

foreign place—it was his new district. When the First Lady introduced the Save America's Treasures project, Tom worked to raise private funds to preserve Christopher Columbus' childhood home in Genoa. In truth, it would not be the last time his passion for the job would make officials in the State Department crazy.

I will never forget his signature moment—when he knelt down in prayer for the victims in the Cavalese cable-car tragedy, sending a powerful message to the world that America weeps for the sons and daughters of its allies as if they were our very own. In turn, the Italian people loved him as he loved them.

Throughout his entire career, whether it was his work in Italy, to secure the peace in Haiti or to forge democracy in South Korea, Tom Foglietta understood that America's role in the world was rooted in moral leadership—in common values, humility and humanity.

I will miss his moral leadership—we all will. But perhaps above all, I will miss his friendship. I will miss eating pasta with gravy, his cooking in my kitchen and those dinners with the gang—with Tom and NANCY PELOSI, BARBARA BOXER, DICK DURBIN, SAM GEDJENSON, CHUCK SCHUMER, ANNA ESHOO, TOM DOWNEY, GEORGE MILLER, and MARTY RUSSO. We could always rely on Tom to do something to spice the night up—whether it was something he would say or him hiring a ragtag band to play a party that only he could love. He was fun—he was warm. He was our friend.

Grazi, Don Tomaso—your passion for people knew no bounds. For that, you will forever be in our hearts.

PAYING TRIBUTE TO LOTTE BRESNITZ

HON. SCOTT MCINNIS

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Mr. MCINNIS. Mr. Speaker, I rise to mourn the passing of a kind and caring woman from my district. Lotte Bresnitz, a longtime community activist and dedicated nurse recently passed away at the age of eighty-five in Aspen, Colorado. She was a kind and generous soul and it is a privilege to recognize her life and service before this body of Congress and this Nation today.

Lotte was born in Nuremberg, Germany and immigrated to the United States in 1938, where she made her home in Cincinnati. She studied to become a registered nurse, and during her studies met and eventually married Kurt Bresnitz. After Kurt was honorably discharged from the U.S. Army, the couple moved to Denver where Lotte took a job as the head nurse in the emergency room at Rose Memorial Hospital. In 1950, while Lotte and Kurt were on vacation in Aspen, they fell in love with the town and decided to relocate. Lotte worked as the head nurse at the Aspen Hospital and Kurt opened a Jewelry Store. After the birth of their two children, John and Carol, Lotte retired to become a full-time mother and continued to volunteer with organizations like the League of Women Voters, and the Senior Citizens Council.

Mr. Speaker, Lotte Bresnitz was an endearing woman whose five decades of volunteer work throughout the Aspen community made

her one of the most recognizable faces in the area. I am honored to stand before this body of Congress and this Nation today to recognize her outstanding record of service. My thoughts and prayers go out to her friends and family at this difficult time of bereavement.

HEMOCARE PROVIDES VALUE FOR AMERICANS' HEALTH CARE DOLLAR—GOOD REASON TO CELEBRATE NATIONAL HEMOCARE AND HOSPICE MONTH

HON. MARK FOLEY

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Mr. FOLEY. Mr. Speaker, homecare presents—a tremendous value for Americans' healthcare dollar. Homecare provides a family-friendly, clinically proven way of receiving quality healthcare for millions of Americans where they prefer to receive care—at home. November, National Homecare and Hospice Month, is an opportunity to recognize the importance of homecare as an essential component of healthcare in the United States.

This important segment of the health care continuum allows patients with medical needs to remain in their homes, including those who are recovering, disabled, chronically or terminally ill who need medical, nursing, social, or therapeutic treatment.

Homecare represents a family value and a value for families. It's about quality healthcare and quality of life for at least 8 million households across the United States.

Recent studies of homecare services support the following conclusions:

Homecare for selected conditions can shorten inpatient hospital stays.

Homecare can reduce the overall costs of care without compromising outcomes.

Homecare can improve clinical outcomes including mortality. This improvement can be striking in degree.

Homecare can improve patient and caregiver satisfaction.

Homecare can improve functional independence and reduce the risk of institutional placement.

For Medicare beneficiaries with selected conditions, formal homecare is the most cost-effective strategy for achieving functional improvement compared to in-patient rehabilitation, nursing-home-based rehabilitation, and discharge to home without formal homecare services.

Homecare is expected to grow in the years ahead because of several large-scale trends:

The American population is rapidly aging. The 85-and-older group is the fastest-growing segment of the U.S. population.

Advances in technology allow virtually every service short of surgery to be delivered at home.

Homecare does not require brick-and-mortar investments since it's provided at home.

So today I join homecare patients and caregivers throughout the United States in celebrating National Homecare and Hospice Month.

