



DECEMBER 6, 2022, PEER-TO-PEER SHARING WEBINAR

Partnering With Pharmacists to Advance Chronic Disease Prevention Efforts



**NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS**
Promoting Health. Preventing Disease.



Agenda

- Welcome
- American Pharmacists Association Presentation
- Kansas Pharmacists Association Presentation
- State Sharing & Q&A
- Osteoarthritis Action Alliance Presentation
- Wrap Up



Webinar Objectives

1. Provide information about ways that State Health Departments and community-based organizations can work with pharmacists, pharmacy staff, and pharmacy schools to promote and implement evidence-based interventions
2. Increase capacity of states to partner with pharmacists to advance arthritis public health strategies
3. Identify partners that CDC-funded grantees can leverage to advance arthritis public health strategies
4. Provide a platform to share tools and resources and brainstorm opportunities for collaboration and sustainability



Housekeeping

- Rename yourself to include state or organization
- Use the chat box for questions during the presentation or present questions via speaking during Q&A
- Visit the Action on Arthritis website for recording, notes, and resources



PARTNERING WITH PHARMACISTS TO ADVANCE CHRONIC DISEASE PREVENTION EFFORTS

American Pharmacists Association Foundation

- The APhA Foundation is a charitable, not for profit 501(c)(3) organization headquartered in Washington, DC, affiliated with the American Pharmacists Association (APhA)
- The mission of the APhA Foundation is to improve health by inspiring philanthropy, research and innovation that advances pharmacists' patient care services
- The Foundation has been heavily involved in research related to involving pharmacists in chronic disease management
- The APhA Foundation is 1 of 10 CDC DP17-1705 Cooperative Agreement Recipients, a 6-year grant whose goal is to enroll patients into CDC's National Diabetes Prevention Program (NDPP)



Pharmacy Landscape:

- There are approximately 61,000 community pharmacies in the U.S.
- “Almost 90% of the U.S. population lives within 5 miles of a community pharmacy.”¹
- Pharmacists are highly trained and highly accessible health care providers
- Great potential to be an access point for public health efforts
 - (e.g.) According to the CDC pharmacies administered over 287 million Covid vaccines
- Is there evidence that involving community pharmacists in community health efforts works?

Brief History of Pharmacist Involvement in Chronic Disease Management



- Asheville Project²⁻¹¹

- Landmark community pharmacy study demonstrating that pharmacists providing appointment-based chronic disease management services improved care and decreased health care costs
 - North Carolina Association of Pharmacists sponsored project
 - City of Asheville health plan agreed to cover a benefit for plan members with chronic medical conditions (diabetes, hypertension, hyperlipidemia, asthma, depression)
 - 24 community pharmacists received training on the latest treatment guidelines
 - Participants voluntarily agreed to meet with program pharmacist at least quarterly
 - Appointment-based: Basic education, medication review, assess compliance, measure outcomes, goal setting, referral to prescriber when plan needed to be adjusted
 - Pharmacists paid for sessions
 - Participants were provided a financial incentive: Zero co-payments on condition related medications

Brief History of Pharmacist Involvement in Chronic Disease Management



- Asheville Project²⁻¹¹
 - Outcomes:
 - Diabetes: (187 participants, 5-year study) improved A1c, blood pressure, cholesterol levels, and decreased total health care costs by over \$2,000/participant/year
 - Cardiovascular: (600 participants, 6-year study) improved blood pressure control and cholesterol levels. ER visits/hospitalizations cut in half. Strokes/heart attacks cut in half
 - Asthma: (200 participants, 5-year study) reduced ER visits from an average of 1.7 participant/year to less than 0.2/participant/year

Brief History of Pharmacist Involvement in Chronic Disease Management



- Project IMPACT¹²⁻⁴⁶

- APhA Foundation program to “refine”, “scale”, and “implement” the Asheville model (5,200 patients cared for across all projects)
 - Replicated the Asheville diabetes management model in 10 cities, with similar outcomes
 - Project IMPACT: Hyperlipidemia
 - Medication compliance improved to 90% and 62.5% of group achieved NCEP ATP III goals
 - Project IMPACT: Osteoporosis
 - 78% of patients screened indicated no prior knowledge of their risk and 70% (of 532) were found to be at high or moderate risk for future fracture
 - Project IMPACT: Depression
 - Statistically significant improvements in PHQ-9 scores, 68% response rate and 56% remission rate
 - Project IMPACT: Immunizations
 - Project IMPACT: Diabetes Prevention, CDC collaborative/1705 (ongoing)

“If this is so great, why isn’t everyone doing it?” What are the barriers?



