

we heard the first reports that there was a novel virus occurring in China. In early January, we saw China take unprecedented steps to enact containment, locking down Wuhan and large portions of their country.

We had our first briefing about 7 or 8 weeks ago. At that briefing, I identified four areas that the administration really had to focus on:

Number one, you need a command control structure. You have to identify one person who is not political and not partisan but is a public health expert who has that ability to work across the interagency process.

Number two, you had to do an emergency supplemental and get resources out to the hospitals, the public health experts, et cetera, to make sure those who were on the front line had what they needed.

Number three, we had to get our scientists and experts—we have the best in the world at the CDC and NIH—to the epicenter, to the hot zone in China. That was delayed not because we didn't want to get there, but the Chinese would not allow us direct access.

Number four, we had to be transparent with the public. We had to let people know the facts as they were occurring.

Fast-forward, 6 weeks ago, I held the first hearing in my Subcommittee on Asia, the Pacific, and Nonproliferation on what was going on. We focused on the first step: containment. It was evident at that hearing with the public experts that we had that you really couldn't contain this novel coronavirus now known as COVID-19. We knew, based on the public health recommendations, that we would likely be seeing community events and community spreading; that was pretty evident.

We lost time. The fact that China tried to contain things gave us a little bit of time, but the fact that we didn't develop a test and we didn't put things in place really set us behind the eight ball.

Two weeks ago, we had the first community case in my home county, Sacramento County. That patient was transferred to UC-Davis, which is my home facility. Based on that, we changed the testing criteria. We still don't have enough tests out there, but we changed the criteria to allow the health professionals, if they suspect a case of coronavirus, to be able to order that test. Now we have got a problem though. We don't have the tests that are available.

We now are moving into the second phase of coronavirus, which is mitigation. In order to do that, Congress took the first important step last week with the \$8.3 billion emergency supplemental. We have to get the resources, the protective gear, the masks, and the tests out to the community who is on the front line.

The reason why I am saying that is, yesterday, we had the first community case in my home city of Elk Grove, in

the school district. We had a grammar school child who tested positive. Both his parents have also tested positive. Elk Grove Unified School District became the first school district in northern California to shut down for a week. I don't know if that is the right move or the wrong move, but I understand, having spoken to the superintendent, the security and health of the children are paramount.

Now we have to make sure that our folks on the front line and the folks who are having to make some of these decisions have the best advice possible. That is why we have got to make sure the CDC puts out guidelines and updates those guidelines on a regular basis.

We have great personnel at the CDC: Director Redfield, Dr. Messonnier, and others. We have got to let them do their work. Even if it is not what the administration wants to hear and even if it is bad news, it is important for us to put out transparent information and guidance to the public.

Now, I also got on the phone and talked to my hospital directors and others. What is concerning to me is they are starting to get those calls, et cetera. They still don't have the testing capabilities that they need. That is of paramount urgency right now.

I applaud Vice President PENCE for allowing the commercial sector to step in here and start developing those tests. Let's remove those bureaucratic barriers and give our private sector, public health labs, and academic health centers the support that they need to get testing capabilities up and running.

Now, I think about this as a doctor. It is important for us at the local level to have good command control structures in place and good lines of communication. Let's let the doctors and the scientists do their jobs. Our job as Congress is to support those on the front line and make sure they have the resources that they need, and we will get through this.

#### PRECIOUS LITTLE SON

The SPEAKER pro tempore. The Chair recognizes the gentleman from South Carolina (Mr. NORMAN) for 5 minutes.

Mr. NORMAN. Mr. Speaker, I rise today to recognize an exemplary citizen, Ms. Crystal Skidmore of West Virginia.

Between 2000 and 2001, around 127,000 children were adopted in the United States, one of whom was Crystal's son whom she gave up for a better life. That same year, only 44 percent of the 3.1 million unintended pregnancies ended in birth.

Instead of giving up hope and having an abortion, Crystal looked to Jesus and chose life for her child. To this day, she protects her son's name when she shares her story. But by the grace of God, she still has a close relationship with him and his adoptive family.

Isaiah 40:31 reads: "... but those who hope in the Lord will renew their strength. They will soar on wings like eagles; they will run and not grow weary; they will walk and not grow faint."

She has described the miracle of her son in a poem she wrote, titled, "Precious Little Son." It goes like this:

Today's the day that you were made  
A new life has been begun  
Within the womb inside of me  
My precious little son.  
From this first day you changed me  
Now through your eyes I see  
Do I want your eyes to look at  
The same things that I see?  
I look around at this world of mine  
In a way I have never done  
I think . . . Is it safe here  
For my precious little son?  
Sadly I know  
The answer is no  
So I drop down to my knees  
I cry as I ask Jesus  
Please help you and me.  
Where are the smiling faces  
For your new eyes to see?  
They are not here in my world  
If I die, they may never be.  
I can only protect you for a while  
While you are safe inside of me  
So I search for smiling happy faces  
For your brand-new eyes to see.  
Again I ask Jesus  
To help me find someone  
To love this life inside of me  
My precious little son.  
I know someone is waiting.  
God has chosen them  
To give you all the love you need  
And make you part of them.  
How I know you need them  
How they have prayed for you to come  
So they can share a part of their world with  
Their precious little son.  
I found the happy smiling faces  
That I want you to see  
And they can't wait to meet their son  
Who lives inside of me.  
Their world is so much brighter  
So I share my love for you  
With lots of happy smiling faces  
And they will let me love you too.  
I will always love you  
I want you to know  
You are in my heart forever  
You are everywhere I go.  
Now we wait on your arrival  
We can't wait for you to see  
How good it feels to share a love  
That only through God can be.  
Our happy smiling faces  
Stand together now as one  
To love this life inside of me  
Our precious little son.

May God be with you.

#### ALL-FEMALE TEAM WORKING ON COVID-19

The SPEAKER pro tempore. The Chair recognizes the gentleman from Maryland (Mr. TRONE) for 5 minutes.

Mr. TRONE. Mr. Speaker, I rise today to recognize the all-women team of scientists from the Novavax Vaccine Lab in Gaithersburg, Maryland, who are working to develop a vaccine for the coronavirus.

Nita Patel, the director for vaccine development and antibody discovery at Novavax, is leading the team of scientists who have been working on a