Certified Professional in CPD (Healthcare) CPC(HC) Credential

Certificate Route Application Form

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GOAL

The goal of the Certified Professional in CPD (Healthcare)/CPC(HC) credential is to enhance the quality and impact of CPD activities and strengthen the discipline of CPD. It accomplishes this by recognizing the professional development and achievement of those engaged in CPD as leaders, program developers, researchers, and administrators, whether physicians or nonphysicians.

This credential is available through a Leadership Route, https://www.cpdcoalition.ca/credential/ or by the Certificate Route, which is the focus of this application. To apply, you will need to complete this application form, submit a short statement, and provide written assessments from two referees.

Individuals are eligible for the Certificate Route if they have completed both the Certificate Program in CPD Foundations (https://www.cpd.utoronto.ca/cpd-foundations/) and the Leading and Influencing Change in CPD programs (https://www.cpd.utoronto.ca/leadingchange/) offered by the CPD Office of the Faculty of Medicine, University of Toronto. These courses are considered the current gold standard for the CPD certificate training in Canada. You may also be eligible for the CPC(HC) through the Certificate Route if you have:

- · completed one of these two programs combined with an additional equivalent program, OR
- have completed a separate certificate or degree program, that in either case is deemed acceptable to the review committee.

Applicant Details

Name

Pronoun/Title Given name (s)

Surname

How do you identify your gender? (Choose all that apply). This list is intended to be representative rather than comprehensive. If you identify with other terms, you are welcome to include them in the additional box below.

Female
Male
Transgender
Two-Spirit
I do not identify with a gender
I prefer not to answer
Additional gender identities (enter below)

Address

Street address City Province Country Postal code

Current/previous work

Current Job Title			Start date	End date
Previous Job Title #1			Start date	End date
Previous Job Title #2			Start date	End date
Previous Job Title #4			Start date	End date
Contact Information				
Work phone	Cell phone	Email		

Education & Training

Continuing Professional Development (CPD)

Please provide the course name, institution, duration, learning objectives and brief course description. Also, upload a separate supporting document describing how these courses or programs you have completed meet the learning objectives below. These learning objectives are from the Certificate Program of Health Professions Education from the University of Toronto: CPD Foundations and Leading and Influencing Change in CPD. These learning objectives are considered the gold standard in the field.

For your reference, the learning objectives are as follows;

- Create CPD initiatives based on evidence supporting the effectiveness and best practices in CPD
- Establish meaningful goals, objectives, and outcome measures for your programs
- Utilize models of program planning for curriculum development
- Determine the appropriate measures to achieve high-quality and bias-free/balanced CPD programs
- Identify future trends in CPD that will impact program delivery

Reference: https://www.cpd.utoronto.ca/cpd-foundations/

- Explore how the demands and forces of change in the healthcare environment have created opportunities and challenges to continuing health education providers.
- Apply best practices in CPD and change management principles to lead and implement new initiatives and overcome barriers to change.
- Lead and implement new initiatives.
- Identify and lessen barriers to change.
- Foster collaboration and expand CPD networks.
- Lead and promote innovation in CPD.
- Identify scholarship opportunities.

Reference: https://www.cpd.utoronto.ca/leadingchange/

Course #1			
Course name 1			
Organization/institution Course faculty name(s):	Year of completion	Course duration:	 months years
Course objectives:			
Course outline/description:			

Course #2			
Course name 1	7.		
Organization/institution	Year of completion	Course duration:	_ months
Course faculty name(s):			○ years
Course objectives:			
Course outline/description:			

Organization/institution	Year of completion	Course duration:	o months
Course faculty name(s):			years
Course objectives:			
Course outline/description:			
Note: If you have completed additional programs/certificate the Coalition Administrative Coordinator	es that you wish to ha	ve considered, ple	ease contact

Course #3

Personal and EDI Statement:

As a Coalition, there is a desire to support an equitable and inclusive system for CPD design, delivery and evaluation across Canada that impacts the quality and outcomes of care. The goal is to promote innovation, growth and spread by enhancing the leadership of those involved in CPD so that they are:

- Confident, capable, and engaged in taking an inclusive approach to CPD planning, design and delivery
- Can lead others through professional development activities that enhance the inclusive

Personal Statement

Provide a personal statement about a recent project, initiative, or program that you have led or contributed to that demonstrates how you have applied your learning from the certificate programs you have completed. Please describe how the recent project, initiative, or program addresses some or all of the following CPD competencies. (Maximum 500 words or 3000 characters).

- 1. Understand and utilize adult learning principles and accreditation standards to guide the development of CPD programs.
- 2. Design education interventions based on best evidence for program development.
- 3. Measure the effectiveness and impact of a CPD activity.
- 4. Collaborate with interprofessional partners and stakeholders to meet the CPD mission.
- Collaborate with health systems to integrate quality improvement, patient safety, and knowledge translation with CPD.
- 6. Utilize tools and processes to aid in the development, delivery, and dissemination of CPD activities.
- 7. Engage in self-assessment and lifelong learning to improve individual performance.
- 8. Facilitate practice-based CPD and team-based learning.

EDI Statement

Please share your ideas to help us understand why you think it is important to address EDI issues in CPD (or as a CPD professional). What are some of the ways you might address these issues (or ways you have addressed these issues)?

Please include your answer to this question to complement your personal statement.

Reference Letters

Include two (2) **reference letters**, one of which might come from your **current supervisor**. Please ask your referees to provide their comments about your achievements and contributions in the field of CPD.

Referees should be encouraged to comment on how you have achieved excellence in the **some or all** of the following 8 Competency Areas of CPD:

- 1. Understand and utilize adult learning principles and accreditation standards to guide the development of CPD programs.
- 2. Design education interventions based on best evidence for program development.
- 3. Measure the effectiveness and impact of a CPD activity.
- 4. Collaborate with interprofessional partners and stakeholders to meet the CPD mission.
- 5. Collaborate with health systems to integrate quality improvement, patient safety, and knowledge translation with CPD.
- 6. Utilize tools and processes to aid in the development, delivery, and dissemination of CPD activities.
- 7. Engage in self-assessment and lifelong learning to improve individual performance.
- 8. Facilitate practice-based CPD and team-based learning.

Please upload any supporting documents.

Letter #1 from your current supervisor (where possible)

Full name	Title	Work Phone Number
Organization	Email	
Letter #2		
Full name	Title	Work Phone Number
Organization	Fmail	

Current Resume

In addition to the description, you provided above, please upload an abbreviated copy of your resume as a single file (not to exceed 4 pages).

Applicant Check List
I have completed all information on pages 2-8.
I have provided my personal statement.
I have provided two referees and provided accurate contact information.
I have provided my abbreviated resume.
I have signed and dated the application.
I have submitted payment with this application