**DEPARTMENT OF THE NAVY**
BUREAU OF MEDICINE AND SURGERY
WASHINGTON, D.C. 20372-5120

IN REPLY REFER TO

BUMEDINST 6110.13
BUMED-3B4
6 Jan 92

BUMED INSTRUCTION 6110.13

From: Chief, Bureau of Medicine and Surgery

Subj: NAVAL MEDICAL DEPARTMENT HEALTH PROMOTION PROGRAM

Ref: (a) SECNAVINST 6100.5
(b) OPNAVINST 6110.1D
(c) SECNAVINST 5100.13A (NOTAL)
(d) BUMEDINST 6200.12
(e) DoD Directive 1010.10 of 11 Mar 86 (NOTAL)

Encl: (1) Effective Health Promotion Programs: Guiding Principles and Practices
(2) Naval Medical Department Strategic Goal 4

1. Purpose. To provide policy and guidelines for the naval Medical Department Health Promotion Program.

2. Cancellation. NAVMEDCOMINST 6110.3

3. Background

a. Health promotion is defined as the combination of health education plus related organizational, social, economic, and health care interventions designed to improve or protect health. The goal of the Navy Health Promotion Program is to improve and maintain the highest levels of unit readiness, concentrating on increased individual fitness by identifying and minimizing health risks and disabilities.

b. A successful health promotion program includes the following program priorities and elements:

(1) Traditional Health Promotion. Nutrition, physical fitness, tobacco cessation, stress management, and alcohol and drug abuse prevention.

(2) Health Protection. Environmental and occupational health, and injury control.

(3) Preventive Services. Maternal and child health, immunization, sexually transmitted disease, human immunodeficiency virus, cholesterol and hypertension screening and control, cancer detection and treatment, and mental health.

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(4) System Improvements. General health education and preventive services, surveillance, and data systems.

c. Health promotion programs, to be effective, need to demonstrate the actual ability to reduce the burden of disease, injury and disability within the community. A summary of guiding principles and practices for effective health promotion programs is provided in enclosure (1).

4. Policy. The Bureau of Medicine and Surgery (BUMED) serves as an aggressive advocate and primary consultant for all health promotion programs in the United States (U.S.) Navy and Marine Corps in support of reference (a). All naval Medical Department activities and members serve as role models for effective health promotion programs.

5. Responsibilities

a. Chief, BUMED develops, implements, and updates strategic goals and objectives for the health promotion program, enclosure (2), and acts as the primary consultant and point of contact for all health promotion programs in the U.S. Navy and Marine Corps.

b. Commanding Officer, Navy Environmental Health Center as a representative of BUMED:

(1) Plans, evaluates, and coordinates naval Medical Department Health Promotion Program policy.

(2) Develops and assists in building successful intervention programs using demonstration sites.

(3) Serves as the main resource for naval Medical Department activities providing information about successful counseling, education, and clinical services.

(4) Assists with infrastructure building at naval Medical Department activities.

(5) In coordination with MED-07 and Commander, Naval Reserve Force, assists individual activities in identifying experts in the Reserve community to participate in development and implementation of health promotion programs.

(6) Assists individual activities in determining health promotion and risk reduction interventions best suited to their community needs. Interventions will be targeted to reduce morbidity, decrease disability, and decrease mortality due to specific disease or injury risks in defined populations.

c. All commanders, commanding officers (COs), and officers in charge (OICs):

(1) Appoint a Health Promotion Program officer to:

(a) Coordinate a systematic approach to health promotion with assistance from on-the-scene active duty, Reserve, and civilian Medical Department subject matter experts.

(b) Serve as liaison, with both the medical and dental treatment facility (MTF and DTF) and local commands, in developing, implementing, and fostering health promotion programs.

(c) Provide an integrated program which determines health promotion risk reduction interventions best suited to community needs. Intervention targets are already defined in 5b(6).

(2) Establish in-house health promotion programs which include:

(a) Physical Fitness and Sports. Provide all personnel with opportunities and incentives to establish healthy and active lifestyles. Reference (b) applies.

(b) Tobacco Use Prevention and Cessation. References (a) through (e) apply.

(c) Substance Abuse Prevention. References (a), (b), and (e) apply.