- The primary barrier is - - - - payment
- Two things need to happen at the same time for this to be a national model
 - Large payers to cover clinical services (to gain the interest of pharmacy owners)
 - A large number of pharmacies are needed to provide the services (to gain the interest of large payers)
- One of the reasons the APhA Foundation applied for 1705 funds was to use these funds to help develop a national network of pharmacies to provide NDPP, with the goal of expanding to other disease management offerings

Summary of 1705 Activity

- The APHA Foundation is one of ten 1705 recipients
- Partnered with Kroger Pharmacies/growing number of community pharmacies to implement NDPP
- Offer the program nationally via Distance Learning, plus In-person which is currently restarting post-pandemic
- The Foundation has recently been recognized as an Umbrella Hub Organization
- The Foundation is applying to become an approved MDPP Supplier

Opportunities for Collaboration

- Work with state pharmacy associations to help identify pharmacies willing to partner in chronic disease initiatives
- Work with state pharmacy associations and/or schools of pharmacy to develop continuing education programs for pharmacists that exposes them to the Arthritis Foundation's Walk With Ease program
 - Perhaps some pharmacies could become referral sites for WWE
 - They would need some compensation/incentive to do so
- Although it would be a heavy lift, consider a pilot program using the appointment-based Asheville Model to address arthritis⁴⁷



CONTACT INFORMATION

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Pharmacy Engagement in Lifestyle Management Programs

Aaron Dunkel, Executive Director, Kansas Pharmacists Association

Courtney Johnson, PharmD, Hesston Pharmacy

Pharmacist Practice Sites



- Community Pharmacy (aka retail)
 - National chain pharmacies (Walgreens, CVS, Kroger)
 - Regional chain pharmacies (Price Chopper, Meijer, HEB)
 - Local independent pharmacies
- Health Systems
 - Ambulatory care (clinic based) pharmacists

Doctor of Pharmacy Training



- Over the counter medication recommendation and counseling
- Medication Therapy Management (MTM)
 - Optimization of prescription and non-prescription medications
- Chronic Disease Management (CDM)
 - MTM
 - Lifestyle modifications
 - Patient self-management
 - 5 A's of intervention
 - Motivational interviewing



Pharmacy Technician Training

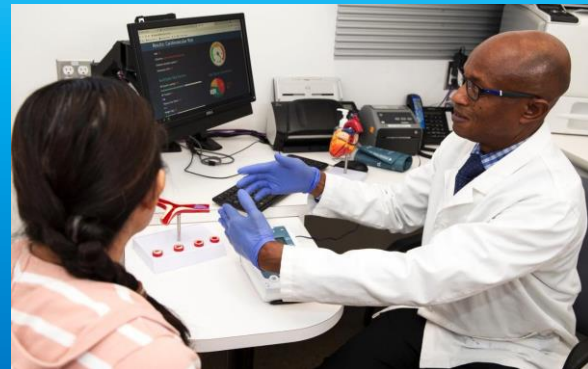


- National certification test required in most states
- Community health worker (CHW) training being implemented in several states
- Pharmacy technicians may perform vital signs, point of care tests, and immunization administration



Sustainability Challenges

- Retail prescription product payments declining
 - Historically would include sufficient payment for counseling
 - Loss of ~1/3 independent pharmacies in past decade
- Limited payment opportunities beyond product-based payments and “incident-to” billing that requires a physician
 - DSME/DPP
 - Medicare Part D complete medication reviews
- Developing opportunities
 - Point of care testing, tobacco cessation
 - Federal provider status, enhanced MTM model (Medicare Part B/D)



