

compassion, these brave men and women regularly put the well-being of others before their own. Through their actions they are heroes . . . through their example they are role models for all of us to emulate.

Madam Speaker, the current COVID-19 pandemic has presented Missouri's first responders with seemingly impossible challenges. Despite numerous obstacles, police officers, firefighters, emergency medical professionals and 9-1-1 dispatchers are showing up every day to care for their friends, neighbors, and communities. On behalf of a grateful community, I express my sincere thanks, and pray God blesses them all with peace and safety.

**FIREFIGHTER EXCESS PERSONAL PROPERTY IN H.R. 6395, THE NATIONAL DEFENSE AUTHORIZATION ACT OF 2021**

**HON. KIM SCHRIER**

OF WASHINGTON

IN THE HOUSE OF REPRESENTATIVES

*Friday, July 31, 2020*

Ms. SCHRIER. Madam Speaker, I am pleased that my amendment to assess the Firefighter Property Program (FFP) and the Federal Excess Personal Property Program (FEPP) implementation and best practices was included in final passage of H.R. 6395, the National Defense Authorization Act of 2021.

I would also like to include in the RECORD a letter of support for my amendment from the National Volunteer Fire Council (NVFC).

The Department of Defense (DOD) Firefighter Property Program (FFP) and the Federal Excess Personal Property Program (FEPP) transfer excess equipment like hoses, trucks, and aircraft and vehicle parts to the U.S. Forest Service to be distributed to states. As the National Volunteer Fire Council notes, "many of the fire departments that take advantage of FFP and FEPP are located in rural areas that have relatively small tax bases and therefore lack the resources to afford new specialized equipment and vehicles to respond to wildland fires and other unique vulnerabilities in the communities that they serve."

The FFP and FEPP programs currently offer excess equipment on a first-come, first-served basis. As the nation is facing increasing threats of extreme fire events, states are not acquiring equipment in an equitable manner. This is due to a multitude of factors. My amendment requests an assessment of FFP and FEPP implementation and best practices, taking into account community need and risk, including whether a community is an at-risk community.

It additionally requires consultation with state implementers and program recipients which will allow us to understand how these programs are operating on-the-ground, and more importantly, how we can improve access for volunteer and small fire and emergency service providers in rural communities.

I am thankful to have the National Volunteer Fire Council's support for this amendment. I want to emphasize their request that the agencies carrying out the assessment required by this amendment "establish a process for volunteer fire departments and state and national organizations representing the interests of vol-

unteer fire departments to provide input into the assessment as part of consulting with 'participants in the programs.'"

As the FY2021 National Defense Authorization Act moves to conference, I ask that my colleagues work to include this important amendment in the final bill.

NATIONAL VOLUNTEER FIRE COUNCIL,  
*Greenbelt, MD, July 22, 2020.*

Hon. KIM SCHRIER, MD,  
*House of Representatives,*  
*Washington, DC.*

DEAR REPRESENTATIVE SCHRIER: On behalf of the National Volunteer Fire Council (NVFC), which represents the interests of the nation's volunteer fire, EMS, and rescue services, I am writing regarding your amendment to the National Defense Authorization Act of 2020 directing the Department of Defense (DoD), acting through the Director of the Defense Logistics Agency (DLA), jointly with the Secretary of Agriculture, acting through the Chief of the Forest Service, to assess the Firefighter Property Program (FFP) and the Federal Excess Personal Property Program (FEPP).

As you know, the FFP and FEPP programs provide critical assistance to thousands of volunteer fire departments across the country each year by allowing them to acquire excess DoD property, including equipment and vehicles. Many of the fire departments that take advantage of FFP and FEPP are located in rural areas that have relatively small tax bases and therefore lack the resources to afford new specialized equipment and vehicles to respond to wildland fires and other unique vulnerabilities in the communities that they serve. These programs are extremely important to the volunteer fire service and I thank you for your interest in developing an assessment to evaluate ways that they can be improved.

One issue that I hope can be examined as part of the assessment is the extent to which additional resources could increase access to and participation in the FEPP and FFP programs by volunteer fire departments. Based on anecdotal evidence from our members I believe that more assistance devoted to helping process applications to acquire surplus property and transport surplus property from where it is stored to the fire department requesting it would make it easier for some agencies to take full advantage of these programs.

I am pleased that your amendment explicitly directs the agencies carrying out the assessment to "... consult with State foresters and participants in the programs..." State foresters play an important role in facilitating the acquisition of surplus property by fire departments in their states. Additionally, differences in state statutes authorizing fire department participation in the FEPP and FFP programs contribute to some of the variations we can observe in acquisition rates between states. All of these are important issues to be examined in the assessment. I would also encourage the Committee to direct the agencies carrying out the assessment to establish a process for volunteer fire departments and state and national organizations representing the interests of volunteer fire departments to provide input into the assessment as part of consulting with "participants in the programs."

Finally, I question the central role that DoD and DLA would play in developing the assessment under the amendment language. As you know, while DoD/DLA along with the General Services Administration are responsible for managing and disposing of a vast array of excess federal property, none of those agencies has anything to do with the management or administration of the FEPP or FFP programs, specifically. I encourage

the Committee to clarify that each agency tasked with carrying out the assessment focus on aspects of the programs that are appropriate given the scope of their actual role in administering the programs.

