

THE CITY OF NEW YORK
OFFICE OF THE MAYOR
NEW YORK, NY 10007

FOR IMMEDIATE RELEASE: May 7, 2020, 9:30 AM
CONTACT: pressoffice@cityhall.nyc.gov, (212) 788-2958

TRANSCRIPT: MAYOR DE BLASIO HOLDS MEDIA AVAILABILITY

Mayor Bill de Blasio: Well, good morning, everybody. This morning, I want to talk about something that really is quintessentially New York. Something that really is the spirit of this place and who we are, and I can summarize it with a simple sentence – New Yorkers do not lack for confidence. We are a people who believe in ourselves. We believe in our city. We have a certain energy in a certain spirit that is renowned all over this world and we need that now more than ever. That essence of who we are is what's going to see us through this fight. I'll tell you something, even a pandemic, even the worst health care crisis in a century, even an economic crisis that only rivals the great depression. Even with these things happening at the same time, I have not seen New Yorkers lose their confidence. Talk to a lot of people, all walks of life. I'm not going to say there are no doubting Thomases, but overwhelmingly New Yorkers tell me they are confident that we're going to come through this and come through this strong. They are confident about the role they are going to play in fighting back this virus and bringing this city back to life.

Now, this virus, understandably, this whole crisis we've gone through, it's not surprising if it gnaws at that confidence. If it sows doubt, that's normal, that's human. Who wouldn't feel some moments of doubt in the middle of something this difficult, and that uncertainty that comes with it, a disease that still is not fully understood by the global medical community. A disease that we all wonder about in terms of our own personal lives. Even though we're confident by nature as New Yorkers, there's uncertainty pervading this whole experience, and the most essential question we all ask is have I gotten this disease already or am I going to get this disease. If I have gotten it or if I do get it, do I put my family in danger? The people I love in danger? The uncertainty is directly related to the lack of testing, that's been the reality from day one, and this has been the central problem in this crisis. The lesson we have to take from this as not only New Yorkers, but as Americans, our nation wasn't in position in terms of testing, and we can never let that happen again. But what we can say for sure is that every day more and more New Yorkers are getting tested. Every day there's a little more confidence, because there's more answers person by person, and they're starting to add up thousands, and tens of thousands, then hundreds of thousands. And this is going to give us a clearer picture of what's going on. It's going to help people have more certainty in your own lives. And won't happen overnight, but it will happen steadily from this point on, and we'll be moving in the right direction. So, to feel our natural confidence as New Yorkers and to answer those uncertainties, the key is more and more testing, and that's what we intend to do.

Now, there's two kinds of tests. The diagnostic test known as the PCR test. That's been the main part of the discussion from the very beginning of this crisis, and we still need to do a lot of that.

And then there's the antibody testing. Remember, there's a clear difference. The PCR test, the diagnostic test answers the simple question, do I have this disease right now? It does not answer what happened in your past. It does not answer what happens in your future, but it does answer clearly, and consistently do you have the disease right now. It allows us to take the actions right now we need to take in a test and trace approach. The antibody test is, really refers to the past. It asks the question, did I get exposed to this disease in the past? And it therefore helps you understand the obvious answer of your own experience. If you did get exposed in the past, were you able to beat it? Well, you know it's, it's a good sign when you know your body's been exposed to this virus and you obviously came through it, it's a good sign. Does it tell you everything? No, and we'll always put that disclaimer on it. There are different kinds of antibody tests, some more accurate than others, some more specific than others. And even the best antibody test does not guarantee that you can't get the disease again. Seems that it's unusual for someone to get the disease again, that's what we've seen so far in our actual experience, but it is not a guarantee. What it does tell you is something and right now we could use all the certainty we could get, we can use all the information we could get. Any step in the direction of more information is better, and if someone knows they've been exposed before, that's helpful. That gives people more confidence to know they came through it. It's also really valuable in terms of the emerging treatment using plasma from folks who have been exposed before. That's a positive development that we want to support more and more, and more and more testing for antibodies does that, helps that along, and it's also part of answering the bigger questions about this disease. The more people test, the more our doctors and scientists have a body of information to help us really understand the disease better and beat it back. So, we are going to proceed energetically with antibody testing in this city as we also build up the PCR testing capacity at the same exact time.

Now, I talk to you before about the effort focused on our first responders, and our health care workers. That is a joint effort with the federal government, with the US Department of Health and Human Services and the centers for disease control. It will reach 140,000 health care workers and first responders, everyone making their own choice. If they want to participate, they will get individual results, but it'll also help us with the larger research we need to do. 140,000 New Yorkers will be tested. It will start next week at hospitals, firehouses police precincts, correctional facilities, and we're going to move that rapidly over the next few weeks ahead.

But now, a new announcement today. Beyond the testing that we'll do for our heroes, we're going to open up antibody testing to a much bigger group of New Yorkers. So, more and more people have the opportunity to get a test that will give them some information, some certainty as we fight ahead. So, as we do this, I want you to remember every time someone gets an antibody test, it's helping them have information. It's helping all of us to have information, so we're really killing two birds with one stone. The individual gets something they need, but the health care leadership, the scientists, they get the information they need to do the research better to answer the questions about the disease. So, real virtue in this. On top of the 140,000 for the first responders and the health care workers, we're adding another 140,000 for everyday New Yorkers. Combined 280,000 people will get antibody tests in just the next few weeks in New York City. Over a quarter million antibody tests will be given. These are numbers that really start to add up, even against the size of a city as big as ours. This initiative, the additional 140,000 that will be available in communities across this city, comes through a partnership with BioReference

Labs. They've been an extraordinary partner with our public hospitals, Health and Hospitals. They've been a key part of our response to the coronavirus from the beginning. I want to thank the CEO of BioReference Labs, Dr. John Cohen, who's worked very closely with the City throughout. The first survey will involve 70,000 New Yorkers. It will start next week and continue through the month. It will be repeated again in early June. So, we'll get these 140,000 additional tests done between the remainder of May and the beginning of June.

We're going to work with five sites initially, but then we will be adding, and the goal is to focus on people in the general area of these test sites. I want to be very clear. There's so many people in the city. Any time you set up a test site, tens of thousands of people live very nearby. We want to focus on where the test sites are, not having to have people travel a long way to get to these tests, but we'll keep adding sites as we go along. So, the sites will be in the Bronx, in Morrisania, in Brooklyn and East New York, and Manhattan, upper Manhattan, Staten Island in Concorde, and Queens in Long Island City. 1000 tests per site every day. Again, 70,000 tests will be given in the space of about two weeks, and then we'll repeat that again.

Now, how does someone get this test? You get it by appointment. Again, the priority given to the surrounding communities and the hotline for making the appointments will be launched this Friday, tomorrow. Now, how does it work? You give basic information, because remember this is to benefit you as an individual, but also to get us information on what has been happening with this disease so we can fight it. So, people will be asked demographic information, employment information, very important. We want to understand how the disease has hit people in different parts of our economy, in different parts of the life of this city. It's a simple procedure. A nurse takes a blood sample, you get your individual result back in 24 to 48 hours. So, even though this is the kind of thing, this testing and the PCR testing is what would have made so much of a difference early on, and could have fundamentally changed the history of this disease in this city if we had had it early. It still helps us now to learn more and more, and obviously to give more and more New Yorkers the confidence in knowing their own situation. So, we will keep you posted as more and more details come out, but I'm looking forward to between the two kinds of testing becoming more of a norm in this city every day that people are getting to those tests and we're getting a better and better picture, and it's all going to contribute to our efforts on testing and tracing, which are going to be developing rapidly in this month.