How to connect with pharmacies



- State pharmacy association
- Rural pharmacies – all pharmacy phone numbers available through internet
- Chain pharmacies – will likely need to ask around for a regional clinical manager

Hesston Pharmacy & Harvey Drug



- Population 3500, approximately 35 minutes north of Wichita, KS
- Family-owned pharmacies



Hesston Pharmacy & Harvey Drug



- Clinical services
 - Immunizations
 - Point of care testing
 - Medication synchronization
 - Adherence packaging
 - MTM services
 - Community Health Worker provides delivery service



Hesston Pharmacy & Harvey Drug



- Lifestyle management programs
 - Diabetes self-management
 - In process of accreditation
- Blood pressure self-management pilot project
 - 16 patients in 2022
 - Frequent check-ins promoting healthy lifestyle
 - Incorporating patient-set SMART goals for accountability in 2023

LMH Health Ambulatory Care Clinics



- Chronic disease management
 - Anticoagulation
 - Asthma/COPD
 - Diabetes
 - Heart disease (blood pressure, heart failure, cholesterol)
 - Osteoporosis
 - Tobacco cessation
- Weight loss consults
 - Primarily for hip/knee surgeries due to osteoarthritis
 - Physical activity limited
 - Medications as adjunctive therapy when indicated





Questions?

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State Sharing & Q&A



OACareTools

Resources for Pharmacists, Employers,
and Adults with OA

Arthritis Council
December 6, 2022



OACareTools

A Toolkit for Preventing and Managing Osteoarthritis (OA)
From the Osteoarthritis Action Alliance

OA IS COMMON
& COSTLY



U.S. adults have OA

MULTIMEDIA
RESOURCES TO
REDUCE THE BURDEN



7 
VIDEOS

12 
PRINT
RESOURCES

1 
PATIENT STORY

LIVING WITH
OSTEOARTHRITIS

HEALTHCARE
PROVIDERS

 MANAGEMENT
GUIDELINES

FUNCTIONAL
ASSESSMENTS 

 COUNSELING
PATIENTS

3 AUDIENCES

- HEALTHCARE PROVIDERS
- EMPLOYERS
- ADULTS WITH OA



9 LEARNING
MODULES

2 POWERPOINTS

WITH
SPEAKER
GUIDES 

EMPLOYERS
WORKPLACE IMPACT

 OA TREATMENT
EMPLOYEE
RESOURCES

PATIENTS

 PHYSICAL ACTIVITY

SELF-MANAGEMENT
EDUCATION 

 MANAGING PAIN

http://

 oacaretools.org

GOOD NEWS! THERE ARE STRATEGIES
TO HELP PREVENT AND MANAGE OA

OA | OSTEOARTHRITIS
ACTION ALLIANCE
OACareTools

OAAA

As a national public health organization, the OAAA is committed to elevating OA as a national health priority and promoting effective policy solutions and resources that address the individual and national toll of OA.

OA Learning Modules

- Relevant content for **Pharmacists**
 - Clinical Management of OA
 - Comorbidities and Co-Occurring Symptoms
 - Engaging Patients in OA Management Strategies
 - Community & Patient Resources
 - Case Studies



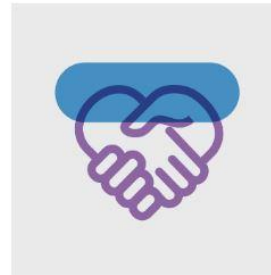
OA Prevalence and Burden



OA Prevention



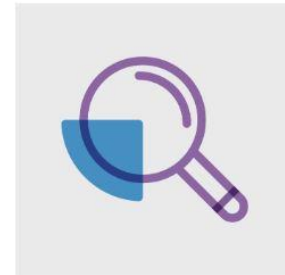
Engaging Patients in OA Management Strategies



