

What can be done is to make funds available to carry out programs to assist them. The legislation authorizes \$10 million to be allocated to individual medical facilities within VA, especially to those in rural areas without a long-term care facility, based upon the proposals submitted by the facilities. In efforts to evaluate the improvements made in caregiver assistance services, a report shall be submitted to Congress by the Secretary no later than a year after enactment of this bill. The report should include information on the allocation of funds to facilities and a description of the improvements made with the funds.

Let us meet these caregivers halfway by giving them the assistance they need to care for the veterans that depend on them. I ask my colleagues to join me in supporting this effort.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 2753

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. IMPROVEMENT OF SERVICES FOR CAREGIVERS OF VETERANS.

(a) IN GENERAL.—The Secretary of Veterans Affairs shall carry out a program to expand and improve the services that assist caregivers of veterans, including veterans of the Global War on Terrorism.

(b) CAREGIVER ASSISTANCE SERVICES.—For purposes of this section, the term “caregiver assistance services” includes the following:

- (1) Adult-day health care services.
- (2) Coordination of services needed by veterans, including services for readjustment and rehabilitation.
- (3) Transportation services.
- (4) Caregiver support services, including education, training, and certification of family members in caregiver activities.
- (5) Home care services.
- (6) Respite care.
- (7) Hospice services.
- (8) Any modalities of non-institutional long-term care.

(c) FUNDING.—

(1) SOURCE OF FUNDS.—In carrying out the program required by subsection (a), the Secretary shall identify, from funds available to the Department of Veterans Affairs for medical care, an amount not less than \$10,000,000 to be available to carry out the program and to be allocated to facilities of the Department pursuant to subsection (d).

(2) MINIMUM ALLOCATION OF FUNDS.—In identifying available amounts pursuant to paragraph (1), the Secretary shall ensure that, after the allocation of funds under subsection (d), the total expenditure for programs in support of caregiver assistance services for veterans is not less than \$10,000,000 in excess of the baseline amount.

(3) BASELINE AMOUNT.—For purposes of paragraph (2), the baseline amount is the amount of the total expenditures on programs in support of caregiver assistance services for veterans for the most recent fiscal year for which final expenditure amounts are known, adjusted to reflect any subsequent increase in applicable costs to support such services through the Veterans Health Administration.

(d) ALLOCATION OF FUNDS TO FACILITIES.—The Secretary shall allocate funds identified

pursuant to subsection (c)(1) to individual medical facilities of the Department in such amounts as the Secretary determines appropriate based upon proposals submitted by such facilities for the use of such funds for improvements to the support of the provision of caregiver assistance services for veterans. Special consideration should be given to rural facilities, including those without a long-term care facility of the Department.

(e) REPORT.—Not later than one year after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans' Affairs of the House of Representatives a report on the implementation of this section. The report shall include information on the allocation of funds to facilities of the Department under subsection (d) and a description of the improvements made with funds so allocated to the support of the provision of caregiver assistance services for veterans.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 465—EXPRESSING THE SENSE OF THE SENATE WITH RESPECT TO CHILDHOOD STROKE AND DESIGNATING MAY 6, 2006, AS “NATIONAL CHILDHOOD STROKE AWARENESS DAY”

Mr. CHAMBLISS (for himself and Mr. FRIST) submitted the following resolution; which was considered and agreed to:

S. RES. 465

Whereas a stroke, also known as a “cerebrovascular accident”, is an acute neurologic injury that occurs when the blood supply to a part of the brain is interrupted by—

- (1) a clot in the artery; or
- (2) a burst of the artery;

Whereas a stroke is a medical emergency that can cause permanent neurologic damage or even death if not promptly diagnosed and treated;

Whereas 26 out of every 100,000 newborns and almost 3 out of every 100,000 children have a stroke each year;

Whereas an individual can have a stroke before birth;

Whereas stroke is among the top 10 causes of death for children in the United States;

Whereas 12 percent of all children who experience a stroke die as a result;

Whereas the death rate for children who experience a stroke before the age of 1 year is the highest out of all age groups;

Whereas many children who experience a stroke will suffer serious, long-term neurological disabilities, including—

- (1) hemiplegia, which is paralysis of 1 side of the body;
- (2) seizures;
- (3) speech and vision problems; and
- (4) learning difficulties;

Whereas those disabilities may require ongoing physical therapy and surgeries;

Whereas the permanent health concerns and treatments resulting from strokes that occur during childhood and young adulthood have a considerable impact on children, families, and society;

Whereas very little is known about the cause, treatment, and prevention of childhood stroke;

Whereas medical research is the only means by which the citizens of the United States can identify and develop effective treatment and prevention strategies for childhood stroke; and

Whereas early diagnosis and treatment of childhood stroke greatly improves the chances that the affected child will recover and not experience a recurrence: Now, therefore, be it

Resolved, That the Senate—

(1) designates May 6, 2006, as “National Childhood Stroke Awareness Day”; and

(2) urges the people of the United States to support the efforts, programs, services, and advocacy of organizations that work to enhance public awareness of childhood stroke, including—

- (A) the Children's Hemiplegia and Stroke Association;
- (B) the American Stroke Association, a division of the American Heart Association; and
- (C) the National Stroke Association.

SENATE RESOLUTION 466—DESIGNATING MAY 20, 2006, AS “NEGRO LEAGUERS RECOGNITION DAY”

Mr. NELSON of Florida (for himself, Mr. TALENT, Mr. DEWINE, Mr. REID, and Mr. BROWNBACK) submitted the following resolution; which was considered and agreed to:

S. RES. 466

Whereas even though African Americans were excluded from playing in the major leagues of their time with their white counterparts, the desire of many African Americans to play baseball could not be repressed;

Whereas Major League Baseball did not fully integrate its league until July 1959;

Whereas African Americans began organizing their own professional baseball teams in 1885;

Whereas the skills and abilities of Negro League players eventually made Major League Baseball realize the need to integrate the sport;

Whereas six separate baseball leagues, known collectively as the “Negro Baseball Leagues”, were organized by African Americans between 1920 and 1960;

Whereas the Negro Baseball Leagues included exceptionally talented players who played the game at its highest level;

Whereas on May 20, 1920, the Negro National League, the first successful Negro League, played its first game;

Whereas Andrew “Rube” Foster, on February 13, 1920, at the Paseo YMCA in Kansas City, Missouri, founded the Negro National League and also managed and played for the Chicago American Giants, and later was inducted into the Baseball Hall of Fame;

Whereas Leroy “Satchel” Paige, who began his long career in the Negro Leagues and did not make his Major League debut until the age of 42, is considered one of the greatest pitchers the game has ever seen, and during his long career thrilled millions of baseball fans with his skill and legendary showboating, and was later inducted into the Baseball Hall of Fame;

Whereas Josh Gibson, who was the greatest slugger of the Negro Leagues, tragically died months before the integration of baseball, and was later inducted into the Baseball Hall of Fame;

Whereas Jackie Robinson, whose career began with the Negro League Kansas City Monarchs, became the first African American to play in the Major Leagues in April 1947, was named Major League Baseball Rookie of the Year in 1947, subsequently led the Brooklyn Dodgers to 6 National League pennants and a World Series championship, and was later inducted into the Baseball Hall of Fame;

Whereas Larry Doby, whose career began with the Negro League Newark Eagles, became the first African American to play in