

peaks anyone has ever seen, such as Cades Cove and Mount LeConte.

Although any time is a great time to visit the park, the views are truly spectacular in the spring, with the blooming of the dogwoods and redbud trees and in the fall when the leaves begin turning various shades of red and orange and yellow.

My hometown of Knoxville is considered by many to be the gateway to the Smokies, and residents of Knoxville played a very important role in establishing the park.

The original idea for a Smokies National Park came from a wealthy and influential Knoxville family, Mr. and Mrs. William P. Davis, who came back from a visit to the national parks out West in the early 1920s with a simple question: Why can't we have a national park in the Smokies?

Very quickly, other influential citizens of Knoxville such as politicians, businessmen, naturalists, and others joined in this movement. Eventually, the legislatures in Tennessee and North Carolina realized that this was a worthy project. Both legislatures appropriated \$2 million in 1927.

Although this was a large amount of money, it was not enough. Colonel David C. Chapman of Knoxville joined forces with National Park Service Director Arno Cammerer and began seeking additional sources of funding. Ultimately, they convinced John D. Rockefeller, Jr., to contribute to the cause.

The Rockefeller family was well known for their philanthropy, especially in regards to the National Parks. They made a gift of \$5 million to the effort, but only on the stipulation that the funds would be matched. To get the full \$5 million, the States and Park Service would have to come up with \$5 million on their own.

Once the funding commitments were in place by 1929, it took several more years to acquire the land and develop the facilities. While this land has become almost priceless today, I don't think enough credit or recognition has been given to those families and people from whom land was taken to create this park.

During the Great Depression, the Civilian Conservation Corps, the Works Progress Administration, and other Federal organizations made trails, fire watchtowers, and other infrastructure improvements to the park. The park was officially opened in June of 1934. That date is the date we are commemorating with this resolution.

I would like once again to thank and congratulate Dr. ROE for his very thoughtful resolution, and I urge all of my colleagues to support this resolution celebrating and recognizing the 75th anniversary of the Great Smoky Mountains National Park.

Mrs. CHRISTENSEN. I reserve the balance of my time.

Mr. LAMBORN. I think it's evident from the remarks of Representative DUNCAN that he has a great love and appreciation and support for this beau-

tiful national park, and the fact that it's the most visited national park in the entire park system attests to its popularity and its beauty.

I would urge all of my colleagues to support this resolution.

Mr. ROE of Tennessee. Mr. Speaker, I urge support for H. Res. 421 and congratulate the Great Smoky Mountains National Park on turning 75. What an amazing success story!

This Park—the most visited in the United States—serves as a source of pride for residents of our entire region and we celebrate the vision of our ancestors who had the foresight to preserve this amazing area for all future generations to enjoy. As an avid outdoorsman myself, I am particularly grateful for this natural wonder.

Two weeks from yesterday, the Park will officially turn 75 with activities planned all summer to commemorate this accomplishment. I hope all Americans will join in the celebration and come visit what is truly one of our nation's finest examples of scenic beauty.

I also want to congratulate the National Park Service for its diligent management of the Park. Without its leadership, the Great Smoky Mountains National Park would not be what it is today.

I hope all members of Congress will join me in supporting H. Res. 421.

Mr. LAMBORN. I yield back the balance of my time.

Mrs. CHRISTENSEN. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN) that the House suspend the rules and agree to the resolution, H. Res. 421.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mrs. CHRISTENSEN. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

JOSH MILLER HELPING EVERYONE ACCESS RESPONSIVE TREATMENT IN SCHOOLS ACT OF 2009

Mr. TONKO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1380) to establish a grant program for automated external defibrillators in elementary and secondary schools.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1380

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Josh Miller Helping Everyone Access Responsive Treatment in Schools Act of 2009" or the "Josh Miller HEARTS Act".

SEC. 2. GRANT PROGRAM FOR AUTOMATED EXTERNAL DEFIBRILLATORS.