Okay. Next thing I want to talk about is how we continue to deepen our response to this disease using every tool at our disposal. We already know some things – we want all the research we can get, but we know some things already and we've been very open about the very sad fact, the very troubling fact. That this disease tracks with profound health care disparities that we already knew in our City and it's only made them worse. So, when we came out with the information on disparities, when we showed the just painful raw truth about what's happening with health care disparities and impact of the coronavirus, talked about a four-point equity plan to address the needs of communities have been hardest hit. The fourth point in that plan regarded tele-medicine and we are now going much farther with tele-medicine than we have ever gone before through our public hospitals, through Health + Hospitals and the focus again will be on the communities that have been hardest hit by this disease. So, tele-medicine had become increasingly common in private health care, but not as much in public health care— before this crisis, now Health and Hospitals will be doing it on a massive scale. So, first phone clinician, this initiative, very

straightforward and it's one of two key things that we are now putting into play. Phone clinician is about what you do individually, it means that, you know, as a New Yorker, if you don't happen to have your own doctor, if you don't have a place to turn to get an answer to a question that you can pick up the phone for free and get a health care provider from our public hospitals and clinics to answer your questions. We want people to get much more guidance even though more and more information is out there about the coronavirus. And again, New Yorkers have listened because you can see and how much progress we made in this City, that's because of your work, that's because you listen, then learned and acted on what you heard. There's still so many questions every hour, every day people have questions, the best thing is to know there's someplace to turn where you can talk to a medical professional and get answers, particularly in communities have been hardest hit. Helping people get the truth about this disease, helping people navigate tough situations, the most obvious being if you have symptoms, what do you do? Or if you have symptoms, how do you deal with keeping the right distance from other family members? Or if you test positive, what are your choices for how to isolate and quarantine? It's really helpful for everyday New Yorkers to have someone to turn to add any hour of the day that they can trust to give them real answers, not just a piece of paper or something they see online, but an actual human being. So, the free hotline is 844-NYC-4NYC – again, 844-NYC-4NYC, and this means that anybody, anytime you need to come pick up that phone and get answers and never leave their home, never have to go through the hassle or the challenges that come with going outside. We keep telling everyone, stay inside the maximum stand possible, therefore, tele-medicine is part of how we give people confidence they can get the help they need without ever leaving their home. Now this initiative is growing all the time, so far, in the midst of this crisis, we've had about 90,000 calls and the result is that over 90 percent of the people make that call, never need to leave their home, get the information they need, get the care they need through the tele-medicine process, and it works, we want to keep building on this. Now, our goal, all of us is to drive back this disease and not need as much help, but we know we've still got a road ahead here. So, our goal is to keep building up this apparatus, we expect to do at least 4,000 calls a day, and if the demand is there, we'll keep building more. So, in the month of May, we're ready to handle 120,000 calls, and again, if this becomes a popular tool, more and more people make the decision to pick up a phone and that is helpful to them, especially again, those who do not have a private doctor or a facility that are already working with that they can rely on. The more people use it, the more we will build it, but expect about 120,000 calls in May – that's going to make a great impact on the lives of those people and their whole families that they have access to that help.

Now, the second piece of this strategy is tele-visits and this is a different approach because this gets initiated by the health care institution. So, think about all those H+H hospitals and community clinics, a lot of them of course have a deep constituency in their neighborhoods of people who have been coming to them, are connected to them. In this instance, this means that the provider reaches out to the patient to check in. Obviously, the vast majority of people are not going to normal appointments right now. Now, previously in our Health + Hospitals facilities, particularly the community-based clinics, tele-visits were pretty rare, almost none, the whole idea was show up in person. Now already during this crisis, there's been 60,000 tele-visits initiated by Health and Hospitals clinics, this is going to deepen, this is going to be a big part of the strategy going forward. So, the goal is to ramp this up to at least a 16,000 per week starting in June. We believe that at least 80 percent of people who need through our clinics for now can do

it through tele-visits. So, it'd be aggressive program by the clinics to reach their patients, check in with them, make sure they get whatever appointments they need. Of course, if someone needs to be seen in person, they still can be, but the goal is to the maximum extent possible, lean on tele-visits reach a lot more people a lot more quickly and always give people the option of getting health care without having to leave their home. Now, look for our public health care system, this is opening up a whole world of possibilities because this is now helping us understand things that weren't used so much before, but might be really helpful not just during crisis, but as we go back to normal might allow us to reach a lot more people. So, this is an example, something we're going to refine more and more while we're fighting back this disease, but I think it's going to be a crucial part of our restart and recovery and making a City that works better and is fairer. If we can perfect the use of tele-medicine in public health care, we're going to reach a lot more people and we're going to reach them faster. That could be an example of something that comes out of this horrible crisis that actually makes us a better city in the future.

Now, this crisis has been tough on everyone, but we know not only have some communities been particularly hard hit, we know some New Yorkers are going through a particularly tough time as individuals and this case I'm referring to homeless New Yorkers. People live on the streets, those 3 or 4,000 people at any given day who are permanently homeless. We have been trying intensely in recent years to bring them in and in this crisis again, new ideas are coming to the fore that are actually allowing us to reach people in whole new ways. And I'm going to report something to you that's pretty amazing today. You know, last night was only the second night in which subways were closed down in those very late night hours for cleaning and therefore all passengers had to leave the subway system and that meant that our Department of Homeless Services and our outreach workers and specially trained NYPD officers could be there in places where there were a number of homeless folks to help them out and offer them a helping hand and offer them a place to come in and get the support they need. Yesterday we talked about very, very impressive progress that was made just on the first night, but of course the question is, okay, well what's going to happen the second night, the third night? What does this really tell us? Well, the results on the second night were even better than the first night, which is very encouraging. Last night, our outreach teams engaged 361 homeless New Yorkers coming out of the subways when they shut down 218 of them well over half accepted help. Again, this is the entire core principle of doing this outreach work to constantly open that door. For those who are homeless to realize there's something else that could be done to make their life better, there's a different way that could pursue, 218 out of 361 accepted help, that meant 196 went to a safe haven or a shelter, 22 went to a hospital. Remember a lot of homeless folks out there need medical care, it's about helping them feel the confidence that they can come in and get help. This is an amazing result, now we've got a long road ahead, but this is an amazing result. Again, permanently street homeless, New York City federal studies show year after year in recent years, somewhere between about 35,000 and 4,000 people. When 218 coming in one night and then we hope and we pray that with a lot of good work, the vast majority of them will stay in except long-term shelter. And then affordable housing and all the support they need to deal with whatever challenge they have, whether it's a mental health challenge, a substance abuse challenge, whatever it is. When these kinds of numbers mean that that many human beings who had lost their way now get a chance to live a better life, that's an extraordinary story. So again, thank you to all those extraordinary outreach workers out there night after night, no matter what's going on, they're there. The NYPD officers who got trained to do this work, who are devoted to this work,

thank you. Thank you to the MTA, great partnership going now, I think this also is something that could lead to a whole different approach in the future that will make life in the City better for everyone, particularly homeless New Yorkers.