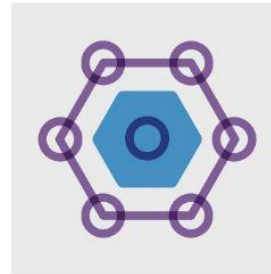
Community and Patient Resources



Clinical Management of OA



Case Studies



Comorbidities and Co-Occurring Symptoms



OA Pathogenesis and Risk Factors



OA Signs and Symptoms

Resources for Healthcare Providers

Clinical Management of OA



Interpreting the 2019 ACR Guidelines



Topical & Oral Analgesics for OA Pain Management

Resources for Healthcare Providers & Adults

Self Management of OA



The benefits of physical activity for arthritis¹

Physical activity is important for managing osteoarthritis (OA) pain, as well as other chronic conditions that commonly occur among adults with OA. Some of the benefits of physical activity for people with OA may include improvements in:^{1,2}

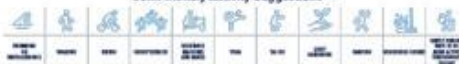
- Pain and stiffness
- Weight management
- Absenteeism³ (missed days of work)
- Range of motion
- Joint stability and balance⁴
- Presenteeism³ (reduced productivity at work)
- Heart health
- Mood
- Ability to perform daily tasks
- Muscle strength

Physical activity recommendations

The physical activity recommendations for people with arthritis generally follow the National Physical Activity Guidelines for Americans⁵; however, they should be tailored to patients' abilities, health, interests, past experiences, geography, and other personal factors.⁶ Providers can help patients find their "FITT" by mutually developing a plan that includes the following recommendations:⁷

- F** Frequency: Start low and go slow, particularly if patients are not currently exercising; gradually increase frequency as they become stronger and more confident. However, the goal for patients should be to move more every day!
- I** Intensity: Provide examples such as being able to "talk" but not "sing" while performing moderate activity, or not being able to say more than a few words at a time during vigorous exercise.⁸
- T** Time: Aim for a weekly goal of 150 minutes of moderate-intensity aerobic activity or 75 minutes of vigorous activity. If patients have a low fitness level and/or experience pain when exercising, recommend starting with 3-5 minute sessions 2 times a day.⁹
- T** Type: Engage in a combination of aerobic (3-5 days a week), strengthening (2 days a week), and balance/flexibility (3 days a week) exercises.¹⁰

Joint-friendly Activity Suggestions^{11,12}



Warning signs to share with patients - sharp, stabbing or constant pain; pain that interferes with daily activities; pain that lasts more than 2 hours after exercise; pain or swelling that does not improve with rest, pain medications or heat/cold treatments; increased swelling/redness in joints.¹

Getting Started with Physical Activity for Arthritis

Physical activity is one strategy for managing pain from osteoarthritis (OA).¹ It helps increase strength, range of motion, and stability in joints.² It may also help improve your function and your ability to manage your weight and other health conditions like heart disease and diabetes.³

OK, physical activity may help reduce OA pain, but what type of movement is best?

Where do you start?

Talk to your doctor about an exercise program that may be right for you. Then get started with these 2 basic steps:

1. Learn what counts as physical activity.
2. Set SMART goals to add more activity in your day safely and effectively.

1 Find your "FITT": Learn what counts as physical activity

- F** Frequency: Start low and go slow, particularly if you have not been exercising. Gradually increase frequency as you become stronger and more confident. However, the goal should be to move more every day.⁴
- I** Intensity: Measure how hard you are working with the talk test. You should be able to "talk" but not "sing" during moderate activity.⁵
- T** Time: Aim for a weekly goal of 150 minutes of moderate aerobic activity. Try breaking this time into shorter blocks of activity if necessary.⁶
- T** Type: Mix it up! Do a combination of aerobic (3-5 days a week), strengthening (2 days a week), and balance/flexibility (3 days a week) exercises.⁷

Joint-friendly Activity Suggestions^{11,12}

- Walking
- Swimming
- Light housework
- Gardening
- Stretching
- Tai chi
- Water aerobics
- Yoga
- Simple aerobic
- Low-impact aerobics
- Strength training
- Tai chi
- Tai chi

CAUTION: If you experience these symptoms, talk to a healthcare provider about your exercise program. Sharp, stabbing or constant pain; pain that interferes with daily activities; pain that lasts more than 2 hours after exercise; pain or swelling that does not improve with rest, pain medications or heat/cold treatments; increased swelling/redness in joints.¹

Check out this [online guide](#) to custom-"FITT" an exercise plan based on your current level of physical activity.

