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**Testimony before the Senate Homeland Security and Governmental Affairs
Subcommittee on Oversight of Government Management, the Federal Workforce
and the District of Columbia
June 16, 2009**

Chairman Akaka and Ranking Member Voinovich, Members of the Subcommittee, thank you for the opportunity to come before you today to discuss how the Department of Homeland Security is protecting and preparing its employees in response to the 2009 H1N1 flu outbreak.

I recognize that, as a department, we must work together to take proper safety precautions to reduce transmission of any disease while still performing our critical mission. This may mean that some employees need to wear personal protective equipment. Some employees may need to telecommute. Others may need to stay home if they have an illness in their family or if their child's school is closed. I am committed to working with component heads from across the department and across the federal government to provide our employees with the safest possible working environment. Our workforce safety and security is always one of my top priorities.

It is important to know that we are making all of our decisions based on the science and the epidemiology as recommended to us by the Centers for Disease Control and Prevention (CDC), the workplace guidance from the Departments of Health and Human

Services and Labor, the public health community, and the World Health Organization (WHO).

DHS Pandemic Influenza Preparedness Activities

Congress appropriated \$7.1 billion in supplemental funding in fiscal year 2006 for avian and pandemic influenza preparedness activities. A majority of the funding went to the Department of Health and Human Services (HHS). DHS received \$47.3 million, which was distributed to DHS components by the Chief Medical Officer. Congress directed that the funding be used for, among other things, workforce protection.

The Department was able to build the basis for its pandemic program with this appropriation. We purchased personal protective equipment (PPE) for use by mission essential employees including those in the National Capital Region, but primarily designated for use by the operational components whose job functions place them at greater risk during a pandemic event, specifically the U.S. Coast Guard (USCG), U.S. Immigration and Customs Enforcement (ICE), U.S. Customs and Border Protection (CBP), and the Transportation Security Administration (TSA). Currently, PPE is pre-positioned at 53 DHS locations and field offices nationwide. The Federal Emergency Management Agency (FEMA) is responsible for coordinating the actual distribution logistics of moving PPE from the DHS stockpile to any delivery location defined by need.

The Department has also stockpiled two types of antivirals, oseltamivir (Tamiflu[®]) and zanamivir (Relenza[®]), dedicated for DHS workforce protection. These medications are stored in a pharmaceutical warehouse. In addition, the USCG purchased courses of antivirals through Department of Defense stockpile channels. Overall, DHS has on hand approximately 540,000 courses of antivirals targeted for its mission essential workforce.

The FY06 supplemental also enabled DHS to prepare a number of pandemic plans in concert with other Federal agencies. The Department's Office of Health Affairs (OHA) coordinated the development of several pandemic plans and products including a DHS

Pandemic Influenza Contingency Plan, and Screening Protocols for Pandemic Influenza – Air, Land, Maritime, and the Draft Federal Interagency Pandemic Influenza Strategic Plan. OHA manages and tracks the action items assigned to DHS under the National Strategy for Pandemic Influenza Implementation Plan.

Effective communication in any disaster is critical, and a severe pandemic where there would be nationwide consequences is no exception. The Office of Health Affairs worked with the DHS Office of Public Affairs and Federal interagency representatives to create the ESF-15 Pandemic Influenza Communications Go Book, which provides a framework for consistent public communications on non-medical issues by Federal agencies as well as state and local communities in the event of a pandemic outbreak.

Training is also crucial for preparing the DHS workforce in the event of a pandemic. OHA developed a pandemic awareness and prevention training DVD for DHS components to use to educate its workforce. The module is accessible on DHScovery, the Department's learning management system, and allows for tracking of trained employees. CBP created its own mandatory training courses for its employees as well. ICE also offers pandemic flu training courses to its employees through its ICE Virtual University web site. These courses have been made available to the ICE workforce since August 2006.

Workforce Pandemic Exercises

In October 2008, DHS conducted an Intradepartmental Pandemic Influenza Tabletop Exercise, which included participants from all DHS components, the Deputy Secretary of Homeland Security, and the National Pandemic Principal Federal Official team. Last month, the Department conducted an intra-DHS workshop focused on workforce protection in the event of a pandemic. The purpose of the workshop was to facilitate in-depth discussions and highlight potential actions addressing Departmental workforce protection issues during a pandemic influenza event. The objectives of the exercise were to clearly identify Departmental-level, versus component-level, responsibilities and to outline internal communications strategies. All DHS components were represented and

13 other Federal departments and agencies sent representatives to the workshop with total attendance estimated at nearly 100 participants.

Messages to DHS employees

Secretary of Homeland Security Janet Napolitano has made communication with the DHS workforce a top priority, especially in light of the inception of the 2009 H1N1 flu outbreak. Guidance we issued advised our employees to follow procedures and recommendations of the CDC and we have consulted with DOL's Occupational Safety and Health Administration regarding workforce protections. Although each DHS component has specific policies and procedures regarding interaction with the public, the Department is committed to ensuring that they are implemented in a manner that complies with federal law, including non-discrimination restrictions.

Specifically, on Saturday, April 25, 2009, Secretary Napolitano sent a message to all DHS employees recognizing ongoing Federal activities to monitor the 2009 H1N1 flu outbreak and stressing flu prevention methods. The Secretary followed the next day with a message to DHS employees working on or near the Southwest border, outlining interim actions recommended by CDC should employees encounter travelers who appear unwell.

The Department's Office of Health Affairs physicians drafted guidance for DHS personnel concerning the use of proposed medications, and are drafting guidance for administration of antivirals for components under the medical control of OHA. In addition, on April 30, 2009, I provided all DHS employees with interim PPE guidance concerning response to the 2009 H1N1 flu outbreak, developed in consultation with OSHA and CDC.

CDC updated and revised its guidance pertaining to the H1N1 flu outbreak on May 27, 2009. On May 29, 2009, I issued a revised management policy to Component leadership, which was consistent with current CDC recommendations.

Incident Coordination

The Department established an Incident Management Cell (IMC) early in the 2009 H1N1 event to track requests for information and respond to component inquiries. We ensure that OHA Offices of Medical Readiness and Component Services staff the IMC full-time. This cell responds to requests and inquiries by DHS offices and components 24 hours a day, seven days a week.

Strengthening Workforce Protection for the Future

The Department is taking a number of steps to ensure continued responsiveness to Component requests and to ensure the health and safety of the DHS workforce. Moving forward, one of our goals is to provide uniform occupational health services across the Department, in order to ensure operational components can deliver post-exposure prophylaxis and treatment of employees in the future. In addition, we hope to strengthen our internal medical oversight capacity, ensuring DHS fully utilizes the capabilities of our medical personnel as well as our emergency services medical personnel. Finally, OHA has been developing a more formal mechanism for providing medical advice to DHS components.

In conclusion, DHS remains dedicated to protecting the health and safety of our workforce in the event of a pandemic. I will continue to work close with Secretary Napolitano and our component leadership to respond to the needs of DHS employees throughout the response to the 2009 H1N1 flu outbreak. As I said, our workforce safety and security is always one of my top priorities.