Now, in this crisis, there are some other people who have been really vulnerable and this is a sad additional story within the story and it's not something we can ever turn away from to save people from the disease to knock this disease back to save lives. We have obviously had a policy of shelter in place, stay at home and it's obviously working. For the vast majority of people, it's about keeping them safe and keeping all of us safe, but there are some people who deal with a very different reality at home or home is not a safe place. And it is a painful reality and it has been before this crisis; we've seen some troubling trends that we must address aggressively. We've seen much domestic violence, too much gender-based violence. We can't accept that. We need people to stay home for everyone's safety, but we also have to find a way to disrupt this problem because it's unacceptable – unacceptable that anyone would be in danger in their own home. We do not allow that in New York City. So, there's always help available literally on a moment's notice. If anyone's in danger, not only will the NYPD come to help and they've put immense resources into fighting domestic violence, but anyone who needs shelter will get it instantly - no questions asked – 24/7 anyone who's in danger, we will help immediately get a roof over their heads and be protected. Anyone who feels endangered, there's a particular hotline for people who are facing this threat - it's 800-621-4673 – 800-621-4673. You know the person on the other end of the line will understand your circumstance and will act immediately to get you help. But responding to the crisis is not enough, we have to prevent domestic violence from happening to begin with. The NYPD and so many community organizations, so many providers, advocates have done extraordinary work finding new ways to fight back against domestic violence and gender-based violence. We need to find even more preventative strategies in this crisis and even more ways to protect those in danger. I'm announcing a COVID-19 response taskforce on domestic and gender-based violence, taking some of the leading minds and some of the people who do the most important work in this city to fight this scourge, bringing them together, working with our Mayor's Office to End Domestic and Gender Based Violence. We'll bring together about 20 of the leaders in this field, convening them right away to figure out what else we can do and what's working any place else in the country of the world that we can bring here. But the bottom line is, we're just not going to allow this to happen. No one should be suffering because they're at home; no one should suffer in silence. No one should be afraid that the place that's supposed to be their safe harbor is actually a place where they're in danger. We cannot have that in New York City. This taskforce is going to help us to come up with new solutions.

So, a couple more things and, and when we talk about new solutions, I want to talk about the challenge that this city faces. In fact, cities all over the country, all over the world are facing as we fight back this disease, as we restart and recover and then work together to find a better path for the future. So many cities have in common a lot of realities and we are increasingly working together to solve problems, to figure out what works one place that might work another place; to share ideas and approaches all as one because we face the same exact challenges. There's not a real sense of difference when you're talking city to city. I can tell you talking to mayors around

the world; everyone has a common language in effect because we deal with the same issues and needs of our people. And we all know that as we come back, as we recover, we're going to be facing some huge challenges ahead, not just from this disease, but from what's happening all around us in this world. This disease has pointed out disparities and has also pointed out the danger of not being prepared for the bigger challenges ahead. So, we have to figure out all of us, all the cities of the world have to work together particularly to address profound dangers to health and safety when it comes to our climate. We've got to reduce pollution; we've got to reduce emissions. We know if we don't band together, global warming will overtake us and global warming is the kind of threat that literally everyone shares. It's a horrible danger, but let us pray it is a unifier and maybe in this moment as the world has fought this virus together, there's been some signs that the nations of the world might come together in common cause - the cities of the world are doing that already. So, we, New York City have been part of an organization called C40. It's a group of cities around the world that are committed to ambitious action to fight global warming and now C40 has laid out a set of resiliency principles for the cities of the world to follow in terms of coming back and coming back better. We've signed on to these principles because they give a good, very basic roadmap of the things we all need to do together and the things we're going to help each other do. And that means a focus on not just bringing back the employment we had before, but creating new green jobs. It means investing more in our people, in the health and safety of our people, including in communities that never got their fair share. It means reducing pollution, reducing emissions everywhere; obviously focusing on communities that have borne the brunt of pollution and the health care impacts of pollution. These principles are really helpful in guiding our work. They're going to be the kinds of ideas that our Fair Recovery Taskforce works with to broaden them into more and more specific game plan over time. But what's actually inspiring in this moment is I've said to you, as New Yorkers, as individuals, you should never feel alone your city's here for you. We also should not feel alone because all the cities of the world are banding together to fight these problems and to find solutions together. And that gives me a real sense of hope.

As we wind this down, I want to take an opportunity to offer some thanks and it's amazing as you've heard this week, there are many days and weeks designated to thank the people who serve us and are there for us, but those days and weeks don't always get all the attention they deserve. In this pandemic, there's a real spotlight on the people who are our heroes, the first responders, the health care heroes, the essential workers. So, you probably didn't know this before, but you should, it's National Correction Officer's Week and these are heroes who don't get their due. It's a tough, tough job. I've spent time in our correction facilities talking to our officers. They have a very tough job. It's thankless, it doesn't get the acclaim, but it's another crucial part of how we make this city work and how we protect people. Our correction officers have to show a lot of agility, a lot of creativity in doing the work they do because remember, it's not just the work of public safety, it is the work of redemption. The entire concept of why we call it department of correction is to help people come back from their mistakes, never see the inside of a jail cell again and our correction officers do amazing work to achieve that kind of goal every single day. So, to everyone at the Department of Corrections, our Correction officers, all the employees at Department of Corrections – appreciate what you do. It is not easy in normal times; it's been a lot harder during this pandemic. It's been a tough, tough time for all of you, I know, but you keep

showing up and you keep making sure everyone is safe and you keep doing that work of redemption. And I want to thank you and I ask all New Yorkers, if you know anyone in your life who works for the Department of Correction, please give them a special thank you this week because they do so much for all, all of us. We don't get to see it that often, but it's, it's something we depend on a lot. Please give them a real heartfelt thanks.

Okay, now time for the daily indicators and again, I'm looking forward to us working together, continuing that strong disciplined approach you've all engaged in to get these numbers to go down together steadily. Today we have progress, it's not perfect progress, but it's damn close. So, this is a good day. I want to see even better days and I want us to string them together cause that's our pathway to opening up, reducing restrictions, and taking the steps towards the restart. So, let's go over to the indicators. Number one, daily number of people admitted to hospitals for suspected COVID-19 - that is down from 109 to 79. Isn't that good to hear? Only 79 people, now for those 79 people they are dealing with real challenges. I never want to belittle, even if a single person has to go into the hospital for COVID-19, but thank God compared to where we were only 79 people as of the latest measure. The daily number of people in ICUs across our public hospital system for some suspected COVID-19 that has gone down as well – from 599 to 567. Again, still 567, that's a lot of people, but it has gone down noticeably and that's great. Now, one thing went in the wrong direction, but I will say thankfully only by one percent, so you know, it's still a good day. Percentage of people tested positive COVID-19 citywide – up 15 percent to 16 percent. Overall, right direction – let's dig in and go farther.

Let me offer a few words in Spanish –

[Mayor de Blasio speaks in Spanish]

Okay, with that we will turn to our colleagues in the media and please let me know the name and the outlet of each journalist.

Moderator: We'll now begin our Q&A. As a reminder, we also have Dr. Barbot, Dr. Katz, and Senior Advisor Jay Varma on the line. First question today goes to Andrew Siff from WNBC.

Question: Hi, Mayor. Good morning. Good morning everyone. Hope you're all doing well.

Mayor: Yes, good morning, Andrew. How you doing?

Question: Hanging in there. My question is about the testing. You have set out benchmarks for testing before and then acknowledged that those benchmarks, despite the best intentions were not met. So, I'm wondering, first of all, what assurances can you give New Yorkers that, that 140,000 number for first responders and 140,000 number for everyday New Yorkers will actually be met? And then assuming you do hit those numbers what is that information supposed to tell us?

