



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

NACDD
2023
Member
Guide

Sowing Seeds of Health for Justice





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Welcome from Our CEO John W. Robitscher, MPH

Dear Member:

We hope that this Member Guide serves as a valuable resource to help you get the most out of your NACDD Membership. Enclosed is an overview of the benefits and the opportunities available to support your work addressing the challenges of chronic disease prevention and control. As a reminder, we are here to support you and your team.

In recent years, the importance of your work has been clearer than ever. As the only organization representing all State and Territorial Chronic Disease Directors and their staff, we are proud to support you in your efforts to reduce the impact of chronic diseases on the population and to advocate for prevention policies and programs.

As a Member of the National Association of Chronic Disease Directors (NACDD), we encourage you to take full advantage of everything our Association provides.

- Find out how to stay up to date on the latest news in your field through our newsletters, Success Stories Database, and publications library (pages 36-37).

- Learn more about professional development opportunities, such as our Members-only Chronic Disease Academy, webinars, and online learning modules (pages 38-39).
- Enhance your involvement by connecting with our subject matter experts in Arthritis, Cancer, Cardiovascular Health, Diabetes, and Health Equity programs, among others (pages 18-19).
- Optimize your peer network via our new NACDD Engagement Community (page 16).

If you have any questions regarding how to get started, we encourage you to reach out directly to our Member Services Department. They are standing by to provide best-in-class service and are always happy to assist you. You can contact our Member Services staff at Members@chronicdisease.org.

All of us at NACDD are honored to serve you. Your important work has helped millions of Americans, and we will always be here to support you every step of the way. Let's keep working together in 2023 and beyond to improve overall health where we live, work, and play.

In Good Health,

John W. Robitscher



John W. Robitscher, MPH
Chief Executive Officer

“

Simply put, NACDD is a one-stop shop for Chronic Disease Directors. If you want to be a better Chronic Disease Director, get involved in NACDD programming and get to know the teams at NACDD. The leadership, advocacy efforts, tools, and workforce development resources at NACDD are all vital components of chronic disease prevention. From new orientation to seasoned professionals, NACDD is here for you.”

—**Ryan Lester**

Former Director of the Bureau of Health Promotion at the Kansas Department of Health and Environment



NACDD CEO John Robitscher presents the 2022 [Impact Award](#) for Community Impact to Esther Hoang of the New Mexico Department of Health at the 2022 Chronic Disease Academy.

OUR STORY

For more than three decades, NACDD has become a leading and influential voice for all those who seek to end the burden of chronic disease in the United States and U.S. territories.

To do this, our programs and activities focus on supporting the professional growth and development of state and territorial health officials.

We know our Members may come to NACDD for different reasons, but as we face an increasingly challenging public health landscape, one thing remains constant: NACDD is here to serve you so that you can best serve your community.

As a national, nonprofit, professional association, we advocate, educate, and provide technical assistance to inform programming and grow chronic disease prevention knowledge, leadership, and capacity among our Membership.

Learn more about NACDD's history by watching our video, [NACDD at 30: Celebrating the Past, Promoting a Healthier Future](#)





NACDD at a Glance


Our Mission

NACDD improves the health of the public by strengthening state and national leadership and expertise for chronic disease prevention and control. NACDD promotes social justice and wellbeing so that communities can build healthier futures.

Our Vision

We envision a world where all people reach their full health potential, free from burdens of chronic disease.

Watch NACDD's video: [Making an Impact](#)

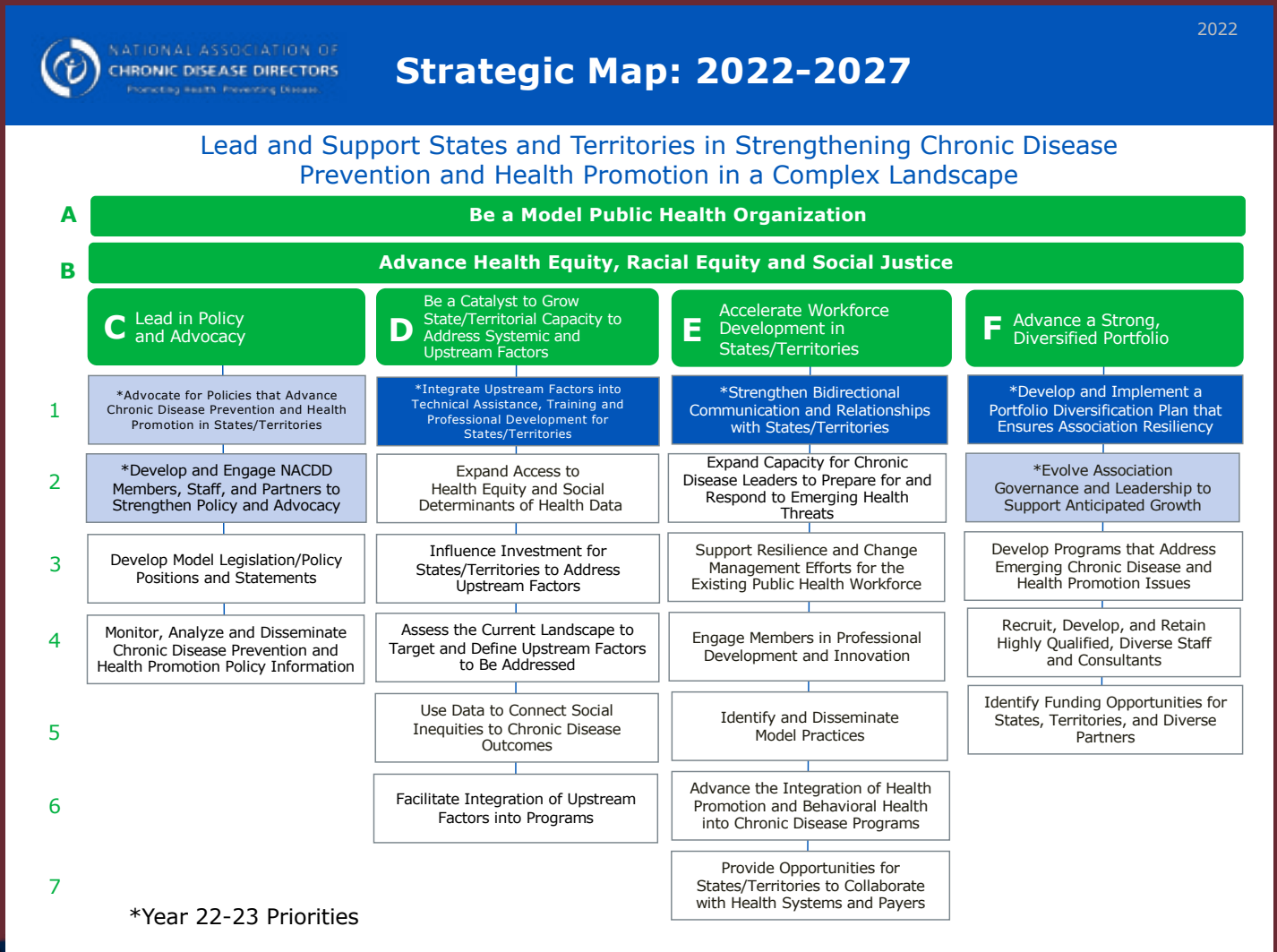


Our new Mission and Vision were approved by the 2022 Board of Directors to signify a broadening of NACDD's mandate and approach to chronic disease prevention and control.

Strategic Plan

Our Board of Directors and Senior Leadership develop our Strategic Plan every five years and work to implement different focus areas each year in line with current workforce and program priorities.

Overarching our plan are two critical efforts: to be a model public health organization and to advance health equity, racial equity, and social justice.



By the Numbers

~7,000

Members Nationwide

50+

Staff Members

35+

Projects

59

State And Territorial Chronic Disease Directors

60+

Subject Matter Experts

\$40+ M

Revenue



OUR COMMITMENT TO HEALTH EQUITY AND ANTI-RACISM

Persistent health inequities have had devastating effects in our society, especially among Latinx, Black, and Native American/Indigenous communities.

Addressing the root causes of these disparities is necessary to make progress as a country and as a field of public health.

Closing racial disparities and advancing health equity through chronic disease programs has long been a focus of our Association and is centered in our 2022-2027 Strategic Plan.



We continue to call upon public health organizations to commit to addressing racism as a public health issue and to center anti-racism in its approaches, as we do.

We also took a step further in declaring white supremacy and white supremacist domestic terrorism as a threat to public health. We have remained committed in our work with our Members to improve State and Territorial Health Departments' understanding of how to advance anti-racism as a core component of achieving health equity in their chronic disease programming. Read the statement, [NACDD Denounces White Supremacy and White Supremacist Domestic Terrorism as Public Health Threats](#)"

Additional information about state/territories' commitments to health equity as well as the Association's other health and racial equity work can be found at chronicdisease.org/page/healthequityprograms.

Finally, our work to be anti-racist also has influenced our approaches to our programming as well as our internal, organizational activities. Together, we are growing, learning, and doing what we ask from others.

Confronting racism is a perennial call to action. It does not end after a news cycle concludes, but is a steady, intentional effort that involves some level of personal introspection and development. We must rise to these challenges because everyone in America should have the chance to live a healthy life, regardless of who they are, how they came here, or what languages they speak.

We will continue to take action to advance racial equity so that we can grow our field for a healthier, more resilient, and just future.



NACDD's latest tool for Members is the Health Equity Primer, which was launched in 2022 to support Members' continued journeys to improving health and racial equity through their work. [Download the Primer.](#)



Equity is not only a written or oral commitment, equity is an action. NACDD and the Board have been dedicated to providing State Chronic Disease programs with solutions to address systems that create barriers for accessing prevention and healthcare services; ensuring useability of data and recommendations by communities most affected by health and social disparities; and engaging partners and populations with high burden in program planning and decision-making. As chronic disease leaders, these resources build our capacity to utilize our 'spheres of influence' to make actionable change."

—Teresa Aseret-Manygoats, MPA,
NACDD Board of Directors Treasurer



Visit [NACDD's Health Equity program pages](#) to learn more about our work to increase health by addressing racial equity in our activities.

OVERVIEW OF YOUR MEMBERSHIP

So you're a Member of NACDD. **General Membership**

What does that mean?

NACDD's Membership is comprised of more than 7,000 Members including State and Territorial Health Department chronic disease program staff as well as public health practitioners across multiple industries.

