TRIBUTE TO THE PROCTOR FIRE DEPARTMENT/SUTHERLAND FALLS HOSE COMPANY ON THEIR 100TH BIRTHDAY

Mr. JEFFORDS. Mr. President, August 15, 1998, will be a great day for Vermonters as we celebrate the centennial of the Proctor Fire Department/Sutherland Falls Hose Company. On behalf of all Vermonters, I want to wish the department a very happy birthday.

For a century, the Proctor Fire Department has been a vital part of its community. The firefighters continually risk their lives to protect the welfare of their neighbors. One such person was Firefighter Maurice "Sonny" Barrow, a twenty-three year veteran of the department. He gave his life on January 23, 1994, while at the scene of a mutual aid fire in Pittsford, Vermont. Mr. Wardwell is a true hero and his sacrifice serves as a reminder to us all of dedication and selflessness of this profession.

Mr. President, the 100th birthday of the Proctor Fire Department/Sutherland Falls Hose Company is a monumental occasion. The department is a vital part of the town and provides prompt and reliable service to people in the most distressing situations. This tribute recognizes the importance of the Proctor Fire Department/Sutherland Falls Hose Company and, more importantly, the courageous firefighters who disable their time and service to the community.

RELIGIOUS PERSECUTION IN IRAN

Mr. BROWNBACK. Mr. President, on December 10, 1948—nearly 50 years ago—the General Assembly of the United Nations adopted and proclaimed the Universal Declaration of Human Rights, a document familiar to almost every American. This historic document states: "Everyone has the right to freedom of thought, conscience and religion; this right includes freedom to change his religion or belief, and freedom, either alone or in community with others and in public or private, to manifest his religion or belief in teaching, practice, worship and observance."

On Tuesday, July 21st, the Iranian government summarily executed an Iranian Baha'i for the single alleged act of converting a Muslim to the Baha'i faith. The Baha'is are Iran's largest religious minority with about 300,000 adherents and suffer continuous persecution for their faith.

The executed, Mr. Rowhani, a medical equipment salesman with four children, had been picked-up near the northern Iranian city of Mashad by the Iranian authorities in September 1997. He was held in solitary confinement during that extended period until his execution.

The facts are stark in their cruelty. His family was allowed to visit him briefly the day before his execution but, amazingly and cynically, they were not notified of execution. No consultation was set for the next day. They finally discovered the death only after they were given one hour to arrange for his burial. With brutal disregard, the Iranian government refused to divulge any information to this grieving family who were forced to conclude from the rope marks that their beloved relative had been executed by hanging.

It is safe to say that Mr. Rowhani was accorded no due process nor afforded a lawyer prior to his execution. He was not notified of execution but, amazingly and cynically, he was set for the next day. They finally discovered the death only after they were given one hour to arrange for his burial. With brutal disregard, the Iranian government refused to divulge any information to this grieving family who were forced to conclude from the rope marks that their beloved relative had been executed by hanging.

My deepest concern now rests with the fifteen other Baha'i's now being held by the government of Iran for alleged religious beliefs. My deepest concern now rests with the fifteen other Baha'i's now being held by the government of Iran for alleged religious beliefs. My deepest concern now rests with the fifteen other Baha'i's now being held by the government of Iran for alleged religious beliefs.
because they dared to quietly celebrate their faith. I speak as much for them today as I do in protest to the brutal killing of their fellow-believer.

This hour, I call on the Government of Iran to ensure the safety of these individuals, and I call for the release of these individuals whose only crime was the sincere expression of their faith, which happens to be a minority religion. Most importantly, I call upon the government of Iran to provide freedom of religion to its people, people who have been viciously and brutally crushed for their faith by hostile national governments.

We cannot bring Mr. Rohhani back or right the wrong that was done to him and his family, but we can advocate against this happening again. Iran must abide by global human rights principles. Accordinly, Iran must release the fifteen Bahais who have been incarcerated for their faith. Iran must preserve the lives of those facing execution for their faith. Iran must honor its commitment to the religious freedom principles of the Universal Declaration of Human Rights and set these prisoners free.