Mayor: So, the 140,000 that the City of New York will do with BioReference Labs, I'm totally confident that that will get done on the schedule we've laid out and the details will be filled in, in the next few days. The 140,000 that we have been putting together with the U.S. Department of Health and Human Services and the Centers for Disease Control, I feel good about it because all of the steps have now come together and the mechanical process has been agreed to. And I expect that testing to start next week. It still involves the federal government. I think, Andrew, you would agree, it's been an interesting ride dealing with the federal government during this crisis. But, on this one, things have been moving very steadily in the right direction and we've gotten confident answers from the federal government about the ability to have this up and running for next week and to hit those numbers. So, the 240,000 pools I feel good about – that will get us 280,000 of the antibody tests right there in addition to all the other testing that will be going on. Again, it is a part of the puzzle. If we had – Andrew, if we had the perfect world, it would be a totally available, universal PCR testing, diagnostic testing. If we had the perfect world, that's what would tell us what we need to know, when we need to know it. That's what we should have had in the beginning of this crisis or as close to it as possible. The federal government has always struggled on the PCR testing. I don't understand it. It is the center of the fight. I first called for the help from the federal government on PCR testing on January 24th. I know others around the country did as well. And the reality of the testing is, the test kits – we know what it takes to make a test kit. Now, we haven't even easier way with the self-swab – the self-swab testing. We know what it takes to analyze a test in a lab. These are knowable things. These are things that can be acted on by the federal government. This is another area where the President has hesitated to use the Defense Production Act to the fullest. I don't understand why for the life of me, our country was not prepared for this and we don't make the things we need in the United States of America. And this is absolutely a negative result of globalization, a real indictment of all the decisions made over the decades to ship manufacturing out in the United States. And it has to be reversed, bluntly. And we're leading the way right here in the city by creating our own capacity and as many areas as we can to produce our own things. But still the federal government isn't getting it right on the PCR testing and they still need to, and they still need to use the Defense Production Act, and to get us what we need. But until that day, Andrew, we will do as much of the diagnostic testing as we can and we will do as much of the antibody testing as we can, because both tell us something and both are usable in our test and trace strategy and in our pathway to a restart.

Moderator: Next is Shant from the Daily News.

Question: Good morning, Mr. Mayor. I wanted to follow up about homelessness on the subways. Colleagues of mine who've been on the ground have found a number of homeless people refusing to go to shelters out of fears of contracting the virus there and instead sort of setting up on buses. So, I just wanted to get your thoughts on the [inaudible] that the problem is basically relocating from subways to the buses. My second question would just be if the outcomes you've seen from the subway closures are giving you to reconsider your opposition to calls from some homeless advocates who are pressing for the City to provide single hotel rooms to every homeless person. Thank you.

Mayor: Thank you. Shant, I appreciate the question, but I actually would say that in both instances the results we're seeing in the first two days entirely validate the heavy outreach strategy and the fact that when provided the choice the right way and when there's lots of support there, a lot of homeless people will choose to go into Safe Havens and shelters. This is something Commissioner Banks has been talking about for years. And, again, this crisis and the specific plan with the MTA is putting a point on it, but I remember – I remember the first press conference we did in Tompkins Square Park – and we can get to the exact date of that – when we announced HOME-STAT and how revolutionary it would be to put a huge amount of outreach workers on the task of bringing in homeless folks off the street and just investing whatever it took to gain the trust of homeless folks and disrupt the negative patterns of their lives and give them a better way. And over the last three years, that strategy has been proven and proven improving again, which led to our Journey Home strategy announced in December, to end permanent street homelessness. This new approach is striking to me because it is creating the kind of positive disruption that's causing homeless folks to make that decision to come in. So, no, the results are speaking for themselves. People are going to Safe Havens and shelter. Again, if there's ever a specific situation where our outreach teams believe a hotel is a better option, that's there for them. But we want to help people, Shant. Remember, this is not, like, someone just needs a roof over the head. These are folks who, for whatever reason, their lives ended up bringing them down to the street on a permanent basis, many, many of whom have either a serious mental health issue or a substance abuse issue or both. You can't just take someone like that and put them into a hotel with no support and call it a day. That takes intensive support, which is what Safe Havens do in particular. So, no, I would focus on the strategy we have now. And as for the homeless folks potentially going on the buses, that's something we have to disrupt as well. We have to help people to the better options. The buses, the subways are for essential workers – this is an emergency, that's what they're for. People who need help should get help. So, I am certain we can work with MTA to address that issue and keep maximizing the offer of help. And, as we do, we see more and more people taking it. That's a very good sign.

Moderator: Next is Marcia from CBS.

Question: Mr. Mayor, how are you doing today?

Mayor: Good, Marcia. How are you?

Question: Let me say, I like the haircut. I hope you didn't do it yourself. Anyway, moving on. This is a social distancing question. Yesterday, the family of the 15-year-old involved in that incident and the 7-5 in the Bronx said that police social distancing arrests are the new stop and frisk. I wonder how you feel about that, but also what are you going to do about this? What will the new guidelines be for the NYPD? Are you going to tell them, you know, just not to issue summonses and make arrests, just to give out masks and sanitizers and advice and messaging?

Mayor: Well, thank you, Marcia. First of all, I want to affirm, thank God, I didn't give myself a haircut or the people of New York City would not be able to look at me as I give them these updates. So, I'm happy you like it though. That's a good sign. No, this is – look, I predicted someone would try to make this parallel and there is no parallel. I feel bad for any family that is suffering in any way. And there was one particular incident on the Lower East Side that was just patently unacceptable – I said it, Commissioner Shea said it, the officer's been modified. It bears no resemblance to what policing is supposed to be in this city. It has nothing to do with the coronavirus, it's just inappropriate activity by an officer. Remember, the vast majority of officers their job, do it well, do it respectfully. The vast majority of interactions between our police and our community go well and you never hear about them. So, the number of times that people are talking about a video that's troubling is still a very, very rare occasion. That doesn't mean we don't have more work to do, a number of leaders of communities of color have said to me they are concerned and they want to make sure that we are actually continually doing the work of leaving the past behind because the past was absolutely unacceptable in the way communities of color were policed. But we have made a huge amount of progress over these years and we're going to continue to. What happened with stop and frisk was a systematic, oppressive, unconstitutional strategy that created a new problem much bigger than anything it purported to solve. This is the farthest thing from that. This is addressing a pandemic. They're addressing the fact that lives are in danger all the time. By definition, our Police Department needs to be a part of that because safety is what they do. Now, the vast majority of interactions around this pandemic are officers reminding people what to do, asking them to change their behavior. People, they respond. I've had this conversation with Commissioner Shea and Chief Monahan – the vast majority of New Yorkers, when an officer – not only police officer, any of our enforcement officers says, hey, I need you to create more space; hey, I need you to put that face covering on, people do it. Some incidents have occurred that have nothing to do with social distancing and we should not forget that there's an entirely different activity going on. Police still have to fight crime and they still have to address conditions and neighborhoods when neighbors call in with a complaint. But no, we're going to make the protocols clearer and clearer, but it's that hierarchy I've talked about several times. The thing we're going to be particularly intolerant of is larger gatherings, those are just downright dangerous. When people are too close together, we're going to help make sure that they create more space. We're going to help make sure people wear face coverings – very consistent with what our police do to protect safety in general. But we're going to keep refining the protocol to make it clearer for everyone involved. It's a whole new world we're dealing with. We never had to deal with this in the past. This is a new world. It'll take time to get it better and make more sense of it, but I'm confident that we'll get it done.

Moderator: Next is Julia from the Post.

Question: Good morning, Mr. Mayor and everyone else on the call. Two questions for you on the DOE. One on the fact that the DOE still hasn't presented its final middle and high school admissions plan. Don't you think that parents and students deserve know how seventh graders are going to be applying for high school next year? And then, I'm looking for you to respond to remarks by Chancellor Carranza at a panel discussion recently. He questioned the ethics of screened schools and told fellow administrators not to "waste a good crisis in pursuit of a change."

