

e. The nominee's resume (not to exceed two (2) pages) if the nomination is based on their professional capacity or qualifications. A resume is optional otherwise.

Nominees will be selected for appointment based on their demonstrated knowledge, qualifications, and professional or personal experience related to the purpose and scope of the Advisory Council. Nominations that fail to include all the above information will not receive consideration.

(2) Members will be appointed for a period not to exceed three years. Members appointed to fill subsequent vacancies will serve for the remainder of the current term of the Advisory Council.

Authority: 42 U.S.C. 3030s note; Pub. L. 119–75, 140 Stat. 279.

Dated: September 9, 2026.

Richard Nicholls,

Deputy Administrator and Chief of Staff of the Administration for Community Living.

[FR Doc. 2026–18727 Filed 9–11–26; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Solicitation for Nominations To Serve on the Advisory Council To Support Grandparents Raising Grandchildren

AGENCY: Administration for Community Living, HHS.

ACTION: Notice of request for nominations.

SUMMARY: The Administration for Community Living (ACL) seeks nominations for individuals to serve on the Advisory Council to Support Grandparents Raising Grandchildren.

DATES: Nominations must be submitted electronically by 11:59 p.m., Eastern on October 14, 2026 to be considered for appointment.

ADDRESSES: Nominations, including all requested information and attachments, must be submitted electronically to: SGRG.mail@acl.hhs.gov. See

SUPPLEMENTARY INFORMATION for details about the nomination process and instructions.

FOR FURTHER INFORMATION CONTACT: Kari Benson, (202) 401–4634, SGRG.mail@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: The Advisory Council to Support Grandparents Raising Grandchildren is authorized by the Supporting Grandparents Raising Grandchildren Act (Pub. L. 115–196) of 2018. The

Advisory Council identifies, promotes, coordinates, and disseminates to the public information, resources, and the best practices available to help grandparents and other older relatives both meet the needs of the children in their care; and maintain their own physical and mental health and emotional well-being. The Advisory Council is specifically directed to consider the needs of those affected by the opioid crisis, as well as the needs of members of Native American Tribes.

The Administration for Community Living has been delegated the authority to execute the requirements and responsibilities as outlined in the Act.

The Advisory Council is made up of the following (or their designees): the Administrator of the Administration for Community Living (ACL); the Secretary of Education; the Assistant Secretary for Mental Health and Substance Use; the Assistant Secretary for the Administration for Children and Families; and, as appropriate, the heads of other federal departments or agencies with responsibilities related to current issues affecting grandparents or other older relatives raising children.

The Advisory Council also must include at least one grandparent who is raising a grandchild, and an older relative (kinship) caregiver caring for children. ACL anticipates selecting up to ten (10) non-federal members to serve on the Advisory Council who will be reflective of grandparents and older relative/kinship caregivers and the professionals working on their behalf, with particular emphasis placed on individuals representing tribal communities, and those families impacted by the opioid crisis.

Advisory Council Responsibilities: The Advisory Council's efforts will build on the accomplishments of the previous council, whose term expires in July 2026. In this regard, the Advisory Council may support the information gathering for, and preparation of, updates to the initial Report to Congress. The Advisory Council may also provide input to update the sections of the National Strategy to Support Family Caregivers pertaining to grandparents and older relative (kinship) caregiver support. The Advisory Council may also be called upon to inform the work of, and collaborate with, the Kinship and Grandfamilies Support Network.

The Advisory Council, or its individual members, may be engaged to author/co-author articles and other materials; engage with print and electronic media; and deliver presentations, workshops, webinars and other forms of educational opportunities

designed to highlight the Administration's commitment to supporting kin and grandparent caregivers.

As needed, and where appropriate, this Advisory Council will coordinate its efforts with those of the Family Caregiving Advisory Council. Such coordination might include joint meetings, presentations, and other activities undertaken in fulfillment of the requirements of the RAISE Act.

The Advisory Council will meet in person or virtually (via Zoom or similar platform), up to three times each year, beginning in May 2027 (estimated). Council meetings will generally be held from 12:00–5:00 p.m., Eastern Time. All meetings of the Council will be open to the public, live streamed on Zoom or a similar platform, and recorded for posting on the ACL website. Advisory Council members will be expected to participate in at least one subcommittee or working group, which will meet, as needed, between Advisory Council meetings to develop and review materials and conduct other activities related to the Advisory Council's mission and purpose.

The completion of all activities described is dependent upon the continued availability of federal funding for the purposes of carrying out the legislation.

Nomination Process: Any person or organization may nominate one or more qualified individuals for membership. Terms are limited to two consecutive terms. Nomination packages must include:

(1) A nomination letter not to exceed one (1) page that provides ALL the following information:

- a. The reason(s) for nominating the individual;
- b. The constituency being represented:
 - i. A grandparent raising a grandchild; or
 - ii. An older relative caregiver of children;
 - iii. A grandparent or older relative caregiver whose family has been impacted by opioid misuse; or
 - iv. A grandparent or older relative caregiver who is a member of Native American tribe; or
 - v. Another expert and/or advocate engaged in programs, services, and supports to kinship families and grandfamilies.
- c. The nominee's particular, relevant experience and/or professional expertise;
- d. Contact information for the nominee (name, title (if applicable), address, phone, and email address); and

e. The nominee's resume (not to exceed two (2) pages) if the nomination is based on their professional capacity or qualifications. A resume is optional otherwise.