NURSING SCHOOL ADMINISTERED PRIMARY CARE CLINICS

Mr. INOUYE. Mr. President, I rise today to speak on an health issue of great importance now and in future years. As our population continues to increase, our elderly live longer, and healthcare technology advances, the need for access to care will undoubtedly also increase. Because of these monumental increases in the need for healthcare access for many Americans, I wish to take a few minutes to discuss the need for support of nursing school administered primary care centers.

Nursing centers are university or nonprofit entity primary care centers developed (primarily) in collaboration with nursing schools of nursing and the communities they serve. These centers are staffed by faculty and staff who are public health nurses and nurse practitioners. Students supplement patient care while receiving preceptorships provided by colleges of nursing faculty. Nursing centers are often associated with academic institutions, who serve as collaborators with nurse practitioners.

Nurse practitioners, and public health nurses, in particular, are educated through programs which offer advanced academic and clinical experiences, with a strong emphasis on primary and preventive health care. In fact, schools of nursing that have established these primary health care centers blend service and education goals, resulting in considerable benefit to the community at large.

Nursing centers tend to be located in or near areas with a shortage of health professionals or areas that are medically underserved. The beneficiaries of these centers have traditionally been the underserved and those least likely to engage in ongoing health care services for themselves or their family members. In the 1970's, I sponsored legislation that would give nurses the right to reimbursement for independent nursing services, under various federal healthcare programs. At the same time, one of the first academic nursing centers was delivering primary care services in New York City.

As the Vice Chairman of the Committee on Indian Affairs, I am pleased to note that the University of South Carolina College of Nursing has established a Primary Care Tribal Practice Clinic, under contract with the Catawba Indian nation, which provides primary and preventive services to those populations. The University also has a Women's Health Clinic and Student Health Clinic, which are both managed by the School of Nursing.

Another prime example of services provided by nurse practitioners is the Utah Wendover Clinic. This clinic, in existence since 1994, provides interdisciplinary rural primary health services to more than 10,000 patients annually. The clinic now has telehealth capabilities that provide interactive links from the clinic to the university hospital, 120 miles away. This technology allows practitioners to direct access to primary care in rural areas. The clinic models its care around population health, mental health, potenial abuse, and emergency trauma treatment.

To date, nursing centers have demonstrated quality outcomes which, when compared to conventional primary health care, indicate that their comprehensive models of care have resulted in significantly fewer emergency room visits, fewer hospital inpatient days, and less use of specialists. The Lasalle Neighborhood Nursing Center, for example, reported for 1997 that fewer than 0.02 percent of their primary care clients reported hospitalization for asthma, less than the 3 percent of expectant mothers who enrolled delivered low birth rate infants; 90 percent of infants and young children were immunized in time; 50 percent fewer emergency room visits; and the clinic achieved a 97 percent patient satisfaction rate.

What makes the concept of nurse managed practices exciting and promising for the 21st century is their ability to provide care in a "spirit of serving" to underserved people in desperate need of health care services. Increasingly, nurse practitioners have consistently provided Medicaid sponsored primary care to underserved communities for a number of years, and have consistently demonstrated their commitment to these underserved areas.

The 1997 Balanced Budget Act (P.L. 105-33) included a provision that for the first time ever allowed for direct Medicare reimbursement of all nurse practitioners and clinical nurse specialists, regardless of the setting in which services were performed. This provision built upon previous legislation that allowed direct reimbursement for the individual nurse practitioners for services provided in rural health clinics throughout America. The law effectively paves the way for an array of clinical practice arrangements for these providers; however, people call it in a "spirit of serving" to underserved people.

Federal law now allows independent reimbursement for nurse practitioners under the Civilian Health and Medical Programs of Uniformed Services (CHAMPUS), the Federal Employee Health Benefits Plan (FEHBP), and in Department of Defense Medical Treatment Facilities.

As the Ranking Member of the Defense Appropriations Subcommittee, my distinguished colleagues and I have listened to the testimonies of the three Service Chief Nurses each year, during the Defense Appropriations hearing. I am proud to report that the military services have taken the lead in ensuring the advancement of the profession of nursing. Military advanced practice nurses provide care to service members and their families in service centers, as opposed to individual practitioners, was not formally included in the law.

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