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**TRANSCRIPT: MAYOR DE BLASIO HOLDS MEDIA AVAILABILITY**

**Mayor Bill de Blasio:** Good morning, everybody. Last night, I got another reminder of the goodness of this season in Grand Army Plaza, lighting a tree to celebrate the holidays with Bishop DiMarzio and the Diocese of Brooklyn. The tree itself is spectacular and a joyous reminder of the Christmas season and the holiday season, and why we remember in the season to be there for each. There's also an extraordinary sculpture, which I urge everyone to go see – amazing tribute to immigrants and what they mean to this city and this nation, and a reminder of the need to welcome and respect all people. Very moving gathering last night. And it is a reminder in this time of challenge, a challenge unlike any we've seen in the history of New York City, anything we've ever seen in our lives, that the most important thing is to be there for each other, to support each other, protect each other, to have compassion for each other regardless of who we are, where we come from. And that is what New York City has done during this crisis. I'm so proud of all New Yorkers, all of you, for the way you've handled this, the way you've looked out for each other.

Look, we've been through just the toughest time, but now we can see the light at the end of the tunnel. And I really want to emphasize that this is the last great battle we're going to go through these next few months, this last great battle against the coronavirus, because now the vaccine is literally just days away. The vaccine will change everything, but it'll take a lot of work to make sure the vaccine gets to everyone who needs it as quickly as possible. The good news is, every step along the way we hear better and better news about the vaccine. FDA has now released its analysis, which is a very positive one. This is being reviewed now further by FDA and CDC, but the good news is we see very promising results. And I want to emphasize to all New Yorkers, we're not just leaving it to Washington. Our extraordinary Health Department, our whole health care team is constantly analyzing the data as well related to the vaccine and we like what we see. And we are working every day to perfect the rollout plan, because, as the vaccine arrives, the goal is to get it to move quickly. And our Health Department is very well poised to do that because we have an extraordinary history of ensuring that New Yorkers are vaccinated over decades and decades. Our Health Department has led the way in making sure that people get the protection they need. So, here to give you an update, a lot of new information that'll be, I think, very helpful to understand how the vaccination efforts are going to go and why we have confidence in the vaccines that are emerging, our Health Commissioner Dr. Dave Chokshi.

**Commissioner Dave Chokshi, Department of Health and Mental Hygiene:** Thank you, Mr. Mayor. Well, yesterday, we truly saw a shot heard round the world, as the United Kingdom's Margaret Keenan received the world's first approved COVID vaccine. We should all be inspired by her words afterwards – if I can do it, well, so can you. Every moment like this one represents a step forward in New York City and beyond, and I want to give everyone an update on what we can expect in the days ahead. Yesterday, the FDA made public the data Pfizer provided in their emergency-use authorization application, which offers promising information about the safety

and efficacy of the Pfizer vaccine. The new COVID-19 mRNA vaccines, like the Pfizer vaccine, teach ourselves how to build immunity to the virus that causes COVID-19. mRNA does not affect or interact with a person's DNA and the cell breaks down and gets rid of the mRNA as soon as it is finished using that information.

Here are a few things that we've learned about the Pfizer vaccine. First, the vaccine is moderately effective within 10 to 14 days of the first dose, which is good news. But the second dose remains very important, because the two-dose vaccine is what was tested and found to be highly effective – that's that 95 percent – at preventing COVID-19. Second, the Pfizer vaccine worked across adult age groups, ethnicities, and people with underlying medical conditions, such as diabetes, obesity, and high blood pressure who participated in the trials. Third, there were side effects, but they were mild to moderate. They were more common after the second dose and they generally lasted one to two days. The most common side effects included pain at the injection site, fatigue, and headache. We will continue to update New Yorkers about this so that they know what to expect with a vaccination.

Now, over the next several weeks, there will be a lot of movement with the vaccine rollout. Tomorrow, an independent FDA advisory committee is scheduled to discuss authorization. The FDA could issue an emergency-use authorization as soon as Saturday. And, if so, on Sunday, a CDC advisory committee will also meet and vote on clinical guidance to accompany the vaccine rollout. If all goes according to plan, the first doses of the Pfizer vaccine would arrive in New York City as soon as next Tuesday on December 15th. Next week, a similar process will unfold for the Moderna vaccine, which could arrive a week or two after the Pfizer vaccine. Preparations are already underway to vaccinate our health care workers who are at the highest risk of exposure. We also give priority to long-term care facility staff and residents. And, in partnership with hospitals and clinicians, we are ensuring our systems are ready. We conducted a successful trial run of the entire COVID vaccine ordering process with Bronx Care from submitting the order all the way to the facility confirming receipt of the test package.

As we move forward with the COVID-19 vaccine and the coming weeks, we will keep New Yorkers informed. We will post vaccine information as we have it on the Health Department website at [nyc.gov/covidvaccine](https://nyc.gov/covidvaccine). The vaccine is one step to protect New Yorkers, especially the health care heroes who have been tireless in keeping our friends, neighbors, and family members alive. I remember joining rounds with the teams on the Elmhurst COVID wards back in March and in the Bellevue ICU's in April as well. And it gives me hope that those extraordinarily dedicated colleagues will soon receive the vaccine. This remarkable scientific breakthrough also reminds me of the every-day miracle of vaccination and the protection it gives us against illnesses like the flu. As you wait for the COVID vaccine, it's not too late to protect yourself and your family against influenza. Get your flu shot today. Thank you.

