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

**Mayor Bill de Blasio:** Good morning, everybody. I thought January 1st was a great day because 2020 was gone and 2021 was here. This may be an even better day. Thank you to the people of Georgia. Thank you for what you have done for the whole country. Thank you for what you've done for New York City. This is amazing. Absolutely amazing. Whole new world of possibilities opens up now for this city and for this country now that there will be 50 democratic US Senators. So, a warm, warm, congratulations on behalf of all New Yorkers to pastor Raphael Warnock, and to Jon Ossoff, you both did an amazing job getting out there and moving the people at Georgia. This is historic by every measure. I want to express my personal congratulations to both of you for all you've done. A special thank you and a special praise to Pastor Warnock, because as many people know he is of course the pastor at the famous and so important in our history, Ebenezer Baptist Church in Atlanta. But before that, he was the youth minister at Abyssinian Baptist Church in Harlem. So, he has served New York City and New York City has put an imprint on him and that is for the good of all. But in making such profound history, Pastor Warnock and Jon Ossoff have done something great for this country and they've also proven Georgia making a statement to the world, sending an African American and a Jewish Senator to the us Senate, saying it's time that everyone be represented and we all work together. Beautiful, powerful statement, but that's just the beginning.

Now a new reality for this city, for this nation, in the leadership of the Senate with Chuck Schumer now poised to lead the US Senate. Brooklyn's own, New York City's own Chuck Schumer could not be better for this city and for this nation and Chuck Schumer working, of course, with Vice President Kamala Harris will lead the Senate and allow us to finally get the support we need to fully recover and move forward as a city, as a nation. Senator Schumer has been tenacious defending the interests in New York City. He feels New York City in his heart, in his soul but he's also been a great leader for this whole country. So, congratulations, Senator Schumer and Speaker Pelosi, just reelected as speaker, I spoke to her yesterday and her commitment to a true stimulus is clear. Her commitment to the cities of America is clear. What an extraordinary thing that the people of Georgia have now created a situation where all of us can move forward, really get the kind of stimulus we need to recover. And I'm going to keep emphasizing when we say the word stimulus, not just a COVID relief or survival plan, which is what we've seen before, but stimulus, it means to stimulate the economy. It means to actually put us back on our feet and move us forward. That's what we need and that's what we're poised to get. I know President-elect Biden, Vice President-elect Harris believe in it deeply. Of course, Senator Schumer and Speaker Pelosi have shown time and time again how much they believe in it. I'm looking forward to calling him Majority Leader Schumer soon, and that's going to be so good for all of us.

Well, everyone, we got some great news there. It's going to change everything. But in the meantime, we have so much work to do and what we're focused on every hour, every day, fighting the coronavirus, turning the tide, and that means making sure as many New Yorkers as

possible are vaccinated as quickly as possible and we are sprinting to get this done. Now, look, what we have learned is the way out of this pandemic is to vaccinate and we need the freedom to vaccinate. This city needs the freedom to vaccinate the highest number of people possible and the most high priority people possible, and that's true in cities and towns and counties all over New York State. We need the freedom to vaccinate because with that freedom of flexibility, we can reach so many people. This is about reaching all the folks who want and need the vaccine and are ready and willing and able. And we've got to remember that in this discussion, the folks who will get the vaccine are the people willing to take the vaccine. We got to reach as many of them as possible. That's another reason we need the flexibility. You can't give the vaccine to someone who doesn't want it. You can only give it to someone willing and we've got to have the ability to reach the next willing person, the next one, the next one.

Now the good news is we've all been pushing for greater freedom of flexibility. We got some good news yesterday from the State and category 1-A, big category of high priority folks, was fully approved as of yesterday, giving us more freedom and flexibility. Now we can reach home health care workers, home health care aides, people who do such crucial work for families all over New York City. I know a lot of these home health care workers I've gotten to know them over the years, many of whom are represented by a local 1199 SEIU. I've known a number of folks who do this work for decades. I honor them and thank them for the work that they do. I remember when my mom was in her last days, the incredible people who helped her and made her comfortable and supported her. These folks do the Lord's work. They need to be vaccinated. Finally, as of yesterday, we've gotten the approval to vaccinate them and we're going to go intensely into that work, particularly through our Health + Hospitals locations. To all the home health workers, home health aides out there, please get vaccines right away. We are ready for you starting today. We want to make sure you get vaccinated. To all of the families who benefit from the love and support of these home health care workers, please let them know vaccination available through Health + Hospitals right now for free, fast, easy, safe, effective. So, having category 1-A open to us, that's a great step forward, but we want to go farther. We want to go farther. We want to make sure that we can reach everyone who needs this vaccine in a much deeper number of priority areas.

But again, let's dwell on what we got in this action yesterday from the State, it also, in addition to the home health aides, it also opens up our ability to provide vaccinations to some members of the NYPD and some members of our Department of Corrections team. That's very good news. We want to make sure that all of these frontline workers, folks who work directly with everyday New Yorkers, folks who do things like having to perform CPR or working in very close proximity, that they're going to get the opportunity to be vaccinated starting right now, starting today. This is a great step. I want to go even farther, but this is a great step. So, we now know about 25,000 NYPD personnel are now eligible. Vaccinations for those NYPD personnel will start today. That includes many of our patrol officers and officers who respond to 911 calls. Those vaccinations will be starting today via the NYPD, we expect that this moment roughly 10,000 officers to be vaccinated by Sunday, and we want to make that vaccine available to all within that 25,000 who are ready to take it. Again, I'm going to keep reminding everyone, a universe of 25,000 is not the same as 25,000 people who actually choose to get the vaccine. As we've been seeing to date the number of folks who are "hesitant" is between 30 and 40 percent in different categories. But what we want to do is get to everyone who's ready, willing, and able. We expect about 10,000 officers to be reached by Sunday. We're also going to intensely work to get our correction officers vaccinated, Correctional Health, run by H + H, is going to be doing that work again, starting today and throughout the week. This is further wind in our sails to get to

our initial goal, which is to reach a 100,000 doses this week. And again, by the end of month, we want to be at the rate of 400,000 doses per week. And each time we get more freedom and flexibility, it helps us to speed things up and reach those goals more effectively and reach more people who are ready, willing, and able.