If you work for a State or Territorial Health Department in chronic disease prevention and control, you are automatically a General Member of NACDD.

Eligible General Members also include State or Territorial Health Department staff who work in health promotion and education, epidemiology units, maternal and child health, oral health, injury, immunization, and communicable and noncommunicable diseases.



The NACDD Member Experience

NACDD's central challenge is to strengthen leadership and expertise for State and Territorial Health Departments as they advance chronic disease prevention and health promotion. We help them advocate for equitable opportunities for health and a modernized chronic disease surveillance system.

NACDD's three-pronged approach to providing support to our Membership is a synthesis of how we:

- **INFORM** Members on public health industry and policy intelligence, evidence-based promising practices, and opportunities to advance their work and careers;
- **ENGAGE** Members in meaningful connections with their peers nationwide and participate in thought-leadership and workforce innovation; and
- **GROW** Members' careers through professional development tools, resources, and learning opportunities such as our annual Chronic Disease Academy and monthly webinars designed for our Members' unique needs and interests.

Visit chronicdisease.org/membershipbenefits or reach out to us at members@chronicdisease.org to learn more.

Associate Membership

If you do not work for a State or Territorial Health Department, but you are a professional working in public health, you are eligible to join NACDD as an Associate Member. Examples include federal employees, nonprofit staff, healthcare providers, public health academics, researchers, corporate employees, students enrolled full-time in public health or an allied field, and individuals retired from the practice of public health.

Eligible Associate Membership categories include:

- **Educational** (example: employees of colleges or universities)
- **Federal** (example: employees of federal agencies)
- **Individual** (example: individuals who are public health practitioners and do not align with other Member categories)
- **Local County** (example: employees of local, municipal, or county health departments)
- **Organizational** (example: organizations with five or more employees who are Members)
- **Partner** (example: employees of private industry or healthcare systems)
- **Retired** (example: former employees of State or Territorial Health Departments)
- **Student** (example: individuals enrolled full-time in public health or an allied field)
- **Tribal** (example: employees of Tribal Health Departments)



NACDD Members span every U.S. state and territory.

WHAT'S NEW AT NACDD

We regularly seek feedback from our Members on how we can best serve you and transform those suggestions into programs that add value and enhancement to your Membership. Here are some new developments at NACDD that may interest you and support your work.

NACDD Launches New Centers to Enhance Program Work

NACDD recently launched two new Centers: the Center for Public Health Leadership and the Center for Advancing Healthy Communities. Both Centers house a variety of pre-existing NACDD programs and have enabled new programs to be developed and implemented. How can these Centers support you? Reach out to the contacts listed to start a conversation.



About the Center for Public Health Leadership

NACDD launched the Center for Public Health Leadership (CPHL) to advance the science and art of public health practice for chronic disease prevention and health promotion. CPHL works closely with State and Territorial Health Departments to create healthy communities and equitable opportunities for health and to facilitate a modernized health system.

The Center's work is organized around three central areas:

Impact and Organizational Capacity efforts focus on discerning what works and how to build effective public health organizations. (Check out one example of how we do this by learning more about our [State Activation and Response \(STAR\) program](#).)

Workforce and Strategic Leadership efforts focus on helping Chronic Disease Directors address current chronic disease prevention and health promotion needs in their states and meet the challenges of the future. (Learn about our [Chronic Disease Directors Forum and Regional Networks](#).)

Professional Development efforts focus on delivering competency-based skill development for chronic disease prevention and health promotion professionals. (Visit our library of [General Member Webinars](#) or our [Learning Center](#).)

Get involved with the Center for Public Health Leadership. Contact cphl@chronicdisease.org to learn how.



About the Center For Advancing Healthy Communities

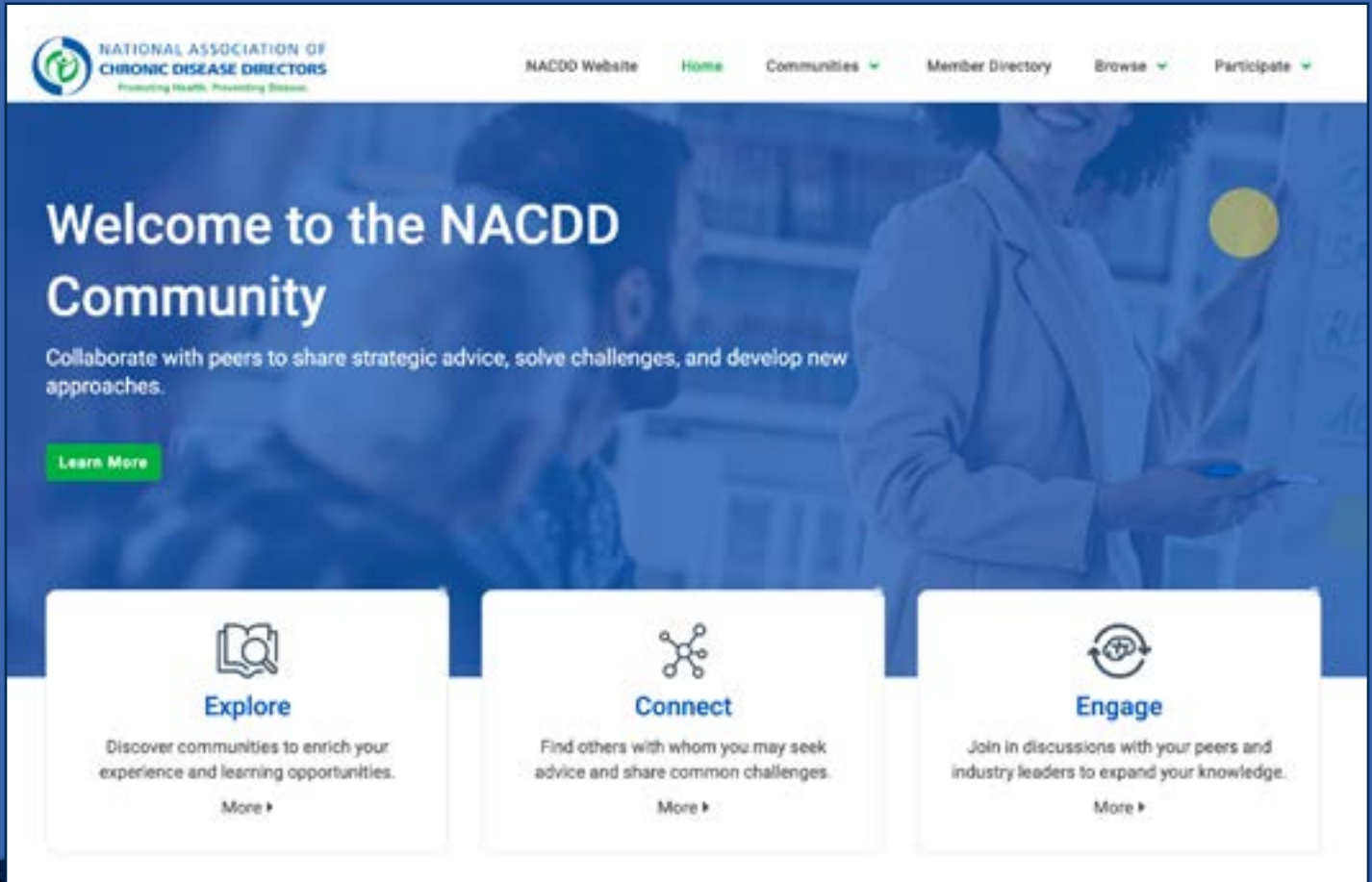
NACDD launched the Center for Advancing Healthy Communities (CAHC), which is committed to making public health programs in communities across states and territories more effective, more equitable, and more inclusive. The Center leverages best practices and evidence-based programming to impact food and nutrition security, physical activity and the built environment, tobacco cessation, obesity, social connectedness, chronic disease-related mental health, and equity/social justice.


NACDD has awarded funding to 20 states to promote healthy living and reduce social isolation during the COVID-19 pandemic through the Building Resilient Inclusive Communities (BRIC) program. This work will help improve people's lives during this pandemic and has a specific focus on reducing health inequities and promoting social justice for those most impacted.

Get involved with the Center for Advancing Healthy Communities. Contact Jennie Hefelfinger, jhefelfinger@chronicdisease.org to learn how.

GET INVOLVED WITH YOUR NACDD COMMUNITY

Join NACDD's Engagement Community




 NATIONAL ASSOCIATION OF
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NACDD Website [Home](#) [Communities](#) [Member Directory](#) [Browse](#) [Participate](#)

Welcome to the NACDD Community

Collaborate with peers to share strategic advice, solve challenges, and develop new approaches.


[Learn More](#)



Explore

Discover communities to enrich your experience and learning opportunities.


[More](#)



Connect

Find others with whom you may seek advice and share common challenges.

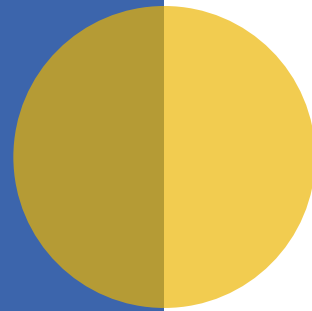
[More](#)



Engage

Join in discussions with your peers and industry leaders to expand your knowledge.

[More](#)



88%

88% of Members who participate in NACDD offerings find NACDD Membership beneficial to them personally/individually.

91%

91% of Members who participate in NACDD offerings find NACDD membership beneficial to their agency.