**Mayor:** Thank you so much, Dr. Chokshi. And thank you for reminding us of the heroism of our health care workers and the fact that you were there at the frontline in some of the places that were bearing the brunt, you understand very personally what extraordinary work our health care heroes did and how important it is to protect them, going forward. And, of course, then to protect all New Yorkers. The vaccine's coming. As you can hear, our Health Department's ready. And these next weeks are going to be a challenge because of the rise in cases we're seeing, but they're

also going to be inspiring, because we're going to see the fight back get even deeper against the coronavirus as more and more people get vaccinated. And, as you heard, even the first dose has a very important impact. So, there's really important news, good news here about how we fight back.

But now, let's talk about what we have to do even beyond the vaccine and what New Yorkers overwhelmingly have been doing, wearing the masks, practicing social distancing, avoiding gatherings, not holding those indoor gatherings, not traveling. We're going to keep talking about this throughout, but it's also important to talk about what allows you to be safe, the rules, the laws that protect you. Because, look, we're saying to people, if you're sick, don't go to work. If you're sick, protect yourself and others. Get the help you need. If you need the help of our Test and Trace Corps. and our Take Care Initiative, it's there for you for free. We want to support people, but we also want people to know, if you are sick, you should not have to fear for your job. You would not have – should not have to worry about whether your job's still going to be there or whether you can make ends meet. This is why in 2014, we passed the paid sick leave law, to protect the most fundamental rights of New Yorkers – to say, if you're sick, or a member of your family is sick, getting well really matters. We have to be there for you and support you. It can't be a choice between your health and your job, your health and your livelihood. We made that decision in 2014, that's something I'm very proud of. One of the things we did that has a lasting impact for the city. We didn't know that there'd be a pandemic, but paid sick leave has taken on even greater meaning because of the pandemic. And I really want to thank everyone at our Department of Consumer and Worker Protection, who took the paid sick leave law and brought it to life and continue to make sure that people's rights are acknowledged. But this takes on other greater meaning in the middle of a pandemic. Here to tell you about this effort to protect people's rights and make sure that their health care truly comes first, my great pleasure to introduce our Commissioner for Department of Consumer and Worker Protection Lorelei Salas.

**Commissioner Lorelei Salas, Department of Consumer and Worker Protection:** Thank you for making the time today to remind New Yorkers about such a saving benefit. Paid sick leave law saves lives. In fact, not only did you, under your leadership – did we get this great benefit for workers, but it was also extended several times to make it one of the most broad laws in the country, protecting workers. And, as recent as earlier this year, the State and federal governments finally recognize how critical this law is in fighting COVID. They passed their own protections. So, thank you to everyone. And we're all in this together, as the Mayor mentioned. We all need to fight this virus together.

A couple of things about the paid sick law. In New York City, the law gives you 40 hours of sick leave in addition to the State and federal leave laws. That means that you first need to use the State and federal laws if you have COVID, if you are having ordered to quarantine. You don't need to use any other days. Now, the sick days under New York City are on top of that leave, and that is a very important reminder for New Yorkers. Now, we have been fighting to collect wages for workers, schools who were denied the sick leave, but it is much more important than collecting money. It is much more important that this benefit be actually available for workers. That is what we're looking for. We're seeking full compliance with this particular law. And we are here for you, we have investigators and attorneys who look into this law. We also have staff who are conducting a lot of outreach to businesses to make sure our small

business owners understand their obligations under the law. Very important to notice – to know that under the City, the State, and the federal laws workers are protected against retaliation and the law is available to all workers, regardless of immigration status.

Most employers are doing the right thing, Mayor, but, recently, we had a couple of situations where workers were fired because they were sick and they tried to take, you know, enforce their rights. My office fought back. Those workers are back in their jobs with the same salary, the same hours that they had before and with the lost wages for those days where they lost what they were illegally fired. So, we have your back if you need to call us if you have questions or if you need to file complaints. But I want to mention just a couple of changes in our New York City law, as a result of some recent amendments in the State law. Very important to know that workers no longer have to wait in order to enjoy this benefit. So, new hires no longer have to wait. There used to be a waiting period before, but, again, because of COVID-19, that waiting period has gone away and you start accruing leave the moment you are hired.

Another thing is that domestic workers are now treated the same as workers in any other industry. Domestic workers have the right to at least 40 hours of sick leave a year. It's, again, important to remind New Yorkers that the New York City law is very broad in its coverage. You can use it to take the flu shot. You will be able to use it to take your vaccine against COVID. You can use that to take care of yourself or your loved ones. You can also use it in situations in which the schools, the public schools are closed, and you need to take care of your kids, because there's a state of emergency, or even if your employer was ordered to shut down and you have leave that you have available to you. We have some changes again – and, as of January 1st, employers that are bigger, that have a 100 employees or more will be able – will have to give employees up to 56 hours of sick leave.

So, again, this is a law that we are prioritizing. My office takes it very seriously. We need to – you know, this is not about workers versus employers. It's about all of us being in this together in order to have a full recovery. We want to make sure that the law is being complied with. Call us with questions, with complaints. We have information on our website in many different languages. We are hosting a lot of round tables right now with the chambers of commerce and with worker organizations. You can call us at 3-1-1 and say paid safe and sick leave. Or, you can visit our website at [nyc.gov/workers](http://nyc.gov/workers). And I just want to wish everyone the safest and healthiest holiday season.

