

**BY ORDER OF THE COMMANDER
FAIRCHILD AIR FORCE BASE**

**FAIRCHILD AIR FORCE BASE
INSTRUCTION 40-103**



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Medical Command

HEALTH PROMOTION PROGRAM (HPP)

COMPLIANCE WITH THE PUBLICATION IS MANDATORY

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Certified by: 92 MDG/CC
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This instruction establishes guidelines and responsibilities for management of the 92d Air Refueling Wing (92 ARW) Health Promotion Program (HPP) as established by Air Force Instruction (AFI) 40-101, *Health Promotion* and AFD 40-1, *Health Promotion*. The goal of the program is to encourage a healthful lifestyle among the members of the Fairchild Air Force Base (AFB) community by facilitating an environment whereby individuals may acquire knowledge and skills to promote healthy lifestyle behaviors. Ensure that all records created as a result of process prescribed in this publication are maintained in accordance with (IAW) Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of IAW the Air Force (AF) Records Disposition Schedule (RDS) located at <https://www.my.af.mil/afirms/afirms/afirms/rims.cfm>. Refer recommended changes and questions about this publication to the Office for Primary Responsibility (OPR) using AF Form 847, *Recommendation for Change of Publication*; route AF Form 847s from the field through the appropriate functional chain of command. No waivers may be granted for any part of this publication.

1. GENERAL: The Assistant Secretary of Defense (Health Affairs) has mandated “Wellness” programs for the military community to alter certain behavior patterns, which cause premature and preventable illness and death. The emphasis on a healthy lifestyle will lead to improved readiness, productivity, morale, and reduced medical expenditures. Though ultimately the individual is responsible for personal health and maintenance and healthy lifestyle behavior, this

organization is directed to provide opportunities where the individual may be persuaded to turn to a healthier lifestyle.

2. OBJECTIVES:

- 2.1. Motivate individuals to modify behavior and lifestyle toward optimal health.
- 2.2. Create or enhance a base, work, and leisure environment to support the healthy behaviors being encouraged.
- 2.3. Enlist active participation in health promotion by all AF organizations.
- 2.4. Expand the role of medical service personnel to encompass health promotion and disease prevention efforts.
- 2.5. Enlist and utilize the support of the AF medical service, other AF organizations, family, and community assistance groups in identifying and meeting health promotion needs.
- 2.6. Plan and work cooperatively with other federal, national, state, and local service agencies in the development, implementation, and evaluation of HPP activities.

3. DEFINITION: Health Promotion Programs. Health information, instructions, and activities designed to increase the knowledge of the beneficiary population concerning their health risks and provide strategies that encourage desirable health practices, including systems or methods that enhance the health and well being of the beneficiary population.

4. PURPOSE: The HPP consists of the following basic elements as directed by the United States Air Force (USAF) Surgeon General:

- 4.1. Tobacco Use De-glamorization, Prevention, and Cessation
- 4.2. Physical Fitness Education
- 4.3. Nutrition (including blood cholesterol control, diabetes control and weight reduction)
- 4.4. Stress Management
- 4.5. Alcohol and Drug Abuse Prevention Education
- 4.6. Prevention and Early Detection of Hypertension (high blood pressure)
- 4.7. Additionally, the 92 ARW Program will include
 - 4.7.1. Children's Awareness Programs
 - 4.7.2. Public Service Awareness Programs
 - 4.7.3. Other awareness activities that the Integrated Delivery System (IDS) and the Population Health Working Group identified as needed.

5. RESPONSIBILITIES: Health promotion is not a single discipline, but a comprehensive and coordinated effort. It involves knowledge and participation from a variety of health-related disciplines such as medicinal, nursing, dental, behavioral, and environmental. It also includes active support and cooperation from other base agencies involved with the basic promotion elements identified in item 4 above. It is imperative that the HPP affects a coordinated networking of the resources available to reduce duplication, provide widest dissemination of information and maximize the impact of related health promotion where possible.

5.1. The 92 ARW/CC will:

5.1.1. Appoint or ensure the appointment of the appropriate representative to the IDS or appropriate sub-committees as per AFI 90-501, *Community Action Information Board* (CAIB) to include, but not limited to:

5.1.1.1. Wing Commander or Representative (92 ARW/CC)

5.1.1.2. Health Promotion Manager

5.1.1.3. Family Advocacy

5.1.1.4. Health and Wellness Center (SGPZ)

5.1.1.5. Equal Opportunity

5.1.1.6. Services

5.1.1.7. First Sergeants

5.1.1.8. Commissary

5.1.1.9. Civilian Personnel

5.1.1.10. Public Affairs (PA)

5.1.1.11. Family Support Services

5.1.1.12. Youth Services

5.1.1.13. Chaplain

5.1.1.14. Additional representatives from each squadron as identified for specific duties, i.e., smoking cessation facilitators and wellness coordinators.

5.1.2. Encourage participation of the following organizations as deemed necessary and appropriate:

5.1.2.1. Health and community service groups, such as American Heart Association, American Cancer Society, American Red Cross, etc.

5.1.2.2. Officers' Spouse Club

5.1.2.3. Enlisted Spouse Club

5.1.2.4. Retiree Clubs

5.1.2.5. Family Services

5.1.3. Provide resources to effectively administer the Health Promotion Program

5.2. The Commander, 92d Medical Group (92 MDG) will:

5.2.1. Appoint the SGPZ to act as his/her representative, provide guidance to the HPP, and appoint other medical representatives as appropriate and IAW AFI 40-101, which provides direction to the HPP.