– NACDD Survey of States, 2022



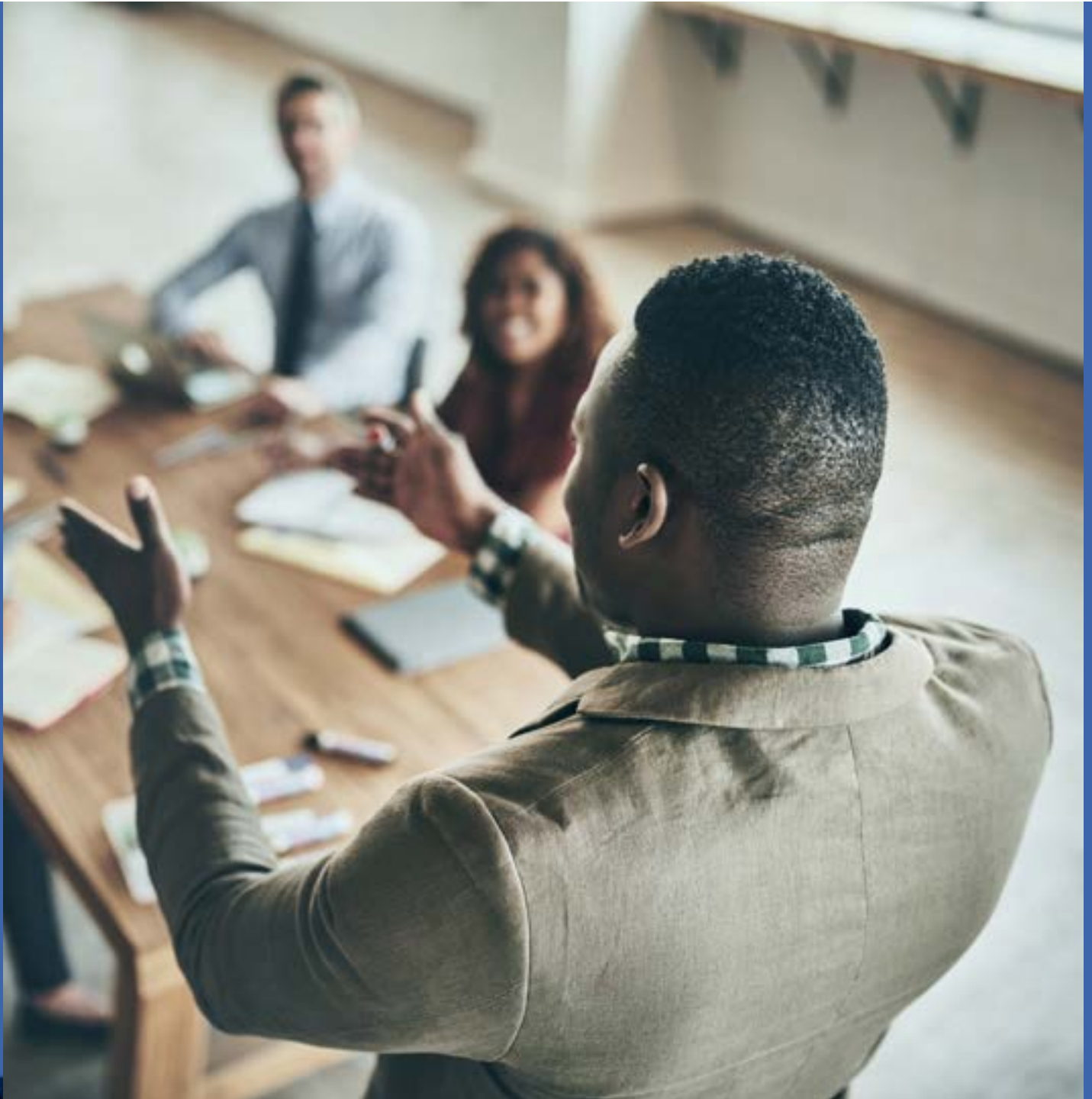
We heard you when you told us you are looking for more ways to connect with other Members to support you and your work. Based on your feedback, in 2022, we launched a unique platform for you to connect, engage, and learn with other State/Territorial Health Department staff, the NACDD Engagement Community.

NACDD’s Engagement community has the following features:

- **Engage in Dynamic Discussions** – Have a question for your fellow public health professionals? Want to share your thoughts or expertise in a community of like-minded peers? Become a regular at our NACDD [Open Forum](#) community or join additional communities based on Member interests that are being added weekly.
- **Review a Rich Library of Resources** – Through our Resource Library, you can share and review helpful resources, tools, and other items to support your work or publicize it.
- **Peer-to-Peer Connection** – Network with Members to learn and grow relationships that can support and sustain you in this rapidly changing public health environment. Our Member Directory allows you to search for Members by name, location, organization, or area of interest (you can opt out of being shown in this search).

Higher Logic currently is only accessible for General Members and participants in our Engagement Community projects and programs. Associate Members will receive access at a later date.

To get started in the Engagement Community, visit our [Quick Start Guide](#) or contact Members@chronicdisease.org.



Committees, Councils, and Other Peer Groups

About Our Committees

NACDD's Committees help to inform the strategic direction of chronic disease prevention and control. For questions about the Committees, please contact Members@chronicdisease.org. The Committees include:

- **Awards Committee:** The Awards Committee is responsible for seeking nominations for NACDD Impact Award recipients, overseeing the selection process, and announcing the results. Any NACDD Member may join the Awards Committee. To join, contact Members@chronicdisease.org.
- **Bylaws Committee:** The Bylaws Committee consists of the President Elect and other members as requested and is responsible for the creation and maintenance of the organization's bylaws, which governs the organization and its operations and activities. The Bylaws Committee is open by invitation from the Board of Directors.
- **Executive Committee:** The Executive Committee consists of the Board of Directors' five officers (President, President-Elect, Secretary, Treasurer, and Past-President) and NACDD leadership as needed. The Executive Committee may exercise all of the powers and authority of the Board of Directors during periods between routinely scheduled meetings of the Board of Directors. All actions of the Executive Committee are reported to the Board of Directors at the next regular or special meeting of the Board of Directors.
- **Finance Committee:** The Finance Committee is chaired by the Board Treasurer and is responsible for the preparation of an annual budget, reviewing the Association's financial status, making recommendations regarding finances to the Board of Directors, and ensuring that an annual review of financial records (audit) is performed in a timely manner. Any NACDD Member may join the Finance committee.
- **Legislative and Policy Committee:** The Legislative and Policy Committee monitors and reviews legislation relating to public health chronic disease programs and develops, reviews, and presents issues, policies, position papers, white papers, and resolutions for consideration by the Association. The committee pursues, with Board approval, a multi-faceted policy agenda that reflects the diverse goals of the membership. Membership is composed of Board Members.

NACDD Policy Committee Chair Dr. David Hoffman accepts an Impact Award on behalf of Rep. Rosa De Lauro (CT-03) at the 2022 Chronic Disease Academy.



About Our Councils

NACDD Councils focus on specific chronic diseases and health equity to advance targeted prevention efforts and professional development opportunities for chronic disease staff. Participating in an NACDD Council offers peer-to-peer connections among staff working in similar chronic disease areas as well as a communication channel with CDC program staff. Your involvement provides a way for you to share knowledge and best practices, brainstorm, problem solve, and innovate in your own public health practice.

NACDD Councils are primarily for the CDC-funded state programs in their focus areas, but they also are open to any interested NACDD Member. For questions about Councils, please contact Members@chronicdisease.org.

Our Councils Include:

- **Arthritis:** The NACDD Arthritis Council provides a forum for CDC-funded state arthritis programs, national organizations, and other partners to come together for peer-to-peer sharing and learning to increase state capacity to advance arthritis public health efforts. The Arthritis Council meets every first Tuesday at 2 p.m. ET. Learn more at chronicdisease.org/arthritis-council

- **Cancer:** The NACDD Cancer Council connects all CDC-funded cancer program staff from State Health Departments, tribal territories, commonwealths, and academic institutions. Cancer staff identify emerging issues, brainstorm, and problem-solve around current issues, and share best practices for cancer prevention and control. The Cancer Council meets every third Thursday at 3 p.m. ET (Jan., April, July, and Oct.). Call information will be sent to council Members. Learn more at chronicdisease.org/page/cancerprograms/cancer-council
- **Cardiovascular Health:** The Cardiovascular Health (CVH) Council is a virtual network of all CDC-funded state and local partners and their contractors addressing cardiovascular disease prevention and management. The CVH Council supports training, identifies learning opportunities, and facilitates meaningful connections among state and local health departments. The Cardiovascular Health Council meets every fourth Wednesday at 1 p.m. ET (Jan., April, July, and Oct.). Call information will be sent to council Members. Learn more at chronicdisease.org/page/cardiovascularhealth/cvh-council
- **Diabetes:** The Diabetes Council includes more than 250 Members from State Health Departments and the District of Columbia who work on diabetes initiatives. The Council connects State Health Departments across the nation for the purpose of implementing diabetes prevention and management strategies. NACDD and CDC work collaboratively to help ensure that Diabetes Council activities align with national objectives. The Diabetes Council Leadership Group meets every first Thursday at 2:30 p.m. ET. Call information will be sent to Leadership Group Members. Learn more at chronicdisease.org/page/diabetes/diabetes-council



The 2019 Pacific Chronic Disease Council

- **Health Equity:** The Health Equity Council connects Members working to promote health equity for knowledge sharing, brainstorming, problem solving, and best-practice dissemination. The HEC works to identify issues that make it difficult to close the gaps in health status and works toward solutions by partnering with State Health Departments, national organizations, and federal agencies to serve as a collective voice. The Health Equity Council meets every second Tuesday at 2 p.m. ET. Call information will be sent to participating Members. Learn more at chronicdisease.org/page/hecouncil
- **Pacific Chronic Disease Council:** The NACDD Pacific Chronic Disease Council (PCDC) provides leadership in the development of a Pacific Non-Communicable Disease Collaborative Initiative targeting health system transformation and expanding population outreach within the U.S. Associated Pacific Island (USAPI) jurisdictions. Learn more at chronicdisease.org/page/pcdc

Other Peer Groups

Generate, Educate, Activate, Respond (GEAR) Groups

GEAR Groups are peer-to-peer, case-based, action learning opportunities for state chronic disease practitioners. They are offered periodically and designed to catalyze planning for longer-term, state-level action. Participants can expand knowledge of pressing topics, develop leadership skills, and network with other public health professionals at State Health Departments.

GEAR Groups use a virtual “All Teach / All Learn” approach to professional development. Using Zoom, GEAR Groups will engage up to 10 states with a facilitator and strategist to explore emerging or long-standing chronic disease prevention and control topics. GEAR Groups meet four times: once a week for 90 minutes each. Meetings are facilitated conversations among participants requiring preparation and active participation.

The sessions are educational webinars that are not recorded. Learn more about GEAR Groups: chronicdisease.org/geargroups

Communities of Practice

Communities of practice are opportunities to participate and engage at a higher level, providing Members with a pathway between CDC and State Health Departments, making it easier for states to fulfill their requirements and achieve success. To learn more about the current list of Communities of Practice being offered, contact Members@chronicdisease.org.