NATIONAL ADOPTION MONTH

HON. DEBORAH PRYCE

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Ms. PRYCE of Ohio. Mr. Speaker, I rise today to celebrate National Adoption Month.

As an adoptive parent of two little girls, I have personally felt the unspeakable joy that comes from welcoming a child into your home and family. The knowledge that you are giving hope and opportunity to a boy or girl who might otherwise have none is inspiring and uplifting.

In fact six in ten Americans have had a personal experience with adoption—meaning they, a family member, or a close friend was adopted, has adopted, or has placed a child for adoption. As we near the holiday season, it warms my heart to know that so many people's lives have been made better by experiencing the joy that adoption brings.

Adoption is an issue that people are willing to talk about, but when it comes to getting personally involved, many back away. According to the Dave Thomas Foundation for Adoption, based in my hometown of Columbus, Ohio, 63 percent of Americans have a "favorable opinion" of adoption, and 78 percent think more should be done to encourage adoption. But acting on those feelings tends to be more difficult. The typical reaction is that "someone else will do it." Unfortunately for the 120,000 children across the country currently in foster care, that is not the case. Though there are millions of suitable parents, many do not engage in the adoptive process for fear they are not up to the task of parenting an adoptive child or because they think adoption is a costly and unmanageable process.

But we still have more work to do. In July, the Department of Health and Human Services launched the first ever national public service campaign to encourage adoption. This new initiative, produced in conjunction with the Ad Council and the Adoption Exchange Association, will highlight older "special needs" children who need permanent homes. "Special needs" means they are children who, for various reasons, have a harder time finding families willing to adopt them. Often special needs include factors such as physical or health problems and ethnic or racial background. Other times, a group of siblings needs to be adopted together. Fifty-three percent of foster children are between the ages of 8–17, and the need to connect these youth with permanent families is significant.

You do not have to be rich, married, highly educated, or a homeowner to adopt a child. Children don't need perfect parents, just individuals who are willing to open their hearts and homes and make a life-long commitment to love and nurture a child.

I am proud to join my colleagues today in honoring National Adoption Month.

HONORING JOHN D. RINGLE AND T. MAXINE RINGLE

HON. TOM DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Mr. TOM DAVIS of Virginia. Mr. Speaker I rise today to honor John D. Ringle and T.

Maxine Ringle for their contributions to Fairfax County, Virginia.

In the mid-1960's and 1970's, much of the Fairfax Station and Clifton areas of the Occoquan Watershed were zoned by Fairfax County for one-acre residential lots. During this time, there was little local public consciousness of the benefits of maintaining the rural nature of the land in order to protect the quality of the drinking water supply from the Occoquan Reservoir.

John and Maxine Ringle owned a substantial portion of the land in Fairfax Station and Clifton and were free to direct the division of that land into one-acre lots. Developing this land would have led to extensive construction, a network of new roads, deforesting the wooded area, and irrevocably destroying the rural nature of this area of Fairfax County.

The Ringles recognized the unique nature of this extensive undeveloped area and envisioned it as a limited-development area where its natural beauty could be preserved. Owners could enjoy the amenities of a rural life while living only a few minutes from the urban offerings of Fairfax County, Virginia and the Washington, DC Metropolitan Area. John and Maxine had the foresight to protect this rural area by creating eleven separate developments with five-acre lots and establish binding covenants to preserve this lot size.

In 1982, the Fairfax County Board of Supervisors, downzoned 41,000 acres in the Fairfax Station and Clifton areas to legally establish a natural protective buffer area in the watershed of the Occoquan Reservoir, currently the source of water for over a million Northern Virginia residents. Without the vision and actions of John and Maxine Ringle in the preceding decades, Fairfax County would not have been able to enact this downzoning which continues to protect and preserve the Occoquan Watershed and Reservoir for Northern Virginia residents.

The Fairfax County Board of Supervisors proclaimed July 26, 2004, as John D. Ringle and T. Maxine Ringle Day. This honor truly is well deserved.

Mr. Speaker, the Ringle's visionary and environmentally sound approach to the development of the Occoquan Watershed enabled Fairfax County to ultimately preserve the Occoquan Watershed and Reservoir for the benefit of all residents. I ask that my colleagues join me in commending John and Maxine Ringle.

RECOGNIZING NATIONAL HOMECARE AND HOSPICE MONTH

HON. GREG WALDEN

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Mr. WALDEN of Oregon. Mr. Speaker, I rise today to recognize November as National Homecare and Hospice Month. National Homecare and Hospice Month is an opportunity to recognize the importance of homecare as an essential component of healthcare in the United States. While most of us formally recognize homecare and Hospice one month out of the year, individuals and families across our Nation that utilize these services realize the importance of homecare and Hospice each and every day.

