Mr. SMITH of Oregon. Mr. President, I rise today to speak about hate crimes legislation I introduced with Senator KENNEDY in March of this year. The Local Law Enforcement Act of 2001 would add new categories to current hate crimes legislation sending a signal that violence of any kind is unacceptable in our society.

I would like to describe a terrible crime that occurred October 25, 1996 in Trevose, PA. A gay man, James Rebuck, 55, was stabbed to death at his residence after he allegedly made a pass at a man at a bar. David Alan Elliott, 23, and Scott Stocklin were charged with first-degree murder, burglary, criminal conspiracy and possession of deadly instruments.

I believe that Government’s first duty is to defend its citizens, to defend them against the harms that come out of hate. The Local Law Enforcement Enhancement Act of 2001 is now a symbol that can become substance. I believe that by passing this legislation, we can change hearts and minds as well.

VA LEADS THE NATION IN QUALITY OF CARE

Mr. ROCKEFELLER. Mr. President, the Department of Veterans Affairs has made great strides in becoming a leader within the health care profession. Too often, we dwell only on what is going wrong or what else can be done. However, as Chairman of the Committee on Veterans’ Affairs, I would like to instead draw attention to what VA has done to bring a high quality of care to our nation’s veterans. While there is no doubt that VA go even further in this area, we know that they have made great strides in delivering the standard of care veterans deserve.

A few years ago, the Democratic staff of the Committee on Veterans’ Affairs issued a report examining the standards of quality within the VA Health Care system. VA spends considerable effort and resources aimed at providing veterans with the highest quality health care in its hospitals and clinics. Over the years, VA has developed dozens of programs devoted exclusively to quality of care issues, yet public attention continues to be focused on examples of poor care within the health care system.

With nearly 956 sites and growing, VA operates the largest health care system in the United States. Veterans should know that the care at one VA hospital or clinic is at the same high quality level as the care at another VA health care facility. The study concluded that this can only be possible if the VA has a national system of quality which has built-in safeguards sufficient to overcome the inevitable fact that human error will always occur.

The committee is currently working on a follow-up to the original study. As more technological solutions to the problem of quality standardization are implemented, they will need to be examined. Quality of care is a vital issue to which I am very committed, and will continue to monitor closely as the VA health care system reconfigures itself to accommodate the changing demographics of the population it serves.

Coronary disease care is one area in particular that VA has excelled in with regard to quality of care. With coronary atherosclerosis being the second most frequent diagnosis among veterans enrolled in VA health care, it is imperative that VA is able to treat this condition with the best care possible. They have met that challenge, with VA medical facilities now providing the same level of care as non-VA hospitals.

The New England Journal of Medicine recently published a report that made this conclusion, based on a study of heart attack patient care within VA. The report also applauded VA’s efforts to improve their overall quality of care.

I ask unanimous consent that an article from The Topeka Capital-Journal, highlighting the report from The New England Journal of Medicine on the study of VA’s quality of care, be printed in the RECORD.

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

VA SYSTEM QUIETLY BECOMING MODEL FOR HEALTH CARE

(By Matthew J. Kelly)

It has long been one of American medicine’s most precious assets and, until recent years, its best-kept secret.

On Dec. 27, the New England Journal of Medicine (NEJM) published a report on a study that found the quality of care for heart attack patients is as high in Department of Veterans Affairs medical facilities as in non-VA hospitals.

At first review, that might seem like faint praise—but not for a health care system often singled out to prove its value and justify its existence. And it continues to do so.

The accompanying NEJM commentary of a VA doctor nailed it: “Overall, the [VA health care] system in this country is quietly improved the way it delivers health care to a special population, while allowing the public to believe that our hospitals are like those shown in movies such as ‘Born on the Fourth of July’ and ‘Article 99.’ At the time these motion pictures were released, the portrayal was inaccurate, and today, they and the images they conjure are even more distorted.

The Department of Veterans Affairs health care delivery system, once maligned, has overcome the stereotypes, is quieting its critics, and has established itself as a force in health care delivery research and medical education, and in such special services as blind rehabilitation, severe psychological conditions, prosthetics and spinal cord injury. Of the latter, actor Christopher Reeve, now quadriplegic, said, “The whole VA system today is a model for what research can do, and must be. And when I look down the list of accomplishments of various centers and how proactive it is, I just rejoice.’’

The patient population VA cares for is, on average, significantly older and poorer than the non-veteran population, more likely to have mental illness or substance abuse problems, more likely to have multiple diseases and less likely to be married and have a social support structure. Despite these challenges, VA health care has transformed itself into what Dr. Donald Berwick, President and CEO of the Institute for Healthcare Improvement, calls “the most impressive work in the country so far on patient safety’’ and ‘’the benchmark in many areas.

Even though the veteran population is declining, veterans’ health problems are increasing as they age. More veterans than ever are enrolling for VA health care. In the last five years, VA, which operates the nation’s largest integrated health care organization, has shifted from an inpatient-focused system—we have closed more than half of our acute care beds—to one that is outpatient-based.