**Mayor:** Thank you so much. Thank you, Commissioner Salas. Thank you to you and your entire team, doing extraordinary work, protecting the rights of working people and consumers in this city. So, thank you for that great work. And, everyone, look, it's as simple as this. If you are sick, stay home. That is the best thing for you, your family, your city. We will protect your rights. If you're sick, stay home. If your child's sick, don't send your child to school. This is how we protect everyone. Look, if you're an employer – and I want to give credit, the vast majority of employers in this city have really shown a lot of compassion for their workers, and I thank you for that deeply. But listen, every employer needs to follow the rules, follow the law to protect working people. So, everyone, this is how we get through this together, recognizing the humanity in each of us and really respecting each person in the challenges they are facing. These laws are here to protect working people, to protect their families, protect their health.

Okay, let's go to today's indicators. Again, this is a new format we're using. Number one, current hospital admissions, daily number of people admitted to New York City hospitals for a suspected COVID-19. – today's report is 196 patients. Now, again, our threshold is 200. We're right up on that now. We've got to keep fighting back to get and stay under that threshold. It is so important. Again, our hospitals are doing a great job. They are using techniques and approaches that they learned from the spring that are much more effective now. So, hospitals are handling the challenges very, very well, and that's really important, but that number is still higher than we need it to be. We've got to push it back down. The new indicator we've added hospitalization rate per 100,000 people – 2.34 percent today. I'm sorry, 2.34 people per 100,000 today. That is still too high. We want to get under two. Number two, current new cases – now, this includes, again, the probable cases from the antigen tests as well as the confirmed cases. Today's number on a seven-day average, 2,738 – obviously, way too high. We want to get that back under 550. That's going to take time to say the least, but the vaccine is going to contribute greatly more and more in the weeks ahead to getting that number down. And number three, this is now the percentage of New York City residents tested positive on a seven-day rolling average. It's the only one we're now presenting the seven-day rolling average, the truest number – 4.81 percent today. We've got to be under five percent. Today, we are. We've got to work hard to keep pushing that number down.

A few words in Spanish –

[Mayor de Blasio speaks in Spanish]

With that, let's turn to our colleagues in the media. Please let me know the name and outlet of each journalist.

**Moderator:** Hi, all. We'll now begin our Q-and-A. With us today is Health Commissioner Dr. Dave Chokshi, Department of Worker and Consumer Protection Commissioner Lorelei Salas, and Senior Health Advisor Dr. Jay Varma. With that, we'll go to Rich Lamb from WCBS Radio.

**Question:** Good morning, Mr. Mayor, and everybody on the call.

**Mayor:** How are you doing today, Rich?

**Question:** I'm doing okay. So, those numbers look a little bit scary, but I'm just – there's kind of a story out there that the hospitals are beginning to run out of space. Is that – is that accurate? I'll say a general opening and turn to Dr. Chokshi. Look, I think hospitals are handling this new wave very well. That's the most important thing to know – lots of lessons learned from the spring, a lot of new approaches that are helping. But, clearly, the uptake has having an impact on them and we're working very closely with the State to make adjustments. I think the Governor and the plan he laid out – the winter plan – one of the things I really appreciated was the focus on seeing the whole health care system, different hospitals, working together to adjust their loads. So, I think space we have. I think we have to be really smart about how each hospital gets assigned patients and the staffing needs of each hospital. Those are the areas I'm concerned about. Dr. Chokshi?

**Commissioner Chokshi:** That's right, Mr. Mayor. I'll just add to it briefly to say, you know, we are concerned when we see particularly the cases go up, because that does turn into hospitalizations going up as well, and we are starting to see that in our indicators. Our hospitals have been planning and preparing for months. They have surge plans that allow them to use additional space. If they need additional ICU capacity, you know, that's part of those plans as well. But our shared goal should remain to do the things that we know can work to keep people from getting to the hospital threshold in the first place. And that's the bread and butter of our public health response that we've seen work over the last few months. The core four – getting tested; people staying home when they're feeling sick; wearing masks. And that's the most important thing that all of us can do to support our hospitals and health care workers.

**Mayor:** Thank you. Go ahead, Rich.

**Question:** So, the second question is a little bit more specific. If we can get a few more specifics on the vaccine. I know the doctor did quite a bit of that, but I'm wondering, you know, will they be arriving by like truck or airplane or are you – and then they will go, what, from a central to, I think there was 44 hospitals, you said had the refrigeration that will allow this, and then what? Shipped on the little, you know, containers with dry ice or – how will that work, and will there be lines or appointments for this? I know what the health care workers undoubtedly, but you know, how will it work generally when it gets to the public?

**Mayor:** Listen, Rich, it's a great question. I think what you're saying to Dr. Chokshi is paint the picture as much as possible, how this is going to work and, Rich, I'll tell you up front, we're going to be doing that more and more each day, letting people have more and more of a picture of how this is going to go. I want to emphasize one thing before turning to the doctor, this is about priorities. So, we're going to make sure the vaccine gets distributed according to priority. And I want people to really hear that, I want all New Yorkers to hear it and respect it. Our health care workers, the frontline with the greatest vulnerability, our nursing home residents and staff, first responders, folks who are essential workers, folks who are most vulnerable, older folks and/or who have preexisting conditions. We really all have to respect those priorities. And our health care system's going to be very rigorous about enforcing those priorities because it really matters that the people in greatest danger get the help first. With that, Dr. Chokshi, in terms of how it arrives, how are you going to distribute, paint that picture?

