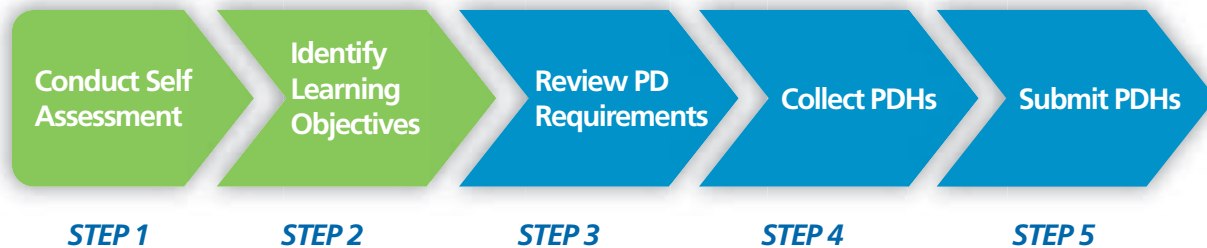




Discipline Specific Competencies



1. Introduction

This part of the guide contains the discipline specific competencies. It is divided into two sections:

1. An introduction explaining how to read the competencies, conduct a competency self assessment, and identify learning objectives
2. The competencies themselves

If you are unfamiliar with the competencies, we recommend you read through the introduction, otherwise, feel free to skip to the *Discipline Specific Competency Tables* section of this document.

This document contains a list of competency statements which apply to individuals who hold the Certificate in Public Health Inspection (Canada), or CPHI(C)⁵, credential. The introduction answers the following questions:

- ✓ Why should you care?
- ✓ What are discipline specific competencies?
- ✓ How was the discipline specific competencies section developed?
- ✓ How do you read a competency statement?
- ✓ When and how do these competencies apply to you?
- ✓ What should you do with these competencies?

⁵ For more information about the CPHI(C), please see Appendix E.

1.1 Before you begin ...

Before you read on, we would like to clarify the following:

- **Competencies are not job descriptions:** A competency does not replace your job description. Competencies are capability expectations from a cross-profession perspective that should be used to understand the skills and knowledge required to perform a certain job or activity.
- **This is a guide, not a checklist:** There are 119 competencies in this document. At no point are you expected to know, show, or demonstrate competency in all 119 areas. For CPHI(C) holders working as generalists across several practice areas, this may translate to 70-90% of the 119 (or approximately 83-107) specific competencies. For those of you with a very specialized focus, this may translate into a more in depth demonstration of, and ability in, a much smaller number of the specific competencies. Each person will have a unique competency mix.
- **You assess your own competency:** The Canadian Institute of Public Health Inspectors (CIPHI) does not use this document to assess your competency. That task is up to you. Whatever benefit you get from this document is based on your own honest assessment of your capabilities. CIPHI will provide you with tools to record your own development, and will provide you with some guidelines and tips for your assessment and continuing education planning efforts. Completing an honest self assessment will help guide your professional development (PD) activities, which will be an annual obligation monitored and audited by CIPHI. For more information on the PD requirements, please refer to the PD (green) section of this guide.
- **By the profession, for the profession:** CIPHI is a self-regulated organization representing your profession. The strength of this document, the Continuing Professional Competencies (CPC) Program, and the entire organization is built directly on your willingness to regulate your own profession and your continued commitment and active contribution to your profession.
- **You want to do this:** CIPHI has assumed that anyone who has gone through all the work of acquiring the CPHI(C) is interested in continuing with professional development and ensuring the continued standard of the credential.

1.2 Why should you care?

The CPC Program has a few key benefits. Specifically, it:

- Provides protection for CPHI(C) holders against challenges to personal competence
- Offers a quality assessment tool for employers to assess staff competencies and help focus professional development

- Supports Environmental Public Health Professionals (EHPs) in gaining and maintaining the skills, knowledge, and abilities (competencies) essential to their role
- Is “by the profession for the profession”
- Aligns with the CPHI(C) certification process and will thus enhance the recognized status of EHPs as specialized professionals
- Aligns with the Public Health Agency of Canada’s (PHAC) *Core Competencies for Public Health in Canada: Release 1.0*
- Contributes positively to workforce development in Canada by improving consistency in language, clarifying roles and responsibilities, and enhancing mobility across practice settings and provincial/territorial jurisdictions

1.3 What are discipline specific competencies?

The competencies listed in this document describe the essential knowledge, skills, and abilities necessary for continued development after receiving the CPHI(C) in the field of environmental public health. Each competency is described by a competency statement, such as:

T1-8 Explain the control measures used to prevent or reduce exposure to hazards related to the practice.

