



Dr. Everett B. Kelley
National President

Jeremy A. Lannan
NVP for Women & Fair Practices

March 5, 2020

The Honorable Jack Reed
Ranking Member
Senate Armed Service Committee
Washington, DC 20510

Dear Ranking Member Reed:

On behalf of the more than 700,000 federal and District of Columbia employees represented by the American Federation of Government Employees, AFL-CIO (AFGE), I write to request an opportunity to discuss with you our public health concerns related to the Coronavirus, or COVID-19. Our union represents civilian employees of the Department of Defense, employees of the Department of Veterans Affairs, employees of the Department of Homeland Security (including law enforcement officers in Border Patrol and Immigration and Customs Enforcement as well as FEMA employees and Transportation Security Officers), Corrections Officers in the Bureau of Prisons, employees of the Social Security Administration, as well as federal employees working throughout the other Executive Branch agencies and programs.

Many federal employees have extensive interaction with the general public as part of their regular duties. Of particular concern are those who have been or are likely to be called upon to provide services to populations infected with COVID-19 or populations at risk for infections. As you know, Americans who have been re-patriated after overseas exposure have been quarantined at two military bases, Travis Air Force Base in California and Joint Base San Antonio-Lackland in Texas. The quarantines at Travis and Lackland were initiated without any type of notice or training for the Defense civilian employees working at these installations. We have received reports from employees we represent that safety protocols and safety equipment were not made available to the DoD employees on the base, nor were they adequately trained on procedures for minimizing the chance of exposure or infection for themselves or their families.

As you may know, a formal complaint has been filed with the Office of Special Counsel alleging that even the Department of Health and Human Services' employees in the Administration for Children and Families who were tasked with providing direct patient care for the quarantined evacuees did not have adequate protective equipment or training. For example, while the Centers for Disease Control employees were provided respirators and other protective equipment, the HHS employees were not. Further, the employees involved in direct patient care left the installations for the surrounding communities, potentially taking viral infection with them. In the midst of all this, the DoD civilian employees of Travis were not even an afterthought.

We have also recently learned that a patient with COVID-19 was moved, at the veteran's request, to the Palo Alto Veterans Medical Center. VA employees are well aware of the Department's "Fourth Mission" of contingency support during national disasters or other public health emergencies. They understand the role of VA facilities in the National Disaster Medical System. But as part of the recent



focus on outsourcing VA medical care to the private sector, this function as well as others has been a low priority in terms of staffing and training.

Indeed, the 8,000 veterans who reside in the VA's own skilled nursing facilities are not only at risk for contracting the virus, they are at risk if the homes' staff become infected and are unable to care for them. The urgency of providing adequate training and protective equipment for VA hospital and nursing home staff cannot be overstated. But the VA has not met with AFGE on this issue either.

While the VA receives funding for its "Fourth Mission" so that performing it does not detract from its primary mission of caring for veterans, the same is not the case for the Department of Defense. Indeed, suddenly imposing this particular public health responsibility and risk on DoD facilities threatens military readiness. We are concerned not only about the diversion of resources and risk to the health of civilian and military employees, but also to their ability to carry out their national security mission as this health risk is introduced to the installations. What kind of impact on military readiness would the forced closure and quarantine of an entire military base create? We do not think that this question has been answered adequately.

We are raising these concerns with the administration as well, but we bring these issues to your attention because we need the support of prominent members of Congress in order to prompt agency officials to recognize the risks facing the federal workforce. We are requesting meetings with top agency officials at the Department of Defense and the Department of Veterans Affairs, and would greatly appreciate your willingness to weigh in to support our request for them to communicate with employee representatives regarding training, provision of protective gear, and other precautionary measures meant to protect us and the public we serve.

Sincerely and In Solidarity

A handwritten signature in black ink that reads "Dr. Everett B. Kelley". The signature is written in a cursive style with a long, sweeping tail on the final letter.

Dr. Everett B. Kelley, National President