**Commissioner Chokshi:** Sure. Thank you for the question. I know this is on many people's minds, you know, how is it actually going to work? And let me paint the picture for what we know about next week. But also caveat it to say that things will evolve and change over time. and particularly as supply expands there be additional ways that that will turn vaccines into vaccinations. But let me start with next week. You know, our focus for next week is planning and preparing for that Pfizer vaccine that I described. Importantly, that vaccine has to be stored in what are called ultra-cold temperatures. So, when it's in transit that means it has to be in a special box that has dry ice to keep it at those ultra-cold temperatures. There's a temperature sensor in that box to make sure that it doesn't get too warm. And there's also a GPS tracker, so that the manufacturer knows exactly where each box is at different points in time. So, the way that it works is that the manufacturer, in this case Pfizer, generally from a facility in Kalamazoo,

Michigan, from what we understand, will send these boxes out across the United States including to New York City. They'll be shipped via different ways. FedEx, UPS, sometimes airplanes, you know, sometimes trucks. And all of those will go directly to the hospitals that have ultra-cold storage in New York City. There are 44 of those that have the ultra-cold freezers this week that covers a total of 54 hospitals where the vaccine will actually be accessed next week. So, this actually eliminates any middlemen. It goes directly from the manufacturer to that place where it will be stored, the hospital where it will be stored. And from that point our hospital colleagues have been drilling and preparing to understand how it will be taken out of the box into the ultra-cold freezer and starting the process of actually unloading the vials to turn them into the injections that will eventually be vaccinations. So, that's the picture that I can paint at this point in time. And as we get more and more information, we'll be sure to share that with you.

**Mayor:** Excellent. Thank you.

**Moderator:** Next is Shant from the Daily News.

**Question:** Yeah. Good morning, everyone. I wanted to ask a few questions related to homelessness. The advocacy group Campaign for New York Housing is saying that the City's homelessness population has reached 20,000 for the first time ever. Mr. Mayor, just wanted to get your comment on that milestone –

**Mayor:** Shant, wait a minute. I'm confused by your question. Could you please say it again? You said the homeless population, I'm confused by the way you're framing it.

**Question:** Yeah. So, I mean, the population of people sleeping in shelters, Safe Havens, the total – that population is at, or I'm sorry. I should say that the shelter and Safe Haven population is at 20,000, according to Campaign for New York Housing. If I have that correctly –

**Mayor:** Yeah, something's – respectfully something's wrong with that number. I have not – I don't understand how 20,000 relates given the numbers that we have had for years now. So, I'll be happy to come back to you when I see that. But 20,000 as a number, it doesn't make sense to me given the numbers we regularly report.

**Question:** Yeah, I'm sorry. I believe it's homeless single adults. New York Housing has unveiled a grim and record-setting milestone among homeless single adults. For the first time single adults sleeping each night in DHS shelters has climbed to more than 20,000. So, it's 20,210 is what they're saying. Sorry that I misspoke initially, if that makes sense. Can you provide some comment on that and just bring us up to speed on what's being done to get this population into housing?

**Mayor:** Thank you, Shant. Yeah. When you say it's specifically single adults, that makes more sense. I can't speak to the exact number without talking to Commissioner Banks and his team to confirm that, but I can only say this to you – clearly, there's been an uptick in the number of single adults in shelter. At the same time, there's been a great reduction in the number of families in shelter. And Shant, this is something that, really, if we're going to talk about homelessness, and we should, we need to look at the facts and the whole picture. The sad reality after the Great

Recession was that more and more, we saw families, whole families going into shelter. We saw people going into shelter, people who were going to work each day, but could not afford to make ends meet in New York City. And that's all about the cost of housing and how so many people were not being paid enough for the work they did. This was true when I came into office. We had already seen that had happened for years. It has continued. The number of families really were what drive an increase in – what was driving an increase in shelter population. Since COVID, that has actually reversed. The number of families coming into shelter has substantially reduced. Thank God that families are able to find some alternative to shelter even with these tough times. And obviously, that means a family is, you know, talking to three, four, five people. So, when a family comes in, that has a very big impact. We're seeing less of that. We are definitely seeing an increase in the number of singles, and we've got to address that constantly.

So, it's all the tools we have, first and foremost, Shant, to get people off the streets, which is the thing that is the worst of all worlds. Anyone who is street homeless, that's where this massive outreach effort has continued, even during the pandemic. That is all part of the Journey Home strategy, intensive outreach, a number of City agencies working together. They've continued to get people off the streets, into shelter. We want people off the streets into shelter, but then you're right, we want to get them onto whatever they need. Some people from street homeless, they need mental health services, they need substance misuse services. Obviously, everyone ultimately needs affordable housing or supportive housing. Over the course of seven years, that's 125,000-plus have gone into shelter and then to permanent affordable housing. That number continues to grow and we will make sure it grows. So, yes, more single adults, but we have a pathway to get them to affordable housing and the services they need. And we will continue to deepen that. Go ahead, Shant.

**Question:** Yeah. On a related note, Politico is reporting that 20 of your former staffers, including two deputy mayors have written to you criticizing the handling of the single homeless men at the Lucerne Hotel saying the plan to move them to a new site Downtown doesn't help them. Have you seen that letter? Does it get you to reconsider the plans for the men at that shelter? Just any comment on that?

**Mayor:** No, and no, I have not seen the letter. I will read it. I respect my colleagues a lot. I just very much have reviewed this situation carefully. I've had conversations with Commissioner Banks in detail about this. We are doing the right thing to stick to the plan we announced three-plus years ago, to focus on getting people to purpose-built shelters, with services and support. That's what we're going to be doing. We never intended to be in more hotels. We need to get out of hotels. That is our plan, that has been our plan. And I really appreciate the compassion and the goodness of a lot of people on the West Side who care for these individual homeless folks. And I only asked them to apply that same love and compassion to the homeless folks who are in the two other hotels in the immediate vicinity that will still be there. So, this move is going to happen, but there's still other folks in need who could use their warmth and their support during this holiday season. Go ahead.

