



DEPARTMENT OF THE NAVY
COMMANDER NAVAL AIR FORCES
BOX 357051
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COMNAVAIRFORINST 6100.1
NO1M
MAR 03 2003

COMNAVAIRFOR INSTRUCTION 6100.1

Subj: HEALTH PROMOTION PROGRAM

Ref: (a) OPNAVINST 6100.2
(b) SECNAVINST 5100.13C
(c) OPNAVINST 5350.4C
(d) OPNAVINST 6110.1G
(e) OPNAVINST 6120.3
(f) BUMEDINST 6110.13
(g) BUMEDINST 6200.12

Encl: (1) Medical Force Protection Grading Criteria
(2) Squadron Health Promotion Score (HPS) grade sheet

1. Purpose. To provide policy and guidelines for the Commander, Naval Air Force, U.S. Pacific Fleet and Commander, Naval Air Force, U.S. Atlantic Fleet Health Promotion Program. Reference (a) specifically requires Commanders, Commanding Officers and Officers in Charge to establish and maintain an effective Health Promotion Program. References (b) through (g) provide guidance on establishing and maintaining the Health Promotion Program. This program encourages healthy lifestyles, which result in increased productivity, greater military preparedness and reduced medical costs. This instruction contains extensive revisions, additions and deletions; therefore, individual paragraph markings noting this fact have not been included.

2. Cancellation. COMNAVAIRLANTINST 6100.2A/COMNAVAIRPACINST 6100.4.

3. Background

a. Approximately 50 percent of all deaths and illnesses in the United States relate to unhealthy lifestyle habits: primarily poor diet, lack of exercise, alcohol abuse, tobacco abuse, and unmanaged stress. Additional compromises to health and productivity results from undiagnosed or inadequately controlled hypertension, elevated cholesterol levels, and lower back injuries. Positive lifestyle and behavioral changes should result in optimal health, an enhanced quality of life and improved combat readiness of Sailors so they are physically and mentally ready to carry out their mission worldwide.

b. Health Promotion is a combination of health education and related organizational, social, economic, environmental and health care interventions designed to improve or protect health. A health promotion program should encourage healthy lifestyles, increase organizational and individual readiness, and concentrate on increased individual fitness by identifying and minimizing health risks and disabilities.

c. The Navy is committed to ensuring medical readiness, maximizing individual performance, reducing disease and associated expenses to personnel, by adopting programs that encourage healthier and more productive lifestyles.

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4. Responsibility

a. Ship and squadron Commanding Officers shall:

(1) Have an active Health Promotion Program.

(2) Appoint a Health Promotion Program Officer (HPPO) in writing. The HPPO must be an E-7 or above member of the command. The HPPO does not have to be from the Medical Department.

b. Ship and squadron HPPOs shall:

(1) Coordinate a systematic approach to health promotion with assistance from local subject matter experts.

(2) Act as liaison between the Commanding Officer/Executive Officer and departments for issues that deal with health promotion.

(3) Liaison with COMNAVAIRLANT/COMNAVAIRPAC Health Promotion personnel to obtain the most up-to-date information available on the Health Promotion Program.

(4) Assist the command in Health Promotion and risk reduction interventions targeted to reduce morbidity, decrease disability and decrease mortality due to specific disease or injury risks in a defined population.

(5) Oversee and assist in the activities of the Health Promotion Program.

c. All ship and squadron personnel are ultimately responsible for their own lifestyle choices and physical readiness. All personnel shall become familiar with the Health Promotion Program policies, objectives, assistance resources and this instruction.

d. The ship and squadron Medical Departments serve a vital role in the establishment and overall maintenance of the command's Health Promotion Program.

5. Policy

a. Aircraft Carrier HPPOs shall:

(1) Obtain a health assessment on each individual of the command annually. This assessment is necessary to ensure the Health Promotion Program is meeting the needs of the crew. The Preventive Health Assessment consolidates medical, occupational health and risk screening services, medical record review, preventive counseling, and risk communication. The Preventive Health Assessment (PHA) requirements listed in reference (e) must be included in the annual assessment of all Active Duty personnel.

(2) Attend the Navy's Health Promotion Director Training and Certification Course.