LOCAL LAW ENFORCEMENT ACT OF 2001

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To apply for health care, veterans can now fill out and submit an easy-to-follow Internet-based application form, which is automatically electronically mailed to the VA health care facility selected by the veteran. VA employees register the data, print the form and mail it back to the veteran for signature. Veterans can also print out the completed form and mail it to a VA health care facility themselves.

Since 1996, when all honorably discharged veterans became eligible to enroll for VA health care, more than a half-million additional veterans have done so. Why? Every VA patient now has a primary care provider and team. VA has computerized mail-out pharmacy services that ensure the timely delivery of drugs to patients. VA has instituted aggressive performance measures that have led to implementation of the best practices of government and private sector health care. On average, VA medical facilities now receive higher accreditation scores than do private sector facilities.

While this transformation was taking place, VA became industry leader in such areas as patient safety, surgical quality assessment, the computerization of medical records, telehealth, preventive screenings and immunizations.

There have been no big wars lately, nor long lines of troops coming home, no welcoming parades necessary. And as these events and the years that he landed, so too do memories. It might be only human to become complacent about those who not so long ago left their families, their schools, their jobs, and the security of their lives because their country asked. They now need our help, as much as we need their help, as much as they need our help, as will future generations of servicemen and women, but platiitudes on Veterans Day and Memorial Day are woefully inadequate. They now need our help, as future generations of servicemen and women, but not only as future generations, but also as the present generation.

Kwame Brown has known adversity since he was born. In July 1976, his parents split and he later moved in with his mother and siblings for 10 months. With the help of relatives, Kwame and his family got out of that shelter and things got better—but not by much. Kwame’s mother, Joyce, raised him and his seven siblings by herself in Brunswick, GA, supporting the family by cleaning hotel rooms.

After his job ended in 1993 when a back injury and other health problems left Ms. Brown unable to work. Since then, the family has scraped by on a monthly disability check and a few extra dollars from babysitting. Their mode of transportation: a bicycle. Such adversity would break most families, but not Kwame Brown’s family.

With the help of a church mentor, Kwame and his siblings became focused and set goals for themselves. Kwame decided he wanted to be a better student and a better basketball player. Through his faith and many hours of hard work, Kwame improved his grades so much that, at 16, he was the lead role at Brunswick’s Glynn Academy. And now he has achieved something that no other person in this country ever has.

On June 27, 2001, 19-year-old Kwame became the first high school player ever to be picked as the No. 1 draft in the NBA. This young man who once lived in a neighborhood so poor it was nicknamed “The Bottom” has pulled himself up to the very top.

At 6-feet-11 inches tall and 240 pounds, Kwame averaged 20.1 points, 13.3 rebounds and 5.8 blocked shots as a senior last year at Glynn Academy; he scored 1,539 career points. His exceptional talent has given rise to a number of awards. He was named to McDonald’s All-America Team and USA Today’s All-USA First team. He was also Georgia’s High School Player of the Year.

Kwame Brown is not only a star on the court. His off-the-court life is just as impressive. Even though he went against his mother’s wishes in postponing plans to attend the University of Florida, Kwame believes that his decision to enter the NBA will allow him to give his family a better life than they have ever known. And he has promised his mother and himself that he will still get that college education.

First, he wants to give his mother something she has never had: the keys to a brand new home.

Basketball legend Michael Jordan, who is part-owner of the Orlando Magic, called Kwame “a kid who understands his surroundings . . . He comes from a family where nothing has been given to him. He has gotten this far with hard work and a little dreaming.”

I am honored to recognize Kwame Brown, a young man who is not only a talented athlete, but also humble, wise and mature beyond his years. I look forward to this new chapter in Kwame’s life with great anticipation. I know his life will be a fascinating story with a wonderful ending.

Mr. CRAIG. Mr. President, I rise today to pay tribute to James Lake upon the occasion of his completion in June of a tenure as the President of the American Nuclear Society for the 2000/2001 year. The American Nuclear Society is an international scientific and educational organization established in 1954. Its membership now has approximately 11,000 engineers, scientists, administrators, and educators representing over 1,500 corporations, educational institutions, and government agencies.

The work of nuclear engineers and scientists is especially relevant to meeting the increasing need of the Nation for electricity. Around the United States, there is a growing public interest in new nuclear plants which offer an economical, safe and environmentally-friendly alternative for the generation of electricity. Development of nuclear professionals is a valuable service for the Nation that advances our energy security and economic well-being.

Jim Lake’s service as the President of the American Nuclear Society this year has helped to stimulate the interest in new nuclear generation which has stemmed from energy shortages in California and higher energy prices in many areas. He has crossed the Nation many times this year to meet with nuclear professionals, industry executives, public servants, educators and students to seek their views and ideas on an expanding role for nuclear energy. Mr. Lake has represented the professionals of the United States in many forums overseas, and has brought home a broad perspective on nuclear energy’s role in a balanced energy portfolio.

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