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<b>POLICY AND PROCEDURE</b>	
<b>SUBJECT/TITLE:</b>	Health Promotion Planning Procedure
<b>Distributed to:</b>	All Employees
<b>HEALTH COMMISSIONER</b>	Michael E. Martin, M.D.
<b>APPROVAL DATE:</b>	2/14/2020
<b>REVIEW FREQUENCY:</b>	5 years
<b>BOARD APPROVAL DATE:</b>	N/A
<b>REFERENCE NUMBER:</b>	G-8

## Health Promotion Planning Procedure

**Purpose:** Planning is essential to the success of a health promotion campaign. The planning process must address how to engage stakeholders at key points. All Scioto County Health Department (SCHD) health promotion initiatives must be based on sound public health practice, using evidence-based messages and communication methods. The SCHD Division Directors (Nursing, Environmental Health) are responsible for approving all health promotion plans, programming, and messaging for their respective programs.

### **A. Procedures for developing SCHD Health Promotion Programs:**

SCHD uses the following steps as the basic planning framework for health promotion campaigns, based on and adapted from the Intervention Mapping public health planning model:\*

#### **1. Identify the health issue or problem to be addressed.**

- a. Review existing data and/or conduct needs assessment.
- b. Identify community partners.
- c. Identify target population, setting, and specific community.
- d. Identify any health disparities affecting this population that may relate to the problem or issue.
- e. Identify any specific communication needs and/or barriers that may apply to the target population.
- f. Identify planning group as appropriate, to include representatives of the target population when possible.

#### **2. Establish program goal, objectives, and outcome.**

- a. State the desired outcome or desired change.
- b. Specify performance objectives for each outcome.
- c. Determine indicators/criteria to monitor progress for each objective and evaluate outcomes.

#### **3. Program design.**

- a. Select the public health messages, activities, and interventions to be communicated/promoted, based on established public health evidence, theory, or practice.

- b. Select methods/communication channels for delivering information and/or implementing activities and interventions.
- c. Establish timeline.
- d. Establish budget.

**4. Program production.**

- a. Develop the messages/activities/interventions/program materials and resources.
- b. Ensure messaging is appropriate for the range of diversity in the target population, including (but not limited to) educational level, language, cultural/ethnic background, disabilities and/or communication barriers.

**5. Program implementation.**

- a. Launch and implement program.
- b. Involve community stakeholders as appropriate.

**6. Assessment and Evaluation.**

- a. Monitor progress at established timeframes.
- b. Assess program strengths/weaknesses and modify program plan as necessary.
- c. Perform final evaluation.
- d. Involve community stakeholders in assessment and evaluation as appropriate.

**7. Report the results.**

- a. Select means by which the outcomes of the program are reported to the community, target population, and other stakeholders.
- b. Communicate results.

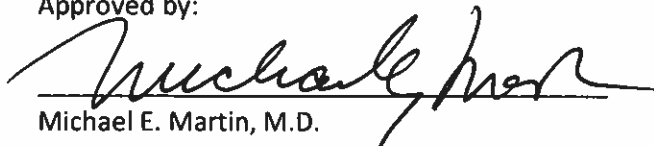
**B. Plan Maintenance**

SCHD will review Communication Response Plan at least every 5 years and revised as needed.

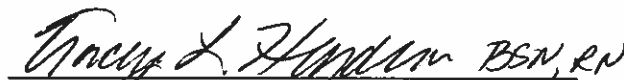
**\*Reference:**

Bartholemew Elderidge, L. K., Markham, C. M., Ruitter, R. A. C., Fernandez, M. E., Kok, G., and Parcel, G. S. 2016. *Planning Health Promotion Programs: An Intervention Mapping Approach*, 4<sup>th</sup> Edition. Jossey-Bass Public Health. ISBN-13: 978-1119035497.

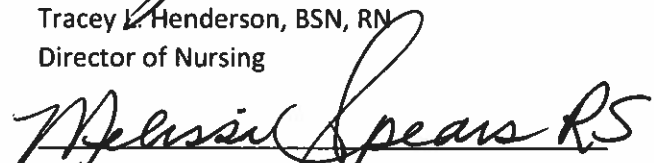
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