These competency statements may require a fair amount of interpretation and personalization. In a profession as broad as environmental public health, the creation of competencies to describe explicit skills relating to specific areas of practice would result in thousands of statements. In order to keep the number of competencies at a manageable level, they are intentionally general in nature.

Note: These competencies are aligned with the certification requirements to obtain the CPHI(C). Those requirements are administered and tested by the Board of Certification. The competencies listed in this document build and expand upon the Board of Certification requirements, but are designed for anyone who already has the CPHI(C).

Competency statements have been grouped into eight categories. No category takes precedence over another, nor are you expected to know a minimum number of competencies from any one category. This grouping reflects the categories listed in the PHAC’s *Core Competencies for Public Health: Release 1.0*.⁶

⁶ PHAC, 2008: <http://www.phac-aspc.gc.ca/ccph-cesp/pdfs/cc-manual-eng090407.pdf>.

Core Competencies

PHAC has led the development of competencies for all public health professions in Canada and the discipline competencies listed in this document parallel with the core competencies developed by the PHAC. CPHI(C) holders who work in a public health environment should refer to both the PHAC core competencies and this set of discipline specific competencies. The PHAC core competencies can be found in Appendix D.

Note: CPHI(C) holders who work in private industry are also encouraged to read the PHAC core competencies.

1.4 How was the discipline specific competencies section developed?

CIPHI volunteers have been working intently on the CPC initiative for over five years now. The first CPC Steering Committee meeting was held the fall of 2004. The CPC Steering Committee and Working Group contracted Klaus Seeger⁷ in April 2008 to develop the first draft of the environmental public health competencies. This draft was then revised by consultants from Meyers Norris Penny LLP (MNP), who had been contracted to facilitate the review process with CIPHI members.

MNP's initial revision was presented to the CPC Steering Committee, Working Group, and CIPHI National Executive Council in November 2008. A subsequent revision was produced and distributed for an initial consultation with CPHI(C) holders in a series of focus groups held across Canada in January 2009. Focus group attendees included a wide variety of individuals from generalists to specialists, students to directors, and both urban and rural professionals.

The current version of the discipline specific competencies was then produced based on feedback from both an online and a conference survey at CIPHI's 2009 Annual Educational Conference, and from a thorough review by Tony Lewis, of the Chartered Institute of Environmental Health (CIEH) in London, UK. Tony Lewis was involved in developing CIEH's environmental health competency statements and has worked on competency frameworks at the international level.

This is a living document and it will continue to be updated and adjusted. Over time, CIPHI members and non-CPHI(C) holders will be invited to continue to inform the ongoing development of the document. An internal governing body, known as the Council of Professional Experience (CoPE), has been created to monitor, regulate, and evolve the CPC Program. For more information on CoPE, please refer to the PD Model (green) section of this guide.

⁷ From Seeger and Associates – Environmental Public Health Service.

1.5 How do you read a competency statement?

Here is an example of how to interpret a competency statement. Using the example above:

T1-8 Explain the control measures used to prevent or reduce exposure to hazards related to the practice.

There are several key terms in the statement:

1. **Explain:** Each statement starts with one or more action verb(s) that identify an activity that you should be able to perform with regard to the competency. In this case, you are asked to **Explain** something, which means:

To make something plain or understandable; to give the reason for or cause of; to show the logical development or relationships of. Using knowledge of subject to provide information that helps to understand something.

A definition for every action verb can be found in the Glossary in Appendix A.

2. **Practice:** The field of environmental public health includes a wide range of practice areas. Some are very traditional and some are emerging. Whether you are a generalist or a specialist, you likely work within a set number of practice areas based on your own experience or job requirements. For example, you may work wholly in a practice area such as Safe Food, or you may work as more of a generalist covering a wide variety of practice areas.