Advocacy

Policy is a critical tool for improving health outcomes at the population level and one of the most important areas where Members say they need assistance. NACDD’s state policy activities support Chronic Disease Directors and their staff by identifying, tracking, and analyzing state policies that are important to NACDD Members as well as educating policymakers and funders on state needs.

- **NACDD Legislative Tracker:** NACDD’s Legislative Tracker allows users to quickly see a 50-state view of what is happening on the legislative front. The tracker displays bills from the current legislative session that can be sorted either by state or policy area. Learn more at chronicdisease.org/page/leg-tracker
- **Advocacy Tools and Resources:** NACDD’s popular advocacy resources contain briefings, white papers, surveys, and other helpful information on chronic disease policy issues tailored to the state and federal level. Members can review NACDD’s policy documents as well as the Associations’ communications with policymakers. NACDD also offers annual appropriations fact sheets by disease state category to inform federal policy. Learn more at chronicdisease.org/page/advocacytools



To access the NACDD Legislative Tracker and other advocacy and policymaker resources, visit chronicdisease.org. For more information about State Policy, contact Liz Ruth at lruth@chronicdisease.org.

- **Government Affairs Forum:** The NACDD Government Affairs Forum hosts monthly calls to provide up-to-date information on the status of NACDD advocacy efforts and current policy news from Washington, D.C. On the calls, participants hear from NACDD's leadership and from consultants at Cornerstone Government Affairs about NACDD's efforts to educate and engage legislators and policymakers about improving the resources available for chronic disease prevention. The calls are held every third Tuesday at 1 p.m. ET. To learn more, contact Liz Ruth, Director of Policy at lruth@chronicdisease.org or visit chronicdisease.org/page/GA_Forum_Overview



Board Service

The NACDD Board of Directors consists of the Executive Committee of five officers (President, President-Elect, Secretary, Treasurer, and Past-President) and up to 14 At Large Directors. The Board of Directors establishes committees to help guide the overall vision and direction for NACDD and develops and maintains working relationships with partners and other similar organizations. Board terms are two years, except for certain officer roles.

Members are eligible for Board service if they are General or Associate Members in good standing with the organization. Board nominations are opened in late Spring and elections are held in the summer. The new Board of Directors are announced prior to the end of the fiscal year (Oct. 1).

If you are interested in Board Service, please contact our Member Services Department to learn more at Members@chronicdisease.org.



“

NACDD proved to be a key player for me as I worked within chronic disease-focused programs at various levels including community-based nonprofit organizations and State Health Departments. NACDD was a consistent and trusted source of fresh-off-the-press communication that was concise and relevant. Over the years, NACDD has provided critical subject matter expertise, training, and peer-to-peer opportunities to me and my team around areas of diabetes and cancer prevention. These resources created an atmosphere of knowledge sharing among communities of practice across the country.

Of particular value, [is the] ability for State Health Department staff to benefit from chronic disease-specific state engagement activities that align local, state, and national partners with one common goal, reducing the burden of chronic disease in our communities!”

—Addey Rascon, NACDD Public Health Consultant

ACCESS ASSISTANCE AND SUPPORT

NACDD Member Services

NACDD offers a variety of programs and services to help you do your best work possible. Reach out to our various departments using the below email addresses. Not sure who to contact? Email Members@chronicdisease.org and our Communications and Member Services team will get you in touch with the best person to help you.

Member Services – NACDD’s Member Services team can assist you with any questions you have about NACDD benefits as well as update your Membership records when applicable.

- General inquiries: Members@chronicdisease.org
- Inquiries about the NACDD Engagement Community: engage@chronicdisease.org

Communications – NACDD’s Communications staff can provide training, resources, and other materials to support effective communication and dissemination of your program activities and successes.

- General inquiries: publications@chronicdisease.org

Careers/Human Resources – NACDD’s Human Resources staff can offer templates for policies and protocols as well as support for advertising job openings. NACDD partners with Public Health Career Source, a website that allows for rapid, on-demand recruiting for governmental public health agencies looking for public health and healthcare professionals to perform a number of functions with a variety of staffing arrangements available. Visit Public Health Career Source: chronicdisease.org/publichealthcareersource

- General inquiries: careers.nacdd@chronicdisease.org

Finance - Through decades of efficient stewardship of federal grant monies, the Association has interacted dynamically with State and Territorial Health Departments to assist them with the procurement and logistics support necessary for their program activities. Learn more: chronicdisease.org/page/finance_home

- General Inbox: FinanceAccountingTeam@chronicdisease.org
- Accounts Payable: ap.nacdd@chronicdisease.org
- Accounts Receivable: ar.nacdd@chronicdisease.org



Meetings - Our experienced Meeting & Events team supports the planning and execution of more than 60 chronic disease programming events across the U.S. and its territories. We also offer sample SOPs for successful virtual meetings and a sample meeting template. Learn more at: chronicdisease.org/page/services_meeting

• eventinfo@chronicdisease.org

“

I believe the Member Services department is the heart and soul of NACDD. I joined NACDD in 2011, and I have watched the Member Services department grow in both size and scope. It is now one of our most essential departments, supporting both our Members and our staff so that NACDD can continue to carry out its important work improving the health of the public by strengthening state-based leadership and expertise for chronic disease prevention and control in states and at the national level. I could not be prouder of where we are today and am excited to see how we grow in the next decade.”

– Tamika Smith, MBA, MS, PMP
Chief Operations Officer



Senior Leadership

NACDD succeeds through our strong core of seasoned and dedicated professionals who serve as our Senior Leaders. Our Senior Leaders as well as our full staff are committed to supporting our Membership in their efforts to build capacity in chronic disease prevention and control and health promotion.

Executive Leadership



John W. Robitscher, MPH
Chief Executive Officer
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Senior Leadership Team



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Liz Ruth, MPA
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Vishwarupa Vasani | VVasani@chronicdisease.org
Briana Watts | BWatts@chronicdisease.org
Charles Williams | CWilliams@chronicdisease.org
Janine Wilson | JWWilson@chronicdisease.org

“

Each time I work with NACDD, it is like receiving a shot of adrenaline. You get to surround yourself with others who are passionate and knowledgeable about the work we do and this makes me want to strive harder for excellence.”

– Jack Miller, MHE, Manager,
Idaho Department of Health
and Welfare

Subject Matter Experts

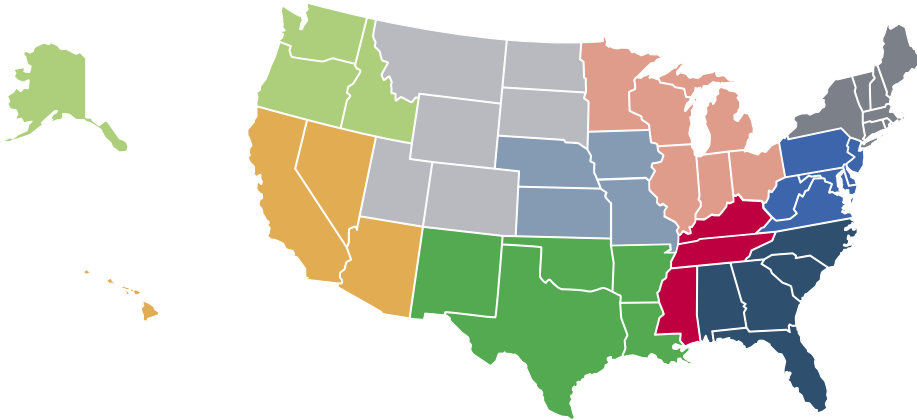
NACDD leverages the deep experience of numerous subject matter experts to educate and assist Members and partners in all areas of our programmatic work. These experts serve in a consultancy role, working across the United States and U.S. territories to provide vital leadership to our organization and Membership.

Contact Marti Macchi, Chief Program Strategy Officer, at mmacchi@chronicdisease.org, to learn more about how your program can engage one of our experts.

For a complete list of our consultants and to read their bios, visit chronicdisease.org/our-consultants



Regional Representatives



The list of Representative Members along with the list of representatives for each region changes frequently. Visit our website to see the most up-to-date list of [Representative Members](#).

The Regional Representatives Committee, a committee of the NACDD Board of Directors and chaired by the Board of Directors President-Elect, is the point of contact for State Chronic Disease Directors in developing input, feedback, and perspective on the policy, leadership, and management of coordinated chronic disease prevention and health promotion. Contact Vice President of the Center for Public Health Leadership Dr. Jeanne Alongi for more information on the Regional Representatives Committee, jalongi@chronicdisease.org.

- | | | |
|--|--|---|
| REGION A
Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, Vermont | REGION D
Alabama, Kentucky, Mississippi, Tennessee | REGION H
Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming |
| REGION B
Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania, Virginia, West Virginia | REGION E
Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin | REGION I
Arizona, California, Hawaii, Nevada |
| REGION C
Florida, Georgia, North Carolina, South Carolina | REGION F
Arkansas, Louisiana, New Mexico, Oklahoma, Texas | REGION J
Alaska, Idaho, Oregon, Washington |
| | REGION G
Iowa, Kansas, Missouri, Nebraska | |

The NACDD Board of Directors consists of the Executive Committee of five officers (President, President-Elect, Secretary, Treasurer, and Past-President) and up to 14 At Large Directors. The Board of Directors establishes committees to help guide the overall vision and direction for NACDD and develops and maintains working relationships with partners and other similar organizations.



FY 2023 Board of Directors

Executive Committee



Kristi Pier, MHS, MCHES

Maryland, President
Kristi.Pier@maryland.gov

Kristi Pier is the Director of the Center for Chronic Disease Prevention and Control at the Maryland Department of Health, leading a team of 20 staff positions to improve the health of Marylanders and reduce the burden of chronic disease in the state. Pier has worked in public health for more than 20 years and worked extensively in diabetes prevention since 2007. Much of her public health

experience has been in chronic disease programming at the state and federal level, and her specific public health interests are outcome-based programming, utilizing data for effective programming, and healthy lifestyle behavior change. Pier has a master's degree in Health Science from The Johns Hopkins Bloomberg School of Public Health and is a Master Certified Health Education Specialist.



