COMNAVAIRFORES INSTRUCTION 6100.1

From: Commander, Naval Air Force Reserve

Subj: HEALTH PROMOTION PROGRAM

Ref: (a) OPNAVINST 6100.2A
     (b) SECNAVINST 5100.13E
     (c) OPNAVINST 5350.4C
     (d) OPNAVINST 6110.1H
     (e) OPNAVINST 6120.3
     (f) BUMEDINST 6110.13A

Encl: (1) Squadron Health Promotion Score (HPS) Grade Sheet
      (2) Squadron Blue M Award Grading Criteria

1. Purpose. To provide policy and guidelines for the Commander, Naval Air Force Reserve (COMNAVAIRFORES), Health Promotion Program. Reference (a), specifically requires Commanding Officers (COs) and Officers in Charge to establish and maintain an effective Health Promotion Program. References (b) through (f) 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.

2. Background

   a. Approximately 50 percent of all deaths and illnesses in the United States relate to unhealthy lifestyle habits: poor diet, lack of exercise, alcohol abuse, tobacco abuse, and unmanaged stress. Additional compromises to health and productivity are undiagnosed or inadequately controlled hypertension, elevated cholesterol levels, and lower back injuries. Positive lifestyle and behavioral changes can 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.
3. **Responsibilities**

   a. Squadron COs shall:

      (1) Have an active Health Promotion Program.

      (2) Appoint a Health Promotion Program Officer (HPPO) in writing. The HPPO must be an E-5 or above member of the command. The HPPO does not have to be from the Medical Department.

   b. Squadron HPPOs shall:

      (1) Coordinate a systematic approach to health promotion utilizing the resources of local subject matter experts, such as the Family Service Center, Chaplain’s Office and Medical Treatment Facility (MTF) Health Promotions/Wellness Department.

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

      (3) Liaison with COMNAVAIRFOR/Commander, Naval Air Force 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 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 squadron Medical Departments serve a vital role in the establishment and overall maintenance of the command’s Health Promotion Program.

4. **Policy**

   a. Squadron HPPOs shall:

      (1) Establish a close working relationship with the local MTF/Clinic Health Promotion/Wellness 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) Publish the MTF/Clinic Health Promotion class schedules, fun runs, Health Promotion tips, etc., to the squadron personnel by posting the information in 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 squadron personnel to utilize the MTF/Clinic Health Promotion opportunities, Morale, Welfare and Recreation (MWR), and other base facilities.

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

(5) Attend the one day classroom Navy and Marine Corps Public Health Center’s (NMCPPH) Health Promotions Basic’s course in conjunction with the prerequisite Navy Knowledge Online (NKO) course. Current course availabilities are available from the NMCPPH website http://www-nmcpchc.med.navy.mil/hp/index.htm or from the local MTF Wellness Center.

(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 squadron personnel to take advantage of the ship's Health Promotion activities.

b. The squadron Health Promotion Programs shall include the elements listed below:

(1) Alcohol and Drug Abuse Prevention and Control. The command's Drug and Alcohol Program Advisor (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 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. Assistance can be obtained through the local Wellness Center and MTF.
(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 and anaerobic exercise and healthy eating choices are keys to successful weight management. CFLs and HPPOs working as a team with the local Wellness Center can provide a comprehensive program for all personnel.

(5) Stress Management. It is the Navy's policy to assist its personnel in developing adaptive and coping skills to better deal with stress. Working closely with the station Family Service Center and Chaplain's office, educational services and counseling can be obtained.

(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 are available through the Family Service Center and Family One Source. 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 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). Providing general military training on these topics can increase operational readiness and reduce high risk behaviors.

5. Program Evaluation. Squadron Health Promotion Programs will be evaluated annually by the local Naval Operational Support Center (NAVOPSPTCEN) Flight Surgeon. If there is no NAVOPSPTCEN Flight Surgeon, the Senior Regional Flight Surgeon will evaluate the program, utilizing the Squadron Health Promotion Score (HPS) Grade Sheet (enclosure (1)). These scores will be submitted to the Force Medical Admin 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). The HPS comprises one-third of the score for the squadron Blue "M" Award, while the Medical Readiness comprises the other two-thirds of the score.

P. E. MCGRATH

Distribution:
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SQUADRON HEALTH PROMOTION SCORE (HPS) GRADE SHEET

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<tr>
<th>Squadron:</th>
<th>Date of Evaluation:</th>
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<tr>
<td>Squadron Corpsman:</td>
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<tr>
<td>Squadron Flight Surgeon:</td>
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To evaluate a squadron's Health Promotion program, NAVOPSPTCEN Flight Surgeon, or the Senior Regional Flight Surgeon will conduct an annual evaluation using the criteria listed below. Grades for each criterion are either satisfactory or unsatisfactory.

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<tr>
<th>Squadron Health Promotion Criteria</th>
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<th>UNSAT</th>
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<td>1. Squadron Health Promotion Officer assigned in writing.</td>
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<td>Squadron communicates the seven essential HP elements plus sexual responsibility to command personnel through the following methods:</td>
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<td>2. Health Promotion bulletin board in squadron spaces containing up-to-date HP class listings from local MTF/Clinic.</td>
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<td>3. Regular (weekly or better) POD/POW notes on Health Promotion.</td>
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<td>4. Health Promotion classes are publicized routinely in the POD/POW.</td>
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<td>5. Random interviews (minimum of 5) show squadron personnel are aware of available Health Promotion opportunities.</td>
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The Health Promotion Score is calculated as follows: $HPS = 100 \times (SAT \text{ items}/5)$

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<tr>
<th>Squadron Health Promotion Score:</th>
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<tr>
<td>Evaluator Signature</td>
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<td>Evaluator Rank, Name, Command (print)</td>
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COMNAVAIRFORES FORCE MEDICAL - Fax 619-767-7417

Enclosure (1)
SQUADRON BLUE "M" GRADING CRITERIA

The Medical Force Protection (MFP) grade is used to determine winners of the Squadron Blue "M" award and consists of 2 parts. The first part is the Medical Readiness score (MRS). The second part is the Health Promotions score (HPS). The MRS and HPS are calculated as follows:

1. Medical Readiness Score. The Medical Readiness Score is the average of the past 12 monthly Medical Readiness percentages as listed in MRRS on the first Monday of each month. Calculate the Medical Readiness Score percentage (MRS%) by using the formula below.

\[ MRS\% = \frac{\text{sum of MR\% reported for past 12 months}}{12} \]

2. Health Promotion Score. To evaluate the Health Promotion Program, the NAVOPSPTCEN Flight Surgeon or 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%) as a percentage by using the formula below. Round to the nearest whole percent.

\[ HPS\% = 100 \times \frac{\text{total \# of SAT items}}{5} \]

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

\[ MFP\% = \frac{2 \times MRS\% + HPS\%}{3} \]

4. Squadron Blue "M" Award. Squadrons with a MFP grade of 90 percent or better will be awarded the Squadron Blue "M" Award Certificate signed by the Commander, Naval Air Force Reserve.