Each time you see the word *practice* in a competency statement, it is referring to the practice area(s) you have knowledge in. So, you would substitute your own practice area(s) into the statement. Depending on how many practice areas you are involved in, you may have to consider the statement several times over with each practice area substituted for the term *practice*.

This document contains a list of six practice areas, which can be found in Appendix C. These six practice areas are purposefully broad and inclusive enough to cover all of the specializations and areas of expertise that CPHI(C) holders in Canada work in. There are many more actual practice areas and they vary from region to region. Rather than explicitly naming all possible areas, we have created an inclusive list of six practice areas. You are not obligated to use the suggested categories. We encourage you to use the term that best applies to your area of practice.

Note: You are not expected to apply these statements for every practice area that exists, but only for the areas you are familiar with or practice in.

3. **Control Measures and Hazards:** There are key nouns and/or phrases in each competency statement. These phrases are often specific to the practice area you are familiar with, and would change depending on your experience and/or job requirements. For this example, you may be familiar with the following controls and hazards:

If your practice area is...	A hazard may be...	Which could be controlled by...
Safe Food	<i>Clostridium botulinum</i> growth leading to paralysis and potential death	Ensuring anaerobic conditions are not created for <i>C. botulinum</i> to sporulate and grow
Safe Water	Nitrate contamination leading to methaemoglobinemia	Ensuring wells are properly constructed to minimize risk of surface contamination
Healthy Living and Healthy Community Environments	Indoor mould growth leading to respiratory irritation	Respiratory symptoms and conditions for mould growth are controlled and remediated

Putting it all together, any one statement may describe several different activities or skills, for a variety of practice areas. You can read the statement, “*Explain the control measures used to prevent or reduce exposure to hazards related to the practice,*” as:

- Explain how to ensure anaerobic conditions are not created to prevent or reduce *Clostridium botulinum* from sporulating and growing within food
- Explain how to ensure wells are properly constructed to prevent or reduce nitrate contamination of drinking water
- Explain how to control conditions of mould growth to prevent or reduce indoor mould growth, which can lead to respiratory aeration and aggravations of asthma

These statements have not been written for precise, objective measurement; they are best considered as markers to demonstrate the qualifications of a CPHI(C) holder, and as guides for your future professional development. You will be responsible for assessing your own competency and the value you gain from this process is based on your own approach to this assessment.

Note: CIPHI is developing a user-friendly online self assessment tool that will make the application of the discipline specific competencies much easier.

1.6 When and how do these competencies apply to you?

In an industry which relies on precision, a set of general competency statements can seem counter-intuitive and even strange. However, these competencies, as they are written, serve a purpose both for your own development and for the enhanced recognition of the CPHI(C) credential.

Application to Your Career

Throughout your career, you reflect on your skills and abilities. You have performance reviews, interviews, and many other official activities and duties; often these activities are tied in directly to your job descriptions or employer organization, and are not necessarily representative of your competency in the environmental public health profession as a whole. The discipline specific competencies section provides a means for you to reflect on your abilities as a professional within your chosen field. Here are three possible ways that the competency document can be applied:

- **As an employee:** The discipline specific competencies enable you to track your progression throughout your career. Whichever way you direct your career, you can use this list of competencies as a marker. Periodically, take time to review these competencies and assess where you stand. You should be able to identify competencies you are strong in, as well as areas for growth and opportunities for development.

Note: This document contains competency statements referring to all the discussed skills, which is why you are not expected to be adept at absolutely every competency.

- **As an employer:** The competencies listed in this document describe skills and abilities that could be covered by an entire team of health professionals. Use this document to identify your team's strengths and weaknesses. Use this assessment to support or develop a business case for either:
 - o Employee training
 - o New hires
- **As an educational provider:** The competency statements in this document describe skills and abilities that could form the basis for continuing education programs potentially offered by any of the affiliated post-secondary institutions, by CIPHI, or through partnerships with other professional organizations.

Relation to the PD Model

The second step in the CPC Program is the implementation of a PD Model. This model sets a certain number of professional development hours (PDHs), which a CPHI(C) holder is obligated to complete annually. Unlike the competencies, professional development is actively monitored and audited by CIPHI.

