?

Question: Can you hear me now?

Mayor: Yes.

Question Thank you. Sorry. Thanks for the tech help to the WebEx team and to Olivia. My question is, I know you said that the numbers of patients are updated every day at 10 and six. It's now 6:44 pm. Do you have those updated numbers? Because the data we're working with is from 10:00 am and it's probably this point unfortunately really out of date.

Mayor: Yeah. When I say they're updated, Katie, that we have to, there's a lot of cross-checking that happens and so six o'clock is the time that they, as I understand that they sort of call timeout at six and then they have to do all the analysis to make sure it's right. If we have and I'll turn to the team, if we have something ready for publishing now, I will happily do it. If we don't, we'll get it to you when we haven't. We're checking right now. No, it's not. It is not ready yet, is what we're getting. But when we do have it, we'll put it out.

Question: Thank you. And secondly, I know that you announced new testing facilities with a new drive through facilities and other boroughs. I know Queens has some of the highest numbers, but I don't know if they have the same level of testing capabilities as other boroughs?

Mayor: Well, let me clarify again. I explicitly did not use the word drive through because they're not drive through. So I want to be really, really clear about that. And I'm going to again, ask everyone, I'll try and be really precise. Sure. I'll be imperfect. But if you ever need clarification, please say so. On testing centers through H + H, 10 new sites at hospitals, those are not drive through. Each will serve 150 people per day with testing. Eight open already, Bellevue, Elmhurst, Harlem, Jacobi, Kings County, Lincoln, Woodhall, Queens Hospital. Two more open next week. Coney Island and Jacobi, none drive through. On the seven new sites of the Gotham clinics. These are also not drive through. Each will serve 50 or 75 people and those are all open,

will be open this week, [inaudible] Cumberland, East New York, [inaudible] Morrisania [inaudible] Vanderbilt. Four new testing centers, a hundred people per day, two open Coney Island, Jacobi two coming up, Kings County, Queens Hospital, none drive through all everything I've just said by appointment. And prioritize testing only. The only drive throughs are the State operated one on Staten Island and the five that are coming in coordination with FEMA. But we don't have locations or start dates for those yet.

Question: That's what I was asking about. Do we know when we'll get those locations and start dates yet?

Mayor: Just what I said, we don't have it yet and when we have it, we'll tell you.

Lapeyrolerie: Last but not least, Yoav.

Mayor: Yoav.

Question: Hi. Mr. Mayor. Two questions. One, I know you said there's no citywide shortages and there's not expected to be for a few weeks, but are you hearing from individual hospitals about specific shortages, either of masks or ventilators? And if so, what is the City doing about those? And can you identify anyone, any that you might've heard from?

Mayor: I heard rumors, but then generally, and you know, again, we have the Health Commissioner here, CEO of Health + Hospitals here, Emergency Management Commissioner here. I think if anyone has different information they'll jump in. But we heard rumors we did some follow ups. I think there were some places that had either you know, they're getting worried about a shortage or they had some very particular thing they needed some quick infusion of. But the basic reality has been we have supplies and if health facilities need them, meaning hospitals we can get them where they need to go. But I am not seeing this as a major problem at this point. I am very concerned going forward, but I don't see it as a major problem at this point. Dr Katz you want to add or Dr. Barbot?

President Katz: I'd just like to validate what the Mayor has said. Health + Hospitals runs 11 hospitals and there have been moments when we've needed to move supplies from one hospital to another. There are also people who are sensibly worried that will we have enough supplies for two weeks from now? And as the Mayor has been very clear, that's why we need a restocking. So I want to assure people that yes, as of this moment we do have enough supplies and we're able to move supplies. And I know that's true of other hospitals. But also understand why people may not have that perception because they are looking at in their hospital how many of the N95 masks are there right now and thinking this is not enough. So I understand the concerns and I certainly appreciate the Mayor's call for help for us to get that restocking. But at the moment the hospitals have what they need.

Mayor: So, to both our doctors here. I think it'd be really helpful. I think it's a very important question -- let's kind of demystify a little. If a voluntary hospital or an H + H facility needed suddenly more surgical mass or whatever it was. Just let's explain to our colleagues in the media how that request would be acted on. And who would they call and what happens next to make

sure they get what they need. And obviously our Emergency Management Commissioner might want to chime in as well. Do either you want to start?

Commissioner Barbot: Sure. I'll start. So, we work closely with our State counterpart to ensure that we communicate with our hospitals on a regular basis and query them on where they are with regards to specific supplies related to masks, gowns, et cetera. And we ask them how long they think that the particular supplies will last and if they are anticipating a delivery so that if there are concerns about potential shortages, we then work with our partners at [inaudible] Office of Emergency Management and at the State to ensure that these hospitals get their supplies in a timely manner.

President Katz: Yes. And to demystify, as the Mayor has asked, all of our 11 hospitals have already been moving supplies and moving patients. So some of our hospitals have been more heavily affected such as Elmhurst than other hospitals. And we've responded as a system by moving supplies, staffing to Elmhurst to do that. And also moved other patients who didn't need to be at Elmhurst to other hospitals. So that's what hospital systems do to respond in a crisis like this.

Question: Okay. Thank you. And I did want to ask one other thing about the disease detectives. I'm curious if their role has changed now that the number of cases coming in is so high? You were planning to double the size of the team, but if they are still doing what they were doing, how do you decide which cases to investigate? And is that work even, you know, how useful is it at this point of widespread community spread?

Mayor: I'll start and pass to the Commissioner. We the number and we're going to continue adding. You know, we're in a different strategic context, but there are plenty of situations where that work is absolutely crucial. The Commissioner can give you a flavor of that.

Commissioner Barbot: Certainly. We've said before that as this outbreak matures, that the work of the disease detectives will focus to prioritize on identifying potential outbreaks amongst health care workers. Because again, the primary focus here is to ensure the capacity of the health care workforce. And then also to work to identify potential clusters in nursing home facilities, as well as, assisted living facilities.

Mayor: Okay. All right, everybody. Thank you. We appreciate – we're in a new world together here, but hopefully we made this work together today and we'll be giving you more updates shortly.

Thanks so much.

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