Thank you for your support for the FEPP and FFP programs, as well as the volunteer fire service generally. If you have any questions please feel free to contact me.

Sincerely,

RON ROY,  
*Chair, NVFC Wildland*  
*Committee, Division*  
*Chief, Douglas*  
*County Fire District*  
*#2, East Wenatchee,*  
*WA.*

**DEPARTMENT OF DEFENSE AUTHORIZATION ACT, 2021**

SPEECH OF

**HON. STEVEN M. PALAZZO**

OF MISSISSIPPI

IN THE HOUSE OF REPRESENTATIVES

*Thursday, July 30, 2020*

Mr. PALAZZO. Mr. Speaker, I rise in opposition to the appropriations bill before us today. The bill we are debating is as partisan a bill as I have seen in my years on the appropriations committee. Not only does the package spend billions over the current bipartisan budget agreement, the bill also contains many policy items that have no place in an appropriations bill.

Despite ongoing negotiations for a new coronavirus relief package this bill adds another 24 billion dollars in coronavirus relief funding . . . this is in addition to the 3 trillion in supplemental funds that were passed in May and adding more funding beyond what was outlined in the Senate's HEALS Act.

This may seem like a worthy cause if we knew the bills were going to be signed by the President in the coming days, but that's not the case. Instead, we are sitting here wasting time and energy inserting these provisions that guarantee the bill will never be signed into law as is.

This bill contains seriously dangerous provisions that place our men and women in uniform in harm's way by repealing the AUMF's that guide our counterterrorism operations, it ties the president's hands with regard to Iran, and undercuts America's dominance of space and our ability to counter nations like China who want to gain supremacy there. Further, it eliminates several long-standing, bipartisan Second Amendment protections while also defunding the police and targeting law enforcement through overreaching regulations.

The amendments that have been made in order by the rule undercut our military leadership even further by making exemptions to policies put in place to preserve good order and discipline, turning our military into a social experiment instead of maintaining our readiness and capability as the world's preeminent fighting force.

Despite the inclusion of South Mississippi's priorities in this bill, such as ship and boat building in Pascagoula and Gulfport, rocket propulsion testing for Stennis Space Center, and many other coastal priorities, this bill fails to deliver what's necessary.

At a time where America is suffering, the country is in turmoil, and we are working to regain our footing as the world's top economy, this bill does more harm than good.

I urge a no vote on the legislation.

CELEBRATING THE 100TH ANNIVERSARY OF PIH HEALTH DOWNEY HOSPITAL

**HON. LUCILLE ROYBAL-ALLARD**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Friday, July 31, 2020*

Ms. ROYBAL-ALLARD. Madam Speaker, I rise today to recognize PIH Health Downey Hospital on its upcoming 100th anniversary. On September 14, 2020, the hospital will proudly celebrate and reflect on the 100 years of service and care that its facilities and its staff have provided. Through the years, the hospital has been a cornerstone of the Downey community, caring for generations of local residents.

From its beginnings as Virginia Hospital in 1920, with six beds and two doctors in rooms on the second floor of a former hotel on what is now Downey Avenue, this hospital's history has been eventful and full of advances. Within two years of its opening, an explosion in the city made the hospital's value clear and showed the need for larger facilities. Two years later, a new 15-bed hospital opened on East 5th Street.

In the 1930s, a group of five physicians purchased the hospital and renamed it Downey Community Hospital (DCH). Growth before and after World War II added operating rooms, modern X-ray equipment, maternity and obstetrics wards, and an emergency department with round-the-clock care. By 1956, the same year the city of Downey became incorporated, DCH reorganized as a nonprofit hospital with 49 beds.

In the mid-1960s, construction began on a new 152-bed facility at the current location on Brookshire Avenue. The day after this facility opened in 1969, eight surgeries were performed. Within a week, the hospital was full.

Over the subsequent decades, DCH continued to grow its facilities, resources, and services to meet the health care needs of the growing community. In 1999, Downey Community Hospital became Downey Regional Medical Center (DRMC), a total health care system that included a 199-bed hospital and DRMC Insurance Services. Downey Regional Medical Plaza opened in 2003.

In 2013, a Management Services Agreement signed between DRMC and PIH Health created an opportunity for greater collaboration between the two mission-based nonprofit organizations. Downey Regional Medical Center, with the approval of the California Attorney General's office, became part of the PIH Health family as PIH Health Hospital—Downey

on October 1, 2013. The hospital was renamed PIH Health Downey Hospital in 2019. This new partnership has been crucial to meeting Southern Californians' expanding health care needs.

Over the last century, PIH Health Downey Hospital has changed and evolved, but it has always been driven by a mission to provide the best care for its patients and our communities and making enhancements and updates to achieve this goal. It is now the second hospital of a vastly growing health system that services more than three million people.

As PIH Health Downey Hospital looks to the future, the hospital and its staff remain committed to honoring a legacy of healing and hope. By prioritizing the needs of its patients and dedicating itself to meeting their needs and expectations for generations to come, the hospital will continue to have a positive impact in the community for the next 100 years and beyond.

Madam Speaker, I ask my colleagues to please join me in thanking and congratulating PIH Health Downey Hospital, and its more than 5,100 compassionate and valued staff, on the hospital's celebration of 100 years providing high-quality health care, and contributing to the health and well-being of our communities in an ethical, safe, and fiscally prudent manner.