Mayor: So, the specific – I don't know the specific panel discussion you're talking about, so I can't respond to comments. I haven't seen the context. We've been clear in this administration that we are reevaluating the admissions process across the board and we're asking important questions about what is fair and equitable, going forward. Many things are going to be reevaluated as a result of this crisis. The whole concept I've been putting forward, that we are not just going to bring New York City back with the status quo that was there before, but we're going to try and make a series of changes that favor equity and fairness. We were already in the process of doing that when it came to school admissions. So, certainly, the screened schools are being reevaluated and we'll have more to say on that in the future. On high school admissions – look, everything has been disrupted here on a seismic level. Of course, with each passing day we're able to do more and more to clarify to students and parents how things are going to go in the future. So, admissions certainly will be addressed and will be addressed soon. But I want to remind everyone that we've had to remake the entire school system in the last few weeks, to create online education on a massive scale for the first time and the focus in recent weeks has been making sure that was up and running fully and getting kids the technology they needed. I remind everyone and anyone, if there still is a child that doesn't have that free iPad who's a public-school student, call 3-1-1, we'll get it to them right away. And also, for children with disabilities in our nonpublic schools, religious and independent and private schools, we will get them a free iPad as well, and, again, any family can call 3-1-1. But our focus has been getting the education system up and running in this new approach, making sure we're focused on high school seniors, because that's the most sensitive piece of this equation, helping everyone who can graduate to graduate, and starting to build a pathway to the summer and then next year. But as we're able, we're filling in more of the blanks, and we'll certainly have a lot more to say on admission soon.

Moderator: Next is Juliet from 1010 WINS.

Question: Hi. Good morning, Mr. Mayor. How are you doing today?

Mayor: Good morning, Juliette. Are you going to present me with another problem to solve today?

Question: No, maybe tomorrow.

[Laughter]

Mayor: Okay, good. You're taking – take one day off once in a while, okay?

Mayor: But, listen, now, thank you for the acknowledgement on the encampments. That's really – we're hearing about more locations, so I'll keep you posted. But my questions today are as follows. What options are you reviewing to avoid furloughs and layoffs? There is a lot of concern about that from working New Yorkers. And the other question is, we had Yankee President Randy Levine on 1010 WINS talking about plans for the possible resumption of baseball. He's hopeful there could be some kind of opening at Yankee Stadium. Now, I know you're a Boston fan, but given that baseball can be a very good thing for the city, do you think you'd find your way there for a first pitch?

Mayor: Yeah, you know, Juliet, I am a huge baseball fan and I'm getting to the point now – you know, I just saw that ESPN is going to start broadcasting the South Korean baseball and I'm like, I need baseball. I think a lot of us need baseball, I'll watch it anywhere, any country anyhow. But look, I would love nothing more than to see baseball come back to New York City and I would happily go to Yankee Stadium and be part of that first game. It would be a joy. And the same with Citi Field for the Mets. I don't think that's coming soon. I think we have to be honest about it. I think it would be – the day that baseball comes back to New York City is going to be an extraordinarily positive moment, and I will celebrate with Yankee fans and Met fans alike. But I think we need to set our sites in a realistic place. As we think about restarting, and we see this from the good examples around the world and the bad examples – and the good examples around the country and the bad examples – you start in smart, purposeful ways. You start where you can do the maximum social distancing. You've got to be careful – the more people you put in one place, the greater the danger until you're really knock down this disease. So, the kind of chicken and egg here, Juliet – you want the perfect time to really reopen big events is when the disease has really been beaten back to, you know, next to nothing. So – and the danger with big gatherings, especially, is that could be one of the things that propels the disease back and gives us that boomerang we really don't want – the example of New Orleans and Mardi Gras – you know, big gatherings cause problems. Could you have baseball without fans or with, you know, a limited number of fans? Yeah, there's different things to discuss, but I want to really emphasize we're not there yet. And I think those bigger gatherings and bigger events are going to be one of the last things that will really fit the equation as we restart. And this one I put in the better safe than sorry category. I know I want to see baseball come back badly, but I want that the day that baseball comes back, everyone is really confident that it's the right thing to do. So, when it comes back, I will unquestionably be there joyously with all other baseball fans, Yankees and Mets alike.

Quick point on the encampments. Again, those are not acceptable in New York City. So, Juliet, if you find others, we want to hear about right away or anybody – anybody watching now, if you see homeless New Yorkers setting up a semi-permanent place to live, we will not allow that. Just call 3-1-1, we'll get NYPD and homeless services and Sanitation over there to clean it up immediately. We need those reports so we can make sure that nothing like that happens. On the furloughs and layoffs, Juliet, this is the last thing I want to do – literally, the last thing I want to do. And the key to avoiding furloughs and layoffs is in the hands of the President and the Congress. So far, the conversation I had with Speaker Pelosi on Sunday suggests that the House will present a stimulus four that is very respectful of our first responders, very respectful of our health care heroes, very respectful of our essential workers, and very respectful of cities and states that will help us fully back on our feet. That's what we need. Senator McConnell has been

disdainful of helping out states and cities in need. The President has gone from silent, to now he's throwing all sorts of perverse conditions on – he's literally talking now about wanting to get a tax break to the wealthy for Capital Gains Tax as a precondition for helping our first responders and our health care heroes. That's unbelievably wrong. It's inappropriate, it's inhuman. It's literally – imagine a rich guy wanting to take care of other rich guys rather than wanting to take care of cops and firefighters and doctors and nurses. It's unbelievable. We're seeing things in this crisis that you can't even believe are coming out of the mouth of the President of United States.

So, I would argue that everyone who wants to see that stimulus so we can be made whole so we can keep our whole workforce intact and needs to raise their voice, whether they're a Democrat, Republican, whoever you are, raise your voice, and our heroes need to raise their voices to remind everyone in Washington of the fact that we need them to be on our payroll serving people. They deserve to be doing the great work they're doing and having the confidence and the security they will do it for years and years to come. But Julia, if you take \$7.4 billion dollars out of any budget, which is exactly what we're dealing with now, and even worse without a stimulus, we'll lose more money because there won't be a restart. There'll be lost revenue more and more the state, if they don't get the help, they're going to cut us more and more. This situation goes from bad to worse really quickly. Right now, any government anywhere missing \$7.4 billion would have to make a lot of tough choices, but it gets a lot worse if we don't get the stimulus. So it's the last thing I want to see for lows and layoffs, but if we don't get to help, we're going to be having to make a lot of really, really tough and painful decisions here in this city.

Moderator: Next is Henry from Bloomberg.

Question: Hello, Mr. Mayor, how are you doing today?

Mayor: Good, Henry, how are you?

Question: I'm good. You know, I saw a 1969 Mets-Baltimore game the other night. Two to one McNally versus Koosman. I highly recommend it – second game of the World Series. My question has to do with this report and the New York Times today that says that a large number of cases nationally emanated out of New York City. New York City was sort of the source of spreading the virus nationally to an extent that was previously unrecognized. I'm wondering whether you or the Health Commissioner has any thoughts about this, whether, you know, what does it say, if anything about federal policy, about city policy and about the nature of this virus?

Mayor: Well, Henry, I haven't seen the specific reporting you're referring to, but I can say this much. The fact is that we know this virus came from multiple parts of the world into the United States. So, of course, the question will be what was done and was not done to stop the introduction into our country. And then the second question has to be what was done or not done to stop the spread once it got here. And that comes back to testing. There's no question in my mind had the testing been in place that we asked for the end of January of it'd been place in February, this entire scenario for the city would have been different and much, much better. So that to me is the story of what happened here. There were choices made or not made that could have profoundly changed the trajectory of this entire disease in the city and this country. But after that, you know, I think it's clear when something is introduced at the kind of level it became

introduced, of course it was going to spread from one place to another and now we're dealing with the results of that.

