

on an essential reform to ensure the security of our Nation. We must reform our national security system to ensure effective interagency operations. As a member of the House Armed Services Committee and co-chair of the House National Security Interagency Reform Working Group, implementing reform of the national security system is one of my highest priorities. Our current interagency process is broken. There are regulatory, legislative, budgetary, resource and culture impediments to effective interagency operations. These problems are independent of personalities, policies and particular presidential administrations. In order to protect the United States interests and its citizens, it is critical that reform to executive and legislative processes be allowed to better the integration among currently stove-piped departments.

A successfully integrated interagency process will empower the United States to more effectively employ our nonmilitary instruments of power abroad. This ability will allow us to more effectively fulfill our interest while reserving the use of lethal force as a last resort. In fact leaders and policy makers need two things; first, an overarching national strategy that frames the intent of all policy on national security; second, a toolbox of resources that can be configured, hopefully in a preventive way, to fulfill our strategic objectives.

The current interagency system was devised over 60 years ago for a different era and is based on a very specific national security strategy when security was primarily a function of military capabilities wielded by one department in overseas missions. At the time, major combat operations and nuclear deterrence were the principal focus of U.S. national security strategy. This strategy required limited coordination of activities between vertically structured military and civilian departments and agencies.

Today, national security involves a much wider array of issues that can be addressed only with a broader set of capabilities that are highly synchronized and carefully calibrated.

Many agencies are not conscious of or prepared to act in their national security roles. Many civilian departments and agencies do not believe they have a role in the national security system, and the cultures of these organizations produce few, if any, incentives for staff to participate in national security missions. These agencies often lack “expeditionary” capabilities. Even if they have the desire to help, they may be prevented from doing so by a combination of factors including personnel shortages, lack of resources, lack of statutory authorizations and regulatory constraints.

Additionally, interagency operations are not governed by standard concepts and procedures. Without common processes, interagency operations tend to be very ad hoc. For example, Paul

Bremer, head of the Coalition For Provisional Authority in postwar Iraq believed that he reported to the President through the Secretary of Defense and did not want to be bogged down by “the interagency process.” National Security Adviser Rice’s senior deputies, simply to get information, were relegated to checking the CPA website every day to see what new orders Bremer had issued. Such arrangements are enormously inefficient and liable to produce erratic outcomes.

We must ensure that civilian agencies have the resources required for effective integration with the Department of Defense. Think what could have been done to deter the growth of criminal militias in Iraq if the Department of Treasury had been able to assist in the rapid implementation of simple electronic banking systems to get money and payroll to the people of Iraq during the post conflict stabilization period.

A new National Security Act is needed to update the organization and procedures created by the National Security Act of 1947. We need to codify an adaptive approach that flattens, simplifies and integrates the agencies of the executive branch and the committees of Congress. We must ensure all departments and agencies that have national security roles have specific objectives, responsibilities and operational planning capabilities so they can protect America’s interests.

Second, we should require that personnel who are selected for the Senior Executive Service in departments and agencies with national security roles have professional development via institutional training and operational assignments in agencies other than their own to better understand the national security interagency system. Third, we should strive to build regional expertise across the departments and agencies to ensure a bench of personnel with the knowledge and skills required to accomplish departmental and agency missions in all regions of the world. For example, we should consider better regional alignment between DOD and the State Department.

As my colleagues and I undertake the challenge of crafting reform legislation, I welcome the opportunity to work with all agencies to gain their insights on the way ahead for reform.

THE ADMINISTRATION HAS LEFT THE HOMELAND VULNERABLE TO ATTACK

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WOOLSEY) is recognized for 5 minutes.

Ms. WOOLSEY. Mr. Speaker, for a long time now, we’ve been waiting for the administration to make an announcement about troop withdrawals from Iraq. Well the big day came last week, and it went over like a lead balloon. The President said that he is going to leave troop levels basically steady.