Nominees will be selected for appointment based on their demonstrated knowledge, qualifications, and professional or personal experience related to the purpose and scope of the Advisory Council. Nominations that fail to include all the above information will not receive consideration.

(2) Members will be appointed for a period not to exceed three years. Members appointed to fill subsequent vacancies will serve for the remainder of the current term of the Advisory Council.

Authority: Pub. L. 119–75, 140 Stat. 279; Sec. 3, Pub. L. 115–196.

Dated: September 9, 2026.

Richard Nicholls,

Deputy Administrator and Chief of Staff of the Administration for Community Living.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Announcing the Intent To Award a Single-Source Supplement for Expanding Outreach and Professional Training To Engage Older Adults With Behavioral Health Conditions in Evidence-Based Health Promotion Programs

AGENCY: Administration for Community Living, HHS.

ACTION: Notice of issuance of single-source award.

SUMMARY: The Administration for Community Living (ACL) announces the intent to award a single-source supplement to the current cooperative agreement held by the Lake Erie College of Osteopathic Medicine (LECOM) for Expanding Outreach and Professional Training to Engage Older Adults with Behavioral Health Conditions in Evidence-Based Health Promotion Programs. The purpose is to expand national outreach, training, and resources to increase participation in community-based, evidence-based programs (EBPs) for older adults with behavioral health issues, to help the aging and disability network develop new practical skills, and to improve coordination among local aging and behavioral health service providers. The administrative supplement for FY 2026 will be for \$1,084,718, bringing the total

award for the FY 2024 to FY 2027 budget period to \$4,345,417.

DATES: The supplement award will be issued to align with Year 3 (September 1, 2026, through August 31, 2027) of the September 1, 2024, through August 31, 2027 project period.

FOR FURTHER INFORMATION CONTACT: For further information or comments regarding this program supplement, contact Patricia Keane, U.S. Department of Health and Human Services, Administration for Community Living, Administration on Aging, Office of Nutrition and Health Promotion Programs; telephone (202) 795–7783; email Patricia.Keane@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: This supplemental funding will increase LECOM's capacity to expand the reach and impact of its approved *Behavioral Health Resources for Integrated Development, Growth, Engagement, and Support (BRIDGES)* for Older Adults project. The goals for expanded funding align with the overall goals of the grant to expand outreach and professional training nationally to increase the participation of older adults with behavioral health conditions in community-based EBPs, to help the aging and disability network develop new practical skills, and to improve coordination among local aging and behavioral health service providers.

LECOM should expand BRIDGES training and technical assistance (TA) to all ACL Chronic Disease Self-Management Education (CDSME) grantees, including those specifically focused on preventing and managing chronic disease in older adults with behavioral health conditions and stressors. They should build a tiered TA model for CDSME and other ACL grantees, scaled to organizational readiness level. This model should include individual consultation, implementation coaching, office hours, cohort models, and peer-to-peer learning opportunities. LECOM should facilitate the federal agencies contributing to the 10th anniversary of the virtual Older Adult Mental Health Awareness Day and convene grantees and the network for behavioral health continuing education and training opportunities to include speakers, partner organizations, and subject matter experts. LECOM should broaden the existing BRIDGES curriculum to specifically include CDSME grantees, and develop a CDSME grantee partnership track to onboard CDSME grantees with targeted implementation resources and communities of practice. LECOM should develop an evidence-informed Dissemination and

Engagement Playbook to use across BRIDGES, CDSME, and the broader grantee portfolio, and other ACL-supported initiatives.

Program Name: Expanding Outreach and Professional Training to Engage Older Adults with Behavioral Health Conditions in Evidence-Based Health Promotion Programs.

Recipient: Lake Erie College of Osteopathic Medicine (LECOM).

Period of Performance: The award will be issued in Year 3 of the project period of September 1, 2024 through August 31, 2027.

Total Award Amount: \$4,345,417 (\$3,260,699 fully funded in FY 2024 + \$1,084,718 in FY 2026).

Award Type: Cooperative Agreement Supplement.

Basis for Award: LECOM is currently funded to carry out the *Behavioral Health Resources for Integrated Development, Growth, Engagement, and Support (BRIDGES)* for Older Adults project for the period of September 1, 2024 through August 31, 2027. LECOM has made substantial progress to date: the project conducted an environmental scan, needs (re)assessments, and stigma surveys; launched a national destigmatization campaign with an accompanying education multimedia toolkit; stood up a technical assistance center and online resource hub focused on the intersection of older adult programming and behavioral health needs; and distributed toolkits to organizations across the aging and disability network. LECOM has also delivered training and outreach through webinars and virtual conferences, including Older Adult Mental Health Awareness Day, and in-person presentations at two national conferences. In addition, the project developed a free, accessible online behavioral health literacy curriculum comprising 13 modules, designed to help CDSME facilitators, caregivers, and older adults recognize, respond to, and refer behavioral health concerns as they emerge.

It would be unnecessarily time consuming and disruptive to the BRIDGES project and the beneficiaries being served for the ACL to establish a new grantee at this time when critical services are presently being provided in an efficient manner.

LECOM is ideally and uniquely positioned to make the best use of the increased funding quickly and efficiently to effectively deliver what is needed to meet the needs of CDSME grantees and the broader aging and disability network. LECOM has established itself nationally as a recognized leader and expert in