(d) Back Injury Prevention. References (a) and (b) apply.

(e) Stress Management. References (a), (b), and (e) apply.

(f) Hypertension. References (a), (b), and (e) apply.

(g) Nutrition. References (a), (b), and (e) apply.

(3) Encourage the participation of Reserve subject matter experts wherever appropriate.

(4) Report Health Promotion Program officer and his or her immediate staff's time and expenses in the Medical Expense and Performance Reporting System (MEPRS). The MEPRS code for the Health Promotion Program officer and staff is EBBC for all

core reporting MTFs and DTFs. Branch medical and dental clinics must use EBB and any fourth-level MEPRS code available. The cost account code associated with the aforementioned MEPRS codes is ME.

6. Action. Commanders, COs, and OICs of naval Medical Department activities must ensure that the policy and guidelines provided in this instruction are implemented.

D. F. HAGEN

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# EFFECTIVE HEALTH PROMOTION PROGRAMS: GUIDING PRINCIPLES AND PRACTICES

1. Effective health promotion programs need to demonstrate the actual ability to reduce the burden of disease, injury, and disability within the community. This can be accomplished by implementing a measurable, scientifically based model of health promotion. This model views health promotion as the scientific assessment and improvement of the health status of specific populations within the overall community.

2. The foundation of this approach lies in the concept of a spectrum of illness contained in the preventive medicine model of disease. This concept views the course of an illness as passing from wellness to disability and death through a series of phases. The onset of disease is caused by exposure of a healthy person in the susceptible phase to one or several risk factors for the disease. The individual then passes through preclinical, clinical, and disability phases. Transitions between phases are marked by the development of symptoms and the diagnosis of the illness where treatment is initiated.

3. The goal of health promotion is preventing avoidable illness and injury. The task of health promotion then is to reduce the impact of disease and injury on the population by eliminating individuals' exposure to the risk factors for illness.

4. The scientific evaluation and improvement of the health status of the U.S. Navy and Marine Corps community begins with epidemiologic studies of the incidence of diseases within the community. The diseases which pose the greatest burden on the quality of life, cause the greatest reduction in productivity, and place the largest demands on available resources must receive the focus of the naval Medical Department's attention.

5. Health promotion initiatives will expand from concentrating on a few diseases to include programs directed toward those population specific risk factors which have been demonstrated to place the greatest burden on beneficiaries. Using epidemiologic methods and statistical quality control techniques, health promotion initiatives must be targeted at the leading causes of morbidity and lost productivity.

NAVAL MEDICAL DEPARTMENT
STRATEGIC GOAL 4

**THE NAVAL MEDICAL DEPARTMENT WILL SERVE AS AN AGGRESSIVE ADVOCATE FOR HEALTH PROMOTION PROGRAMS IN THE U.S. NAVY AND MARINE CORPS.**

STRATEGY 4.1 The naval Medical Department will serve as the primary consultant for health promotion programs in the U.S. Navy and Marine Corps.

OBJECTIVE 4.1.1 BUMED will establish an effective health promotion office.

OBJECTIVE 4.1.2 BUMED will develop a network of support and a resource database by communicating with other Government and civilian organizations.

OBJECTIVE 4.1.3 BUMED will coordinate the development of guidelines for safe, efficient, and customer focused health promotion programs.

OBJECTIVE 4.1.4 BUMED will coordinate the provision of staff for conducting site visits to commands requesting direct assistance in establishing and evaluating health promotion programs.

OBJECTIVE 4.1.5 BUMED will effectively communicate opportunities for benchmarking.

OBJECTIVE 4.1.6 BUMED's health promotion representative will serve as liaison with Bureau of Naval Personnel and Headquarters, U.S. Marine Corps health promotion councils.

STRATEGY 4.2 The naval Medical Department will serve as a role model for developing and evaluating effective health promotion programs.

OBJECTIVE 4.2.1 BUMED will coordinate the deployment of health risk appraisal tools.

OBJECTIVE 4.2.2 Each medical and dental activity will identify its health promotion opportunities and develop effective health promotion programs for internal and external customers.

OBJECTIVE 4.2.3 Each medical and dental activity will assess the effectiveness of its health promotion programs by using statistical methods and customer-focused surveys.