Mr. Speaker, the administration’s decision to “stay the course” in Iraq is absolutely unacceptable. The American people know that invading Iraq was a mistake in the first place. And they want to bring all of our troops out, not just token forces.

The President said that he can withdraw a handful of troops without the surge because the surge has been a success. But when he leaves office, troop levels will actually be higher than it was before the surge. That leads me to ask a simple question. If the surge has been so successful, why do we need more troops after the surge than before it?

The President also said that normal life is returning to Iraq. Try telling that to the 4 million Iraqis who are still refugees and not able to return. Half of them are children.

The President also told us that civilian deaths are down. Try telling that to the relatives of the 1,200 civilians who were killed in Iraq this summer.

And what is an acceptable number of civilian deaths? This summer, an average of 13 Iraqi civilians were killed every day. If that happens in any State or any city in America, we would call it a crime wave. But if it happens in Iraq, the administration seems to think it’s something to celebrate.

The administration has also been telling us for a long time that the occupation of Iraq is making America safer. But that claim doesn’t hold up, either. The independent and bipartisan Partnership For a Secure America issued a report last week which says that America is still “dangerously vulnerable to chemical, biological and nuclear attacks.” It also said that “the threat of a new, major terrorist attack on the United States is still very real.”

And a joint report issued last week by the House Foreign Affairs Committee and the House Committee on Homeland Security found that the administration has not delivered on a myriad of critical homeland and national security mandates. It is clear, Mr. Speaker, that the administration’s single-minded obsession with the occupation of Iraq has left our homeland open to another attack, an attack that could be much worse than 9/11.

Today we commemorate the terrible anniversary of that terrible day—not today, last week we did. It is outrageous that after 7 years we can’t say that our citizens are safer than they were that day. And the administration’s decision to stay the course in Iraq will only continue to make things worse.

The only solution is to set a firm timetable for the safe redeployment of our troops out of Iraq. Giving the Iraqi people back their sovereignty will allow us to work with the international community to rebuild that shattered country. Iraq needs electricity, schools, roads, hospitals and water. And America needs to invest in

health care, renewable energy, education and jobs. Those aren't just domestic needs. They are critical parts of our national security.

The administration, Mr. Speaker, has tried to solve all of our problems with military force alone. That strategy has been a miserable failure. We cannot bomb or torture our way to victory in the fight against terrorism. We must work to end the poverty and the despair that caused it. The sooner we learn that lesson, the safer America will be.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

AMERICA'S EPIDEMIC OF HEALTH CARE-ACQUIRED INFECTIONS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Pennsylvania (Mr. TIM MURPHY) is recognized for 5 minutes.

Mr. TIM MURPHY of Pennsylvania. Mr. Speaker, it seems like every day in this House floor we call for a moment of silence to recognize some tragic loss of life across our country. And it is fitting that we do so.

If we were to recognize with a moment of silence those who die in hospitals from avoidable infections, we would be stopping House business many times each day.

So I am here to express my concern that we continue to ignore the increasing problem and potentially fatal epidemic of health care-acquired infections. Another week goes by and more and more patients are becoming infected with preventable infections. And instead of tackling this issue head-on, we continue to let the number of cases rise. And the costs strains our health care system, and more lives are lost.

Well enough is enough. This year alone, up to today, there have been 1,243,835 cases of health care-acquired infections. There have been a total of 61,562 deaths. And the total cost on our health care system has been \$31 billion 95 million 999,420.07. By the end of this year, that estimate will be \$50 billion and 100,000 lives lost.

Something must be done. We must put self-interests aside and work together to improve the safety of our hospitals. And I am committed to making sure this happens. That is why I introduced legislation last year that saves lives and money, H.R. 1174, the Healthy Hospitals Act. And it has received strong bipartisan support and support from consumer groups.

This legislation offers a simple solution to lower the costs associated with health care-acquired infections. It is not expensive. It simply requires hospitals to publicly disclose their infection rates and let the public see this transparently.