Okay, now let's talk about the next steps because it's so important, the ability to reach other people in need. So, my central concern right now is folks over 75. And you're going to hear from Dr. Chokshi in a moment, he's going to talk to you as a caring doctor, someone who sees patients, even though he's Health Commissioner, he still sees patients every day. He's going to talk to you about why reaching people over 75 matters from a medical point of view, but I'm going to talk to you from a human point of view, just directly as a layman. Look, folks over 75 are the most vulnerable in this crisis. Right now, we are not allowed to vaccinate them according to State rules. We need the freedom and flexibility so that we can start vaccinating folks over 75 right away, that freedom to vaccinate means reaching our seniors in need. Now, what we know is that this is an issue all over the country and the US Surgeon General, Dr. Jerome Adams weighed in. They said that there's a challenge right around the country with different rules and with the fact that there's obviously a lot of people who are not yet willing to be vaccinated, that's why localities, cities, counties need the freedom to vaccinate as many people as possible within priority category. So, Dr. Adam says if the demand isn't there, states and governors should move quickly to other priority groups. It's a very smart, common sense approach. Give us the freedom to go where the interest and the desire is over 75, let's get to them, let's get to all essential workers. I want to resize us again, all essential workers, whether you work in a grocery store, or whether you work in food service, or you're a police officer, or a firefighter, or an educator, we need to reach all those essential workers as quickly as possible. So we are looking for that freedom.

Now, in the meantime with the authorization we do have, we're moving aggressively. So, let's talk about our new 24/7 sites. These are going to be the mass vaccination sites, the mega sites that are going to allow us to do 24/7 thousands of people in the day, two of them starting this weekend on Sunday, Brooklyn Army Terminal, Sunset Park, Brooklyn and Bathgate Industrial Park in the Bronx. Those two sites open Sunday, and they will continue to be open 24/7 from that point on, by reservation, we're going to talk about that. We need people to make appointments. We do not want long lines. We do want people pre-certified. These are the first two sites. Sites will be opening all five boroughs. In the coming days, we'll have announcements on that very soon, but I want to emphasize to everyone, all five boroughs will have these mega sites, 24/7 sites, and the more authorization and flexibility we get, the more different kinds of people can come into those sites whenever convenient to them, but we want it to be by reservation to make sure it's done right. Now for this weekend, also, as you're going to hear more from Dr. Chokshi, Health Department putting up its vaccination hubs. Now these are not 24/7, but they're during the busiest hours of the day, there'll be opening Sunday as well, Brooklyn at the Bushwick Educational Campus, Queens at Hillcrest High School, Bronx, the South Bronx Educational campus. These sites, again, you sign up for a time. You go to the DOH website, the Department of Health website to sign up that allows us to screen people, get people at the right time, make sure it goes fast and smoothly.

Everyone, look, we know our seniors need the ability – and again, I want to start pre-registering seniors as we go forward. We're going to have the announcement on that shortly. We're going to have the ability for seniors to register in advance online or by phone. A lot of seniors prefer phone. We'll have announcements on that shortly, but the key concern here is what we're seeing

among folks over 75 and we have got to reach this population urgently, urgently. The story yesterday from the head of our Health + Hospital system, Dr. Mitch Katz, that his dad, 98-years-old and a World War II veteran can't be vaccinated because that priority has not been authorized by the State of New York. I understand there's a lot of challenges here. I understand there's a lot of good people that need to be vaccinated, but it seems to me a 98-year-old World War II vet deserves to be vaccinated right now today. Let's get that freedom. Let's get that freedom to vaccinate. Here to tell you about everything that the Health Department's doing, and a particular focus on our New Yorkers over 75 and the urgent need to serve them, our Health Commissioner, Dr. Dave Chokshi.

**Commissioner Dave Chokshi, Department of Health and Mental Hygiene:** Thank you, Mr. Mayor. Well, in any outbreak, whether we're testing, tracing, treating, or vaccinating, the public health response requires us to follow where the virus moves so we can then respond to where the disease is present. Now, the data that we watch so closely is showing us alarming trends with cases and hospitalizations in adults over the age of 75. Over the past 30 days, six percent of all cases are among those 75 and up, but 30 percent of hospitalizations, and most tragically 58 percent of deaths are in person 75 and older. Percent positivity is increasing citywide, but particularly among that same group of individuals to almost 12 percent in the most recent week for people older than 75. Data from the Test and Trace Corps show that more than half of cases aged 75 and up are likely from community transmission and about 38 percent are from a close contact to a known case, usually household transmission. That means we all have a role to play in protecting our seniors. Just setting the numbers aside for a moment, each of us knows and has worried about an aging parent or a grandparent during this pandemic. We must do everything that we can for them, yes, in our families, but also as a city. That's why I believe that New Yorkers age 75 and older should be eligible for the vaccine as soon as possible. Several states have already prioritized older adults. To meet this, as a city, we are increasing our points of access for vaccinations, pulling out all the stops to expand our capacity, as you heard the Mayor say. This week alone, we've already added 25 points of access, spanning community clinics, Urgent Care sites, Health + Hospitals sites, and Health Department pop-up clinics as well. These are all for currently eligible populations to vaccinated. You can find all of these locations at [nyc.gov/covidvaccine](https://nyc.gov/covidvaccine). And, as the Mayor also said, we'll launch additional sites, including our first three City vaccine hubs on Sunday. These will be sites set up at schools that can offer vaccinations by appointment to eligible New Yorkers with a capacity to serve at least 30,000 additional New Yorkers next week. And, starting January 16th, we'll ramp up to a total of 15 City vaccine hubs able to serve over 100,000 New Yorkers weekly.

These are the kinds of resources we're getting ready to serve New Yorkers. We also need the federal government to do its part, such as enabling pharmacy chains, such as CVS, Walgreens, and Rite Aid to deliver vaccinations in the community as well. And beyond capacity, we're prepared to reach our seniors in order to answer their questions and alert them to resources, that includes through direct mail, robocalls, and engagement through senior centers in partnership with the Department for the Aging and other City agencies. We will also ensure they are able to access vaccination, including people who may be disabled or find it hard to walk. The vaccine is not the only measure we can take to protect each other, especially seniors. That's why last month I issued a Commissioner's Advisory to at-risk New Yorkers, which applied to older adults and to people with underlying health conditions who are at increased risk. I want to make it clear that it also applies to caregivers and household members of these individuals to take all of the precautions that you can to protect them. This message is as urgent as it has ever been – avoid

activities outside of the home, except for essential purposes, including medical care and other necessities. I'm asking New Yorkers to remain vigilant. Don't let the numbers make you numb, continue getting tested and practicing the core four – staying home if you feel sick or were exposed to COVID-19, washing your hands frequently, wearing a face covering, and keeping your distance. All of these measures will help us curb the spread of the virus, even as we do more each day to turn vaccines into vaccinations. Thank you, sir.

