but representative of many of the problems facing Americans. Time and again, Mr. Taschner has had the courage and initiative to take on cases that more prominent firms are hesitant to handle for political or monetary reasons. Dana Taschner truly brings honor to his profession.

Mr. Taschner's devotion to fighting oppression recently earned him the American Bar Association's Lawyer of the Year award. He was chosen from a pool of approximately 245,000 other lawyers in North America, competing with litigators with much higher profiles and greater wealth. In 1993, Mr. Taschner took on the Los Angeles Police Department and succeeded in forcing them to change their policy regarding police officers who commit domestic violence. In this case, he represented 3 orphans whose father, an L.A. police officer, murdered their mother and then took his own life. Taschner was able to overcome his own painful memories of domestic abuse and secure the orphans a settlement. He argued that the department should not have returned the officer's gun after he had beaten his wife and threatened to kill her. He also forced the department to treat these matters as criminal cases, rather than internal affairs.

In this era of cynicism and self-promotion, I believe we must take steps to encourage and reward sincerity. Dana Taschner's unwavering dedication to his clients can be seen in his personal relationships with them, relationships that often outlive the outcome of the case. As an attorney myself, I have seen firsthand how much our country needs people in my field who care enough about their clients to commit themselves personally, as well as professionally. Many litigators find it much easier to take the cases that will bring the most profit or prestige, rather than represent people who are in need of legal representation.

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I am proud that his colleagues have lavished accolades upon Mr. Taschner, but I believe it is a much greater sign of his success that his clients put their faith in him. Dana Taschner, whose integrity and selfless devotion to fairness truly embody our American justice system, is a role model for us all.

**THE HEALTHCARE QUALITY ENHANCEMENT ACT**

Mr. FRIST. Mr. President, I rise today to express my continued support for S. 2208, the Healthcare Quality Enhancement Act, which seeks to reform and improve the Agency for Healthcare Policy and Research (AHCPR).

Studies show that health care quality is dictated more by where you live than by scientific evidence or what is the best practice in medicine. Today, we have more clinical medical research results than ever before, yet we are falling short in our success to disseminate our findings and to influence practice behavior. In 1843, Dr. Holmes published his famous article on hand washing for the prevention of puerperal fever in the new England Quarterly Journal of Medicine and Surgery. While it is an accepted and expected practice today, it took several decades before his recommendation became a universally accepted practice.

The landmark Early Treatment Diabetic Retinopathy Study was published in 1985. Then, three years later, the American Diabetes Association published care guidelines for patients with diabetes. Unfortunately, however, today the national rates for annual diabetic eye exam is still only 38.4 percent. Clearly, the practical application of scientifically sound diabetic eye care recommendations has not fared much better than the highly beneficial and very important hand washing theory. While there are more scientific discoveries than ever before, the practical introduction of these new scientific discoveries does not appear to be much faster than it was more than 100 years ago.

Through S. 2208, I am seeking to close the gap between what we know and what we do in health care. The expired statute of AHCPR represented an outdated approach to health care quality improvement. S. 2208 would establish the Agency for Healthcare Quality Research (AHQR), whose mission is the overall improvement in health care quality. Built upon the current AHCPR, the Agency for Healthcare Quality Research is refocused and enhanced to become both the hub and driving force of federal efforts to improve quality of health care in all practice environments. The Agency will assist, not burden physicians in four specific ways. First, it will aggressively support state-of-the-art information systems for health care quality. Improved computer systems will advance quality scoring and quality-based decision making in patient care. Next, it will support research in areas of primary care delivery, priority populations and access in under served areas. The Agency's authority is expanded to support health care improvement in all types of office practice—both solo practitioners and managed care. In addition, it will promote data collection that makes sense. Physicians want information on quality to enable them to set their outcomes with their peers. Statistically accurate, sample-based national surveys based on existing structures will efficiently provide reliable and affordable data. And finally, the Agency will promote quality by sharing information with doctors, not the federal government. While proven medical advances are made daily, patients wait too long to benefit from these discoveries. We must get the science to the people who use it—physicians.

I would like to point out that S. 2208 does not create a new bureaucracy, nor does it expand the federal government. Rather, it refocuses an existing agency, the AHCPR, on a research mission that can better serve the health and health care of all Americans. The reauthorization of the AHCPR and the creation of the Agency for Healthcare Quality Research enjoys broad-based support. By providing leadership in supporting research on health care quality improvement, eight Senators, including myself, are co-sponsoring this bill. They are Senators Collins, Fairecloth, Jeffords, Inouye, Mack, Breaux, and Lieberman. In addition, S. 2208 was later incorporated in another bill which received co-sponsorship from 49 Senators. Also, I am pleased to report that 44 leading organizations, consisting of health care professionals, patient advocates, major health care organizations and health services researchers, have also lent their support for this measure.

Americans want and deserve better health care. For this compelling reason, I will reintroduce S. 2208 in the 106th Congress. I urge my colleagues to support health care quality improvement and to refocus the federal government's role in this vitally important area of research.

**NOMINATION OF JEFFREY S. MERRIFIELD**

Mr. SMITH of New Hampshire. Mr. President, I rise today in support of Mr. Jeff Merrifield to the position of U.S. Nuclear Regulatory Commissioner.

Jeff Merrifield was born in Westerly, Rhode Island and spent most of his childhood in Antrim, New Hampshire. In 1965, Jeff graduated magna cum laude with his B.A. from Tufts University. In 1966, he joined Senator Gordon Humphrey's staff and handled energy and environmental issues. I first came to the Senate in 1990 and I was fortunate that Jeff was one of several staffers who carried over from Senator Humphrey's staff to mine.

While working for Senator Humphrey and me, Jeff put himself through Georgetown Law School. He graduated in 1992 after which he began work for the Washington D.C. based law firm of McKenna and Cuneo. There, he practiced environmental and government contracts law until 1995. I was very pleased to have Jeff returned to my staff in 1995 to be my counsel for the Senate Subcommittee on Superfund, Waste Control and Risk Assessment. He was the lead staffer in developing my Superfund reauthorization legislation.

During his term with the Senate, Jeff has been involved with all aspects of solid and hazardous waste disposal and the regulation of nuclear waste, including Superfund, RCRA, and the Interstate Surface Transportation Act (ISTEA I).

In addition to his duties on the Committee, Jeff has also been extensively