The lesson we have to take from this is if we ever dealt with anything like this in the future is to be really clear about what would need to be done to keep a disease out of this country, but most especially what would need to be done here to stop it once it got here with every forceful federal response and local response available. But I would also say while we're trying to analyze what happened, how about we get the federal response right now? Again, two things the federal government really needed to do in this crisis: testing and support the cities and states right now, failing still on the testing and failing to step up to support the cities and states. So we'll look back and we'll have plenty of time to analyze what was, what I'm shocked by Henry is the same mistakes are being made right this moment. And this will determine whether this disease continues to spread or not. And I think we need to take every opportunity to stop at dead in its tracks now. And we can only do that with really full federal support. We still don't have it.

Moderator: The next is Abu from Bangla Patrika.

Question: Hello Mayor. How are you?

Mayor: Good. How are you doing?

Question: Good. Thank you so much. I have a question, which is you express the frustration and anger a day before yesterday about, I think yeah, about the President who is not helping New York City. What is the alternate plan if you don't get any support from federal government? And then number two, you know, the city is closed, so might be in the future city will be open. What is the plan? How will be the style of [inaudible], restaurant and bar nightclub? You know, I mean if it's open then how it will be authentic – same like crowded or it could be a different kind of shape. What would be the new, you know, the style and system?

Mayor: Great question, Abu. I thank you for that.

So I think it's fair to say the restaurants, bars, nightclubs are one of the most sensitive pieces of this equation. We just talked earlier about Yankee Stadium, Citi Field, you know, there's really big gatherings. That's probably the single most sensitive piece of the equation when you bring huge number of people together. But the restaurants and bars, nightclubs combine lots of people and usually very limited space. So, there's a lot of good ideas around the world now about how you could bring them back properly. I can't give you the exact timing. We're not there yet. We will say much more in the coming days about what we are seeing in terms of the sequencing of each part of our economy and the restart. This is part of why we have our advisory groups helping us now who represent each of the industries of the city, give us real world advice about what they're going through, what they need. But what I can tell you is there's going to be different times for different types of businesses and different conditions for each type of business and it's going to be steady and careful. So when you think about what we were used to just a few months ago with restaurants and bars and everyone's super close together and it's part of the energy we love about this city, that's not happening right away to say the least restaurants and bars we've got to help him back. But figuring out when that can begin is something we have not

finalized, but we'll say as soon as possible. And then inevitably with some initial restrictions. So different ideas are out there about a capacity within a restaurant and bar. How many people could be allowed in different ideas about restaurants compared to bars or nightclubs? That's a whole discussion. They may not be treated equally because of different realities. Outdoors is an interesting and promising possibility to rely on more of the service being outdoors. You still need precautions, but that's an interesting option we're looking at. Face coverings, gloves you know, a number of specifics to make the experience safe. Now we have to see that that can be done in a workable manner. And also, for each business they have to decide if that's a set of conditions they want to reopen with or whether they want to just keep focusing on take-out and delivery. But we will put together a plan that gets very specific about the when and the how and the conditions and the precautions. And that's going to grow with time. But don't expect anytime soon that kind of crowded bar or restaurant that we knew before. It will be here one day, but it will not be soon.

On the question of what we would do with no stimulus. It's just tragic, horrible math. I want people to think about \$7.4 billion. What a staggering number that is. And you know, a lot of people look at the city budget like, oh you could do this, you could do that. You know, \$7.4 billion means a whole huge swath of things have to be cut. And again, if there is not a stimulus and if it's not a very generous stimulus, the situation gets worse because the lack of stimulus hurts, restart and recovery. Then there's less revenue. So the problem we have now, the \$7.4 billion becomes a much bigger problem if the state isn't made whole. They've already cut us \$800 million on top of the \$7.4 billion. So really right now the hit, we've taken a \$7.4 billion plus \$800 million, which is \$8.2 billion. There will inevitably be really substantial additional state cuts. It just gets worse and worse and worse and then we have to think about all sorts of things just to balance a budget. By law, we must balance our budget. So it is a very tough picture and it should motivate everyone to fight every day to get that stimulus and to put pressure on the President and Senator McConnell. Look, if the President of the United States had said, we got to do stimulus four, we got to make the cities and states whole, we got to replace their loss revenue. If he said those three sentences, it would have been done already and we would be much more strongly back on the road to recovery. This is just a sick game that the President will not open his mouth and say, we will make the cities and states whole, that's all he has to do and the Senate will follow. But he's playing politics. So, everyone who cares and needs to raise their voice. And the more the voices come from, you know, a whole range of our society, obviously Republicans and Democrats and people from every walk of life in every industry, the faster we will get this done.

Moderator: Next is Gloria from NY1.

Question: Thank you Mr. Mayor. I want to talk about this antibody testing effort you're announcing specifically what's so much debate and discussion going on around how these antibody tests are being done and what the results actually show the problem of positives and some of these tests not being properly vetted by the FDA. So, what is the guidance, that's my first question, that the city is using? What is the test to be specific? And my second question is about homeless engagements last night. Out of three out of 361, 218 accepted help is the City of recording what happened to those other people?

Mayor: So that's a really good question, Gloria. And we'll have Commissioner Banks follow up with you. So again, on the 218, 218 out of 361 is a stunning figure to begin with because I've been watching this, this situation over the last three years with the HOME-STAT initiative and again, well over 2000 people have come in and stayed in and remember that that base we work from, this is again, as Commissioner Banks talked about yesterday, this is not everyone who's ever been out on the street panhandling or someone who's homeless very temporarily or someone who lives in a shelter. We're talking about the essence, the most painful, tough part of the problem is permanent street homelessness, 3,500 to 4,000 people at any given moment. A horrible tragedy we have to fight. Against that backdrop, well over 2000 people in the last three years have come in, stayed in, never gone back to the street.

So, 2,000 over three years is actually pretty amazing compared to the universe we're dealing with and compared to the history of the city where there was never anything like that, they never even got close in previous years to bringing in that many people. This is the single most intensive effort to reduce street homelessness in the history of the city. 2,000-plus in three years. I'm telling you, you heard yesterday's figures last night, 218 in one night. Now that doesn't mean everyone will stay in permanently of course, but if you had 196 accepted shelter, and 22 went to the hospital, that's an amazing start. So, I want to emphasize just how promising that is and the more we do that, the more people who decide to stick with it, you're going to see that street population shrink.

On those who did not accept help, we keep coming back. Remember, think of how individualized the approach is, God forbid you or I were street homeless. The outreach workers would know us by name in the vast majority of cases and they be continuing to work with us coming back time after time, dozens of times, hundreds of times even trying to win our trust, trying to get us to come in, figure out what we need to come in. So Commissioner Banks will fill in the blank for you. But I would pretty much guarantee that some of those people last night who weren't willing to come in, we're known to the Department of Homeless Services and they're going to keep engaging them and just keep coming back cause the persistence is working. That's what was the missing link in previous strategies. The persistence works here.

On the antibody test. We will give you all the specifics of which test we're using. As I said, we're working with BioReference Labs on the city test. The federal initiative with the CDC and HHS will be done with Quest Diagnostics. So, to really leading a well-respected testing entities, we will get you exactly which test each is using. And, and with it will of course be guidance for everyone about what the test tells you. What it doesn't tell you. We've been explicit about this. The test doesn't tell you everything. It tells you something and it's not a perfect measure. It does not mean you don't have to keep practicing social distancing and using PPEs depending on your profession. But it gives you some confidence, some knowledge, and it helps in other ways as terms of our bigger fight against the coronavirus. So, we'll give that information to everyone who gets tested and we'll give them their own results and make clear to people what kind of follow-up makes sense depending on their results. But we want to be very transparent about what the test is, what it means, what it doesn't mean, and what the results are – we're getting as we go along.