**Mayor:** Thank you so much, Dr. Chokshi. And thank you for really, really crucial work you're doing and your team at DOH is doing. And I just want everyone to hear the simple message, we need to reach New Yorkers over 75. We need to reach them now. So, look, to make sure people have information, the DOH website is going to be one of the go-to places. Folks looking for information, folks looking to confirm that you are eligible under our current rules or the rules that we hope will be approved very soon by the State, go to [nyc.gov/covidvaccine](https://nyc.gov/covidvaccine) – [nyc.gov/covidvaccine](https://nyc.gov/covidvaccine). Again, we want to make sure people are constantly updated and we're going to start, pre-registration looking forward to those new categories being approved. We'll be doing that soon. We'll have an update on that as soon as that's ready. Also want to say, anyone who wants text alerts about a vaccine availability, you can text COVID-692-692 for updates and information – COVID-692-692.

Okay. Before we go to our indicators, another very good thing to talk about. And it's a joyous day for so many New Yorkers who celebrate Three Kings Day. Happy Three Kings day to all. This is a beautiful holiday, a holiday that's all about hope and faith and following the guiding star to someplace better. What could be a more powerful message as we fight back the coronavirus. Now, typically, we get to put together, as you see on your screen, beautiful celebrations. I've joined folks in East Harlem many times for extraordinary celebrations done by the East Harlem Community by El Museo Del Barrio and many others. It's a really a powerful, beautiful holiday. We don't get to do the in-person parades and processions this year. We have to do things virtually, but the idea of the holiday is just as strong. And following the wise men, the wise voices that gave people hope in the past and remembering them and remembering the voices of wisdom today. And I would link it to the wisdom of the people of Georgia also, but it's a beautiful holiday. We're celebrating virtually this year. We'll be back together in person celebrating next year, I'm confident of that. *Feliz dia de los Reyes Magos. Feliz dia de los Reyes Magos a todos.*

Now, we will go to our indicators. Number one, daily number of people admitted to New York City hospitals for suspected COVID-19 – today's report, 279 patients. That's a big jump, as you can see. Typically, obviously, we want to be under 200 patients. We've generally been right around that number in recent days, still too high, but this 279 is quite a jump. We are watching that very carefully. That said, hospitals are still doing an extraordinary job, lots of capacity available, great job handling patients. But, as you heard from Dr Chokshi, too many of those patients are folks over 75 who really are facing a profound danger. We've got to help them. We've got to get them vaccinated. Hospitalization rate per 100,000, 4.21 percent – obviously, too high, got to drive that down. And the same with current new cases, daily new cases, seven-day average 3,845 – way too high. And the same with our current testing indicator, percentage of New York City residents tested positive, seven-day rolling average, 9.25 percent. We see what's happening. Obviously, the trend's all around us. We've got to beat them back. We beat them back through vaccinating. We beat them back through following those really smart health habits that have done so much for us and really doubling down, because this is our last great battle

against the coronavirus. We need one more push here and New Yorkers can do it. And, certainly, we are hopeful that as the impact of the holidays wears off over the next few weeks and there aren't the same kind of gatherings that we're going to see some improvement in those numbers naturally. But we have to do all of the above the turn of the tide.

A few words in Spanish –

[Mayor de Blasio speaks in Spanish]

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

**Moderator:** We'll now begin our Q-and-A. As a reminder, we're joined today by Dr. Chokshi, by Dr. Long, by Dr. Katz, and by Senior Advisor Dr. Jay Varma. First question today goes to Juliet from 1010 WINS.

**Question:** Oh, hey. Good morning, everybody. Good morning, Mr. Mayor. How's it going?

**Mayor:** It's a very good day, Juliet. I am feeling bubbly today because of the results of Georgia. How are you today?

**Question:** Yes. Yes. I'm okay. Thank you very much. My first question involves, how do people sign up for the vaccine? You know, this is very nuts and bolts. You, in fact, had mentioned seniors like to do things on the phone and not online, and although there's websites, what do people need to do to find out what their category is when they're eligible and where they go for a form or online registration? How does this work?

**Mayor:** Okay. I'm going to start with Dr. Chokshi. I'm going to bring in Dr. Katz too, because I want to make sure we are over-communicating to the people of New York City both about the vaccinations that are available right now, for example, at our Health + Hospitals sites. And we talked about those home care workers, we want to get them vaccinated starting today. So, I'll have Dr. Katz talk about how people can access vaccinations through H + H. And Dr. Chokshi will talk about the information that's available via the Department of Health. And, again, with the Department of Health hubs opening up on Sunday, how that system is going to work. But the bigger plan, again, these 24-seven sites, many more sites all the time. By the end of this week, we're going to be around 160 sites all over the city, 250 by end of the month. What we really need to do is have a very active reservation system, phone and online, usable for everyone, including seniors who prefer phone, multiple languages. That's what we'll be announcing in the next few days, exactly how that will work. Looking forward to Sunday when people can start going to these larger sites. But, remember, only some people can go to those sites because of the current rules. I want to see if we can get that authorization right away, that flexibility right away to get to folks over 75. If we can get that authorization, we can start to vaccinate them immediately, and that's crucial. So, Dr. Chokshi first on where people can get information and how they can sign up if eligible now, and then Dr. Katz will talk in particular about the home health aides. Go ahead, Dr. Chokshi.

**Commissioner Chokshi:** Thank you, Mr. Mayor. And they're really, you know, two fundamental questions. Number one is, am I eligible for a vaccination right now? And then, the

second is, if I am eligible, where can I actually go and get vaccinated? For the first question, and as the Mayor has said, you know, we do have information on our website, it's [nyc.gov/covidvaccine](https://nyc.gov/covidvaccine). But in the coming days, we'll also have additional information so that people can know if they are not yet eligible when they should expect to be able to get vaccinated as well. And then for the second question, if you are currently eligible to get vaccinated, we have all of the locations that I've described from the currently existing sites, which span hospitals and community health clinics and Urgent Care sites to the city sites that we're standing up, whether Health + Hospitals or the Health Department, and then, coming soon, those mass vaccination sites – all of those will also be taken together and put on the web. And I want to recognize whether it's an older New Yorker or someone who may not have as ready internet access, we have to push this information out through many other channels. You heard the Mayor talk about text messaging. We're going to use phone calls as well as robocalls as part of that. But equally importantly, we are spending day and night getting the information out to the places that people already trust, whether it's your own primary care doctor, whether it's the local clinic that you're used to going to, whether it's your church or another community organization. And so, we're going to make sure that as we get updates on a daily basis, all of that information is shared so that people can turn to multiple different sources to get their questions answered.

**Mayor:** Thank you very much. Dr. Katz?

**President and CEO Mitchell Katz, Health + Hospitals:** We're very happy to work collaboratively with our sister department in making these vaccines available. Right now, Mr. Mayor, you were talking about home care workers, which are so important. We want them to be safe. We want them to not get sick and to not be able to transmit virus to the people they care for. Right now, using the same website as the Commissioner has spoken of, [nyc.gov/COVID](https://nyc.gov/COVID), people cannot – who are in that group of home care workers can actually not only find out information, but they can schedule themselves for an appointment to come in to be vaccinated at one of our hospitals or outpatient sites. Thank you.

