other health care providers (including primary care physicians and internists) and to cancer survivors and their families, where appropriate and in accordance with Federal and State law; and

(vii) development of initiatives that promote the coordination and effective transition of care between cancer care providers, primary care physicians, mental health professionals, and other health care professionals, as appropriate, including models that use a team-based or multi-disciplinary approach to care.

(b) WORKFORCE DEVELOPMENT FOR HEALTH CARE PROVIDERS ON MEDICAL AND PSYCHO-SOCIAL CARE FOR CHILDHOOD CANCER SUR-VIVORS.—

(1) IN GENERAL.—The Secretary shall, not later than 1 year after the date of enactment of this Act, conduct a review of the activities of the Department of Health and Human Services related to workforce development for health care providers who treat pediatric cancer patients and survivors. Such review shall include—

(A) an assessment of the effectiveness of supportive psychosocial care services for pediatric cancer patients and survivors, including pediatric cancer survivorship care patient navigators and peer support programs;

(B) identification of existing models relevant to providing medical and psychosocial services to individuals surviving pediatric cancers, and programs related to training for health professionals who provide such services to individuals surviving pediatric cancers; and

(C) recommendations for improving the provision of psychosocial care for pediatric cancer survivors and patients.

(2) REPORT.—Not later than 2 years after the date of enactment of this Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and Committee on Energy and Commerce of the House of Representatives, a report concerning the findings and recommendations from the review conducted under paragraph (1).

SEC. 202. GRANTS TO IMPROVE CARE FOR PEDI-ATRIC CANCER SURVIVORS.

(a) IN GENERAL.—Section 417E of the Public Health Service Act (42 U.S.C. 285a–11), as amended by section 101, is further amended by striking subsection (b) and inserting the following:

('(b) IMPROVING CARE FOR PEDIATRIC CANCER SURVIVORS.—

"(1) RESEARCH ON PEDIATRIC CANCER SURVI-VORSHIP.—The Director of NIH, in coordination with ongoing research activities, may continue to conduct or support pediatric cancer survivorship research including in any of the following areas:

"(A) Outcomes of pediatric cancer survivors, including within minority or other medically underserved populations and with respect to health disparities of such outcomes.

"(B) Barriers to follow-up care for pediatric cancer survivors, including within minority or other medically underserved populations.

"(C) The impact of relevant factors, which may include familial, socioeconomic, and other environmental factors, on treatment outcomes and survivorship.

"(D) The development of indicators used for long-term follow-up and analysis of the late effects of cancer treatment for pediatric cancer survivors.

"(E) The identification of, as applicable—

"(i) risk factors associated with the late effects of cancer treatment;

((ii) predictors of adverse neurocognitive and psychosocial outcomes; and

"(iii) the molecular basis of long-term complications.

"(F) The development of targeted interventions to reduce the burden of morbidity borne by cancer survivors in order to protect such cancer survivors from the late effects of cancer.

((2) BALANCED APPROACH.—In conducting or supporting research under paragraph (1)(A)(i)

on pediatric cancer survivors within minority or other medically underserved populations, the Director of NIH shall ensure that such research addresses both the physical and the psychological needs of such survivors, as appropriate.".

SEC. 203. BEST PRACTICES FOR LONG-TERM FOL-LOW-UP SERVICES FOR PEDIATRIC CANCER SURVIVORS.

The Secretary of Health and Human Services may facilitate the identification of best practices for childhood and adolescent cancer survivorship care, and, as appropriate, may consult with individuals who have expertise in late effects of disease and treatment of childhood and adolescent cancers, which may include—

(1) oncologists, which may include pediatric oncologists;

(2) primary care providers engaged in survivorship care;

(3) survivors of childhood and adolescent cancer:

(4) parents of children and adolescents who have been diagnosed with and treated for cancer and parents of long-term survivors;

(5) nurses and social workers;

(6) mental health professionals;

(7) allied health professionals, including physical therapists and occupational therapists; and (8) others, as the Secretary determines appropriate.

SEC. 204. TECHNICAL AMENDMENT.

(a) IN GENERAL.—Section 3 of the Hematological Cancer Research Investment and Education Act of 2002 (Public Law 107–172; 116 Stat. 541) is amended by striking "section 419C" and inserting "section 417C"

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect as if included in section 3 of the Hematological Cancer Research Investment and Education Act of 2002 (Public Law 107–172; 116 Stat. 541).

Mr. McCONNELL. Mr. President, I ask unanimous consent that the committee-reported substitute amendment be agreed to; that the bill, as amended, be considered read a third time and passed; and that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee-reported amendment in the nature of a substitute was agreed to.