(a) PROGRAM REQUIRED.—The Secretary of Education shall carry out a program under

which the Secretary makes grants to local educational agencies, to be used by the local educational agencies for one or both of the following:

(1) To purchase automated external defibrillators for use in elementary and secondary schools served by the local educational agency.

(2) To provide training to enable elementary and secondary schools served by the local educational agency to meet the requirements of subsection (d)(1), but only if automated external defibrillators are already in use at such schools or are acquired through this program.

(b) ELIGIBILITY.—

(1) LOCAL EDUCATIONAL AGENCIES.—To be eligible to receive a grant under this section, a local educational agency shall submit an application to the Secretary at such time, in such form, and containing such information as the Secretary may require.

(2) ELEMENTARY AND SECONDARY SCHOOLS.—To be eligible to receive an automated external defibrillator through a grant under this section, a school may be any public or private school served by the local educational agency, except that an Internet- or computer-based community school is not eligible.

(c) MATCHING FUNDS REQUIRED.—

(1) IN GENERAL.—To be eligible to receive a grant under this section, the local educational agency must provide matching funds from non-Federal sources equal to not less than 25 percent of the amount of the grant.

(2) WAIVER.—The Secretary shall waive the requirement of paragraph (1) for a local educational agency if the number of children counted under section 1124(c)(1)(A) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6333(c)(1)(A)) is 20 percent or more of the total number of children aged 5 to 17, inclusive, served by the local educational agency.

(d) TRAINING AND COORDINATION REQUIRED.—A local educational agency that receives a grant under this section shall demonstrate that, for each elementary and secondary school at which the automated external defibrillators are to be used—

(1) there are at least 5 individuals at the school who—

(A) are employees or volunteers at the school;

(B) are at least 18 years of age; and

(C) have successfully completed training, with the expectation that the certification shall be maintained, in the use of automated external defibrillators and in cardiopulmonary resuscitation, conducted by the American Heart Association, the American Red Cross, the National Safety Council, or another nationally recognized organization offering training programs of similar caliber;

(2) local paramedics and other emergency services personnel are notified where on school grounds the automated external defibrillators are to be located; and

(3) the automated external defibrillator will be integrated into the school's emergency response plan or procedures.

(e) PRIORITY.—In making grants under this section, the Secretary shall give priority to schools—

(1) that do not already have an automated external defibrillator on school grounds;

(2) at which a significant number of students, staff, and visitors are present on school grounds during a typical day;

(3) with respect to which the average time required for emergency medical services (as defined in section 330J of the Public Health Service Act (42 U.S.C. 254c-15(f))) to reach the school is greater than the average time

for emergency medical services to reach other public facilities in the community; and

(4) that have not received funds under the Rural Access to Emergency Devices Act (42 U.S.C. 254c note).

(f) ESEA DEFINITIONS.—The terms used in this section shall have the meanings given to such terms in section 9101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801).

(g) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section such sums as may be necessary for each of fiscal years 2010 through 2015.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. TONKO) and the gentleman from Wisconsin (Mr. PETRI) each will control 20 minutes.

The Chair recognizes the gentleman from New York.

GENERAL LEAVE

Mr. TONKO. Thank you, Mr. Speaker. I request 5 legislative days during which Members may revise and extend and insert extraneous material on H.R. 1380 into the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. TONKO. I yield myself, Mr. Speaker, such time as I may consume.

Mr. Speaker, I rise today in strong support of H.R. 1380, the Josh Miller HEARTS Act. This is a bill that my colleague and friend from the neighboring State of Ohio has introduced that will save countless lives at a relatively low cost to taxpayers.

According to the American Heart Association, more than 200,000 Americans die of sudden cardiac arrest each year. Even more disturbing is the fact that 50,000 of these deaths could have been prevented with the use of an automated external defibrillator, or AED.