Bala Simon, MD, DrPH, MPH, FAAFP

Arkansas, President-Elect
Appathurai.Balamurugan@arkansas.gov

Bala Simon, MD, DrPH, MPH, FAAFP (or Dr. Bala as he prefers to be called) is a licensed, board-certified family physician and epidemiologist. He obtained his medical degree from The Tamilnadu M.G.R Medical University in Chennai, India. He completed his family medicine residency at the University of Arkansas for Medical Sciences (UAMS) College of Medicine, Department of Family and Preventive

Medicine in Little Rock, Ark., and earned his Doctor of Medicine (MD). He obtained his master's degree in public health with an emphasis in epidemiology from Tulane University's School of Public Health and Tropical Medicine. He further obtained his doctorate in Public Health (DrPH) with an emphasis in Health Policy and Epidemiology from the University of Arkansas for Medical Sciences Fay W. Boozman College of Public Health. He was awarded the degree of Fellow of the American Academy of Family Physicians (FAAFP).

Dr. Balamurugan serves as the state Chronic Disease Director and the Medical Director for the Chronic Disease and Tobacco Branch at the Arkansas Department of Health. In this capacity, he provides clinical oversight and leadership to chronic disease programs such as heart disease, stroke, diabetes, cancer, nutrition, physical activity, and tobacco across the state through the Arkansas Department of Health's 94 Local Health Units. He also serves as an Associate Director for Science for the Center for Health Advancement, one of the five centers at the Arkansas Department of Health. Additionally, he serves as a Clinical Assistant Professor at UAMS Family Medical Center clinic, where he provides clinical care to patients and teaches medical students and residents. He also serves as an Associate Professor at the Department of Epidemiology in UAMS College of Public Health. He is widely published with more than 42 peer-reviewed publications.



Teresa Aseret-Manygoats, MPA

Arizona, Treasurer
Teresa.Manygoats@azdhs.gov

Teresa Aseret-Manygoats was raised on the Navajo Nation in northern Arizona and is Dine' (Navajo) and Filipina. Teresa is the Office Chief for the Office of Health Equity and Population Health (which

includes the health equity efforts and chronic disease programs) and is the designated State Chronic Disease Director at the Arizona Department of Health Services (ADHS), where she has worked for seven years. Previously, she worked for the third largest public health district in the United States, the Maricopa County Department of Public Health, and a tribal nonprofit organization that supports the efforts of 21 tribes in Arizona. In her free time, she supports her older daughter's dream of healing animals through volunteering, soaks up the sun while watching her younger daughter play competitive softball, reads, and stays physically active.



Linda Scarpetta, MPH
Michigan, Secretary
ScarpettaL@michigan.gov

Since June 2013, Linda Scarpetta, MPH, has been the Director of the Division of Chronic Disease and Injury Control at the Michigan Department of Health and Human Services. The Division is responsible for

providing leadership, innovation, and coordination to prevent and control chronic diseases, injuries, and violence, and to promote wellness and quality of life for people living in Michigan. The Division is home to more than 40 programs that address cancer prevention and control, diabetes, asthma, arthritis, health promotion for people with disabilities, tobacco, cardiovascular health, physical activity and nutrition, and injury and violence prevention, as well as integrate with oral health and HIV/AIDS programs. Prior to becoming the Division Director, Scarpetta served as the Manager of the MDHHS Injury and Violence Prevention Section for more than 20 years, overseeing several programs, including childhood injury prevention, fall prevention for older adults, sexual violence prevention, youth suicide prevention, and the National Violent Death Reporting System.

At-Large and Associate Directors



Nimisha Bhakta, MPH
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Nimisha.Bhakta@dshs.texas.gov



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Jamie Hahn, MEd
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Felisa Wilson-Simpson, PhD, FNP-BC, PPCNP-BC
Mississippi
Felisa.Wilsonsimpson@msdh.ms.gov

Ex Officio Directors



David Hoffman, DPS, CCE
New York (Associate Director)
DHoffman@mariacollege.edu



Leslie McKnight, PhD
Illinois (Associate Director)
LMcknight@peoriacounty.org

To read bios for the At Large & Associate Directors, go to chronicdisease.org



Serving several terms as Chairman of the Pacific Chronic Disease Council under the NACDD umbrella since 2008 to present, NACDD has enlightened and advanced my knowledge and control, enhanced my management analysis and decision making methods through trainings, widened my professional network, and built and sharpened my leadership skills.

Recently jumping on board to serve as an NACDD Board of Director allows me the privilege and honor to serve our chronic disease community and our disparate populations in the states and territories.”

–Patrick Solidum Luces
NACDD Board Member (Guam)

SHARE YOUR SUCCESS

Impact Awards

NACDD's annual Impact Awards provide our Members and partners with an opportunity to be recognized for best practices in chronic disease prevention and health promotion as well as contributions that go beyond public health. Nominations are typically opened in the early summer.



2022 Impact Award Winners

Joseph W. Cullen Excellence Award

The Joseph W. Cullen Excellence Award is given to an individual outside the traditional public health field who has made outstanding contributions in the field of chronic disease.

Dany Bourjolly Smith

*Director of Employee Benefits
City of Wilmington, Delaware*

Mentor Award

The Mentor Award is given to an outstanding chronic disease prevention and control professional who has guided, supported, and promoted the training and career development of other chronic disease prevention and control practitioners.

Adeline Yerkes

*Owner/Manager, AMY Consulting, LLCs
Private Consultant on Health Systems*

Community Impact Award (Individual)

The Community Impact Award is given to an individual that has made significant impacts or achieved significant influence in a community related to chronic disease prevention and control.

Esther Hoang

*Manager of NUPAC Program
New Mexico Department of Health, Nicotine Use Prevention and Control (NUPAC) Program, Population and Community Health Bureau, Public Health Division*

Community Impact Award (Team)

The Community Impact Award is given to a state, tribal, or territorial Chronic Disease Unit that has made significant impacts or achieved significant influence in a community related to chronic disease prevention and control.

The Michigan Department of Health and Human Services Diabetes and Kidney Unit

- **Lauren Mobley Neely**, *Diabetes and Kidney Unit Manager*
- **Kim Lombard**, *Diabetes Self-Management Education and Support Program Coordinator*
- **Adrienne Davenport**, *Diabetes Consultant*
- **Tamah Gustafson**, *Diabetes Consultant*
- **Anjanette Laurin**, *Nurse Consultant*
- **Lynn Foucher**, *Evaluation Consultant*

Health Equity Champion Award (Individual)

The Healthy Equity Champion Award is given to an individual that has demonstrated progress in advancing health equity as a core value of their work and in addressing the social and economic factors that contribute to preventable health disparities, or who have applied health equity principles to improve public health practice.

Vivian Lasley-Bibbs

*Director & Epidemiologist
Office of Health Equity
Kentucky Department of Health*

Health Equity Champion Award (Team)

The Healthy Equity Champion Award is given to a Chronic Disease Unit that has demonstrated progress in advancing health equity as a core value of their work and in addressing the social and economic factors that contribute to preventable health disparities, or who have applied health equity principles to improve public health practice.

*Linda Scarpetta, MPH
Chronic Disease & Injury
Control Division Director*

*Holly Wilson
Program Coordinator/
MiRACE Team Lead*

*Kim Raiford
Division Executive Secretary/
MEAT Team Lead*

*Brianna Braun
Departmental Analyst*

*Akia Burnett
Public Health Consultant
Manager*

*Adrienne Davenport
Public Health Consultant*

*Lindsay DeCamp
State Suicide Prevention
Coordinator*

*Amanda Gallaher
Public Health Consultant*

*Candice Lee
Public Health Consultant*

*Lisa Mei
Public Health Consultant*

*Janee Moore
Food Access Public Health
Consultant*

*Sheyonna Watson
Public Health Consultant*

*Tierra Youngblood-Fields
Public Health Consultant*

*Adrian Zeh
Evaluation and Grants
Specialist*

*MiRACE (Michigan Real Adaptive Changes to Equity)
and MEAT (Michigan Equity Action Team) Teams
Michigan Department of Health and Human Services,
Division of Chronic Disease and Injury Control*

Rising Star Award

The Rising Star Award is given to an individual staff member in a state, tribal, or territorial Chronic Disease Unit who is not a director and who has demonstrated exceptional leadership and innovation to promote health.

Jennifer Mandelbaum
*Program Evaluator
Division of Diabetes and Heart Disease Management
South Carolina Department of Health and Environmental
Control*

Chronic Disease Innovator Award for Chronic Disease Units

The Chronic Disease Innovator Award is given to a state, tribal, or territorial Chronic Disease Unit that demonstrates an innovative approach to reducing the burden of chronic disease prevention and control. In 2022, two of these were awarded.

Georgia Department of Public Health's Chronic Disease Prevention Section

- **Kia Toodle**, *Director, Chronic Disease Prevention Section*
- **Sarah Wilkinson**, *Deputy Director, Office of Child and Adolescent Risk Reduction Strategies*

Rhode Island Department of Health's Diabetes, Heart Disease and Stroke Program (within the Center for Chronic Care and Disease Management)

- Nancy Sutton, MS, RD
- Megan Fallon-Sheridan, MS, RD
- Cali McAtee, MPH
- Breanne DeWolf, MS

Special Award Presented by NACDD CEO John Robitscher

Project Officer of the Future

Devi Hawkins-Prather

Public Health Advisor and Project Officer with the Center for State, Tribal, Local, and Territorial Support, Centers for Disease Control and Prevention

ProVention Health Foundation Excellence in Achievement Award

Screenvision Media

- John Partilla, CEO
- Gerald Griffin, Chief Revenue Officer
- Lisa Brewer, Regional Account Executive



Jon Partilla, CEO of Screenvision Media accepts ProVention Health Foundation Excellence in Achievement Award from John W. Robitscher and John Patton.

ProVention Foundation Health Policy Award

The Honorable Rosa DeLauro
U.S. Representative (CT-3)



Want to chat with your peers? Start a Thread in the NACDD Engagement Community

engage.chronicdisease.org/home

Publicity for Your Work

Have exciting news to share with your fellow Members? Start a thread in the NACDD Engagement Community. Get your story out there while connecting with other Members who may have something similar to share.

Tell Us Your Kudos

Send us your recent promotions, new certifications or degrees, or any other professional highlights for inclusion in our Impact Brief newsletter at publications@chronicdisease.org. And don't forget to update your profile in the Engagement Community!

Write a Guest Blog Post for NACDD

Do you have an interesting topic or area of expertise that you would like to write a blog post

about for our website? Email us your idea at publications@chronicdisease.org. Want to become a regular blogger in the Engagement Community? Email us at Members@chronicdisease.org to get started.