(3) Develop an evaluation form that can be used to evaluate the Health Promotion activities given at the command. At the end of all Health Promotion activities, a survey should be provided to participants in order to

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evaluate and make changes to improve the activity. All participants should be encouraged to fill out an evaluation form.

b. Ships shall have a Health Promotion Council. The council will work together to provide information, motivation and education to create and maintain a command environment that actively supports Health Promotion, disease and injury prevention.

(1) The ship's HPPO shall serve as chairperson of the Health Promotion Council.

(2) The ship's Health Promotion Council shall meet at a minimum on a quarterly basis or at the call of the chairperson.

(3) Written minutes of the meetings shall be forwarded to the Commanding Officer via the Senior Medical Officer and the Executive Officer.

(4) The ship's Department Heads of organizational elements listed below shall nominate a representative for the Health Promotion Council.

- (a) Medical Department
- (b) Dental Department
- (c) Drug and Alcohol Program Advisor (DAPA)
- (d) Food Services
- (e) Command Fitness Program
- (f) Public Affairs Office
- (g) Morale, Welfare and Recreation (MWR)
- (h) Training Department
- (i) Safety Department
- (j) Religious Ministries Department

c. Aircraft squadrons must establish a Health Promotion Team (HPT). The HPT shall include the HPPO as the team leader. Other HPT members shall include, as a minimum, a medical representative, the command fitness leader, the command DAPA and the MWR Committee Chairman. The team should set goals, objectives, and track health promotion activities and strategies, in writing.

d. Squadron HPPOs shall:

(1) Establish a close working relationship with the local Medical Treatment Facility (MTF)/Clinic Health Promotion Coordinator and other shore based health promotion/wellness organizations (i.e. fitness centers) to ensure squadron personnel are aware of the resources available when not deployed.

(2) Pass the MTF/Clinic Health Promotion class schedules, fun runs, Health Promotion tips, etc. to the squadron personnel by posting the info in

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the Plan of the Day /Plan of the Week and on bulletin boards in the squadron spaces. The information should also be passed at quarters.

(3) Encourage its personnel to use the MTF/Clinic Health Promotion opportunities, MWR, and other base facilities with the command's backing.

(4) Encourage its personnel to use evaluation forms to provide feedback to the HPT on HP activities at the command, MTF/Clinic, MWR and other base facilities.

(5) Attend either the 4 1/2 day Navy's Health Promotion Director/Coordinator Course or the 2 day Health Promotion Basic Course.

(6) If the squadron is deployed to a ship the squadron HPPO shall establish a close working relationship with the ship's HPPO. The squadron HPPO must encourage the squadron personnel to take advantage of the ship's HP activities.

e. The ship and squadron Health Promotion Programs shall include the elements listed below:

(1) Alcohol and Drug Abuse Prevention and Control. The command's DAPA manages the Drug and Alcohol Abuse Prevention program. The DAPA will provide programs and initiatives that prevent substance abuse and addiction, address early intervention, and provide drug and alcohol rehabilitation to break the cycle of addiction.

(2) Physical Fitness and Sports. The Command Fitness Leader (CFL) manages the command fitness program. The CFL shall provide fitness improvement programs, and appropriate educational information and training to the command personnel.

(3) Tobacco Use Prevention and Cessation. It is the Navy's policy to create an environment that supports abstinence and discourages the use of all tobacco products, to create a healthy working environment and to provide tobacco users with encouragement and professional assistance to stop.

(4) Nutrition Education and Weight Management. It is the Navy's policy that comprehensive weight management and nutrition education programs be developed and implemented to achieve and maintain an optimal level of nutritional health and body composition for all Navy personnel. Daily aerobic exercise and healthy eating choices are keys to successful weight management.

(5) Stress Management. It is the Navy's policy to assist its personnel in developing adaptive and coping skills to better deal with stress.

(6) Suicide Awareness and Prevention. Sailors can make a significant difference in preventing suicide and life-threatening behaviors among their shipmates. Sailors need to know how important it is to provide early assistance to shipmates at risk. Suicide awareness and prevention strategies for getting help early can save lives.

(7) Hypertension Screening, Education, and Control. It is the Navy's policy to provide all personnel with programs for early hypertension

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identification, information, on factors influencing blood pressure (e.g. diet, exercise, and medication), and treatment referral, where indicated.