**Mayor:** Thank you. And I want to note, just as we're talking about the home care workers, who we depend on so much, and families all over the city just love and appreciate deeply – also want to speak up for our childcare workers, our childcare providers, they're also in that category waiting for approval. I know there's so many parents who would love nothing more than to see childcare workers given the approval to be vaccinated. Same, obviously, with our educators and school staff. There are so many people were right to vaccinate who are folks who are just crucial to our lives that are part of our extended family. I want to start reaching all of them. Go ahead, Julia.

**Question:** Okay. So just to follow up, I'm assuming that all of these locations – whatever they are, pop ups or the hub, you will still need to make an appointment and register to get there. Are you concerned, you know, people are just going to start showing up to get on line once they're eligible?

**Mayor:** Yeah, I am obviously. We need to get this reservation system out clearly to people. We need to show them it works. And look, we understand a lot of times in life, Juliet, the best way to convince people is to show it to them in action. It's going to be a lot easier when we have the next categories approved, because then we're going to be able to get a much broader population engaged. But really, when you think about it, the reservation system guarantees everyone the

best possible experience. It means you're pre-certified so you go right through, you know the time you're supposed to be there, you're not waiting in line, you're not exposed to a lot of other people – that's in everyone's interest. And we're going to keep getting that message out and show people in action that it's the way that works. We have a lot of sites, that's the good news. So, there's going to be a lot of good options for people. We can spread people out around a lot of sites. But the fact – the practice of going and getting that appointment is crucial to keeping everyone safe. Go ahead.

**Moderator:** The next is Michael Garland from the Daily News.

**Question:** Good morning, Mr. Mayor.

**Mayor:** Hey, Michael. Happy New Year.

**Question:** Happy New Year. So, I have a question on the 30 percent refusal rate among health care workers on the vaccine. Where – do you have a sense of why that is? Where is the skepticism coming from those people? And, you know, as far as the general public's concerned, if there's that kind of it seems like lack of trust, you know, why would the general public kind of – how do you expect the general public to react to that? Right? That you have 30 percent of health care workers at this point refusing the vaccine.

**Mayor:** Michael, very important question. Very fair question. First of all, be careful with the word refuse – I think there's a group of people all through our society who are ideologically anti-vaccine, that's not what we're primarily talking about here. We're talking about hesitancy, which means folks who want to wait a while for whatever combination of reasons. I'll turn to Dr. Katz, because he has been hearing directly from the many, many health care workers who work for him. Now, point-one, the vast majority are getting vaccinated. So, let's both put the facts in order – vast majority of health care workers are choosing to get vaccinated right away. If you're talking about public opinion, well, I'd say look at what the vast majority are doing. Second, I think some are just waiting. I think they feel confident in their own health and safety practices. They've been through this whole crisis, keeping themselves safe with the support of the PPE supplies and their hospital leadership. And I think it's natural that some people might say, hey, I think I'm okay the way I am. But, really, I think as with everything in life, the more vaccinations that occur, the more trust there will be. And that's why we just have to keep this process moving. Dr. Katz?

**President Katz:** Mr. Mayor, you've explained it well. I'd like to add a couple of details. Among our physician staff, we've had overwhelming desire to take the vaccine. So, among the physicians who are people who have looked closely at the science, we have very high take-up rates. I think the – when it comes to other staff, I think people have to understand that these are people who worked in the trenches for the last 10 months, taking care of one COVID patient after another. And it's not shocking that many of them feel like, hey, I got through this. Many of them actually got sick and know their antibody titers. Many of them feel like, well, if I didn't get sick after doing all of this, I'm not going to get sick. And to tie it to your earlier remarks, sir, who's really at the greatest risk? The people at the greatest risk are over 75 years old and have other – are younger and have other comorbid illnesses. It's tough work working in the hospitals. My staff generally are quite healthy and younger. I wish they would all get vaccinated. But I understand that they feel from this amazing experience they've had, they don't feel the same vulnerability. On the other hand, my patients with diabetes, with hypertension, with heart disease



who are over 75, they really feel that vulnerability, and the data supports that, and that's why I so support what you're saying about getting them vaccinated.

**Mayor:** Thank you, doctor. Go ahead, Michael.

**Question:** So, the second question has to do with the Georgia elections. You know, we all know, you know, how much you you've talked about this stimulus and the need for that. I'm wondering, you know, if it appears to go the way it's going with two seats coming to the Democrats, what would you like to see us – as separate and apart from the stimulus – like to see happen as far as the agenda, moving forward. You know, are you for DC statehood? I mean, what's on your kind of wish list. I just use that as an example, but, you know, what would be like the top five things you'd like to see done apart from the stimulus?

**Mayor:** Yeah. I don't know if have a perfect top five for you, Michael, but let me – let me put it in some kind of an immediate order, just a couple of things. Absolutely stimulus – serious stimulus. You know, take the New Deal model – and I know Joe Biden believes in this – a fast stimulus, February, ideally, that is about restoring our economy and helping us all recover. That's number one. Second, I would say, related, FEMA reimbursement should go to 100 percent for all the places in this country that were afflicted. It makes no sense in an international pandemic to make localities pay for the kinds of expenses that are supposed to be covered by FEMA. When localities have lost revenue, massive amounts of revenue because of this crisis. It's just a ridiculous vicious circle. So, make that 100 percent FEMA reimbursement and apply it retroactively to the beginning of the crisis. Make cities and counties and states whole for what they've been through. So, those are particularly urgent matters. I'll certainly be talking about in the coming days a lot of other important actions that I think are needed, some that could be done administratively by the White House, some that will require to Congress.

**Mayor:** To say the least, comprehensive immigration reform and undoing so much of the damage that was done by President Trump. Focusing on climate change, so much has to be changed there, especially on the administration side. And I know President Biden will be entirely focused on that. There's so many things we could talk about. I'm glad you mention DC statehood. I think it's absolutely the right thing to do and it's been long overdue. So there's so much that can happen but everything begins with a real stimulus and that 100 percent FEMA reimbursement. Go ahead.

**Moderator:** The next is Rich Lamb from WCBS 880.

**Question:** Good morning, Mr. Mayor and everybody on the call. Mr. Mayor just wondering, we've seen news out of South Africa that there is another COVID strain, which apparently has more mutations and people are really worried about whether or not the vaccines will have any effect on this – or they're worried about it anyway. They don't know that it won't. But it certainly seems that there's a lot of concerns. I wonder if the doctors can weigh in on that as well?