Join the Conversation on Social Media

Follow and chat with NACDD on all our social media platforms:

- LinkedIn ([linkedin.com/company/nacdd](https://www.linkedin.com/company/nacdd))
- Facebook ([facebook.com/chronicdiseasedirectors](https://www.facebook.com/chronicdiseasedirectors))

Success Stories

NACDD hosts a database of more than 400 public health success stories from State and Territorial Health Departments working in chronic disease prevention and control. We share these case studies with legislators, partners, and national advocates. Submissions are welcome through a simple form at publichealthsuccess.org.

Watch a video about NACDD's [Success Stories Database](#).



STAY INFORMED

Newsletters

Impact Brief: our monthly newsletter shared with all Members and partners.

We encourage you to send us your news, career opportunities, funding announcements, and personal achievements for inclusion by emailing publications@chronicdisease.org. View the Impact Brief archive at chronicdisease.org/page/impactbrief.

The Connector: an email newsletter highlighting collaborations with national, state, and local partners to advance diabetes prevention and control. To be added to the distribution list, contact nacdd.diabetes@chronicdisease.org. View The Connector archive: chronicdisease.org/page/diabetes/diabetes-library

Off the Cuff: a brief, mostly weekly newsletter that is sent on Monday mornings focused on cardiovascular health and the work of the Cardiovascular Health Council. (Sign up to receive [Off the Cuff](#).)

Legislative and Policy News: this weekly newsletter provides updates on federal appropriations and other policy issues affecting NACDD Members. For archived copies of the newsletter, email Director of Policy Liz Ruth at lruth@chronicdisease.org.

Attend Events

NACDD hosts several regular meetings for Members to help you connect with and engage with your peers, participate in professional development activities, and provide thought leadership. You can view all of our meetings at chronicdisease.org/events.



Visit chronicdisease.org to stay informed about new publications, policy statements, podcasts, videos, and other tools and resources to support your professional development and career advancement.



View our calendar and learn about upcoming events that are searchable by keyword and other filters at chronicdisease.org/events.

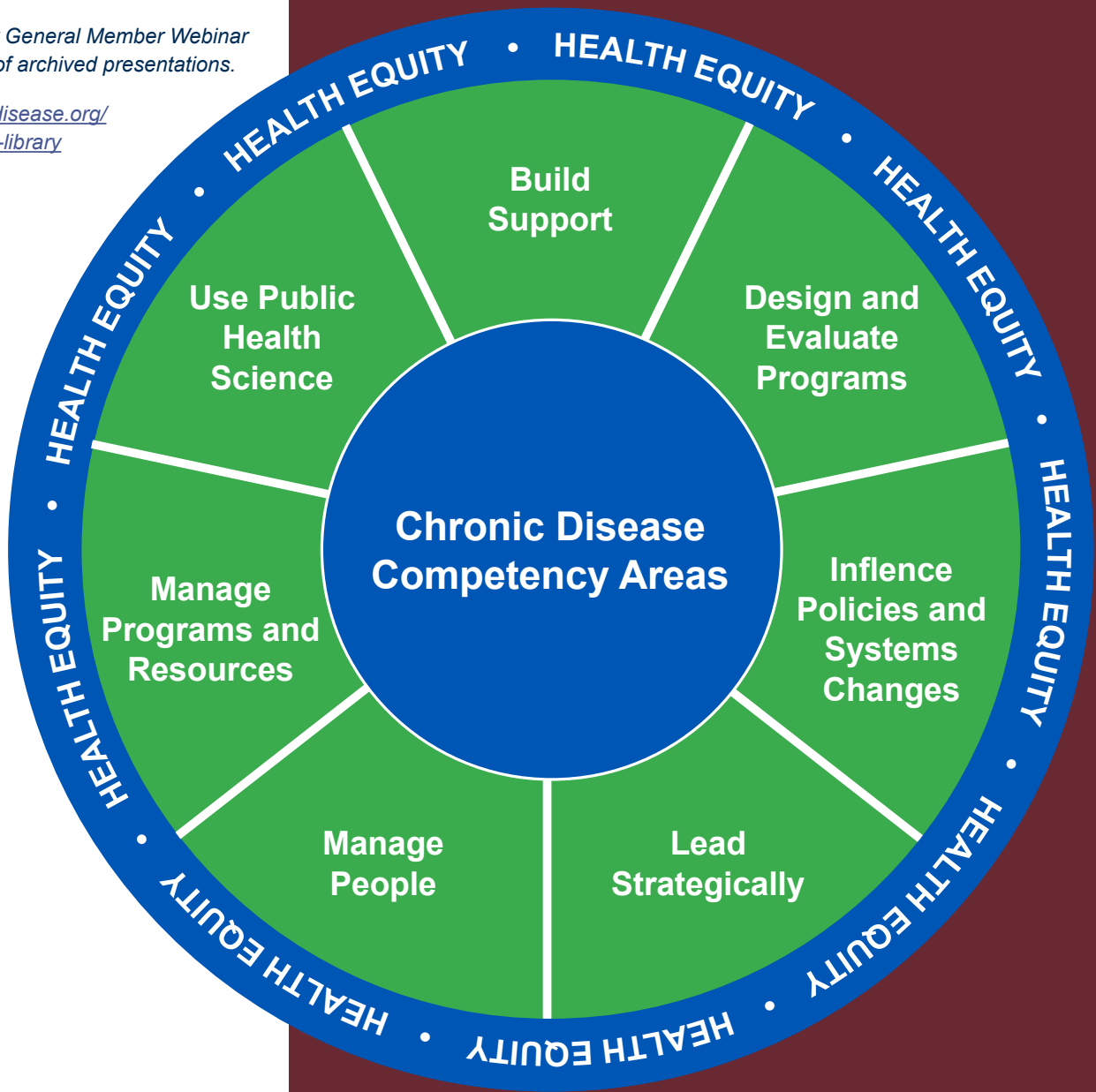


NACDD plans more than 60 events per year to benefit Members' growth and state and territorial capacity. Special care is taken to support health and safety as well as ideal learning environments and opportunities.



Visit our General Member Webinar Library of archived presentations.

chronicdisease.org/webinar-library



Our Chronic Disease Competencies

General Member Webinars

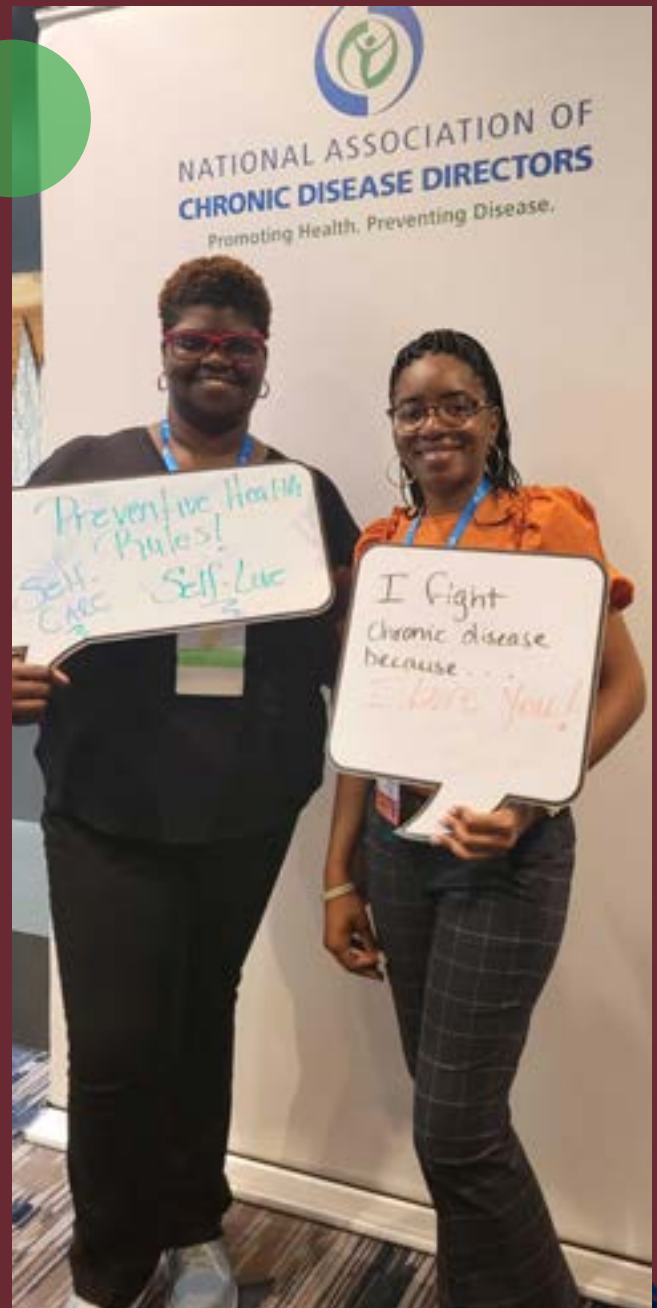
General Member Webinars are interactive webinars open to all Members featuring national subject matter experts as well as state speakers and case studies on timely topics. Webinars are intended to help expand Member capabilities within the Chronic Disease Competency areas. General Member Webinars are typically held the 2nd and 4th Thursday of each month at 3 p.m. ET. (Review our archive of General Member Webinars in our [Webinar Library](#).)

Professional Development Resources

From live, in-person, or virtual training workshops and roundtables to archived, on-demand courses and webinars, NACDD offers learning opportunities to meet your needs when and where you are.

Chronic Disease Competencies

The NACDD Chronic Disease Competencies are a set of observable and measurable knowledge, skills, abilities and personal attributes that build success for both individuals and teams working in Chronic Disease Prevention and Control. The competencies provide a guide to help identify, evaluate, and develop desired behaviors. The competencies are grouped into seven major areas: Build Support, Design and Evaluation Programs, Influence Policies and Systems Change, Lead Strategically, Manage People, Manage Programs and Resources, and Use Public Health Science. We build our programming around the competencies and offer a free self-assessment and complementary learning materials. Learn more about the competencies and take the self-assessment at: chronicdisease.org/page/competencies



To access the online learning modules and a more comprehensive list of services and benefits, visit chronicdisease.org. For more information on learning and professional development resources, contact the Center for Public Health Leadership at cphl@chronicdisease.org.

Technical Support

NACDD offers direct technical assistance and connection with subject matter experts to address your department and community's needs through a variety of programming. Some of our most popular technical support services center on workforce development and organizational-capacity development. Contact the Center for Public Health Leadership to learn more at cphl@chronicdisease.org.



