



FOR IMMEDIATE RELEASE

Statement of Ranking Member Bennie G. Thompson

Taking Measure of Countermeasures (Part 2): A Review of Efforts to Protect the Homeland through Distribution and Dispensing of CBRN Medical Countermeasures

May 12, 2011 (Washington) – Today, Committee on Homeland Security Ranking Member Bennie G. Thompson (D-MS) delivered the following prepared remarks for the Emergency Preparedness, Response and Communications subcommittee hearing entitled “Taking Measure of Countermeasures (Part 2): A Review of Efforts to Protect the Homeland through Distribution and Dispensing of CBRN Medical Countermeasures”:

“Each state is required to have a plan outlining how they will receive and distribute Strategic National Stockpile medications and supplies received from the Centers for Disease Control (CDC) as quickly as is possible to their residents.

Included in these plans is an indication of the state’s ability to institute proper storage, inventory control, and security of the medical countermeasures they receive. Unfortunately, these are the same public health offices and departments that have faced severe federal, state, and local budget cuts.

While temporary funding is provided during times of crisis, such as during the H1N1 pandemic, this is simply an inadequate and unsustainable strategy.

As we begin the process of authorizing and appropriating funding used for grants to states, we must seriously examine these issues and provide the resources necessary to meet our objectives.

The shortage of trained public health workers will present an additional barrier for our emergency response efforts.

It is estimated that the United States has 50,000 fewer public health workers than it did 20 years. Additionally, one-third of the public health workers will be eligible to retire within 5 years.

With numbers like that, it makes one wonder who exactly would be giving out these medications should we face another public health emergency?

Who will safeguard communities with large numbers of vulnerable populations such as children, the uninsured or underinsured, the elderly, and those with low incomes?

To ensure that those who are providing these needed medical countermeasures have the skills needed to carry out their mission, we must not only develop standard qualifications for these workers, but we must also make sure that state plans include provisions for adequate surge capacity.”

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