It is determined that the Cures Acceleration Network Review Board, is in the public interest in connection with the performance of duties imposed on the National Institutes of Health by law, and that these duties can best be performed through the advice and counsel of this group.

Inquiries may be directed to Claire Harris, Director, Office of Federal Advisory Committee Policy, Office of the Director, National Institutes of Health, 6701 Democracy Boulevard, Suite 1000, Bethesda, Maryland 20892 (Mail code 4875), Telephone (301) 496-2123, or harriscl@mail.nih.gov.

Dated: February 9, 2024.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2024-03110 Filed 2-14-24; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director; Notice of Charter Renewal

In accordance with Title 41 of the U.S. Code of Federal Regulations. Section 102-3.65(a), notice is hereby given that the charter for the National Center for Advancing Translational Sciences Advisory Council, was renewed for an additional two-year period on February 7, 2024.

It is determined that the National Center for Advancing Translational Sciences Advisory Council, is in the public interest in connection with the performance of duties imposed on the National Institutes of Health by law, and that these duties can best be performed through the advice and counsel of this group.

Inquiries may be directed to Claire Harris, Director, Office of Federal Advisory Committee Policy, Office of the Director, National Institutes of Health, 6701 Democracy Boulevard, Suite 1000, Bethesda, Maryland 20892 (Mail code 4875), Telephone (301) 496-2123, or harriscl@mail.nih.gov.

Dated: February 9, 2024.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2024-03104 Filed 2-14-24; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health,

HHS.

ACTION: Notice.

SUMMARY: The invention listed below is owned by an agency of the U.S. Government and is available for licensing to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

FOR FURTHER INFORMATION CONTACT:

Daniel Lee at 301–761–6327 or daniel.lee5@nih.gov. Licensing information may be obtained by communicating with the Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases, 5601 Fishers Lane, Rockville, MD 20852; tel. 301-496-2644. A signed Confidential Disclosure Agreement will be required to receive copies of unpublished information related to the invention.

SUPPLEMENTARY INFORMATION:

Technology description follows:

DeePlexing—Extending Imaging Multiplexity Using Machine Learning

Description of Technology: Spatial proteomics and transcriptomics are fastemerging fields with the potential to revolutionize various branches of biology. In the last five years, various multiplex immunofluorescence and immunohistochemistry imaging methods have been developed to stain 5-60 different protein markers in a given tissue. Nonetheless, most of these techniques are iterative and can image a maximum of 3-8 markers in a single cycle, resulting in processing time of several hours to days.

Scientists at National Institute of Allergy and Infectious Diseases (NIAID) and National Cancer Institute (NCI) have developed a new method-DeePlexing—that uses a deep learning algorithm to dramatically enhance the number of markers stained in a single imaging cycle. This is accomplished with no changes or upgrades to the imaging platform itself. In the DeePlexing method, multiple antibodies/probes are conjugated to the same fluorophores and later deconvolved computationally to retrieve the multichannel signal with high accuracy. In digital spatial profiling, DeePlexing enables the user to detect seven different protein markers in a single cycle using only three fluorophores and even quadruple the number of markers in a single round without compromising the quality of RNA and protein in the sample. For multiplex protein profiling, DeePlexing can potentially stain for up to 255 different protein markets with eight fluorophores and deconvolve the signal for each of the 255 markers computationally.

This technology is available for licensing for commercial development in accordance with 35 U.S.C. 209 and 37

CFR part 404.

Potential Commercial Applications:

- Imaging platforms in spatial transcriptomics
- Multiplex protein spatial imaging Competitive Advantages:
- Enhances the number of markers stained in a single imaging cycle
- Achieves this marker detection increase without compromising RNA or protein quality when that is part of the analytical pipeline
- Reduces the required processing time for multiplex imaging platforms
- Inexpensive and replicable Development Stage:
- Prototype

Inventors: Ronald N. Germain (NIAID), Spencer M. Grant (NIAID), Nishant Thakur (NIAID), Chen Zhao (NCI), and Abigail J. Wong-Rolle (NCI).

Intellectual Property: HHS Reference No. E-202-2021-0; Software Tool.

Licensing Contact: To license this technology, please contact Daniel Lee at 301-761-6327 or daniel.lee5@nih.gov, and reference E-202-2021-0.

Dated: February 9, 2024.

Surekha Vathyam,

Deputy Director, Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases.

[FR Doc. 2024-03120 Filed 2-14-24; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Notice of Meeting for the **Interdepartmental Serious Mental Illness Coordinating Committee** (ISMICC)

AGENCY: Substance Abuse and Mental Health Services Administration, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The Secretary of Health and Human Services announces a meeting of the Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC).

The meeting will provide information on federal efforts related to serious mental illness (SMI) and serious emotional disturbance (SED); the Olmstead Decision: 25 Years of History in the Making; SMI Advisor: A Modern Approach to Technical Assistance that Makes an Impact; and Report Outs from Focus Area 1—Data and Evaluation; Focus Area 2—Access and Engagement; Focus Area 3—Treatment and Recovery; Focus Area 4—Criminal Justice and Focus Area 5—Finance.

DATES: March 27, 2024, 9:00 a.m. to 4:00 p.m. (EST)/Open.