Online Learning Modules

A continually growing library of online learning modules is offered to Members on topics that help build skills in the Chronic Disease Competencies. Learning modules are on-demand, self-paced, and interactive, and most take 45 minutes or less to complete. Visit our online course catalogue at chronicdisease.org/course-catalog.

Chronic Disease Academy

An in-person, invitation only event generally held every other year featuring dynamic plenary sessions, skill-building workshops, and inspiring presentations featuring best practices in state chronic disease prevention practice.

You can watch archived plenaries and listen to podcasts from previous Academies in our publications library:

chronicdisease.org/category/publications-library

Learn more about the 2022 Academy:

chronicdisease.org/2022-chronic-disease-academy

“

NACDD has been instrumental in learning about and leveraging national partners to practice public health in a more holistic, whole-person care way.”

– Jennifer Sousa
Past NACDD Board
Member (Florida)



PARTNERSHIPS

At NACDD, our acronym doubles as a reminder that Nobody Alone Can Defeat Disease. Partners expand, amplify, and increase the impact of public health practice, education, and policy. Each year, NACDD looks to add new partners to its portfolio, and it often looks to its state Members to point the way. If your state has industry partners that NACDD could help you develop a relationship with, please contact [John Patton](#), VP, Center for Partnerships & Innovation.

One of NACDD's greatest values to the public health community is its vast network of partners.

For the last 30 years, NACDD has convened and collaborated with health agencies from every level of government as well as academic institutions, national and local nonprofits, and corporations from all sectors of business and industry. NACDD's ability to identify and link together nontraditional partners is one reason why NACDD remains a sought-after partner among government and nonprofit public health organizations and private industry.

In 1988, NACDD was founded in partnership with the Centers for Disease Control so that the Association could serve as a bridge between state Chronic Disease Directors and federal chronic disease prevention and control efforts.

NACDD's relationships have enabled it to conduct groundbreaking work with software, media, research, and marketing firms that have transformed outdated chronic disease interventions into relevant 21st century tools for use by State Health Departments and their partners.

To discuss new ways we can all bring better health to the public, contact jpatton@chronicdisease.org





We spark innovation in public health.

That's our mission and our promise.

Bring us your project, your dream, your vision, your goal —
and we will be the catalyst to make it a reality.



ProVentionHealth.org

GUIDING PRINCIPLES

For Shaping the Future Health Landscape

The following future-looking statements are designed to internally guide staff, leadership, Board Members and stakeholders to the overall purpose of NACDD activities and serve to connect the Mission (what NACDD does) to the Vision (what NACDD endeavors to achieve).

- Where the public, stakeholders and decision-makers understand the value of chronic disease prevention and control with regard to broadly improving health, well-being, productivity, and reducing costs.
- Where convenient, healthy choices abound for all and healthy behaviors are a regular part of daily life where people live, learn, work, worship, and play.
- Where there is broad and equitable access to evidence-based programs and services for the prevention and management of chronic disease.
- Where health systems are designed to ensure pro-active, culturally relevant and linguistically effective, population-based approaches to prevent and manage chronic disease.
- Where community-based health programs support the prevention and management of chronic disease for all people and are seamlessly coordinated with clinical care.
- Where the public health workforce is equipped with timely, reliable and comprehensive information regarding all aspects of chronic disease, giving special attention to identify and work together with vulnerable and high-risk groups.

NACDD is Developing a New Generation of Leaders

- NACDD believes that state-based leadership and expertise in chronic disease prevention and control are vital to achieve its action.

NACDD is working toward a future,

- Where every state and territory will have public health leadership that can envision, motivate, and enlist partners, and guide a coordinated response to chronic disease prevention and control in ways that are strategic, collaborative, and in alignment with federal initiatives.
- Where state-based Chronic Disease Units are the standard bearers of excellence in meeting all relevant public health accreditation standards.
- Where each state and territory has the resources and strategic information necessary to sustain chronic disease programming and related policies.
- Where all States and Territorial Health Departments are equipped and empowered to effectively leverage their unique position, regarding the education of both official and unofficial policy makers.
- What includes an empowered and informed state-based chronic disease workforce with specific knowledge and expertise that enables implementation of national priorities within a state context.



BYLAWS

The following bylaws were approved by the NACDD Board of Directors on July 10, 2019.

The National Association of Chronic Disease Directors

ARTICLE 1 – Name and Address

Section 1:

The Name of the Association shall be: The National Association of Chronic Disease Directors (NACDD).

Section 2:

The principal location and address of NACDD is 325 Swanton Way, Decatur, Georgia, 30030. NACDD may have other such offices, either within or outside the District of Columbia as the Board of Directors may authorize from time to time.

ARTICLE 2 – Membership

Section 1. Qualifications:

Section 1.a. Representative Members:

Representative membership shall be open to one Chronic Disease Program representative who is an employee of the health department of a state, commonwealth, territory, district or possession of the United States. Representative members have voting privileges at the annual or special membership meetings, may serve as officers and directors of NACDD and may serve on committees, councils, or any group so designated by NACDD.

Section 1.b. General Members:

General membership shall be open to other health department employees who work with chronic disease prevention and control programs, including, but not limited to staff in health promotion and education, epidemiology, maternal child health, oral health, injury, immunization, communicable or non-communicable diseases and/or risk factors from any state, commonwealth, territory, district or possession of the United States, in addition to the representative to NACDD who is serving as the representative member from that jurisdiction. General members may serve as officers and directors of NACDD and may serve on committees, councils or any group so designated by NACDD.

Section 1.c. Associate Members:

Associate membership may be subject to Board approval and is open to individuals, organizations, or companies who meet the criteria below. Associate members may not serve as officers of NACDD but may serve as directors-at-large or as members of NACDD committees, councils or any group so designated by NACDD.

Individual Associate Membership, includes, but is not limited to:

Professional – Individuals interested in the area of public health chronic disease prevention and control but who are not employed at health departments of states, commonwealths, territories, districts or possessions of the United States.

Student – Individuals enrolled as full-time (minimum 12 credit hours) students in public health or allied field.

Retired – Individuals retired from the practice of public health, but who remains committed to the purposes of NACDD.

Organizations or Companies – Entities who have demonstrated they have an interest in the area of public health chronic disease prevention and control. These entities must not be listed in sam.gov as an entity who should not be awarded federal funds.

Section 2. Cessation of Membership:

Section 2.a. Representative Member:

A Representative Member ceases to be a Representative Member upon cessation of employment at the health department of the state, commonwealth, territory, district or possession of the United States. The Board of Directors may also terminate membership if it determines that a Representative Member no longer supports the purpose of NACDD, and will notify the Representative Member of the termination.

Section 2.b. General Member:

A General Member ceases to be a General Member upon cessation of employment at any health department of any state, commonwealth, territory, district or possession of the United States. A General Member also ceases to be a General Member if the Board of Directors determines that the General Member ceases to support the purpose of NACDD and notifies the General Member of the termination.

Section 2.c. Associate Member:

An Associate Member ceases to be an Associate Member if the Board of Directors determines that the Associate Member ceases to support the purpose of NACDD and the Board notifies the Associate Member of the termination.

Section 3. Fiscal Year Membership Meeting:

An annual business meeting of the Representative Members of NACDD (the "Annual Membership Meeting") shall be held at such time and place as fixed in advance by the Board for the purpose of electing officers and directors-at-large and transacting any other business that may properly come before the Representative Members. Written notice of each Annual Membership Meeting shall fix the time and place of the Annual Membership Meeting and, if deemed appropriate by the Board, the purpose or purposes thereof, and shall be given to each Representative Member, in the manner provided by these Bylaws, at least ten (10) but no more than sixty (60) days before

such meeting. A duly executed waiver of notice thereof may also fix the time and place of any Annual Membership Meeting of the Representative Members.

Section 4. Special Meetings:

Special meetings of the Representative Members may be called by the Board or by the President of NACDD or, at the written request of twenty-five percent (25%) or more of the Representative Members, shall be called by the President on behalf of the Members. Written notice of each special meeting shall fix the time and place of the special meeting and, if deemed appropriate by the person or persons by whom or at whose request the special meeting is being called, the purpose or purposes thereof, shall be given to each Representative Member, in the manner provided by these Bylaws, at least ten (10) but no more than sixty (60) days before such meeting. A duly executed waiver of notice thereof may also fix the time and place of any special meeting.

Section 5. Voting; Proxies:

At all meetings of the Representative Members, 20 (twenty) Representative Members, represented in person or by proxy, shall be necessary and sufficient to constitute a quorum for the transaction of business. Each Representative Member shall have one vote. A vote of the majority of the Representative Members, represented in person or by proxy, at any meeting at which a quorum is present, shall be the act of the Representative Members, except as otherwise provided by these Bylaws or by the District of Columbia Nonprofit Corporation Act (the DC Nonprofit Corporation Act). Members may vote by proxy executed in writing or electronically by such Representative Members. A proxy shall be valid for 11 months unless a longer period, which may not exceed 3 years, is stated in the proxy. Every proxy shall be revocable at the pleasure of the Representative Member that executed it. Voting on all matters may be conducted by mail ballot. If a quorum is not present at any meeting, the Members present at such meeting may adjourn the meeting from time to time, without notice other than an announcement at the meeting, until a quorum shall be present.

Section 6. Presiding Officer(s):

The President of NACDD shall preside at all meetings of the Representative Members. At any Representative Membership meeting, if the President is not present, the President-Elect shall preside at the meeting. If the President or the President-Elect is not present, the Board shall appoint a presiding officer for such meeting.

Section 7. Participation by Means of Communications Equipment:

Any one or more Representative Members may participate in a meeting of the Representative Members by means of a conference telephone or similar communications equipment allowing all persons participating in the meeting to hear each other at the same time. Participation by such means shall constitute presence in person at a meeting.

Section 8. Written or Electronic Ballot:

Any action that may be taken at any annual, regular, or special meeting of Representative Members may be taken without a meeting if NACDD delivers a written or electronic ballot to every Representative Member entitled to vote on the matter. All matters relating to the use and counting of such ballots shall be in accordance with the DC Nonprofit Corporation Act.

ARTICLE 3 – Dues and Fiscal Year

Section 1. Dues:

It shall be the responsibility of the Board of Directors to establish and review annual dues structures for all classes of members. The Board of Directors may determine that any member who has not paid dues will forfeit membership in NACDD.