**Moderator:** Next is Andrew from WNBC.



**Question:** Good morning, Mayor, and everyone on the call. We've seen that when it comes to COVID treatment some important folks like former Mayor Giuliani, President Trump have been able to access treatment that regular folks can't get. So, I'm wondering what assurances or promises you can make to New Yorkers that folks of influence won't jump the line and get the vaccine before those in the priority order.

**Mayor:** Andrew, you're a wise man. We've had this conversation in the last 24 hours because I share that concern deeply. We will not allow people who are privileged to jump the line. We're not going to allow people to get the vaccine, unless it is their time to get the vaccine. So, for example, someone who does not have preexisting health conditions, someone who's younger, someone who's not a frontline health care worker or a first responder should not be getting the vaccine now. Their time will come. We've got to protect those who serve us and those who are most vulnerable. And we will enforce that rigorously. The whole health care system and the whole government reality, the federal, state, city government, everyone agrees on the priorities. And those priorities will be respected and enforced. So, I would say to anyone who thinks that they're privilege puts them ahead of other people in greater need, that's not going to happen in New York City. Go ahead.

**Question:** On a different topic about schools. When you announced the decision to reopen, you said that schools would be providing five days of in-class learning. We got the percentage yesterday. I think it's 161 schools are offering it now. That's only 20 percent of the elementary schools that reopened. So, what do you say to parents about that? And are you concerned that you won't be able to deliver on what you said?

**Mayor:** I'm not concerned about that because we will be able to deliver. I would say, first of all, Rome wasn't built in a day. We said, this is something that's going to be phased in over the coming weeks. We're retooling the whole situation based on first of all, the facts of this week, we're very, very clear. This is the week that anyone who is signed up for blended learning, current blended learning or hasn't declared what status they're in for their child, their child needs to show up in school this week. If they don't show in school this week, then we're going to reach out to the family and say, we're going to put you into all remote, unless you have something to tell us that would change that, we're going to assign your child to all remote. That's going to adjust the numbers for each school.

Obviously, also, we've been very clear, every student has to have a consent form for testing or a medical exemption. This week, we're going to get the clear numbers that are going to allow us to make the adjustments in each school and get us in position to do five-day-a-week education. In some cases, some schools that's going to be for every single student. In other cases, it's going to be for a lot of students and there'll be prioritized according to which kids have the greatest need. It's going to – we have the schools that are there already this week. More schools will be in that position, the following week, and the following week, and then when we come back in January, we'll have the whole picture resolved. So, I'm very confident you're going to see schools with five-day-a-week education overwhelmingly in this city. Go ahead, or we did two. Okay, next one, sorry.

**Moderator:** Next is Nolan from the New York Post.

**Question:** Good morning, everybody.

**Mayor:** Hey, Nolan. How you doing?

**Question:** I'm well. A follow up in the vein of Andrew's question. In November you said that you were going to speak to the process by which kids will be able to pick their high schools soon. Said that it would come in the next week or two. You said that you're going to have an answer on it soon. You said that a decision needed to be made quickly. It's now the 9th of December. We still don't know how kids are going to pick their high schools, how the admissions process will work for screened high schools. When are we getting the plan?

**Mayor:** This month. Obviously, Nolan, we had some additional challenges in the last few weeks that we have to focus on with the coronavirus, but this month we'll announce all the admissions approaches. Go ahead.

**Question:** Yeah. I take that, you know, obviously it's been a heck of a year for everybody and a heck of a nine months, but there are a lot of parents who are very frustrated – but there are a lot of parents who were very frustrated about the fact that their kids are trying to figure out where they want to go to school and by all the delays. Can you speak to the frustrations of parents trying to figure out where their kids are going to go in September?

**Mayor:** I have been through it myself in non-pandemic times. And I have to say to all parents, I understand the admissions process is filled with anxiety and concern even when there isn't a pandemic. Of course, people are feeling so much. We have to get it right, given that we're dealing with entirely different realities. And there's been many, many more challenges than during a normal school year. We'll announce the plans this month. We'll get to work. Everyone will be able to ultimately know their admissions decisions for their children in time. We want to get it done quickly. I do hear the concerns of parents. We'll have the plan out this month. Go ahead.

**Moderator:** Next is Aundrea from WCBS.

**Mayor:** Aundrea, are you there?

**Moderator:** Aundrea? Do we have you?

**Mayor:** Aundrea? You may be on mute if you're out there.

**Moderator:** We're going to go back to Aundrea. And next we're going to – and next we're going to try Dan Krauth from ABC-7.

**Question:** Hi, Mayor. Good morning. Thank you for the question.

**Mayor:** My pleasure, Dan, how you doing?

**Question:** I'm doing well. Thank you, Sir. You mentioned contact tracing earlier. We've been trying to get some contact tracing information, our viewers want, in regards to where is this virus spreading? For example, bars, restaurants, gyms, etcetera. We reached out to NYC Health + Hospitals, and they referred us to the State who then referred us back to the hospital. And this has been going on for a few weeks now. Is this information you receive on a daily basis and why isn't this information released to the public regularly so families can help make healthy decisions?