(8) Injury Prevention. It is the Navy's policy to provide all personnel with education and training programs to reduce the incidence of back pain and associated injuries. These programs shall assist Navy personnel in establishing and maintaining proper posture, body mechanics, lifting skills and a safe work environment.

(9) Sexual Health & Responsibility Program (SHARP). The SHARP program shall include education and training on pregnancy and sexually transmitted disease (STD) prevention, including Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS).

6. Program Evaluation

a. Aircraft carrier Health Promotion Programs will be evaluated by the Force Medical Officer during the Medical Readiness Inspection (MRI). MRI scores are an important component of the annual medical departmental award, the Blue "M". MRI grades are also a component of the scoring of the Aircraft Carrier Battle "E".

b. Squadron Health Promotion Programs will be evaluated annually by the Senior Regional Flight Surgeon utilizing the Squadron Health Promotion Score (HPS) Grade Sheet (enclosure 1). These scores will be submitted to the Force Medical Officer by 31 December of each calendar year. The results from the evaluation will be used in the scoring of the Squadron Blue "M" per enclosure (2), and shall be included in the grading criteria of the Squadron Battle "E" award.



G. R. BEAMAN
Chief of Staff

Distribution:
CNAP Website

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MEDICAL FORCE PROTECTION GRADING CRITERIA

The squadron Medical Force Protection Program grade consists of 2 parts. The first part is the annual average of the monthly Medical Readiness scores. The second part is the Health Promotion Program score. The Medical Force Protection score is calculated as follows:

1. Medical Readiness Score. The Medical Readiness Score is the average of the past 12 monthly Medical Readiness percentages, which have been reported to Force Medical. Calculate the Medical Readiness Score percentage (MRS%) by using the formula below.

$$\text{MRS\%} = \frac{\text{(sum of MR\% reported for past 12 months)}}{12}$$

2. Health Promotion Score. To evaluate the Health Promotion Program the Senior Regional Flight Surgeon from each area will conduct an annual inspection using the elements listed in enclosure (2). Calculate the Health Promotion Score (HPS) score as a percentage by using the formula below. Round to the nearest whole percent.

$$\text{HPS\%} = 100 \times \frac{\text{(total \# of SAT items)}}{5}$$

3. Medical Force Protection Total Score. The Medical Force Protection (MFP) score is calculated as a percentage by using the formula below. Round to the nearest whole percent.

$$\text{MFP\%} = \frac{(2 \times \text{MRS\%}) + \text{HPS\%}}{3}$$

4. Squadron Blue "M". Squadron medical department's with a Medical Force Protection score of 90 percent or better will receive a Squadron Blue "M" Certificate signed by the COMNAVAIRPAC or COMNAVAIRLANT Force Medical Officer. The Medical Force Protection Score shall be included in the grading criteria for the Squadron Battle "E".

MAR 08 2003SQUADRON HEALTH PROMOTION SCORE (HPS) GRADE SHEET

Squadron:	Date of Evaluation:
Squadron Corpsman:	
Squadron Flight Surgeon:	

To evaluate a squadron's Health Promotion program, the Senior Regional Flight Surgeon (or his designee) will conduct an annual evaluation using the criteria listed below. Grades for each criterion are either satisfactory or unsatisfactory.

Squadron Health Promotion Criteria	SAT	UNSAT
1. Squadron Health Promotion Officer assigned in writing.		
Squadron communicates the seven essential HP elements plus sexual responsibility to command personnel through the following methods:		
2. Health Promotion bulletin board in squadron spaces containing up-to-date HP class listings from local MTF/Clinic.		
3. Regular (<i>weekly or better</i>) POD/POW notes on Health Promotion.		
4. Health Promotion classes are publicized routinely in the POD/POW.		
5. Random interviews (<i>minimum of 5</i>) show squadron personnel are aware of available Health Promotion opportunities.		
Total		

The Health Promotion Score is calculated as follows: $HPS = 100 \times (SAT \text{ items}/5)$

Squadron Health Promotion Score:	
<i>Evaluator Signature</i>	
<i>Evaluator Rank, Name, Command (print)</i>	

Return this form to the appropriate TYCOM:
 COMNAVAIRLANT Force Medical – Fax 757-444-5331 / DSN 564-5331
 COMNAVAIRPAC Force Medical – Fax 619-545-1146 / DSN 735-1146