Homecare provides a family-friendly, clinically proven way of providing quality healthcare for millions of Americans and homecare has become an increasingly important part of our health care system. The highly skilled services that these caregivers provide have enabled millions of our most frail, older and disabled citizens to avoid hospitals and nursing homes and stay just where they want to be—in the comfort and security of their own homes.

In a rural district, such as Oregon's Second Congressional District, which encompasses over 70,000 square miles, including two counties with no physicians, accessing healthcare service can be challenging. There are 23 homecare agencies serving the 20 counties of Oregon's Second Congressional District. In some parts of Oregon, homecare professionals are the only source of healthcare services. The tremendous dedication and compassion of these professionals truly deserves the recognition of November being named National Homecare and Hospice Month. The care they provide is truly invaluable and allowing individuals to remain in their homes and close to loved ones is priceless.

Because homecare is so crucial to rural areas, I introduced the Medicare Rural Home Health Services Improvement Act (HR 4902). This bill would ensure that homecare providers that serve patients in rural areas will continue to receive a 5 percent add-on payment through 2007. This measure recognizes that the delivery of homecare services in rural areas is more costly because of the extra travel time required to cover long distances between patients. Longer travel times mean that rural caregivers have to devote more time to each patient and are also unable to make as many visits in a day as their urban counterparts. If the extra rural payment is not extended, agencies may be forced to turn away rural patients with the greatest care needs.

Nationwide, homecare represents a family value and a value for families. It's about quality healthcare and quality of life for at least 8 million households across the United States.

According to reports issued by the Medicare Payment Advisory Committee and other independent observers:

Homecare for selected conditions can shorten inpatient hospital stays.

Homecare can reduce the overall costs of care without compromising outcomes.

Homecare can improve clinical outcomes including mortality. This improvement can be striking in degree.

Homecare can improve functional independence and reduce the risk of institutional placement.

For Medicare beneficiaries with selected conditions, formal homecare is the most cost effective strategy for achieving functional improvement compared to in-patient rehabilitation, nursing-home-based rehabilitation, and discharge to home without formal homecare services.

Homecare is expected to grow in the years ahead because of several large-scale trends: The American population is rapidly aging. The 85-and-older group is the fastest-growing segment of the U.S. population.

In the near future, advances in technology will allow virtually every service short of surgery to be delivered at home.

Homecare does not require brick-and-mortar investments since it's provided at home.

Homecare is a critical component of our healthcare delivery system; so today I join homecare patients and caregivers throughout the United States in celebrating National Homecare and Hospice Month.

RECOGNIZING MR. JOE DAMORE FOR HIS SERVICE TO SPARROW HOSPITAL IN LANSING, MI

HON. MIKE ROGERS

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Mr. ROGERS of Michigan. Mr. Speaker, I rise today to recognize Mr. Joe Damore for his outstanding leadership and commitment to improving healthcare as the President and CEO of Sparrow Hospital and Health Systems in Lansing, Michigan. Mr. Damore has led the Sparrow Health System to its success as one of the top healthcare providers in the greater Lansing area. Since his arrival in 1990, the Sparrow Health System has become mid-Michigan's first and only Level 1 Trauma Center, and increased its medical staff from 500 to 850 physicians. Under the direction of Mr. Damore, the Sparrow Health System has expanded its residency programs with Michigan State University, allowing young health professionals to gain the valuable experience needed for the future, while providing quality healthcare to mid-Michigan residents.

The Sparrow Health System has a mission to provide quality, compassionate and affordable healthcare to the residents of mid-Michigan. In the past fourteen years of dedicated service, Mr. Damore has guided the Sparrow Health System to exceed this mission with expanded facilities and increased inpatient admissions from 18,000 to 29,000 per year. It is because of his exceptional leadership and success that we offer Mr. Damore a fond farewell as he has been offered a position as the President and CEO of Mission Health and Hospitals in Asheville, North Carolina. Mr. Damore will certainly be an asset to the Asheville healthcare community.

Mr. Speaker, during his tenure at the Sparrow Health System Mr. Damore has brought affordable and superior healthcare to the residents of mid-Michigan. I ask my colleagues to join me in recognizing Mr. Joe Damore for his extraordinary commitment and dedication to provide top quality health services, and to wish him success in all of his future endeavors.

PAYING TRIBUTE TO SHIRLEY BOWEN

HON. SCOTT McINNIS

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Friday, November 19, 2004

Mr. McINNIS. Mr. Speaker, I would like to recognize Shirley Bowen as she embarks on a well-deserved retirement from Colorado Mountain College. Shirley has served the college for almost four decades and her leadership has made a significant difference in the development of Colorado state policy, testing procedure, and state-wide curriculum. It is my pleasure to congratulate Shirley before this