2 Set SMART goals to add more activity into your day safely and effectively

The next step is setting SMART goals that are Specific, Measurable, Achievable, Realistic, and Time-based. This can use the FITT guidelines above, or you can use your own personal metrics to write your SMART goals.

Use the worksheet on the other side to make physical activity goals for yourself.

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Getting Started with Physical Activity for Arthritis

Exercise Rx for Arthritis

Resources for Adults with OA

Self Management of OA

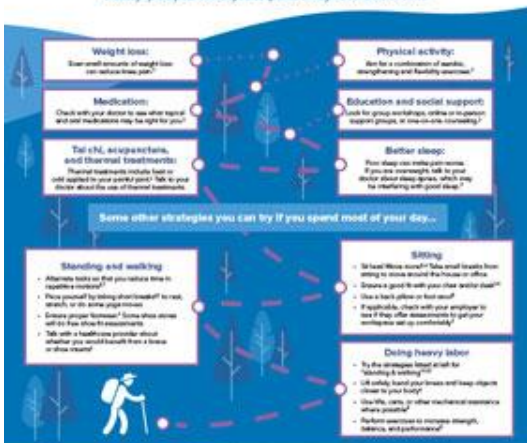
Find Your Path through Joint Pain

Find Your Path Through Joint Pain

Arthritis can lead to severe joint pain and poor physical function, and it can negatively affect quality of life.^{1,2}

Here are some steps you can take that may improve your pain and quality of life.^{1,2}

Many people with joint pain may benefit from:³



Dealing with Osteoarthritis or Joint Pain?

OA OSTEOARTHRITIS

Dealing with Osteoarthritis or Joint Pain?

There are things you can do that may help you feel better.

 Physical Activity	<p>Being physically active is important for managing osteoarthritis (OA). Physical activity may help improve pain, mood, and your ability to do everyday activities. It can also help you manage your weight.¹</p> <p>Participate in activities already planned!²</p> <ul style="list-style-type: none">Active Living Every DayArthritis Foundation Exercise ProgramBalance Training³Go to Group⁴Walk With Ease - Group & Self-directed <p>Share your body. Some examples of personally activities include walking, biking, and swimming.⁵</p> <p>Look for employer sponsored benefits such as walking paths, yoga classes, stretch breaks, and/or fitness center discounts.</p>
 Weight Loss	<p>Extra weight increases joint pain and damages cartilage of the joints, especially in the hips and knees. Even small amounts of weight loss may help reduce pain. Losing 1 pound of weight first gives you 4 pounds of relief on your knees.⁶</p> <p>Extra weight increases joint pain and damages cartilage of the joints, especially in the hips and knees. Even small amounts of weight loss may help reduce pain. Losing 1 pound of weight first gives you 4 pounds of relief on your knees.⁶</p> <ul style="list-style-type: none">Make small changes, one at a time.⁷Limit sugary drinks such as soda and juice and replace them with water.⁸Add a vegetable and/or fruit to your meals.⁹Pack your own lunch each day.¹⁰Get more and better sleep.¹¹Get your knee checked.¹²
 Pain Management	<p>Pain is common for those living with arthritis.¹³ Pain management may include non-medication strategies and medications.¹⁴</p> <p>Try some of these recommended non-medication strategies for managing pain:¹⁵</p> <ul style="list-style-type: none">Stretch, strengthening, balance, and flexibility exercisesWeight lossThe iceHeat & cold therapies (just as painful treatments or ice packs)AcupunctureBraces (such as knee or hand braces)

Resources for Adults with OA

Self Management of OA

Learn to Live a Full Life with OA



Are you experiencing stiffness, swelling and/or pain in your joints? It could be caused by osteoarthritis (OA). Osteoarthritis is the most common type of arthritis.

You don't have to live with joint pain. Even though there is no cure for OA, there are many options to manage OA pain. Remember that people respond differently to treatments, so you may need to try several methods (or a combination of methods) to help you manage your OA symptoms. Talk to your healthcare provider about your treatment options.