AEDs are portable devices used to restart the heart after sudden cardiac arrest. Studies have shown that these devices, which are required in Federal buildings and on airplanes, can be safely used by anyone, including children. Defibrillators talk the user through the lifesaving process and do not deliver a shock unless the heartbeat analyzed by the machine is in need of it.

Prompt response to a patient experiencing cardiac arrest is imperative, and waiting for EMS to arrive can be indeed fatal. Utilizing CPR techniques and administering an AED can more than double the victim's chances of surviving. A defibrillator shock is the most effective treatment for sudden cardiac arrest, and heart experts at Johns Hopkins University believe over 500 lives can be saved annually with the widespread placement of AEDs.

The legislation put forward today will go a long way towards saving lives in our Nation's schools. This bill establishes a grant program to place lifesaving defibrillators in every elementary and secondary school that chooses to participate in the program.

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Additionally, the law would require recipients of these grants to train

school staff in AED and CPR practices, coordinate with local paramedics, and integrate AEDs into existing medical emergency response plans. These provisions will save the lives of students, of teachers, of parents, staff and community members in our American schools. On any given day as much as 20 percent of the community's population passes through its schools, and it is our duty to ensure that these are safe places for our children to learn and for the community members to interact. Since schools are natural meeting places for the public, this bill can save the lives of countless children, teachers, parents and others. Similar legislation passed the House last year; and some States, such as Ohio and New York, are taking a leadership role in making an important difference. As a response to the tragic death of 15-year-old Josh Miller, Ohio instituted a program to place AEDs in schools. Since the inception of the program in 2005, 13 lives have been saved by defibrillators. Similarly, the New York program, in honor of 14-year-old Louis Acompora, has saved 38 lives since 2002.

I want to thank families like those of the Millers and the Acomporas whose hard work has brought national attention to this important issue. They have worked through their grief and, fueled by the tragic loss of a child, have toiled tirelessly to keep other parents from experiencing a similar loss. With passage of this bill, Congress has the opportunity to join these families and prevent future tragedies. Encouraging results and the many lives saved already demonstrates why we must pass this legislation. By putting in place preventative measures like those offered in this bill, we can save more lives.

Mr. Speaker, once again I express my support for H.R. 1380, and I thank Representative SUTTON for her dedication to this cause. I urge my colleagues to pass this resolution sponsored by the Member of our House, Representative SUTTON.

I reserve the balance of my time.

Mr. PETRI. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1380, the Josh Miller Helping Everyone Access Responsiveness Treatment in Schools Act of 2009, also referred to as the Josh Miller HEARTS Act. This legislation would authorize the United States Secretary of Education to make grants to public and private elementary and secondary schools to purchase automated external defibrillators, also known as AEDs, for school grounds and to train employees and volunteers on how to use these devices which have saved thousands of lives all over the United States.

An AED is a portable, computerized medical device that can check a person's heart rhythm to determine whether he or she is in cardiac arrest. It can recognize a rhythm that requires an electronic shock and can advise a rescuer when a shock is needed. The

AED uses voice prompts, lights and text messages to tell the rescuer the precise steps he or she needs to take to operate the device. It is an extremely accurate and easy device to use. As such, the device is widely credited for saving hundreds of lives each year.

This bill requires local education agencies that receive a grant under the program to provide at least a 25 percent match from non-Federal sources. It also ensures that local paramedics and other emergency services personnel are notified regarding where the actual AED is located on the school grounds in case they ever have to respond to a situation on the campus. H.R. 1380 is an important piece of legislation that will help save lives all across the country. I urge my colleagues to support the bill.

I have no requests for time, and I yield back the balance of my time.

Mr. TONKO. Mr. Speaker, I am pleased to recognize the gentlewoman from Ohio (Ms. SUTTON) whose thoughtful resolution is before the House for as much time as she may consume.

Ms. SUTTON. I thank the gentleman from New York for his great leadership on this issue and for all of the work that he does in Education and Labor on many issues that are so important to the people of America.