□ 2015

Hospitals should be taking commonsense measures, like washing hands, sterilizing equipment between uses, testing patients and giving antibiotics at the right time. It is, after all, people's lives we are trying to save.

How can a hospital or health care system argue that they don't want to report their infection rates if reporting is shown to save lives? How can hospitals complain that they don't want patients to know about patient safety and patient quality? Aren't hospitals supposed to be in the business of saving lives?

Hospitals need to be held accountable for opposing legislation, for opposing legislation, that would require reporting, because evidence shows it makes a difference. In my home State of Pennsylvania, there are shining examples of what happens when hospitals are held accountable for reporting.

Hospitals in Pennsylvania are required by State law to make their infection rates public, and we have seen the infection rates drop dramatically. Some hospitals were able to get to a zero infection rate, no lives lost. And here is the mortality statistic. According to the Pennsylvania Health Care Cost Containment Council, the average charge of hospitalization for a patient who became infected with a hospital-acquired infection was \$185,000 each, while the average charge for a patient without an infection was \$31,000. Reporting infections is proven to save money and lives.

Hospitals say "it will cost us more to keep track of it." That simply is not true. Isn't this enough to get our hospitals on board? Isn't this enough proof to save lives? Our health care system is in need of repair, not just simply saying it is too expensive, let's let government take it over. It needs to be fixed.

While we continue to talk about reforming government, cutting costs and eliminating funding for infrastructure projects back home, I hope my colleagues in the health care industry will support commonsense legislation that will save money and lives.

Public reporting of health care acquired infections is exactly what it sounds like, but the benefits of this simple action are far reaching. I hope that patients and their families will speak up to Members of Congress about the need for this transparency and demand such legislation be enacted.

Mr. Speaker, I encourage all my colleagues and hospitals around the country, especially those hospitals that know this saves lives and money, to support public reporting of hospital-acquired infections. Let's do this right. Let's save lives. After all, the families of so many Americans are at stake here. We can act on this. We can make a difference. We can save lives and save money.

The SPEAKER pro tempore. Under a previous order of the House, the gen-

tleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

(Mr. PALLONE addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

IMPROVING ACCESS TO HEALTH CARE FOR ALL AMERICANS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maine (Mr. ALLEN) is recognized for 5 minutes.

Mr. ALLEN. Mr. Speaker, we have a health care crisis in America. Rising health care costs are overwhelming individuals, families and businesses, large and small. We have a staggering 41 million individuals, nearly one in six Americans, without health insurance. In America, that is just not fair.

Millions more Americans have only catastrophic coverage, with \$5,000 to \$15,000 deductibles. Others have policies with copays so high that basic health care needs, including preventive and diagnostic service, are not met. Many families are literally one serious illness away from bankruptcy.

To fix our broken economy, we have to fix our broken health care system. We must build a stronger, more effective health care system before it is too late. The future of our country and our ability to compete in the global economy depend on it. I believe that every American has a right to quality, affordable health care that doesn't blunt the competitive edge of employers or unduly burden taxpayers. It is time for bold action.

I have created the Healthy Americans Plan to relieve the strain on families and individuals, ease the burden on businesses and nonprofits and drive down costs. It builds on the strengths of the existing American health care system, but provides new and better choices for businesses, the self-employed, families and individuals.

My plan will offer quality, affordable health insurance choices like those available to Members of Congress. My plan will help small businesses offer employee health coverage by providing them with a refundable tax credit. It also improves access to medical care in rural areas and provides relief for middle-class families and individuals who are struggling to afford health insurance.

The key elements of my plan include the following:

All Americans, including the self-employed and owners and employees of small businesses, will be guaranteed the freedom to purchase a quality plan that is affordable and right for them.

Americans who like their current health care coverage will have the security of knowing they can keep it.

Insurers will have to compete for business on the basis of cost and quality, not by profiting from and discriminating against people because of age or preexisting conditions.

National choices will include private plans as well as a nationwide option, a