It's important to get started today. For most people, OA could get worse over time if symptoms are not addressed now.

Take steps today to get on the path to less joint pain.

Recommended Treatments for OA

	Treatment	Hand	Knee	Hip
At-Home Treatments	Low Impact Exercise			
	Weight Loss			
	Ice			
	Injury Prevention Activities			
	Support Devices - Cane, brace, etc.			
Support From A Professional	Self management education			
	Therapeutic Heat/Cooling			
	Yoga			
	Cognitive Behavioral Therapy			
	Acupuncture			
Pharmacologic Approaches	Physical & Occupational Therapy			
	Oral NSAIDs - Over the Counter or Prescription			
	Topical NSAIDs			
	Anesthetics - Over the Counter or Prescription			
	Tramadol or Suboxone			
Surgical Options	Conformal Surgery			
	Joint Replacement			

*Adapted from Kozanicki SL, Neege T, Hochberg MC, et al. 2019 American College of Rheumatology/Arthritis Foundation Guideline for the Management of Osteoarthritis of the Hand, Hip, and Knee. Arthritis Rheumatism. 2020;72:220-233.
NSAIDs= Non-steroidal anti-inflammatory drugs (e.g., ibuprofen, naproxen sodium).

Questionable Treatments

There is little scientific evidence that the following alternative treatments are effective or safe to address OA pain. Combining any medications (over-the-counter or prescription) carries risk. It is important that you discuss any non-prescribed medications or supplements with your healthcare provider.

- CBD products
- Glucosamine supplements
- Vitamins & Minerals
- Turmeric
- Fish oil
- Herbal treatments

The Weight and Osteoarthritis Connection



Did you know that your joint pain and your weight may be connected?

Osteoarthritis (OA) is the most common type of arthritis. OA can be caused by excess body weight, aging, a prior joint injury, being female, genetics, and excessive/repetitive movement from certain jobs or sports. For most people, OA can get worse over time if you don't address the symptoms now.

Losing weight isn't easy, but it could mean a world of difference for joint pain. Weight loss might help relieve some of the stiffness, swelling and pain in your joints from OA. Here are some tips to get you started.

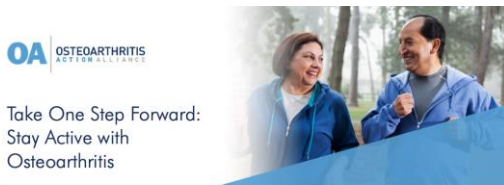
	Set a goal - Choose a weight loss goal you believe you can accomplish. Even small amounts of weight loss help: losing 1 pound can equal 4 pounds of pressure off your knees.
	Take it slow - People who lose weight gradually and steadily (about 1 to 2 pounds per week) are more successful at keeping weight off. A goal of losing 10 pounds should take you 2 to 3 months or longer.
	Focus on lifestyle changes - Healthy weight loss isn't about quick fixes, extreme exercise or fad diets. Your journey is extremely personal. Experiment to find the methods that work best for you and that you can stick with over time. Here are some websites that can help you adopt a healthier lifestyle: <ul style="list-style-type: none">• YOUR WEIGHT MATTERS - yourweightmatters.org Take the Your Weight Matters Challenge today and talk to your healthcare provider about your weight.• CHOOSE MY PLATE - choosemyplate.gov Learn about healthy eating, meal planning and portion control.• FIND AN EXPERT - eatright.org/find-an-expert Find a Registered Dietitian Nutritionist in your area who can help you develop a weight management plan.



Resources for Adults with OA

Self Management of OA

Take One Step Forward: Stay Active with OA



Stiffness, swelling and pain in your joints from osteoarthritis (OA) should not keep you from your favorite activities. There is a common myth that being active could make your joint pain symptoms worse, but the opposite is true! **Doing simple exercises to build your strength and keep your body moving can reduce your pain and stiffness.**

Osteoarthritis (OA) is the most common type of arthritis. For most people, OA can get worse over time if you don't address the symptoms now.

Find your fit

Not every type of exercise is for everyone. Experiment to find the kind that works for you. The key is finding something that you enjoy and can stick with over time. Remember that as your symptoms change over time, you may need to adjust your activity and try a different exercise routine.