Mr. Speaker, I rise today as the proud sponsor of H.R. 1380, the Josh Miller Helping Everyone Access Responsiveness Treatment in Schools Act, also known as the Josh Miller HEARTS Act. Sudden cardiac arrest is the leading cause of death in the United States and is the leading cause of death on school property and for student athletes. This bill establishes a grant program to help elementary and secondary schools across the country purchase automated external defibrillators, or AEDs.

I introduced the Josh Miller HEARTS Act in memory of a young man from my hometown of Barberton, Ohio. To know Josh Miller was to know a kindhearted and generous young man with limitless potential. Josh was a Barberton High School sophomore with a 4.0 grade point average, the son of proud parents Ken and Geri Miller. He was a linebacker who dreamed of playing football for Ohio State someday. He was the kind of kid who could walk into a room and light it up. But one day, without warning, his dreams were cut short. Josh never showed any signs of heart trouble; but while playing football for his school in 2000, he collapsed after leaving the field. And by the time his heart was shocked with an automated external defibrillator, it was too late to save him. Josh suffered a sudden cardiac arrest which, according to the American Heart Association, claims the lives of nearly 300,000 Americans every year. Josh's death was devastating not only to his family but to our entire community.

Like Josh, the vast majority of these individuals who suffer sudden cardiac arrest do not display any prior signs of

heart trouble. Yet there is an easy-to-use, relatively inexpensive piece of medical equipment that more than doubles the odds of survival for someone experiencing a sudden cardiac arrest. An AED is the single most effective treatment for starting the heart after a sudden cardiac arrest; and because the chances of survival decrease by up to 10 percent for every minute that passes, every second is critical.

In March, I reintroduced the Josh Miller HEARTS Act to increase the availability of AEDs in our communities. Because schools are central gathering places in our communities, placing AEDs in our schools will save the lives of students enrolled there; but they will also be available for teachers and staff, parents and volunteers, and the many other members of the community who pass through their halls every single day.

This legislation is modeled on a similar program for the State of Ohio. Dr. Terry Gordon, a cardiologist at Akron General Medical Center, has dedicated his life to this lifesaving mission. His tireless efforts in Ohio led to the adoption of a statewide initiative to put an AED into every school in our State. I hope that we in Congress can build on Dr. Gordon's good work and carry out this program at the national level.

This bill is endorsed by the American Red Cross, the American Heart Association, the Heart Rhythm Society, the Sudden Cardiac Arrest Association, the International Association of Firefighters, the American College of Cardiology, the National Education Association, the Parent Heart Watch, the American Federation of Teachers and the National Safety Council. I want to thank these organizations for their support on this issue, and I look forward to working with them to continue to raise awareness on AEDs.

Losing a young life like Josh's can bring a sense of helplessness. In just the last year in the short time from August 2008 to December 2008, 63 children lost their lives to sudden cardiac arrest. But today we have an opportunity to act. This bill passed the House in the last Congress, but it did not emerge from the Senate. This time I am pleased to report that Ohio Senator GEORGE VOINOVICH will be leading the charge in the Senate and that Ohio Senator SHERROD BROWN will be working alongside him to make sure that it gets done.

It is appropriate that this bill comes to the floor this week. This week is National CPR and AED Awareness Week, and this week serves to raise awareness of the importance of CPR training and AED accessibility. In fact, the American Heart Association has embarked on a campaign to train 1 million people in CPR and the use of AEDs this week. I urge my colleagues to join me in supporting this effort to bring AEDs into every single school across this country. I thank the gentleman from across the aisle for his support of this measure. AEDs in schools will save lives. I want

to thank the Miller family and the Acompora family and others who have turned their personal tragedies into a lifesaving mission.

Mr. TONKO. Mr. Speaker, I am pleased to recognize the gentleman from Kentucky (Mr. YARMUTH) for 3 minutes.

Mr. YARMUTH. I thank the gentleman for yielding.

Mr. Speaker, I rise today in strong support of the Josh Miller HEARTS Act so that we may take another step to ensure that all the resources necessary to keep our children safe in their schools are readily available.