5.2.2. Provide resources to effectively administer the HPP Program.

5.3. The Health Promotion Manager will:

5.3.1. Facilitate the HPP and coordinate activities involved in health promotion.

5.3.2. Be responsible for the overall planning, organizing, coordinating, and directing of the HPP which will:

5.3.2.1. Teach Health and Wellness-related courses.

5.3.2.2. Provide counseling and referral to individuals identified with high-risk factors as per health risk assessments.

5.3.2.3. Market the different programs offered.

5.3.2.4. Write news articles promoting awareness, motivation, and encouragement of health related topics.

5.3.2.5. Be responsible for briefings various groups, agencies, and senior leadership on the status, participation, and needs of the programs offered.

5.3.3. Act as resource person to the wing on accessing other agencies and medical services as they relate to wellness issues.

5.3.4. Provide oversight to the base smoking policy and appoint the tobacco cessation program director and assistant Non commissioned Officer In Charge (NCOIC), as needed.

5.3.5. Provide input to the 92 ARW/CC through CAIB briefings, committee minutes, and narrative summaries of the health environment of the base community from trends found in needs assessments and physical and attitude/morale screenings of various base populations.

5.3.6. Maintain liaison with local organizations concerned with preventive medicine, fitness, and wellness.

5.4. The SGPZ representative will:

5.4.1. Encourage dietary habits contributing to good health, disease prevention, weight control, and coronary risk reduction.

5.4.2. Coordinate with all base military and commercial dining facilities and base commissary in promoting healthy food choices and nutritional education.

5.5. The PA representative will support the HPM by emphasizing HPM programs via articles submitted to the base newspaper IAW AFI 35-101, *Public Affairs Responsibilities and Management*,

5.6. Commanders and supervisors, at all levels, will:

5.6.1. Permit sufficient time, as mission needs allow, for military/civilian personnel to participate in fitness activities, smoking cessation, stress management, and wellness classes, as well as nutritional consultations. Health promotion activities of this nature normally last sixty to ninety minutes.

5.6.2. Permit sufficient time for civilian personnel to attend wellness programs through flexible scheduling, etc. Time, consistent with operational constraints and regulatory requirements, should be allowed for participation in an exercise program.

5.6.3. Ensure the promotion and practice of healthy lifestyle behaviors of subordinates under their command and in conjunction with the objectives of this regulation. This

includes building other incentives into the work environment that support and encourage positive changes.

6. POLICIES AND PROCEDURES:

6.1. Clinic personnel carrying out various promotions will be guided by appropriate clinic regulations regarding medical service practices and procedures. Other base agencies performing health promotion activities will do so in coordination with the HPP manager.

6.2. The following types of activities will not be considered health promotion encounters and will not be reported:

6.2.1. Patient (disease oriented) education—patient education is defined as any teaching that is an expected standard of care for a disease or condition

6.2.2. Clinical education that is required part of job or description/expectation.

6.2.3. Activities governed by other directives, i.e., squadron health or weight management programs, intramural sports, unless a non-mandated component is added to the basic program (example: Nutrition class given following a Be Well Class.)

6.3. A Health Promotion representative will attend IDS per IDS guidance. Substitute representation is expected of members who must be absent from the meeting. Responsibilities of the HPP include, but are not limited to the following:

6.3.1. Survey base population every two years through the use of the IDS needs assessment to identify needs and design programs based on them.

6.3.2. Plan, conduct, review and evaluate effectiveness of new or existing programs.

6.3.3. Identify personnel and resources that can be utilized by the HPP.

6.3.4. Provide open lines of communication between health care providers, base organizations, health consumers, and community agencies.

6.3.5. Plan effective methods for the determination of health information.

6.3.6. Pursue the positive spirit for which the original directive was intended. Realization that the health and well-being of each individual is the basis of the program and will help to ensure the continued success of all health promotion activities.

6.3.7. Make every effort to ensure the development of high-quality programs that will create the intended positive impression on our beneficiaries.

BRAIN M. NEWBERRY, Colonel, USAF
Commander, 92d Air Refueling Wing

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFI 35-101, *Public Affairs Responsibilities and Management*, 18 August 2010

AFI 40-101, *Health Promotion*, 17 December 2009

AFI 90-201, *Community Action Information Board and Integrated Delivery System* 31 August 2006

AFFD 40-1, *Health Promotion*, 17 December 2009

AFMAN 33-363, *Management of Records*, 01 March 2008

Prescribed and Adopted Forms

Prescribed Forms: None

Adopted Forms:

AF Form 847, *Recommendation for Change of Publication*

Abbreviations and Acronyms

AF—Air Force

AFB—Air Force Base

AFI—Air Force Instruction

AFMAN—Air Force Manual

ARW—Air Refueling Wing

CAIB—Community Action Information Board

HPP—Health Promotion Program

IAW—In Accordance With

IDS—Integrated Delivery System

IMT—Information Management Tool

NCOIC—Noncommissioned Officer In Charge

OPR—Office of Primary Responsibility

PA—Public Affairs

RDS—Records Disposition Schedule

SGPZ—Health and Wellness Center

USAF—United States Air Force