The bill (S. 292), as amended, was ordered to be engrossed for a third reading, was read the third time, and passed.

SUPPORTING GRANDPARENTS RAISING GRANDCHILDREN ACT

Mr. McCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 343, S. 1091.

The PRESIDING OFFICER. The clerk will report the bill by title.

The senior assistant legislative clerk read as follows:

A bill (S. 1091) to establish a Federal Task Force to Support Grandparents Raising Grandchildren.

There being no objection, the Senate proceeded to consider the bill, which had been reported from the Committee on Health, Education, Labor, and Pensions, with an amendment to strike all after the enacting clause and insert in lieu thereof the following: SECTION 1. SHORT TITLE.

This Act may be cited as the "Supporting Grandparents Raising Grandchildren Act".

SEC. 2. FEDERAL TASK FORCE TO SUPPORT GRANDPARENTS RAISING GRAND-CHILDREN

(a) ESTABLISHMENT.—There is established a Federal Task Force to Support Grandparents Raising Grandchildren (referred to in this section as the "Task Force").
(b) OLDER RELATIVE CAREGIVER.—In this sec-

(b) OLDER RELATIVE CAREGIVER.—In this section, the term "older relative caregiver" has the meaning given the term under section 372(a)(3) of the National Family Caregiver Support (42 U.S.C. 3030s(a)(3)).

(c) MEMBERSHIP.-

(1) IN GENERAL.—The Task Force shall be composed of the following members, or their designee:

(A) The Secretary of Health and Human Services.

(B) The Attorney General.

(C) The Administrator of the Administration for Community Living.

(D) The Director of the Centers for Disease Control and Prevention.

(E) The Assistant Secretary for Mental Health and Substance Use.

(F) The Assistant Secretary for the Administration for Children and Families.

 (G) The Director of the Indian Health Service.
 (H) The Administrator of the Centers for Medicare & Medicaid Services.

(1) The head of each Federal department, agency, or other governmental entity identified by the Secretary of Health and Human Services as having responsibilities, or administering programs, relating to the current health, educational, nutritional, and other needs and current issues affecting older relative caregivers, including grandparents, raising children in their care.

 (J) A grandparent raising a grandchild or grandchildren as well as another older relative caregiver of children.
 (2) LEAD AGENCY.—The Department of Health

(2) LEAD AGENCY.—The Department of Health and Human Services shall be the lead agency for the Task Force.

(d) DUTIES.—

(1) IN GENERAL.-

(Å) INFORMATION.—The Task Force shall identify, coordinate, and disseminate information publicly about Federal information, resources, and best practices available, on the date of the determination, to help older relative caregivers, including grandparents, raising children in their care, including those raising children in their care as a result of the opioid crisis, meet the health, educational, nutritional, and other needs of the children in their care as well as maintain their own physical and mental health and emotional well-being.

(B) NATIVE AMERICANS.—In carrying out the duties described in subparagraph (A), the Task Force shall ensure that the needs of Native Americans (as defined in section 102 of the Older Americans Act of 1965 (42 U.S.C. 3002)) are considered.

(2) REPORT.—

(Å) IN GENERAL.—Not later than 360 days after the date of enactment of this Act, the Task Force shall submit a report to the Special Committee on Aging, the Committee on Health, Education, Labor, and Pensions, and the Committee on Finance of the Senate and the Committee on Education and the Workforce, the Committee on Energy and Commerce, and the Committee on Ways and Means of the House of Representatives that includes—

(i) best practices, resources, and other useful information for older relative caregivers, including grandparents, raising children in their care; and

(ii) an identification of the gaps in needs of older relative caregivers, including grandparents, raising children in their care.

(B) FINAL REPORT.—Not later than 4 years after the date of enactment of this Act, the Task Force shall submit a final report to the Special Committee on Aging, the Committee on Health, Education, Labor, and Pensions, and the Committee on Finance of the Senate and the Committee on Education and the Workforce, the Committee on Energy and Commerce, and the Committee on Ways and Means of the House of Representatives that includes the final findings of the Task Force, recommendations for future actions to address issues faced by older relative caregivers, including grandparents, raising children in their care, and any other useful information.

(3) PROCESS FOR PUBLIC INPUT.—The Task Force shall establish a process for public input to inform the identification of, and updates to, the best practices, resources, and other useful information and the gaps in needs described in paragraph (2), including a process for the public to submit recommendations to the Task Force and an opportunity for public comment.