**Mayor:** Dan, listen, I'll start, and I'll turn to Dr. Chokshi. I want to make sure we're clear. First of all, I'm sorry, if there was any situation where the information wasn't provided to you clearly. We'll fix that today. Dr. Long, who runs the Test and Trace Corps, has spoken to this issue repeatedly right here at this table. He's talked about the thing we've seen, the most identifiable piece of the puzzle has been from travel. We've seen some situations related to indoor gathering, some related to bars, restaurants, etcetera, but we've talked about, and the Governor has talked about, the main driver appears to be family settings, multi-generational homes, family gatherings, not so much being out in a community settings. However, all of this interrelates and not all of it is perfectly traceable. When there is a specific problem, if you said, well, hey, I want to know if a bar, a restaurant, a store in my community has had a problem, you'll know it because the Health Department follows up on that situation and if they determine that something has to be closed, they close it. So, you'd know, just like we have closed schools when we determined they need to be closed individually, stores, restaurants, that's what the Health Department does. So, Dr. Chokshi, maybe you can speak to that.

**Commissioner Chokshi:** Sir, you covered most of the high points. Let me just add two more from my perspective. First to build on the last thing that you said, it's exactly right. When we do, do investigations and we find that there are clusters we take action. That's the most important thing. Both at the level of the entity, whether it's a business or an organization, but also very importantly for the individuals who are involved because we know what it takes to break the chains of transmission of this virus, and that's to get people to isolate and quarantine as quickly as possible and supporting them in doing that. So, that's the first thing I would say. The second point is just to not – for us all, to not miss the forest for the trees here, with respect to the actions that we need to take. We know household spread, smaller social gatherings, larger gatherings, you know, outdoors and indoors, these are the things that both in New York City and around the world have contributed to the spread of the coronavirus. We have to avoid those things as much as possible but also make sure that we are wearing our masks particularly indoors as the weather has become colder and maintain our distance. We've said these things for months I know, but we have to maintain discipline because we're in a riskier environment as cases increase. So, it's actually the time for us to redouble our efforts in that vein.

**Mayor:** Go ahead, Dan.

**Question:** What is the success rate contact tracers have had citywide? I know you mentioned a number a week ago when we spoke last, but when it comes to reaching out to people in the city.

**Mayor:** Dan, it's actually been growing, it's been a high level of success and growing. Folks are being very responsive. We'll get you the exact latest number. Dr. Long spoke to it last week, in

fact, or even a few days ago. We've been really impressed. We have the biggest strongest Test and Trace Corps in the country. Thousands and thousands of infections have been prevented. And this is really important to understand. Test and Trace is a great concept on so many levels, but let's go to the most basic impact it has. It stops infections from happening. When they go in and they determine that someplace has to be closed that means you are stopping that chain of infection. When they help someone to safely separate from the people around them, they're stopping that chain of infection. The incredible work that's being done with Take Care, to get folks into hotels or get them support so they can safely separate a home, that means they're not circulating with other folks. So Test and Trace has stopped thousands and thousands of infections from happening. We're seeing more and more New Yorkers engage Test and Trace, provide the information, help them find their contacts if they've been in close contact with someone. And, you know, it's really striking to me that people want help. We're seeing more people asking for that Take Care help, those hotels and those deliveries of food or medicine at home. Folks understand more and more that Test and Trace is there to help them. And they are engaging at a high number, but we'll get you the exact number. Go ahead. Back to – we still have Aundrea out there?

**Moderator:** We're going to try Aundrea?

**Question:** Hello. Can you hear me now?

**Mayor:** There you go, Aundrea. How are you doing?

**Question:** I'm great, thanks. Sorry about that earlier. Mr. Mayor, starting with you, during the spring your administration was criticized for not distributing information in a timely manner deep into communities of color that were hardest hit. So with that in mind, what is the specific plan to reach out to those same communities, especially immigrant communities to build trust about the vaccine and to convince people to get it?

**Mayor:** Aundrea, I want to say thank you. It's a great question. Important question. And I'll start and then turn to Dr. Varma and Dr. Chokshi. First of all, I want to say when the virus came on in the beginning we were all trying to make sense of something that we'd never dealt with before on this scale. And our focus of course, was protecting human life and protecting the hospitals that went under immediate strain. We soon learned from experience just how horrible the impact of the disease was and how much disparity was reflected in the way the disease played out in our communities. The hospitals we focused on reinforcing were also those hospitals serving communities of color, serving immigrant communities. And thank God we shored them up and provided them help so they could make it through. And they did. But we learned how important it was to go out to communities and we started that right away. And that was one of the building blocks of the Test and Trace Corps. We now have a Test and Trace Corps of almost 5,000 people, hired from the communities most affected by the coronavirus, speaking the languages of those communities, working with community-based organizations that have the trust of the people. That's why Test and Trace has been so successful. So that point you make of how have we adjusted from what we've learned? We made those adjustments back in May and June and put this huge corps out in the field. And it's had a really important impact on keeping people educated, up-to-date, engaging them, getting them to testing. Of course, on top of that moving

testing where it's needed most into communities who need it most and working with partners to make that happen. That's been a huge X factor here, positive X factor. So that's been the game plan.

Now, making sure people trust the vaccine. It's the same basic game plan, Aundrea. Heavy emphasis on being out in the communities, Test and Trace Corps, working with local health care providers, working with trusted community voices, working with faith leaders. But on top of that, we have some of the doubt that's been sowed about vaccines. We have to overcome that. That's going to take a lot of public information and showing people it works. And showing people that other people in their community are getting the vaccine and it's helping. That's the basic game plan. Let me let Dr. Varma and Dr. Chokshi jump in.