ADDRESSES: The meeting is open to the public and can be accessed virtually only by accessing: https://www.zoomgov.com/j/1611468532?pwd=b0xnU2dTbFJqQXIONkJkUzdjdzhtZz09 or by dialing 646–828–7666, webinar ID: 161 146 8532, passcode: 127885. Agenda with call-in information will be posted on the SAMHSA website prior to the meeting at https://www.samhsa.gov/about-us/advisory-councils/meetings.

FOR FURTHER INFORMATION CONTACT: Pamela Foote, ISMICC Designated Federal Officer, SAMHSA, 5600 Fishers Lane, Rockville, MD 20857; telephone: 240–276–1279; email: pamela.foote@samhsa.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background and Authority

The ISMICC was established on March 15, 2017, in accordance with section 6031 of the 21st Century Cures Act, and the Federal Advisory Committee Act, 5 U.S.C. App., as amended, to report to the Secretary, Congress, and any other relevant federal department or agency on advances in SMI and SED, research related to the prevention of, diagnosis of, intervention in, and treatment and recovery of SMIs, SEDs, and advances in access to services and supports for adults with SMI or children with SED. In addition, the ISMICC will evaluate the effect federal programs related to SMI and SED have on public health, including public health outcomes such as: (A) rates of suicide, suicide attempts, incidence and prevalence of SMIs, SEDs, and substance use disorders, overdose, overdose deaths, emergency hospitalizations, emergency room boarding, preventable emergency room visits, interaction with the criminal justice system, homelessness, and

unemployment; (B) increased rates of employment and enrollment in educational and vocational programs; (C) quality of mental and substance use disorders treatment services; or (D) any other criteria determined by the Secretary. Finally, the ISMICC will make specific recommendations for actions that agencies can take to better coordinate the administration of mental health services for adults with SMI or children with SED. Not later than one (1) year after the date of enactment of the 21st Century Cures Act, and five (5) years after such date of enactment, the ISMICC shall submit a report to Congress and any other relevant federal department or agency.

II. Membership

This ISMICC consists of federal members listed below or their designees, and non-federal public members.

Federal Membership: Members include, The Secretary of Health and Human Services; The Assistant Secretary for Mental Health and Substance Use; The Attorney General; The Secretary of the Department of Veterans Affairs; The Secretary of the Department of Defense: The Secretary of the Department of Housing and Urban Development; The Secretary of the Department of Education; The Secretary of the Department of Labor; The Administrator of the Centers for Medicare and Medicaid Services; the Administrator of the Administration for Community Living, and The Commissioner of the Social Security Administration.

Non-Federal Membership: Members include, not less than 14 non-federal public members appointed by the Secretary, representing psychologists, psychiatrists, social workers, peer support specialists, and other providers, patients, family of patients, law enforcement, the judiciary, and leading research, advocacy, or service organizations.

The ISMICC is required to meet at least twice per year.

To attend virtually, submit written or brief oral comments, or request special accommodation for persons with disabilities, contact Pamela Foote. Individuals can also register at https://snacregister.samhsa.gov/.

The public comment section will be scheduled at the conclusion of the meeting. Individuals interested in submitting a comment, must notify Pamela Foote on or before March 18, 2024, via email to: Pamela.Foote@samhsa.hhs.gov.

Up to three minutes will be allotted for each approved public comment as

time permits. Written comments received in advance of the meeting will be considered for inclusion in the official record of the meeting.

Substantive meeting information and a roster of Committee members is available at the Committee's website: https://www.samhsa.gov/about-us/advisory-councils/ismicc.

Dated: February 12, 2024.

Carlos Castillo,

Committee Management Officer, SAMHSA. [FR Doc. 2024–03165 Filed 2–14–24; 8:45 am] BILLING CODE 4162–20–P

ADVISORY COUNCIL ON HISTORIC PRESERVATION

Notice of Adoption of Policy Statement on Housing and Historic Preservation

AGENCY: Advisory Council on Historic Preservation.

ACTION: Notice of adoption of policy statement on housing and historic preservation.

SUMMARY: The Advisory Council on Historic Preservation has adopted its Policy Statement on Housing and Historic Preservation.

DATES: The policy statement was adopted and went into effect on December 22, 2023.

FOR FURTHER INFORMATION CONTACT: Druscilla Null, (202) 517–1487, dnull@achp.gov.

SUPPLEMENTARY INFORMATION: The Advisory Council on Historic Preservation (ACHP), an independent Federal agency created by the National Historic Preservation Act (NHPA), works to promote the preservation, enhancement, and sustainable use of our nation's diverse historic resources, and advises the President and the Congress on national historic preservation policy.

Under the NHPA, the ACHP's duties include advising the President and Congress on matters relating to historic preservation; recommending measures to coordinate activities of Federal, state, and local agencies and private institutions and individuals related to historic preservation; and advising on the dissemination of information pertaining to those activities. In keeping with these mandates, in June 2023 the ACHP initiated discussions regarding the role that rehabilitation of historic buildings can play in alleviating America's housing shortage and how the ACHP might advise and assist Federal agencies and other stakeholders on the topic.