

Worst of all however, teens and young adults experience the highest rates of violent crime.

It is clear that we must make an effort to raise our children to recognize that violence is nothing more than the physical manifestation of fear and desperation. However, our society's glorification of violence has become so ingrained in our culture that it has become seemingly impossible to reverse.

Madam Speaker, it is our collective responsibility to create a society that values respect toward our fellow citizens. This legislation is simply a small step toward addressing what has become a destructive parasite upon the future of our country. By learning how the media and society promote violence and examining ways in which we can address this most pressing dilemma, it is my hope that we can stem the tide of violence and crime in America so that subsequent generations can live in a more peaceful nation.

I ask for my colleagues' support and urge the swift consideration of this bill.

CONFERENCE REPORT ON H.R. 2346,
SUPPLEMENTAL APPROPRIATIONS ACT, 2009

SPEECH OF

HON. CAROLYN B. MALONEY

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 16, 2009

Mrs. MALONEY. Madam Speaker, I rise today in support of the men and women in our armed forces and H.R. 2346, the Supplemental Appropriations Act of 2009.

I support this bill because it is the first step toward ending the war in Iraq and bringing home the troops, as President Obama has pledged to do by August 2010. This bill is consistent with the President's plan and provides the troops with increased pay and better protection over the next few months as we begin to withdraw.

H.R. 2346 will provide \$1.9 billion more than requested for Mine Resistant Ambush Protected, MRAP, vehicles. Since most of our casualties in Iraq result from roadside bombs, it is critical that we fully fund vehicles capable of keeping our troops safe. In addition, this bill recognizes the hardships of "stop-loss"—remaining on active duty beyond one's contract—on military servicemembers and their families by providing a retroactive pay increase for those serving under stop-loss orders.

This bill does what Bush-era war funding bills did not. By mandating performance reports, it illustrates the understanding that Congress needs to be fully informed about the progress of the military actions undertaken by the United States. By refocusing our efforts on success in Afghanistan, it demonstrates a shift from an open-ended two front war to a focused mission in Afghanistan centered on establishing a strong Afghan military and political infrastructure. Lastly, by extending a line of credit to the International Monetary Fund, which will be significantly leveraged, this bill reflects the Administration's strong belief that diplomacy and economic empowerment are critical to winning the war on terror.

Finally, I also support the funding for preparedness against pandemic flu. New York City has been hit the hardest by the recent

outbreak of the H1N1 strand of influenza with 567 hospitalizations to date. Pandemic flu preparedness funding will prepare New York and the nation for the worst case scenario by increasing the national stockpile of antiviral drugs and medical supplies and improving our capacity to develop and produce vaccines to prevent infection.

INTRODUCTION OF THE ADVANCE CARE PLANNING AND COMPASSIONATE CARE ACT OF 2009

HON. EARL BLUMENAUER

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 17, 2009

Mr. BLUMENAUER. Madam Speaker, today I am proud to introduce the Advance Care Planning and Compassionate Care Act of 2009. This important legislation will provide the tools and resources necessary to dramatically improve care at the end of life.

As we approach health care reform, there is no other area more vital for honest discussion and careful analysis than what happens at the end of a patient's life. For most of us, the majority of our lifetime health care will be administered in that last year. Indeed for some, the last few months is when we will use the most doctor care, the most medical procedures, and spend the most days in a hospital.

Advances in health care have led to an aging population facing increasingly complex end of life health care decisions. These strains make complicated decision-making regarding medical care incredibly difficult. Too often, decisions are avoided until a crisis occurs, resulting in inadequate planning, unknown patient preferences, and families left struggling with the burden of determining their loved ones' wishes. For both families and patients, this is a time of incredible stress, confusion, and pain.

This legislation will provide valuable resources to patients, their families, and health care providers to ensure that care at the end of life is aligned with patient wishes and values.

The Advance Planning and Compassionate Care Act of 2009 would:

Improve consumer information about advance care planning and end-of-life care. This legislation would provide critically needed information and assistance to consumers and their families in order to guarantee that an individual's final wishes for care are carried out.

Improve provider education and training about advance care planning and end-of-life care. This legislation would establish a National Geriatric and Palliative Care Service Corps modeled after the National Health Service Corps.

Require portability of advance directives. The legislation would improve the portability of advance directives from one state to another, and require any existing advance directives to be prominently placed in a patient's medical record so they are easily visible.

Authorize funding for new and innovative approaches to advance care planning. Grants would be made available to states for development of electronic advance directive registries. Grants would also be made available to develop systems to identify that a person has an advance directive using driver's licenses, similar to how organ donor status is indicated.

Provide Medicare, Medicaid, and CHIP coverage for advance care planning consultations. This legislation provides Medicare, Medicaid, and CHIP coverage for advance care planning so that patients can routinely talk to their physicians about their wishes for end-of-life care.

Improve consumer access to hospice and palliative care. This legislation provides greater consumer information about hospice and palliative care, so the public is well informed of the care options available at the end of life.

Provide concurrent care for children. This legislation requires that concurrent care—the provision of both curative and hospice care at the same time—is available to children who qualify for hospice. This will make it possible for children to receive the palliative services they need from hospice while still pursuing potentially curative treatments.

Require the development of quality measures to assess end-of-life care. The Secretary of HHS, acting through the Director of the Agency for Healthcare Research and Quality, shall require specific end-of-life care quality measures for each relevant provider setting. The legislation would also develop and implement accreditation standards and processes for hospital-based palliative care teams.

Establish the National Center on Palliative and End-of-Life Care at the NIH. Biomedical and health services research is vital across all phases of life. A new National Center on Palliative and End-of-Life Care at the NIH will lead biomedical research on palliative and end-of-life care.

RECOGNIZING THE STATE UNIVERSITY OF NEW YORK (SUNY) CORTLAND MEN'S LACROSSE TEAM

HON. MICHAEL A. ARCURI

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 17, 2009

Mr. ARCURI. Madam Speaker, I stand today in recognition of the State University of New York (SUNY) Cortland Men's Lacrosse Team, which won the NCAA Division III championship with a 9–6 victory over Gettysburg College on May 24, 2009. The SUNY Cortland Red Dragons finished 2009 at 19–2, setting a school record for wins in a season. The game also marks the 200th career victory for three-year head coach Steve Beville and Cortland's second national championship in four years.

The Gettysburg Bullets held the lead at 4–2 after the first quarter, only to be shut out by the Cortland defense in the second and third quarters—a scoreless run that spanned about 38 minutes. The Red Dragons tied the game at the half before pulling ahead in the third quarter and closing the game with the title.

Junior Brandon Misiaszek (New Hartford, NY) was named the Most Outstanding Player with a career-high five goals. Mike Tota (Webster, NY) had a goal and an assist, finishing the season just one goal away from becoming the seventh player in school history to score 50 in a season. Senior goalie Matt Hipenbecker (Mountain Lakes, NJ) recorded 10 saves—seven alone during the fourth quarter—finishing an impressive performance in the NCAA playoffs during which he registered 40 saves.

Madam Speaker, I am honored to represent such talented and dedicated athletes in my