**Mayor:** Thank you for the question, Rich. I'm going to turn to Dr. Varma. And then if any other doctors want to weigh in. But let me just say, look, while we are constantly monitoring any new strains and trying to understand the full ramification, one thing is still clear as a bell. Vaccinate the most people possible, particularly those who are most vulnerable and that's the folks over 75. So far, the vaccine appears to be effective with different variants. Rather than any of us sort of

wait and worry about new variants, why don't we take the bull by the horns and go vaccinate everyone over 75 who is willing and protect them in advance? Dr. Varma?

**Senior Advisor Jay Varma:** Great. Thank you for the question. And I'll start by just reemphasizing what the Mayor just said. He's absolutely right. What we need to focus on most importantly is what we know right now. And what we know right now is that the vaccine is highly effective at preventing COVID infections here in the United States. It's very well studied now in tens of thousands of patients and obviously millions of doses that have now been provided throughout the country. So that's obviously the single most important priority, people who are eligible for the vaccine should be encouraged to get it as soon as they possibly can. You are absolutely right though, that we are very concerned. The more infections that occur in humans, the more likely it is the virus will mutate. You know, dogs bark, ducks quack, viruses mutate. That's what viruses do. And the single best way to prevent them from mutating is to stop their infections in humans. So, everything that we've been emphasizing about hand-washing, mask wearing, maintaining distance remains absolutely important. Now, this scenario that you're concerned about is what is certainly what a lot of scientists including myself are worried about for the long-term future. It is possible that this could end up as a virus very similar to influenza. But what did we do for influenza? We monitor these mutations and we update the vaccine regularly based on that. That is not a situation that we're in right now, but it is one that we are prepared to handle, I think as a scientific and public health community, if that becomes a possibility in the future.

**Mayor:** Any of the other doctors want to add? Okay, go ahead. Rich.

**Question:** Okay. So, I'm wondering, you know, Britain is really in lockdown now. And I'm wondering whether, is there any point at which you would foresee New York City going back into lockdown? I mean it's clear that the numbers are going up. Is there a trigger, is there a number, or is there a situation that would cause that?

**Mayor:** Rich we're going to watch very carefully every day. Right now, I'd say I think the formulation that the State has put together and you'll remember I joined with Governor Cuomo when he put forward his vision around the focus on hospitalizations and what's going on in our hospital systems. I think that is still the essence of how we need to make our decisions. I every day go over to the hospitalization numbers with our team, ICU capacity, what we're seeing in the efficacy of our hospitals in terms of saving lives. So far, we've seen extraordinary success in all of our hospitals, public, voluntary, independent. Real worries about folks over 75 in particular, we're emphasizing that. And we're watching that situation very, very carefully. But overall, I would say our New York City hospitals across the board are doing very well. And if we can keep that momentum and keep doing the things we need to fight back this virus. And that means everyone taking the personal responsibility. New Yorkers have really done very well better than almost any place else in the country. The mask wearing alone is far superior to most places in the country. But also continue to rapidly vaccinate and expand these categories. I think we can get through January and I think February could be much better. But that is a day-to-day reality that we are monitoring. I want to be really clear, we are watching very carefully Rich. And so, I do not see additional restrictions today. But it's something we're going to be assessing every day. And obviously the State makes those ultimate decisions, something we're comparing notes with the State on frequently.

**Moderator:** The next is James Ford from PIX 11.

**Question:** Good morning Mr. Mayor and everyone on the call. And happy Three Kings Day.

**Mayor:** Happy Three Kings Day to you, James. How you doing?

**Question:** Great. Thank you very, very much. I appreciate you asking. Look, you have said that you're very hopeful that the City will reach, or maybe even surpass its vaccination goals going forward. But you've also said within the last week that it hadn't reached those goals up to this week. What assurances can you give that the City can reach those goals? And can you elaborate on the importance of entities like 1199SEIU in getting people registered and getting shots in arms for people like their members and other unions?

**Mayor:** Yeah. Look, James, thank you. Very important question. I laid out at the beginning of the week, this core notion. That this week, our goal is 100,000 vaccinations. By the last week of January 400,000 vaccinations in a week, a million total for a month. I feel confident about those numbers. I think that every time we get more freedom and flexibility, we can do even better to ensure those numbers. So, the fact that the full category 1-A was approved yesterday by the State, that's allowed us today to start vaccinations at the NYPD. And in the course of this week, those officers who are eligible in the NYPD and Department of Correction we'll be able to do a lot more this week with them than we would have if we didn't have that freedom. The fact that our home health care aides now are authorized, it makes so much sense. They are right there. No one more sensitive, no one more important to our families. That's going to allow us to do more. We're working closely with Local 1199SEIU. An organization I have the deepest connection to over decades. We want to make sure their members are reached. Everyone is ready for the vaccine. And that's why we've been close coordination with them about the availability of vaccines at H + H sites starting today. So, I think Local 1199 is going to play a crucial role in helping us really get a lot of people reached starting this week. And every time we get more freedom and flexibility, we get more organizations, allies to help us get the word out and to really help people get there. Remember some people need answers to their questions, James. They need, you know, understandably they want more information about the vaccine. Some people it's really logistical. Just understanding how to apply, understanding what's the right location for them. The more organizations, including labor unions that are helping us to do that, the better off we are. Go ahead, James.

**Question:** Yes. This is for my colleague Narmeen Choudry. The Governor is widely expected today, as soon as today, to say that recreational marijuana might be legalized in New York. That he will be part of an effort to ensure that happens. What impact could that have on New York City, assuming it is the case and whether or not it's the case? Legal recreational marijuana, if it happens, what impact does that have on New York City?

**Mayor:** Big question, James. Let me say it this way. I am a believer it's time to legalize marijuana and to do it the right way. Over a year ago, the City put out a report, which I urge everyone to look at it again. If this issue is going to really be a focal point in Albany with the Legislature and the Governor, go back to the report we put out, I think it was December 2018. That is the right way I believe to legalize marijuana. It was based on real careful research with public safety experts, health experts, but also folks who look at the economic impact of this new industry. As a matter of fairness, not only should you legalize marijuana, but expunge the records

of anyone who suffered because of inappropriate, overzealous laws of the past. It's important that the legalization be done in a way that supports small business opportunity, not mega corporations taking over this industry. I do not want to see a repeat of the tobacco industry. I do not want to see the excesses that we saw with the tobacco industry, trying to push people to use a product, whether it was right or wrong for them or safe or unsafe for them. Also, I want to see an industry that is decentralized, localized and where we incentivize the industry to grow in communities of color. So, the ownership, the profits, the capital is going overwhelmingly to folks who suffered from those bad laws of the past. So, there's a lot. I urge again people to look at the report, in fact, we'll recirculate that report again today. There's a way to do it, right. And then of course, on revenue, there is a tremendous revenue possibility. It's timely. We need to make sure that the way that revenue is distributed between the cities, localities, counties and the State is fair. Remember, so much of the on the groundwork will be born by cities, towns, localities, counties. There also has to be a fair share of revenue to support that work in the process. So those are the number of the things going through my mind when I think about this important moment.

