The essential ingredient in the provision of health services is, of course, the people who are engaged in it.

People who contribute to our health—as individuals and as a nation—are needed in large numbers at every level of education and skill. They must be encouraged to enter the health field. They must work in settings which allow them to use their abilities most effectively. Our most important task in the field of health is to prepare enough people with adequate knowledge and skill so that the right and expectation of every individual to have good health and to fulfill himself as an individual being can be realized.

The supply and quality of America's health professionals is at the very heart of our success in achieving and maintaining the opportunity for good health services for all Americans. The great breakthroughs in medical research will be of little value if patients in need cannot have access to physicians, dentists, nurses, and other important practitioners of the health professions. Our continuing rising prosperity as a nation will not bring about better health if essential health services are not available when and where they are needed.

When these laws were first enacted, attention was directed to the critical needs for different kinds of skills in the respective areas of health manpower. It was pointed out at that time that there were often long waiting periods for medical and dental care, that hospital beds were closed for lack of staff, and that desperately overcrowded hospital emergency rooms were unable to meet urgent community needs.

The removal of financial barriers to the receipt of health care through private health insurance, medicare, and medicaid is increasing the demand for services. Costs of providing services have risen rapidly, as have the costs of education and training. The science base that is the foundation for all of our education programs for the health professions, and for the services they provide, continues to expand and provide new opportunities for service.

When these laws were first enacted, we all recognized that there was no such thing as "instant manpower" and we recognized that we were already late in meeting the need. But the commitment was made, the tasks were begun, and we are beginning to see the results.

When one stops to think that the first construction project under the Health Professions Educational Assistance Act was funded in 1965, only 3 years ago, we can see that we are making good progress. We are also aware that, as we tool up to train increasing numbers of students, the demand for health services is also increasing. We cannot afford to stand still; we must run simply to keep up.

Under the Health Professions Educational Assistance Act, first authorized in 1963, 114 schools have received $365 million for construction of teaching facilities. These dollars have assisted in the construction of 17 new schools and the expansion, renovation, or remodeling of 97 other schools. Approximately 4,000 new first-year places are attributable to such construction. Health professions basic improvement grants will aid 170 schools this year.

Construction grants under the Nurse Training Act have aided 84 schools, adding over 3,300 new first-year places.

There is much more progress to report, Mr. Chairman, and in the interest of time I will submit for the record, with your permission, a detailed description of accomplishments under these programs.