(e) SUNSET.—The Task Force shall terminate on the date that is 5 years after the date of enactment of this Act.

(f) NONAPPLICABILITY OF FACA.—The Federal Advisory Committee Act (5 U.S.C. App.) shall not apply to the Task Force.

(g) FUNDING.—No additional funds are authorized to be appropriated to carry out this section. The Task Force shall be carried out with funds otherwise appropriated.

Mr. McCONNELL. Mr. President, I ask unanimous consent that the committee-reported substitute amendment be agreed to, the bill, as amended, be considered read a third time and passed, and the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee-reported amendment in the nature of a substitute was agreed to.

The bill (S. 1091), as amended, was ordered to be engrossed for a third reading, was read the third time, and passed.

NATIONAL CACFP WEEK

Mr. McCONNELL. Mr. President, I ask unanimous consent that the Judiciary Committee be discharged from further consideration of and the Senate now proceed to the consideration of S. Res. 405.

The PRESIDING OFFICER. Without objection, it is so ordered.

The clerk will report the resolution by title.

The senior assistant legislative clerk read as follows:

A resolution (S. Res. 405) designating the third week of March 2018 as "National CACFP Week."

There being no objection, the Senate proceeded to consider the resolution.

Mr. McCONNELL. Mr. President, I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, and the motions to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 405) was agreed to.

The preamble was agreed to.

(The resolution, with its preamble, is printed in the RECORD of February 13, 2018, under "Submitted Resolutions.")

RESOLUTIONS SUBMITTED TODAY

Mr. McCONNELL. Mr. President, I ask unanimous consent that the Sen-

ate now proceed to the en bloc consideration of the following Senate resolutions, which were submitted earlier today: S. Res. 445, S. Res. 446, S. Res. 447, S. Res. 448, and S. Res. 449.

There being no objection, the Senate proceeded to consider the resolutions en bloc.

Mr. McCONNELL. I ask unanimous consent that the resolutions be agreed to, the preambles be agreed to, and the motions to reconsider be considered made and laid upon the table, all en bloc.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolutions were agreed to.

The preambles were agreed to.

(The resolutions, with their preambles, are printed in today's RECORD under "Submitted Resolutions.")

Mr. McCONNELL. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. McCONNELL. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. JOHNSON). Without objection, it is so ordered.

PROVIDING FOR A CORRECTION IN THE ENROLLMENT OF H.R. 1625

Mr. McCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of H. Con. Res. 116, which was received from the House.

The PRESIDING OFFICER. The clerk will report the concurrent resolution by title.

The senior assistant legislative clerk read as follows:

A concurrent resolution (H. Con. Res. 116) providing for a correction in the enrollment of H.R. 1625.

There being no objection, the Senate proceeded to consider the concurrent resolution.

Mr. McCONNELL. I ask unanimous consent that the amendment at the desk be agreed to, the concurrent resolution, as amended, be agreed to, and the motion to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment (No. 2226) was agreed to, as follows:

At the end add the following:

"On page 749, line 12, strike 'and' through line 14 'are' and insert 'is'"

The concurrent resolution (H. Con. Res. 116), as amended, was agreed to.

The PRESIDING OFFICER. The majority leader.

QUORUM CALL

Mr. McCONNELL. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll and the following Senators entered the Chamber and answered to their names:

[Quorum No. 1 Leg.]				
Cornyn Daines Johnson	Johnson King Leahy	McConnell Risch		

The PRESIDING OFFICER. A quorum is not present.

The majority leader.

Mr. McCONNELL. Mr. President, I move to instruct the Sergeant at Arms to request the presence of absent Sen-

ators, and I ask for the yeas and nays. The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The question is on agreeing to the motion of the Senator from Kentucky.

The clerk will call the roll.

The senior assistant legislative clerk called the roll.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from North Carolina (Mr. BURR), the Senator from Arizona (Mr. MCCAIN), and the Senator from Pennsylvania (Mr. TOOMEY).

The result was announced—yeas 91, nays 6, as follows:

[Rollcall Vote No. 61 Leg.]

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NAYS—6

Alexander	Corker	Lee
Cassidy	Cotton	Rubio
	NOT VOTING-3	

McCain Toomey

The motion was agreed to.

The PRESIDING OFFICER (Mr.

DAINES). A quorum is present.

The majority leader.

TARGETED REWARDS FOR THE GLOBAL EDUCATION OF HUMAN TRAFFICKING—Continued

Mr. McCONNELL. Mr. President, I ask unanimous consent that notwithstanding rule XXII, the Senate now vote on the motion to invoke cloture