**Moderator:** The next is Henry from Bloomberg.

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

**Mayor:** I'm doing very well Henry. How you feeling?

**Question:** Doing good. I'm kind of a little a pandemic'ed out if you will.

**Mayor:** I don't think you're alone, Henry. I think we're all in that status, but we're going to move forward.

**Question:** Okay. Very good. I'm going to ask you a little bit about this operation of building out these sites all over the city and at the same time restricting access to the vaccine. Even in your call for people over 75, that's still pretty restrictive when you've got a population of a whole bunch of people with kidney, chronic kidney conditions, and diabetes and asthma and everything else, a lot of at risk conditions that people could use that vaccine for. And I'm just wondering whether with all these facilities that you've got and all these restrictions on who can get the vaccine, whether we're facing a situation that's very similar to the hospital boat at the Hudson River? That you'll have a big cavern of facility and very few people using it. And at this point, I guess that's one part of my question. The other part is why are we hearing about these plans now? When the vaccine was something that the President was trumpeting up, if you will, for the last 10 months? We've known that a vaccine was coming by the end of the year or close to it. Why now are these plans being sprung upon us and being developed at the last minute?

**Mayor:** Henry, these are exactly the kinds of plans that people need. They have to be done right. And the most important thing with the vaccine, in fact, we did not know until just days before it arrived, when it would definitively arrive. And what we did know was it was an entirely different vaccine than our health care community had dealt with before. That there had to be an emphasis on ensuring safety and ensuring that the vaccine could be implemented properly. We know if the first few weeks when the vaccine was focused on health care facilities and on nursing homes, if that rollout had not been done effectively, it would have made all the other work ahead much more difficult. So, there was a cautious approach in the first weeks to getting it right and really making sure the procedures worked, making sure people reacted well to it. And that was another

great unknown, until you were giving it to large numbers of people. While in fact, we found that the vast majority of people had little or no reaction to it in a good way. That it was safe and effective. All of that had to be established. Now that having been done, we're now in the category of 100,000 people this week. And hundreds of thousands more in the weeks ahead. Very comfortable that we had to go through those stages to get it right. What we do have a problem with, I agree with you, is that the categories are still way too constrained. Look again, if we could get approval, which I would like as early as today for a phase 1-B, what does that achieve? Well, that puts another million or so people into play. That's all adults over 75, that's all essential workers. That's all educators and childcare providers. That's all first responders. That's a huge universe. You're not talking about cavernous facilities waiting for people. If you can put that additional million people into play, you've got a lot of folks who will want and need the vaccine right away. But I further agree with you, we should expand the categories to any folks with pre-existing conditions as quickly as possible. Because I think the difference now, Henry from even a few weeks ago is the recognition. We have a hesitancy issue, which we knew we would have to some extent, but we're seeing it in real life. So, categories, if a category is a million people, but only 600,000 are going to be willing, then it's really 600,000. And then you still have to deal with logistics and everything else and making sure people end up at the right place at the right time. You want ever expanding categories, but I'm right there with you. I think reaching folks with preexisting conditions is a very high priority. We should move to that quickly as well. Go ahead, Henry.

**Question:** Okay. I guess related to that question is the issue of how are these people going to show up? I just, I think you've got all of these sites there. And there's not a – there doesn't seem to be much of a mechanism for getting people to these sites. And getting their reservations set up. There's, I just, I don't understand why you think that there will be a flood of people? You know, a 24/7 demand for these vaccines when there's been so little preparation of the population for getting to these sites?

**Mayor:** Again, Henry we can't tell people something exists if it doesn't exist. So, we had to get – we'd been fighting obviously to just get phase 1-A fully authorized. That was only achieved yesterday. But the real action is in phase 1-B., the folks over 75 and all the essential workers. We are hoping for that approval, you know, in a matter of days. We're educating people right now to get ready. We're starting a reservation system right now so people can preregister. We're putting these sites up. I think there's going to be demand now. I think there will be a hell of a lot of demand when we get to 1-B. But again, want to turn to Mitch Katz now, because I don't want you missing the fact that now that we've got flexibility example with home care workers, you're going to see potentially tens of thousands of folks in the next days, being able to go in and get vaccinated. And the system that's working through. So, Dr. Katz, could you reemphasize to Henry exactly how one of those now authorized home care workers goes about making their reservations?

**President Katz:** Absolutely, sir. So, Henry on our sister agency's website and [nyc.gov/COVIDvaccine](https://nyc.gov/COVIDvaccine), there are the instructions on how to schedule yourself for an actual appointment. And as one of your colleagues talked about, we want to make sure that we don't have waiting rooms full of people or crowds or lines, which could further transmit COVID. And so it will all be done as an appointment system. But the great thing is people on that single site will be able to choose a wide variety of places. It can be near their home. It can be near their work. They'll be able to choose an exact time. They will come in and they'll get vaccinated. All

will be done safely with protective equipment. And we can handle these thousands and thousands of people. We look forward to it.

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

**Moderator:** The next is Gloria from NY1.

**Question:** Hi, good morning, Mr. Mayor.

**Mayor:** Hey Gloria. Happy New Year.

**Question:** Thank you. Happy New Year to you as well. I wanted to ask you specifically about this authority that you are asking, especially with the numbers that Dr. Chokshi cited for folks 75 and up and the hospitalization rate. What is your understanding as of today about why the State isn't giving you this authority? And where are we in terms of supply? If the State were to say, okay, you can go ahead and start vaccinating people, 75 and up, do we actually have enough vaccine to do that at this point?

**Mayor:** We have enough to start, but you raise a very important point, Gloria. We need and this is one of the things that I talked about yesterday with the letter to the federal government, to Vice President Pence and to the head of the CDC, and to the Secretary of Health and Human Services. If you're talking about this week, next week, we have a supply. If you're talking about later in January, we still don't have guarantees about what kind of supply we're going to have. And this is why when I said the million goal, I said from the beginning, we need federal, State and manufacturer cooperation to get it done. We need the federal government to really clarify that New York City will get enough doses to keep to that goal. It should be in everyone's interest to make that happen. And obviously we're in a position to move quickly and some places don't have as much infrastructure. So, we need those guarantees. But if you're talking about our ability to reach people over 75? If we were given the authorization today, can we reach hundreds of thousands of people in the next days with what we have? Yes, yes, we can. After the next week or two, we start to have a real challenge in terms of supply. Go ahead.