**Senior Advisor Varma:** Sure. I can start. Yeah, just really echo what the Mayor has said. We fully understand that trust is something that you earn, but that you can lose very easily. And you have to continuously work on earning it. As it relates to the work that we've done on contact tracing, this has been absolutely vital to us to understand what are the best ways to reach people who need services? And how do we counter misconception? We've learned that through all of our hyper-local responses in very diverse and different communities. And we're continuing to learn, with all of our partnerships that we have with community organizations. Now vaccines is one step above that because with the tests, of course you're just getting a specimen taken from your body. With a vaccine people are having something put into their body to prevent infection. So we know from a long history of having a very successful vaccine program in the city that we need to continuously work with people to understand what their concerns are. And speak to them honestly, and frankly about how those concerns are addressed. So we're going to continue to learn as we do this. And our partnership with communities is really the basis for all of it.

**Mayor:** Dr. Chokshi.

**Commissioner Chokshi:** Thank you. Well, this is such an important question. And first, I just want to say Mr. Mayor, I appreciate your commitment and your passion for this. That has been very clear in your charge to us to make equity as important a pillar as the science and the operations of turning vaccines into vaccinations. And so it will be central to everything that we do in our vaccine rollout. There are three ways in which we're thinking about this. The three ways are access, uptake, and outcomes. So first with respect to access, just as Dr. Varma said, it's about ensuring that we meet patients where they are, in the neighborhoods and communities where they live. Including the priority neighborhoods that have been a focus of the Mayor and the administration. With respect to uptake. It is about making sure that we have the humility to recognize that people think about medicine and health care in different ways. And the humility also to rely on trusted messengers who already exist in those communities. And ultimately it's about outcomes, you know, making sure that vaccination leads to what we all are aiming toward in 2021. Which is the end to this terrible pandemic and to avoid all of the preventable suffering that we have seen.

**Mayor:** Thank you very much. Go ahead, Aundrea.

**Question:** So just to continue on with that, what could that look like? Does that mean that you're going to be asking pastors and community leaders to publicly get the vaccine or possibly offering the vaccine in community health centers and not just hospitals? More concretely what could that look like once it's available to the general public?

**Mayor:** I think you just described it beautifully. Yes. The answer is yes. There's going to be a heavy emphasis on working with community health providers. And yes when leaders, community leaders qualify, making sure – meaning that it's their priority group is up for the vaccine, making sure that their communities see them taking the vaccine. I think it's incumbent upon elected officials, leaders of all kinds when it's the right time, according to our health care leadership for us to get the vaccine according to the priorities. We have to do it. We have to show we believe in it. So absolutely you hit the nail on the head. In terms of the role of community health care providers, clinics, and individual providers in the distribution, why don't you help people understand some of the approach you're going to take?

**Commissioner Chokshi:** Absolutely and thank you. And I speak about this as someone who has practiced as a primary care doctor, you know for many years. The trust that you can build with patients by taking care of them in that longitudinal way is irreplaceable. And we have to rely on that with respect to what we're planning to do with the COVID-19 vaccine. Community health centers, the smaller you know, one and two doc practices where so many people continue to get their care. The places where people have built up relationships over time, that's where people are going to look to, to understand what does my nurse and my doctor think about this? And that's where we have to equip them, not just with the vaccine, but with the information and the messages that will make a difference in terms of getting it to the communities that will most benefit and the people who will also most benefit.

**Mayor:** Thank you. Go ahead.

**Moderator:** We have time for two more. First, we're going to go to Katie from the Wall Street Journal.

**Question:** Hi, thank you, good morning. My first question, or actually both are related to the vaccine distributions. I'm curious, I know that obviously there's a standard of who is essential and who is prioritized. But then within that level of prioritization, how do you kind of figure out who gets it first? If there's an essential worker, I don't know, Mayor, if you kind of get a priority as the Mayor or other elected officials? I don't know if you'd explain that a little bit more?

**Mayor:** I'll start and pass the Dr. Chokshi. It's a good question, Katie. First of all, look, we know that the doses are going to come in and they're going to come in fast and furious. Let's be clear. We expect a lot to come in and come in quickly week after week. And we're talking about more than one type of vaccine, which is great, to give us more supply. The health care leadership are going to make the decisions. They're going to decide by categories and then work to quickly as humanly possible, reach everyone in that category. When you talk about for example, nursing homes. A number I've seen is about 100,000 being the universe of everyone who's in a nursing home as a resident, everyone who works in some form or capacity in a nursing home, in any kind of shift. When you add everyone up for New York City, it's about 100,000 people. That whole

group of 100,000 people needs to be reached. We're going to move that very, very quickly. That's a very finite universe. So for elected officials and other leaders, the doctors will decide when it's our time. The important thing is to work through each category of people, but move it fast and then go onto the next priority category. Go ahead, Doctor.

**Commissioner Chokshi:** Sir, I'll just add one point on this, which is the prioritization is something that there is active conversation, but then also guidance from both the federal government through the CDC, as well as the State government. You know, with respect to the specifics of those different prioritization phases. Thus far the CDC advisory committee has issued recommendations for what's called Phase One A. As the Mayor has already described that covers high risk health care workers and long-term care facility staff and residents. But hasn't yet issued recommendations beyond that for the rest of Phase One, which will include essential workers and other people who are most susceptible to the virus. And so we will follow those conversations as they evolve and stay in close coordination across the multiple levels of government on this.