Both informal and formal training can be accepted as professional development. The competencies in this document can be used to select the appropriate professional development for you. Use this document to:

- Review your competencies
- Identify competencies that you would like to develop
- Find PD opportunities to help develop the competencies

Promoting the Profession

The competencies are a base for the development of the national standard. Regardless of whether you work in British Columbia, Newfoundland and Labrador, or anywhere in between, the competencies are the same and apply to holders of the CPHI (C). Competencies not only indicate what is expected of professionals with the CPHI(C) designation, but they also identify why a CPHI(C) holder cannot be easily replaced by other professionals. As a result, the competencies help strengthen the designation. If an employer, colleague, or even the general public can see the value of the CPHI(C), then anyone who has earned this credential will be preferred over a professional who lacks the designation. This is a major goal of the entire CPC Program and the competency statements are the first step to achieving this improved professionalism.

Individual/Group	Use competencies to:
CPHI(C) HOLDERS	<ul style="list-style-type: none"> ✓ Self-assess their technical knowledge, skills, abilities, and aptitudes ✓ Identify PD needs ✓ Identify training for PDHs
EMPLOYERS	<ul style="list-style-type: none"> ✓ Identify staff development and training needs ✓ Support staff recruitment, development, and retention ✓ Assist in the development of job descriptions and interview questions ✓ Provide a rationale for securing funds to support workforce development and staffing ✓ Assist with staff engagement
EDUCATIONAL INSTITUTIONS	<ul style="list-style-type: none"> ✓ Develop, coordinate, and offer sustainable courses that meet employers' and professionals' needs
CIPHI	<ul style="list-style-type: none"> ✓ Promote the skills and aptitudes of CPHI(C) holders

Real Life Examples

For some real life examples of the specific competencies, please see Appendix E.

1.7 What should you do with these competencies?

In order to derive the fullest potential from the discipline specific competencies, there are several activities and tools that we encourage you to use. First, the competencies can be used as guide in “reflective practice” and in the ongoing personal reflection of your daily performance and practice. A more in depth discussion of reflective practice is included in the PD Model (green) section of this guide.

Two additional competency related activities are a self assessment and identification of learning objectives.

The Self Assessment Tool

A tool that is currently under development is the self assessment tool. This tool will guide you through the evaluation of your discipline specific competencies. It is encouraged that all CIPHI members complete the self assessment at least once annually. A paper-based version of the tool will be available on the CIPHI website in mid January, 2010. An online version will be available later in the year. CPHI(C) holders can obtain PDHs for completing an annual self assessment. Refer to the PD Model (green) section of this guide for more details.

Identification of Learning Objectives

Once you complete your evaluation using the self assessment tool, the tool will provide you with a summary of your ratings along with tips and suggestions on how to use the ratings to identify learning objectives and create a learning plan that is personally meaningful. You will be able to specify learning objectives targeting the educational, developmental, and experiential activities in the competency areas that you have identified as growth opportunities. You will also be able to identify developmental goals and the steps you want to take towards achieving them. These steps will then form the PD activities that you engage in and the PDHs that you submit to CIPHI on an annual basis. (Please refer to the green section of this guide for more information on the PD Model and its requirements).

2. Discipline Specific Competency Tables

Most CPHI(C) holders will be competent only in some practice areas. Assess your knowledge, skills, and abilities in Tables 1 to 8 (T1 to T8) below for the practice areas that are relevant to you. CIPHI expects that CPHI(C) holders should be proficient in the competencies that apply to them and are relevant to their practice area(s).

Table 1: Public Health Sciences (T1)

This category includes key knowledge, critical thinking skills, and aptitudes related to the environmental public health sciences. Competency in this category requires the ability to apply knowledge in practice.