Moderator: Next is Mark Morales at CNN.

Question: Hey everyone, how you doing today?

Mayor: Good, Mark. How are you?

Question: Good. I wanted to follow up on the social distancing questions and specifically about what was discussed yesterday. I know we were talking about releasing data as far as someone's is go for the month of April and I wanted to know when is that going to happen? When are you, when is the city going to be releasing the summons data related to social distancing for the month of April and if you've seen the data, what does that show you?

Mayor: So, I have not seen it. I expect to see it very shortly. It will be released for sure. I want to remind everyone – thank you, I've been given the update. It will be released tomorrow. That is certainly shortly. So, I'll see it today. It'll be released tomorrow. Here's what we know. We know there's 8.6 million people. We know we've been at this crisis about two months and we know that in very few instances has there been a need to give summonses. That's the good news. There's certainly been sometimes we had to give summonses, when they were needed, they were needed. But we will give you that breakout. It's still such a small number that I think it tells us something, but it doesn't tell us anything nearly as important as the fact that there has been intensive effort by the NYPD and other agencies to educate and to enforce. And now also more and more to give out the face coverings. And the vast majority of that is worked. And the reason we know it's worked is because we can see it in our daily indicators. We can see how much progress has been made with the social distancing. We can see it with our own eyes the way the vast majority of new Yorkers are applying social distancing and putting on the face coverings. So vast majority of cases this is working, but we will give you that data tomorrow. It'll show the facts as they are, but it'll also be against a pretty small sample size because summons has not been something we've had to do too much, but we won't hesitate to do it when we need to.

Moderator: Next is Yoav from The City.

Question: Hi Mr. Mayor. I wanted to ask you about the subway sweeps. Do you have a sense for what percentage of the homeless people at the end of those train lines are being engaged? And, and what type, it's kind of a similar to Gloria's question about what type of accounting is it for, what happens to them? But you also mentioned that it sounded like offering a hotel room was one of the options that they can be given in certain cases. Can you just say in which cases and have any of the homeless people actually moved to hotel rooms from the subway?

Mayor: So again, I'll have a Commissioner Banks give you more detail, but I can give you just an overview. Let me ask from Freddi Goldstein that just if we have yesterday's numbers too on number engaged – yeah, that'd be helpful. On your first question, Yoav, so again, I've said it, I'll say it again. 361 were engaged last night by our homeless outreach teams and NYPD, 218 of the 361 accepted help, 196 one to shelter 22 went to the hospital. So, when we say accepted help, it means that they actually left the scene with our teams and were taken someplace else where they could get help. So a huge percentage, the remainder did not accept help, but again, we know a lot of them and we'll keep working on them. And I need people to understand that these are human beings. Each one is different. You know, you don't win every time, but you keep at it, you do get a lot of people to move. And I think we're seeing more and more in this crisis, more and more

street homeless people are choosing to accept help, and I think it's in some ways related to all the changes that are happening and all the disruption of our normal life pattern, it's actually opening up a lot of homeless people to the possibility of accepting help, and that's a good thing. To compare to the night before, 252 were engaged and 139 accepted help.

So high levels of engagement both nights and in both cases a majority accepted help and that's a very striking result. Again, there seems to be in my humble opinion overfocus on the hotels. The hotels seem like in many of our questions here, I think the hotels are being put on a pedestal, that's just not the reality, and so let's try and get it clearer here. Hotels work for some things, they don't work for everything. When it comes to a homeless person who needs help right now, this is different than if someone's in a shelter setting, let's just try and get this tight here, someone's in a shelter setting, congregate shelter we've talked about, and there's a need for more social distancing, that's a case where we are using hotels. We've been doing it more and more to make sure there's enough space and we choose according to the person and what they need, and some people do better because they can handle a hotel situation. Other people can't so easily handle a hotel situation. Many are folks who need a lot of support and being in a shelter with fewer people can be the better and healthier option, and that's what's worked on every single day.

The folks who are street homeless and have been spending a lot of time either on street or subway or both are in many cases dealing with really extreme problems, and the goal is not to just take them and leave them alone somewhere, but the goal is to get them the intensive help they need. That's the entire concept of the Safe Haven and that's a concept has been proven now for three years to work. Think about, Yoav, someone who is street homeless with a very high interconnection to serious mental health issues and or substance misuse. They need a safe place. They need a lot of support. They need a lot of medical care. They need mental health services and or substance misuse services. It's not snap your fingers, you know, instant gratification, they were living on a subway or a street and now they're in a building and they're fine and they're going back to normal life. It is a process. It takes time and energy, but we've seen a lot of success. So you don't just take someone and drop them someplace. You take someone someplace where they can get the intensive help they need as part of their rehabilitation, as part of getting them to a better place. That's the whole reality. As I said, if there's an instance where a hotel for any particular reason makes more sense, of course that option exists, but when you're talking about people coming off of the streets, I don't think that's the typical option. The typical option is Safe Haven or shelter. And again, Commissioner Banks will get you more later on.

Moderator: Next to this, Jeff Mays from the New York Times.

Question: Hey, good morning, Mr. Mayor. Just two questions. Some of the city's black elected officials, police reform groups, even some of the police unions are warning that the social distancing enforcement is dangerous, untenable, and it's only a matter of time before some sort of tragedy occurs. Are you concerned about one of these incidents becoming something tragic? And then secondly Commissioner Shea I believe suggested that when the weather gets warm there may be a plan to limit the number of people can go into parks. Is that something that you are working on or have discussed with the Commissioner or plan to put into place?

Mayor: Thank you, Jeff. Yes, on the second piece, yes. Commissioner and I have had extensive conversations with members of both our teams and other agencies as well. And there are certain parks where the – just the configuration of the park lends itself to overcrowding and we're working on strategies right now to address that and we'll have more to say on that tomorrow. But there's no question that in a kind of toolbox of approaches that we could use to help make sure that social distancing works. It – we've got some parks that are just, the way they're set up is it's just too easy to have crowding. We can't let that happen and we have to limit the number of people going in. And we'll, again, we'll talk about how we're going to do that. And it's not that many places honestly, but wherever that is the case, we're going to work with a protocol to do that. Well it will take some experimentation. It'll take some effort to make sure it works, but I think it's a good direction.

On the first part of your question, look, this is our job to avoid these tragedies, and the reason that I do this work, and I know it's true for Commissioner Shea and so many people here, is to fundamentally change things. We have fundamentally changed policing in New York City. There's more change that has to be made, but before we came here, policing was based on a very punitive approach, heavy reliance on stop and frisk, heavy reliance on arrest. There was not a value put on deepening relationships between police and community. There was not a value put on retraining and we've been doing all these things and we're going to do a lot more. We've already trained the entire police force in de-escalation. We obviously put body cameras on every patrol officer. The entire strategy now is neighborhood policing and building relationships with communities. We have de-emphasized arrest to a huge degree, let alone getting rid of the vast, vast majority of stop and frisk. Nothing has changed in this crisis. The whole mission is to protect people's lives and avoid the tragedies of the past.