**Question:** Okay. Thank you. And I wanted to ask a question about, I know the category for health care workers has been expanded but has there been any discussion that there might be some health care workers within that category – you know we've heard from say a physical therapist and people who maybe are not immediately on that front line, who are now having access to the shot, and here you are talking about people who are older, home health aides. So, has there been a consideration to actually break out these categories even further to people who are really, really exposed?

**Mayor:** I'm a believer, Gloria, in broadening the categories, just like Henry's very good question about folks who are not over 75 but do have preexisting conditions. I want the broadest categories possible amongst priority people. I want the freedom to vaccinate. It's just – look, to me, if we have that freedom – again, I want to be real-world about this, take away 30 percent or 40 percent of people in each category who are not yet ready. And I want to use those words, not yet ready. I think a lot of them will be ready over time, but they're not yet ready. So, we got to be clear about the fact that there's going to be a lot of folks who will wait, a lot of folks who, even though we're saying it's here, it's ready, come get it, just logistically or otherwise, might not rush

immediately to it. That's why having lots of options helps us continue to reach those who are ready, willing, and able right now. So, I'm very concerned about folks with pre-existing conditions, obviously concerned about anyone else in the broader health care field who's working closely, as you mentioned, a physical therapist great example, anyone who's working closely with patients and folks in need. So, what I want to see is constant expansion of these categories. As we expand the categories, we're going to see how people respond, and that's going to tell us how much farther we can go. And, obviously, again, we need to see that federal guarantee of our supply. We need to see the manufacturers deliver. But I would like to see a much more aggressive approach to flexibility and freedom to vaccinate. Go ahead.

**Moderator:** We have time for two more for today. The next is Matt Chayes from Newsday.

**Question:** Hey, good morning, Mr. Mayor, how are you doing?

**Mayor:** I'm doing good, Matt, how are you?

**Question:** All right, thank you for asking. Last month you said you agreed with and would implement recommendations that were made in the DOI report on the NYPD's handling of the Floyd protests in May, June. One of those recommendations was consolidating police oversight into this is a quote, "a single agency headed by an independent board." It's now tripartite. Since you support the recommendations, when and how will this independent board we put into place? While you're still mayor?

**Mayor:** So, what I want to figure out – thank you for the question – I want to figure out with the Civilian Complaint Review Board and with the Department of Investigation and with NYPD, so those are all three key elements of this focused on that proposal, how we consolidate those functions. I think there is a way to do it that maintains the strength that each of those three pieces bring to the equation. And I appreciated the recommendation greatly. I talked to the DOI commissioner about it, the notion that this was a direction, it could be implemented more than one way, but it was a direction to consolidate and make a higher impact, the functions of those three pieces. I think that's right. So, we're going to be in conversation with all those agencies. We're going to figure out the right way to implement it. To the best of my understanding, Matt, it's either through a Charter change and we're going to have a Charter revision commission, so that's an option, or potentially through City legislation. But we just have to work out which path and the details of that plan, and I do think that's something that will happen this year. Go ahead.

**Question:** And for Dr. Varma, to what extent is the virus transmitted via outdoor dining? And is there any evidence that banning outdoor dining, as has happened in California, could or has backfired by encouraging indoor gatherings in places like homes?

**Mayor:** Go ahead, Dr. Varma.

**Senior Advisor Varma:** Okay. Yeah, thanks for the question. Yeah, outdoor dining is an interesting challenge, I think. What we know about this virus is that the likelihood of transmission in the outdoor setting is very low. And that's because the virus can easily get diluted into the air and not transmit infection to other people. And that's why we here in New York have felt comfortable keeping outdoor dining open. I think the issue in California, it gets to this larger issue of, how do you prevent humans from interacting with other humans to reduce transmission

of the virus. And I think the situation in California, similar to other places around the world, has gotten so severe that they felt incumbent to basically do anything they possibly could to reduce human interaction. Of course, you rightly point out that one of the balances that we have to take anytime restrictions are placed is allowing people to do things so that they can feel normal and human and have the regular activities we all do. And that's why I think like we've – one thing we've learned during this epidemic is that keeping outdoor spaces open like parks, allowing outdoor recreation is important because it is much safer and that's not something that we absolutely knew at the beginning of this epidemic.

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

**Moderator:** Last question for today, it goes to Duncan Osborne from The Gay City News.

**Question:** Happy New Year, Mayor.

**Mayor:** Hey Duncan, how are you doing? Happy New Year.

**Question:** I'm fine. Thank you. So, a quick question about the plan to end AIDS that you endorsed in 2014. Looking at the city's 2019 HIV data report, you reported 1,200 estimated new HIV infections in 2019. Your goal is to get the 600 estimated new HIV infections in 2020, and highly unlikely that you're going to be able to do that to go from 1,200 to 600, because the city's never done that before. I'd appreciate your comments on that, and I'd also welcome any comments that Dr. Varma has.

**Mayor:** Well, I'm going to turn to Dr. Chokshi and Dr. Varma. Obviously, the Department of Health plays a key role here and has done outstanding work to end the epidemic. I appreciate the question very much, Duncan. Look, I think the city – this is a very good news story. It's about the city, but it's really first and foremost about the community, how the community came together over years and years, decades, and fought for the right kind of health care and the right kind of policies, and it has made a world of difference. 2020, obviously, a year where many goals and plans have been disrupted by the coronavirus, and Dr. Chokshi and Dr. Varma can give their update as they know it so far. But our focus on ending the epidemic is as strong as ever. And it's quite clear that when we work closely with communities, when we provide the right kind of resources and not just medically, but in terms of rental assistance and social services that that's the way we move forward. And we educate people, and we have a really embracing approach to public health, that's what works. It has been working and we're going to finish the mission. Dr. Chokshi –

**Commissioner Chokshi:** Thank you, Mr. Mayor, and thank you for this very important question about the HIV/AIDS epidemic. My starting point is that the Mayor laid out a visionary plan for ending the HIV epidemic in New York City back in 2014 and there have been historic reductions in new HIV infections year over year, as you pointed out in your question. Between 2019 and 2020, the preliminary data that we have does indicate that those reductions will continue between 2019 and 2020 for the reasons the Mayor has pointed out and that all of us know with respect to how the COVID pandemic has affected health care, but also has affected all of society. We'll see what the final numbers show with respect to new infections in 2020, but the big picture is that we are on track to meeting this big goal of ending the HIV epidemic in New York City.