**Mayor:** Go ahead, Katie.

**Question:** Thanks. And my second question is, are there any New York City hospitals, particularly Health + Hospitals facilities that don't have the cold storage capacity? And are they in, you know, parts of the city I guess, where hospitals are known to be already at capacity?

**Mayor:** Dave will speak to that, but also the point about if the hospital doesn't have it, how you're supporting them in the same geographical area? Go ahead, Dave.

**Commissioner Chokshi:** Thank you for the question. So first all 11 of the New York City Health + Hospitals sites do have ultra cold freezers. So they will have the ability to store the Pfizer vaccine. The universe of acute care and specialty hospitals in New York City is a total of 55. 44 of them have the ultra cold freezers on site. Ten of them are part of systems or will otherwise have access to the vaccine through those 44 points. And there is one hospital that will not have access to the ultra cold freezer but is planning to start when the Moderna vaccine, the one that requires normal freezer storage is available. So we expect within the first few weeks of the rollout that all 55 hospitals will be able to start vaccinating.

**Mayor:** And Moderna is a week or two weeks behind Pfizer in terms of deliveries to New York City? Just confirm that?

**Commissioner Chokshi:** That's our understanding at this point, Sir. Yes.

**Mayor:** Right, but this month, for sure, from what we know.

**Commissioner Chokshi:** That's our understanding.

**Mayor:** Good. Okay, go ahead.

**Moderator:** Last, we'll go to Abu from BanglaPartika.

**Question:** Hello Mayor. How are you?

**Mayor:** Good, Abu. How are you?

**Question:** Good, thank you so much. Mayor, I have a question which is you know, as we know the New York City has a budget problem, but there is the minority business community, they're suffering because of the COVID. And is there any plan you have, near future or if we get the stimulus, to help or any kind of stimulus for the minority business or the people who are suffering you know, in terms of their business, because of the COVID?

**Mayor:** Yeah Abu, such an important question. Very quickly look, the stimulus has to be really substantial. It has to help people directly. It helps to help small business owners, help people who rent their apartments, help building owners. There's so many specific things that we need in that stimulus in addition to helping city and state governments to recover and continue to provide services. So we need a stimulus that is being talked about right now to include as much of that as possible. And then we need another much bigger stimulus when President Biden takes office, the president-elect takes office. So point one, but the second point is what we're doing through our Task Force on Racial Inclusion and Equity to maximize the amount of government resources going to the 27 communities that were hardest hit by COVID. Which are Asian communities, African American communities, Latino communities, immigrant communities, they all need to see additional support for businesses in those communities. And the efforts we make through our minority and women-owned business initiatives to move government spending to where it's needed most, is going to be a crucial part of that. So we have a number of things we've announced, more are coming to support those businesses and help them through to when the vaccine is fully distributed and our economy is coming back stronger. Go ahead.

**Question:** Second question is, you know, still the people are dying by COVID. And [inaudible] you know, they're having the funeral. And we are having to report that the people are going to funerals, they're infecting the other people. Do you have any specific message to the people who organize the funeral, how they can handle the funeral, how they control the crowd?

**Mayor:** I'll start and turn to Dr. Chokshi. Abu listen, any family that is in pain, that is mourning, that has lost a loved one, I understand. We all have that same impulse to gather together the way we normally would have. But we have to understand how much that could turn into something really bad for the people we love. And the last thing we want to do is mourn one loved one, and then end up putting another loved one in danger. So what I'd say to everyone, to the funeral homes, to the houses of worship, to the families is either hold off the memorial service until the vaccine has been distributed. Or if you are going to have a service, please very, very carefully observe the social distancing and the mask wearing. And keep the numbers very limited so everyone is safe. And you know that the loved one we've lost would have wanted that, they'd want everyone to be kept safe. So please follow those rules very, very carefully. Dr. Choksi you want to add?

**Commissioner Chokshi:** Sir what you said is exactly right. I'll just acknowledge what a tragic you know, thing that families have to experience with respect to funeral services. We know this



virus hitches a ride on relationships, and unfortunately doesn't respect even those settings that are so tragic. Yes, the most important thing is exactly what the Mayor advised with respect to, how to do a service safely. Which is to keep the numbers as small as possible, really limited you know, only to the family members that you can maintain a very rigorous distancing of at least six feet and ensure that people are wearing masks at all times. Those are the ways that we can prevent more suffering from coming from those settings.

**Mayor:** Thank you so much Doctor. Look, everyone, as we conclude today, let's be thankful that we have a scientific community and health care professionals who gathered together with extraordinary purpose and speed and created the vaccine we're discussing today. This really is historic. And even though we have been confronted with one of the worst crises in generations, we've been confronted with so much pain and suffering. We also have to recognize that we've seen one of the greatest responses from our health care community and our scientific community, creating this vaccine. This is something that's going to change lives and protect people very quickly, starting this month in this city. And we should take heart from that. It's also a reminder that none of us gets there alone. We're depending on those scientists and health care professionals, we depended on our health care heroes and our first responders in the height of this crisis. And we are depending on them again. But they're also depending on us, they're depending on us to wear that mask, to practice social distancing, to avoid those indoor gatherings, to not travel for the holidays. If you honor all the people who are serving you, you can serve them by following those basic smart guidelines and keeping each other safe. New Yorkers have done an amazing job. You really should be proud of how far we've come. One last big battle before we are able to defeat this scourge once and for all, but everyone needs to be a part of it. And I know you will be. Thanks, everybody.

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