Section 2. Fiscal Year:

Fiscal year shall be October 1 to September 30.

ARTICLE 4 – Board of Directors

Section 1. Composition and Responsibilities:

There shall be a Board of Directors consisting of the five officers (president, president-elect, secretary, treasurer, immediate past president) of NACDD and up to fourteen at-large directors as determined by the Board of Directors. No more than 20 percent of the at-large members of the Board shall be Associate Members. The Board of Directors shall determine and establish special and ad hoc committees and appoint members of NACDD committees. The Board of Directors may establish and maintain working relationships with other organizations consistent with the purposes of NACDD.

Section 2. Ex Officio Directors:

The President may appoint representatives from related affiliates/agencies or other individuals by virtue of their position as ex officio directors, upon the approval of the Board of Directors. The ex-officio appointments end with the term of the appointing President. All ex-officio directors do not have the right to vote.

Section 3. Unanimous Consent:

Any action required or permitted to be taken at any meeting may be taken without a meeting if all directors consent in writing to the taking of such action. Such written consents shall be filed with the minutes of the Board of Directors. Consents may be sent by mail, by facsimile or by electronic mail.

Section 4. Meetings:

Meetings of the Board, regular or special, may be held within or outside the District of Columbia upon not fewer than two (2) days notice to each officer and director, either personally or by mail, facsimile, or e-mail, subject to waiver of notice as provided in the DC Nonprofit Corporation Act. Neither the business to be

transacted at, nor the purpose of, any regular or special meeting of the Board need be specified in the notice or waiver of notice of such meeting. Regular meetings shall be held at least once each year, or more often as established from time to time by resolution of the Board, or as required by the business of NACDD. Special meetings of the Board may be called by the President at any time and shall be called by the President upon the written request of a majority of the officers and directors then in office.

Section 5. Quorum:

A majority of the officers and directors then in office shall constitute a quorum for the transaction of business. The act of the majority of the officers and directors present at a meeting at which a quorum is present shall be the act of the Board. If a quorum is not present at any meeting of the Board, the officers and directors present may adjourn the meeting without notice other than announcement at the meeting, until a quorum shall be present.

Section 6. Participation by Means of Communications Equipment:

Any one or more officers or directors may participate in a meeting of such Board by means of a conference telephone or similar communications equipment allowing all persons participating in the meeting to hear each other at the same time. Participation by such means shall constitute presence in person at a meeting.

ARTICLE 5 – Executive Committee and Officers

Section 1. Composition of Executive Committee:

Executive Committee – shall consist of the president, president-elect, secretary, treasurer and the past president. The Executive Committee may exercise all of the powers and authority of the

Board of Directors during periods between routinely scheduled meetings of the Board of Directors. However, the Executive Committee shall have power or authority to:

- Amend the Articles of Incorporation;
- Adopt an agreement of merger or consolidation;
- Recommend to the Representative Members the sale, lease or exchange of all or substantially all of NACDD's property and assets;
- Recommend to the Representative Members a dissolution of NACDD or revocation of a dissolution;
- Amend these Bylaws;
- Or authorize the expenditure of funds not previously approved by the Board of Directors;
- All actions of the Executive Committee must be reported to the Board of Directors at the next regular or special meeting of the Board of Directors.

Section 2. Officers:

The five officers of NACDD shall be a president, president-elect, secretary, treasurer, and past president.

Section 3. President:

The president of NACDD shall serve for one year and shall preside over the meetings of NACDD, the Board of Directors and the Executive Committee. The president serves as the volunteer leader and spokesperson for NACDD. S/he assures that the Board of Directors fulfills its responsibilities for governance and strives to achieve the mission of NACDD. The president assumes office at the annual business meeting and serves for a one-year term.

Section 4. President-Elect:

The president-elect shall be elected for a period of one year and will automatically become president at the end of the current president's term. The president-elect will preside in the absence of the president. The president-elect serves to provide future continuity of programs, goals, objectives and strategic direction of NACDD. S/he acts in place of the president as requested. The president-elect takes office at the annual business meeting and serves for one year. The year as president-elect is a year to be mentored by the president and past president and serves as a learning period.

Section 5. Secretary:

The secretary ensures appropriate minutes are recorded, distributed and posted for all meetings of the Membership, the Board of Directors and the Executive Committee and that all official records of NACDD are maintained. The secretary assumes office at the annual business meeting and serves for a two-year term.

Section 6. Treasurer:

The treasurer serves to maintain the funds of NACDD, review all appropriate financial records, and monitors disbursement of funds in accordance with approved Association policy. The treasurer also serves as a voting member of the Finance Committee but may not serve as Chair. S/he assumes office at the annual business meeting and serves for a two-year term.

Section 7. Past President:

The past president serves to ensure historical continuity of programs, goals, objectives and strategic direction of NACDD. S/he serves as Chair of the Nominating Committee. The past president takes office at the annual business meeting and serves for one year. The past president serves as a mentor to the president and president-elect.

ARTICLE 6 – Vacancies

With respect to a vacancy in the office of the president, the president-elect automatically steps up to complete the unexpired term and shall serve the succeeding full year as president. In the event of a vacancy in the office of past president, the next available past president who is a Representative or General Member in good standing and is willing to serve, may be appointed by the Board of Directors to complete the unexpired term. In the event of a vacancy occurring in the office of president-elect, secretary, treasurer, or director at large of the Board of Directors, the Board of Directors shall appoint replacements to serve the remainder of the term vacating officer or director.

ARTICLE 7 – Tenure and Eligibility for Officers and Directors, Terms, Conflict of Interest and Removal

Section 1. Tenure and Eligibility of Officers:

The president and the president-elect may serve for one term only, with at least an intervening one-year period since their last term in the same office. The secretary and the treasurer may serve for not more than two consecutive terms. Officers of NACDD to be eligible for office must have served one term as a director at large and must be members in good standing.

Section 2. Tenure and Eligibility of Directors at Large:

The term of office for the directors at large shall be two years, with one-half of the Board Directors at large elected each year. Directors at large shall serve not more than two consecutive terms.

Section 3. Term Ends at Close of Annual Meeting:

Officers and directors at large shall hold office until the NACDD end of the fiscal year, September 30.

Section 4. Removal from Board of Directors:

Officers and directors at large with two consecutive unexcused absences from regularly scheduled Board of Directors meetings, may be removed from the Board of Directors by a majority vote.

Section 5. Conflict of Interest:

No member of the National Association of Chronic Disease Directors (NACDD) Board of Directors, or any of its committees, shall derive any personal profit or gain, directly or indirectly, by reason of his or her participation with NACDD. Each individual shall disclose to NACDD any personal interest which he or she may have in any matter pending before NACDD and shall refrain from participation in any decision on such matter.

ARTICLE 8 – Election of Officers and Directors At Large

The Board of Directors shall designate a Committee to solicit candidates from the membership and prepare a slate of candidates for each office to be filled. The slate of candidates for officers and directors at large will be emailed to the Representative Members at least ten (10) but not more than forty-five (45) days prior to the end of the fiscal year. Each Representative Member with dues paid in full as of the date of the mailing of the slate may submit one ballot to the chair of the Committee. A candidate receiving a plurality of the vote for any office or director position shall be declared elected. If there is a tie vote for any officer or director position, the incoming Board of Directors shall vote at the first Board meeting of the fiscal year to break the tie between the candidates with the highest number of votes received. The results of the elections will be announced at the beginning of the fiscal year and installed at the first Board meeting of such year. All matters relating to the use and counting of such ballots shall be in accordance with the DC Nonprofit Corporation Act.

ARTICLE 9 – Committees

Section 1. Board Committees:

The Board of Directors may create one or more committees of the Board that consist of one or more directors. The creation of such a committee and appointment of directors to it shall be approved by a majority of all the directors then in office. To the extent specified either in the Bylaws or in the resolution adopted by the Board, the board committee may exercise the powers of the Board of Directors, except that such committee shall not:

- a) Authorize distributions;
- b) Approve or propose to the Representative Members action that District of Columbia law requires be approved by the Representative Members;
- c) Fill vacancies on the Board of Directors or any board committees; or
- d) Adopt, amend, or repeal the Bylaws.

Notwithstanding the above, the Board of Directors may appoint one or more directors as alternate members of any board committee to replace any absent or disqualified member during the member's absence or disqualification.

Section 2. Advisory Committees:

The Board may create or authorize the creation of one or more advisory committees whose members need not be directors. An advisory committee shall not be a committee of the Board or exercise any of the powers of the Board.

Section 3. Committee Resolution:

Unless the committee appears in the Bylaws, the Board shall adopt a resolution for the committee, which resolution shall specify the purpose of the committee, the authority of the committee, if any, the composition of the committee and the reporting responsibilities of the committee.

ARTICLE 10 – Amendments

Section 1. Prior Notice:

These bylaws may be amended by a two-thirds vote of the Representative Members at a meeting at which a quorum is present, provided all proposed amendments have been e-mailed to members thirty days prior to the meeting or vote. If the vote is conducted by mail ballot, all matters relating to the use and counting of such ballots shall be in accordance with the DC Nonprofit Corporation Act.

ARTICLE 11 – Parliamentary Authority:

The rules contained in “Roberts Rules of Order Revised Most Recent Edition” shall govern meetings of NACDD in all cases in which they are applicable and in which they are not inconsistent with these by- laws.

ARTICLE 12 – Indemnification

Section 1. General:

To the fullest extent permitted by the DC Nonprofit Corporation Act, every person who is or was a director, officer, employee, member or agent of NACDD shall have a right to be indemnified by NACDD.

Section 2. Insurance:

Without limiting the generality of the foregoing and to the fullest extent permitted by the laws of the District of Columbia, NACDD may purchase and maintain insurance against all or a portion of any liabilities and expenses, if any, resulting from the indemnification of any of the foregoing persons pursuant to this Article.

Section 3. Contract or Other Rights:

This Article shall not exclude any other rights of indemnification or other rights to which any director, officer, employee, member or agent may be entitled by contract, by vote of the Board of Directors or as a matter of law. If any clause, provision, or application of this Article shall be determined to be invalid, the other clauses, provisions, or applications shall not be affected but shall remain in full force and effect.

The provisions of this Article shall be applicable to claims, actions, suits, or proceedings made or commenced after its adoption, whether arising from act or omissions occurring before or after its adoption.





NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS

Promoting Health. Preventing Disease.

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