**Mayor:** Thank you. Dr. Varma, do you want to add?

**Senior Advisor Varma:** Yeah, just really briefly. I appreciate the opportunity because before I did my stint in Africa for the past couple of years, I had the privilege of helping to lead this initiative under the Mayor. And I do think it's really important to be reminded about the HIV epidemic. You know, this is really the most recent modern example of what happens when you have an infection that can spread rapidly throughout the world and requires a huge mobilization of effort from the community and science to address it. And I do think that you know – as Commissioner Chokshi noted we don't have final numbers yet. So, I think it is too soon to conclude whether the target will be missed. But I think we are clearly headed in exactly the right direction. And that's not just the result of the City's initiative, that's the result of activists and community groups and everybody working together to ensure that HIV negative people who are at risk get on PrEP, and then HIV positive people get and are able to stay on antiretroviral therapy. So, I do think all – that the trajectory is exactly in the right direction and New York City has really led the world in this response. It's one of the few countries to reach the 90-90-90 goals from the United Nations and to not just meet them, but to actually maintain them for an extended period.

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

**Question:** So, second – and I apologize for what may be seen as a gruesome question – but have you seen declines in 2020 particularly since we all started to lock down back in March in sexually transmitted infections in particular among men who have sex with men that might indicate you could at least come close to having to achieve a 50 percent reduction, you know, in so far as STIs are associated also with new HIV infections. Have you seen a decline in STIs that might predict a greater than, or near a 50 percent decline in HIV infections in 2020, which is what you're going to have to achieve to get your goal of 600?

**Mayor:** No, I appreciate the question and the bluntness of the question. And we believe in the goal. Again, 2020 extremely complex year, and one we're still assessing. I'll start with Dr. Chokshi and Dr. Varma who between them and their different times in the Health Department have been furthering this initiative. Also, if Dr. Katz or Dr. Long want to add anything on this, you're welcome. Dr. Choksi.

**Commissioner Chokshi:** Thank you. This is another very important topic, and I just want to thank you for shining a light on all of the other ways in which health has been impacted as a result of the COVID pandemic. It's what we consider the reverberating effects or the parallel pandemics, you know, that are associated with COVID-19 and how it has changed the way that we interface with health care. But also, how other diseases have been affected during this time. To answer your specific question about sexually transmitted infections, we can get you the preliminary data, again, that we have for those numbers. There have been some declines, but the picture is more complicated because of the fact that in many cases care was interrupted during March and April. And so, people weren't getting tested as often for those sexually transmitted infections. The one other point that I will make is that this has been a focus for the Health Department and our public guidance with respect to encouraging safe sex practices during the COVID-19 era as well. We have information about that on our website, and we'll be happy to follow up with you on that point as well.

**Mayor:** Thank you. Dr. Varma.

**Senior Advisor Varma:** Yeah, just one other additional point on top of what Dr. Chokshi has said that I think once we're through this horrible time, once we're through this pandemic, one important outcome of this has been that as you can see from the Health Department website there is rapid COVID testing available at all of the sexual health clinics. One of the side benefits of that is that the instrument that is used for that rapid COVID testing, is the exact same instrument that was used at the Chelsea clinic to set up the quickie labs. So, we have the opportunity to really, you know, replicate that quickie lab experience throughout the city now. And that's a side benefit of investing in COVID is that it can ultimately used for other things and expand the ability for people to get really fast, quick and easy STI diagnosis onsite.

**Mayor:** I want to turn to – thank you. I want to turn to Dr. Katz, who was on the frontline at the beginning of the epidemic in San Francisco and I think it would be good to have a moment of reflection from you of just how far we've come and what we need to do to finish this mission, Dr. Katz.

**President Katz:** Thank you, Sir. I mean, I, of course, in my mind go back to the 1980s when I was a doctor in San Francisco taking care of people with HIV/AIDS and also an openly gay man where most of my friends and colleagues were infected and where funerals were a weekly occurrence. To be honest, I never thought I would live to see another epidemic. I thought I had lived through my epidemic already. COVID has brought us another epidemic, but it is incredibly gratifying to see the amazing work that's happened in New York City, along with San Francisco being the epicenters of the HIV epidemic. And it brings tears to my eyes to think of the people who don't have to go through the horrible pain that I saw among my friends and patients in the 1980s. It's amazing work and New York City should be so proud.

**Mayor:** Thank you very much. Well, everyone, as we conclude today just want to say on that, what's a powerful note to end on, but also a hopeful note that we have stared down adversity before and overcome, and we're in the process of doing that right now in New York City. But the way we do that, the way we fight back the coronavirus, the way we get back on our feet and recover is by vaccinating the maximum number of people and having the freedom to vaccinate. And I want to give a further update on sites that will be announced in addition to the sites you heard earlier. The larger sites, those mega sites, 24/7 – I talked about one in the Bronx and one in Brooklyn. I want to give an update that we are looking at two sites in Staten Island. There'll be one or the other, either Richmond Savings Bank Park, the ball field there, or it will be at the Staten Island Ferry Terminal. We'll have an update on that very shortly. Another potential Brooklyn site, MCU Park, the Cyclone stadium in Coney Island. Just giving you a sense of some of the, kind of, larger sites that will be available for these 24/7 operations. But again, they'll be all five boroughs. We'll have additional updates just the next few days, looking forward to those first two sites I mentioned, Bathgate in the Bronx and Brooklyn Army Terminal starting on Sunday, others coming online in the days immediately after.

And then in terms of the Health Department hubs, we talked about the three that are coming online this Sunday, Bushwick in Brooklyn, Hillcrest – Bushwick High School, Hillcrest High School, Queens, South Bronx High School campus in the Bronx. The following Saturday, not this Saturday, but the one after, additional sites include the Marta Valle campus in Manhattan and the Wadleigh I. S. 88 campus in Manhattan. In Brooklyn, Abraham Lincoln High School,

Canarsie High School, George Washington High School. In Staten Island, Port Richmond High School and Staten Island Tech. In the Bronx, Walton High School and Adlai Stevenson. And in Queens, August Martin and Beach Channel. So, again, this situation where we're building out sites, it's going to happen constantly. We want this to be as easy as possible. We want to make sure that New Yorkers looking to get those vaccines have many options. And, again, the more people we can vaccinate the better, the more freedom and flexibility we have the better. Ultimately by the end of this month, 250 sites around the city, 400,000 New Yorkers being vaccinated per week, again, so long as we get that help from our federal partners, our state partners, and the vaccine manufacturers.

As we conclude, we have to go back to where we started today, the big news of the day, thank you to the people of Georgia. I want to just – we should send a free bagel to everyone in Georgia to thank them, from New York City to you because Georgia has done something amazing for the whole country. I now have confidence there will be a stimulus. I now have confidence we're going to have what we need to recover. So, this – we all on Election Day in November felt the momentousness. This is an amazing one, two punch that now we are feeling the bigger change we need to actually get the help, to get ourselves back on our feet, to recover, to fully recover for New York City and the whole metropolitan area to be the engine of the American economy again, and that all of our people can get back on their feet and move forward. Everyone will have that chance to finally move forward. So, what a momentous result and what a good day for New York City. Thank you, everyone.

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