Arthritis-Friendly Exercises

Low-impact activities can keep you moving and help build strength. Whatever you choose, start with just 10-15 minutes or less and build up your endurance over time. Try to do your exercise at least three times a week to get you on the road to less joint pain. Eventually, aim for exercising at least five days a week.

- **Walking** – Take a short walk around the neighborhood. Did you know that people who walk with a friend – human or furry – actually spend more time walking than those who go it alone?
- **Water Exercise** – Water aerobics or swimming can help build strength while relieving joint pain.
- **Yoga** – Build strength, improve flexibility, increase blood flow and calm your mind with a gentle yoga session.
- **Stretching and strengthening exercises** – Regular stretching and strengthening will help improve your range of motion and strengthen your muscles to make your everyday activities easier to get done.

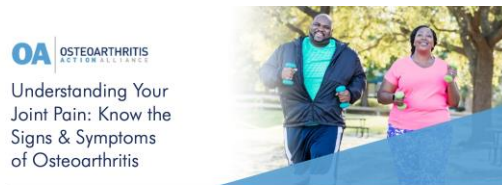


IMPORTANT

Before you start an exercise routine, check with your healthcare provider. Initially, you may feel some pain or discomfort when starting to exercise, but here are some warning signs that you might be overdoing it or that something is wrong:

- Sharp pain
- New pain in a new area
- Pain that lasts more than 2 hours after exercise
- Shortness of breath, chest pain, or dizziness

Understanding Your Joint Pain: Know the Signs and Symptoms of OA



Joint pain is common, but you shouldn't have to "just live" with it. There are many ways to reduce joint pain so you can stay active your entire life.

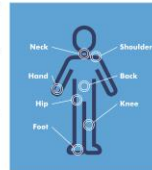
Osteoarthritis (OA) is the most common type of arthritis, especially among older people. OA symptoms vary by the individual. For most people, OA can get worse over time if you don't address the pain and symptoms now.

What is OA? Osteoarthritis mostly affects cartilage. The surface layer of cartilage breaks down and wears away. This allows bones under the cartilage to rub together, causing pain, swelling and loss of motion of the joint. Over time, these changes can affect the bones, tendons, and other joint tissues.

What are some of the causes of OA? Risk factors or causes of OA include aging, excess body weight, a prior joint injury, being female, genetics, and excessive/ repetitive movement from certain jobs or sports.

OA Signs & Symptoms

- Joint pain typically in the hands, knees, feet, neck, hips and spine
- Several minutes of stiffness in a joint after getting out of bed or sitting for a long time
- Mild swelling or tenderness in one or more joints



What is the difference between OA and RA? Rheumatoid arthritis (RA) affects far fewer people than OA. RA is an autoimmune disease in which the body's immune system attacks its tissues, including joints and organs. As compared to RA, OA affects only the joints, which causes changes to a joint's cartilage, shape, and movement.

There is no cure for arthritis - however, joint pain and OA symptoms can be managed through treatment, lifestyle changes and education. Make an appointment with your healthcare provider and use the Talking With My Provider Worksheet to get you moving on a path to less joint pain.

Visit oaaction.unc.edu/jointpain for more information.

Resource Links:

- OACareTools Lunch & Learn: <https://youtu.be/1KF94WbzLMI>
- September Arthritis Council Presentation:
<https://vimeo.com/747024536>
- OACareTools toolkit: <https://oacaretools.org>
- OAAA Online Resource Library: Living Better with Osteoarthritis
<https://oaaction.unc.edu/JointPain>



Discussion

Tools and Resources



Wrap Up and Closing



Funding Opportunity

The NACDD/CDC Active People Healthy Nation Walkability Virtual Academy (WVA) is now live!

Applications are due by January 13, 2023

<https://chronicdisease.org/page/wai/>



NACDD ENGAGE Community Updates

- Action on Arthritis Community Notifications
 - All users are now enrolled to receive weekly community digest

<https://engage.chronicdisease.org/home>

Contact Lisa/Heather if you need help creating an account

Thank you!