We have a new threat that we have to put front and center and this is where I parked company from the PBA and some of the activists as well simultaneously, and I'm very comfortable parting company from both, with all due respect to them. The way you keep people safe in New York City is to use the finest police force in the world to protect people. That is a fundamental truth and when confronted with the biggest crisis we've ever known, we're not going to sideline the NYPD. We're going to use the NYPD to the fullest, but with smart protocols, smart training, figuring out what works and doesn't work, and I am not making my decisions based on a very few interactions that were handled poorly or went bad. I'm making my decisions based on the millions of interactions that are going right and the fact that clearly the city is moving in the right direction on social distancing and shelter in place and it's making us safer and it's saving lives. We're here to save lives. I'm not going to sacrifice saving lives because people are fearful of something that loomed in the past. I want to protect people in every way, but it begins with protecting them from the clear and present danger of this disease.

So I hear the concerns, I hear the criticisms. There's been some very positive constructive ideas from, for example, public advocate Jumaane Williams or Brooklyn Borough President Eric Adams have talked about bringing in a lot of additional elements of the community to help with educating and supporting efforts at social distancing. I think that's a great idea, we'll have more to say on that soon as well. But no, the NYPD has to lead the way and keeping people safe and fighting this disease is job one and that's what we're going to do.

Moderator: We have time for two more today. Next is Christina from Chalkbeat.

Question: Hi, Mayor. Thanks for taking my question. I wanted to know if there are any plans to systematically test teachers to contribute to being able to reopen school and what role also the subway system will play in reopening schools? Obviously now there are shutdowns and lots of students and teachers rely on them to the class.

Mayor: Very important. I would dare say profound questions, Christina, I appreciate it. On the second one, look, everything's going to interact here. I am a firm believer that we can get to a full reopening of schools in September, but I want to keep giving people a window into my philosophy developed through constantly talking to the experts and looking at the conditions in our city and thinking about how we mix all these factors together the right way. My worldview is its mission critical to get our schools up and running in September. It's mission critical to get our economy started as soon as we can do it safely and then build it out in a safe, careful manner. All of that is going to require the pieces fitting carefully in each case and each step being proven before we take the next step.

So, you're absolutely right. It's hard to have that full reopening of schools without the subway system being more available to our students and the people that work in schools. That says to me how important it is to keep tight with our current strategies. If you value the reopening of school in September and stick with the social distancing, stick with the shelter in place, stick with the strategy that work, put a face covering and all the things we're going to do to keep that working is about driving down the disease and then that hand off, as I said to an intensive testing trace strategy that keeps driving down the disease more. We do that intensely enough May, June, July, August, that's the gateway to reopening schools fully. I would also argue that's the gateway to expanding subway service again and doing so many other things. So yeah, there's a deep interconnection and I think the job is to get those pieces to align through the hard work we're doing now.

On the testing of teachers, we have not obviously defined all the pieces yet of what a reopening of schools looks like, but I think a lot of testing will be a part of it by any definition. And the world I like to get to is one where there's maximal testing available for school communities to give people confidence that they can come back into the school community and really know what's going on and that anyone who for whatever reason still might need to be isolated is isolated in a timely fashion. So what that looks like when that can be done, how that can be done, those are blanks we need to fill in. But will testing play an important role in the restart schools? Absolutely.

Moderator: Last question for today goes to Erin from Politico.

Question: Hi, Mr. Mayor – couple quick questions about the antibody testing. Have you received new information or assurances as to the reliability of the results of these tests? I know just a couple of weeks ago the Health Department put out an alert, essentially saying not to rely on them. There's anything changed between now and then. And then can you just give some more details of who is eligible? You said people in the neighborhood are prioritized, but how do

you define that exactly? And beyond that is, is everyone eligible or do you have to hit other criteria?

Mayor: Thank you, Erin. So, we'll put out the eligibility criteria. Look, we've got a good thing which is testing, but I don't want to see people start to go too far for testing, especially in a world where we're going to start to make it more and more available and more and more places. So I want there to be a sense of localness to this. That's why it's so important to have a priority for residents in, you know, nearby communities. This is to reach a lot of people. It's also for the research purposes I talked about and if you're talking about you need to do thousands of people at each test site, you know, you can do that in so many parts of the city, in a, you know, an area within walking distance of the test site even, you could get enough people to reach those goals. So, I want it to be very local. People will call and reserve, preference will be given to the local area. Obviously there's additional testing and people can do it from places that are somewhat farther, we're going to allow that, but it's not our preference, our preferences for it to be as local as possible just to minimize travel, because we know more and more testing is coming behind it. We're obviously in an intensive ramp up now.

On the reliability, you know, I think it's a great question. I think it's really important that we are clear. This test is not the end all, be all. Said it a bunch of times, we'll say it every single day, it will be – there'll be written materials given to people. There'll be reminders given by the health care professionals. We are not promising people a rose garden here. We're not saying the antibody test is the last word. It's not, but it tells you something. The most effective tests, and obviously we're working with BioReference and Quest Diagnostics to make sure that we have the tests that we believe are the most fine-tuned, if you will, the most specific to indicating that you've had COVID-19 and you've been exposed to it previously. We will announce exactly what those tests are and give information about the nature of them. But we would only utilize as the City of New York, we'd only work with partners who agreed to use a test that we have higher confidence in, in terms of its specificity, identifying the presence of COVID-19 previously in someone's experience. There are some other tests out there that I think are less reliable. We're not going to work with those so we will be clear about reliability levels.

But even with that said, that what we know, what we don't know, what we can know is if you've been exposed to the disease and you came through it, that tells you something, that is helpful. It tells you something about your experience, it tells you something about your resiliency. It's helpful to know. It does not change the fact that you still need to take precautions. We'll keep delineating all those precautions because we don't have the hardest evidence that you couldn't get the disease again. We don't have a lot of evidence that you will get the disease again or it's likely, but we can't say definitively you won't, so we're going to keep telling people to be careful and safe because of abundance of caution. Certainly if someone has been exposed to disease, that's important again for knowing who could be candidates to provide plasma for that kind of treatment for others and the research is the research and having facts about people helps us on a research level to understand disease, as I said, to understand it demographically, by occupation, all sorts of things we need to know.

So, we'll keep putting all those qualifiers on and if someone comes to get tested, they're like, oh wow, you know, if I get a positive it means I don't need to wear a face covering anymore or if I

work in a I don't need PPEs, we'll say instantly, no, you still do. Until this is over, you still do. So we'll keep putting all those qualifiers on, but it still helps. It still tells us something. And again, as we get the final specifics out there, we'll give a lot of detail on which test we're using and what it means and how we're going to move forward.

All right, well everybody, I'm going to finish where I started on a word again, synonymous with our city, confidence. I feel a lot of confidence today myself and I have been taking in so much information from day one. If I was not convinced we were on the right path, I would tell you. You'd be able to see it in my face. I am 100 percent confident that we can and will beat this disease and I am even more confident because of what I've seen you do. There is an interesting line in life between confidence and arrogance. Arrogance is when in many cases you aren't backing it up with the facts. In this case I have confidence and New Yorkers have confidence because we're actually proving to ourselves and to the world that we can change the reality of what's happening in this city and we can beat back this disease. It's happening literally every single day and the indicators go over it each day show it, and you can see it in the life of the city that things are getting better because people did the right thing.

So, there will be doubts along the way. There will probably be some setbacks even, but you don't have to wonder about New Yorkers. You don't have to wonder about our basic nature. You don't have to wonder about our toughness, our strength, our compassion for each other. You don't have to wonder about the ability of New Yorkers to do big things. It's playing out on the great stage right now. It's playing out before our very eyes, and I am confident we're moving in the right direction and please, I know it's not easy. I know it's too long a battle, but we will get through it. Do what you're doing. Do even more. Spread the word about the power of social distancing, of wearing those face coverings, of staying home to the maximum extent possible. It's working. Let's keep going and that's the way back to normal.

Thanks, everybody.

###