More than 200,000 Americans die of sudden cardiac arrest each year. Of these, more than 50,000 lives could be saved if automated external defibrillators were easily accessible. The AED is a portable device that can restart the heart after cardiac arrest, and can be safely used by anyone, including children, as the device actually talks users through the lifesaving process and automatically analyzes whether a potentially lifesaving shock is needed. Making defibrillators available in our schools will save lives, and the Josh Miller HEARTS Act will go a long way toward increasing the availability of these emergency lifesaving devices.

As we recognize National CPR and AED Awareness Week, this legislation is particularly timely. The bill will require recipients of these grants to train school staff in AED and CPR practices, coordinate with local paramedics and integrate AEDs into existing medical emergency response plans. These provisions will save the lives of students, teachers, parents, staff and community members in U.S. schools.

As we have heard, the act bears the name of Josh Miller, 15-year-old from Barbarton, Ohio. I had the privilege of meeting with Josh's family, and I was so taken with how they have used his loss to mount a national effort to prevent additional losses like their tragic one. Last fall in my district, a young football player also died on a practice field. I don't know that the existence of an AED might have saved his life, but I do know that we owe our young people every possible resource, including AEDs, to make sure that these tragedies do not recur.

I want to congratulate Congresswoman SUTTON for her leadership in this effort. She has been tireless and passionate about making sure that our kids are protected. I also want to thank Dr. Terry Gordon who is now Congresswoman SUTTON's constituent but is a long-time friend and a native of Louisville, Kentucky. He has also been tireless and passionate in this effort.

With that, I urge my colleagues to support the Josh Miller HEARTS Act and take one more step forward to protecting our young Americans.

Mr. TONKO. Mr. Speaker, to the point of H.R. 1380, we have heard of the wisdom of making available defibrillators throughout the schools of

our great country. It's a natural fit because of the clustering that takes place each and every school day where the need may arise. Obviously a preventative sort of plan like this will help with saving lives and certainly will honor the memory of Josh Miller and Louis Acompora in that hopefully they will not have died in vain, that a measure like this can bring us to a sound bit of policy.

For all those reasons, I would strongly urge our House to support H.R. 1380 and commend Representative SUTTON for her outstanding leadership on this issue.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. TONKO) that the House suspend the rules and pass the bill, H.R. 1380.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

CONGRATULATING UNIVERSITY OF TENNESSEE WOMEN'S BASKETBALL TEAM

Mr. TONKO. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 196) congratulating the University of Tennessee women's basketball team (the "Lady Vols") and Head Coach Pat Summitt on her 1,000th victory.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 196

Whereas, on February 5, 2009, Head Coach Pat Summitt recorded her 1,000th win with a victory over Georgia 73-43;

Whereas Coach Summitt has a lifetime record of 1,000-188 in her more than 35 years of coaching, all with the Lady Vols;

Whereas Coach Summitt's first win as Coach of the Lady Vols was on January 10, 1975, against Middle Tennessee State 69-32;

Whereas, on March 22, 2005, Coach Summitt passed Dean Smith for most NCAA collegiate basketball wins of all-time with a 75-54 victory over Purdue on March 22, 2005;

Whereas Coach Summitt and the Lady Vols own a 404-62 all-time record versus 12 teams from the Southeastern Conference (SEC);

Whereas Coach Summitt and the Lady Vols have won 27 SEC titles;

Whereas Coach Summitt has never had a losing season;

Whereas Coach Summitt and the Lady Vols have had 32 consecutive seasons with at least 20 wins;

Whereas Coach Summitt and the Lady Vols teams have gone undefeated in SEC play 8 times;

Whereas since Tennessee began contesting games with SEC opponents, the Lady Vols have produced a 168-12 record in home games;

Whereas Coach Summitt has been named SEC Coach of the Year 7 times;

Whereas Coach Summitt has been named NCAA Coach of the Year 7 times;