Competency Statement - Public Health Sciences	
T1-1	Explain and evaluate <i>practice</i> principles
T1-2	Using resources available, identify potential incident causes
T1-3	Identify and explain the procedures for investigating an incident such as an outbreak
T1-4	Use equipment, techniques, and procedures to conduct inspections/investigations
T1-5	Identify and explain analysis reports in relationship to the <i>practice</i>
T1-6	Identify symptoms and etiology of common diseases related to the <i>practice</i> , using relevant reference materials
T1-7	Identify and explain hazards related to the <i>practice</i> , i.e. chemical, biological, radiological, and physical hazards
T1-8	Explain the control measures used to prevent or reduce exposure to hazards related to the <i>practice</i>
T1-9	Explain the potential impacts to public health associated with the <i>practice</i> , e.g. the impacts associated with land use, development planning activities, environmental contaminants, and any type and quantity of spills
T1-10	Identify, explain, and apply, where necessary, the most recent provincial/regional <i>practice</i> requirements, standards, guidelines, policy and program changes including amendments using relevant reference materials
T1-11	Explain roles and functions of the CPHI(C) holder related to the <i>practice</i>

Competency Statement - Public Health Sciences

T1-12	Explain <i>practice</i> advisories/orders/recalls
T1-13	Based on information provided, implement or rescind relevant practice advisories/orders/recalls
T1-14	Recommend behavioural changes based on <i>practice</i> knowledge and historical data such as communicable disease trends
T1-15	Explain changes to sampling techniques and advances related to analysis results in <i>practice</i>
T1-16	Apply systematic inspection processes to any premises, and conduct audits when applicable
T1-17	Use and maintain knowledge of current <i>practice</i> technologies, inspection equipment and sampling equipment
T1-18	Assess and monitor the quality of one's own work
T1-19	Research policy and procedure development and analyze evidence to help with the evaluation of <i>practice</i> policies and programs
T1-20	Analyze <i>practice</i> activities to assist in effective and efficient delivery
T1-21	Analyze and apply <i>practice</i> risk assessment and protection strategies
T1-22	Develop operation plans or provide feedback/input on operational plans to Managers, looking at evidence and research
T1-23	Evaluate <i>practice</i> program needs or provide feedback/input to Managers
T1-24	Evaluate political action and perspective to support <i>practice</i> area policies and programs
T1-25	Evaluate the historical interaction of public health and local/regional conditions
T1-26	Develop policies and procedures to manage actions taken by department, especially on high risk events and activities

Table 2: Assessment and Analysis (T2)

This category describes the competencies needed to assess, analyze, and evaluate information (including data, facts, concepts, and theories). These competencies are required to make evidence-informed decisions, prepare budgets and reports, conduct investigations, and make recommendations for policy and program development.

Competency Statement - Assessment and Analysis	
T2-1	When applicable, evaluate areas/facilities to confirm non-compliance activities related to the <i>practice</i>
T2-2	Identify indicators used in sampling quality
T2-3	Identify and explain how to set up a sampling program for a given site and situation, when relevant policy is in place
T2-4	Identify and apply relevant reference material for <i>practice</i> activities and issues
T2-5	Use appropriate methodologies to collect, store, and retrieve accurate <i>practice</i> information
T2-6	Identify and interpret illness or adverse results based on available evidence for, and analysis of, the <i>practice</i>
T2-7	Explain and apply progressive enforcement actions required when hazardous practices, related illnesses, or non-compliance activities have been identified
T2-8	Assess risk status based on investigation, in order to assign priorities for <i>practice</i> assessment, inspection, and follow-up actions
T2-9	Identify community leaders and champions as sources of information for community action
T2-10	Assess and interpret requirements and best practices that are relevant to local conditions and policies
T2-11	Apply existing data collection tools to assess <i>practice</i> outcomes
T2-12	Evaluate past public health impacts of failed systems and recommend corrective action
T2-13	Analyze technical papers, understand tabular and graphical presentations of data, and interpret them for a non-technical audience

Competency Statement - Assessment and Analysis

T2-14	Analyze internally generated quality assurance data to assist in planning for and setting future directions
T2-15	Analyze internally generated data and communicate it to staff to enhance effective program delivery and assist in planning and setting future environmental public health directions
T2-16	Interpret and apply <i>practice</i> methodologies, including biostatistics and epidemiology, and recommend specific actions to assist in planning for and setting future directions
T2-17	Evaluate program implications for political and local audiences in non-technical terms, using appropriate media
T2-18	Design new data collection tools to assess <i>practice</i> outcomes
T2-19	Evaluate the effectiveness of performance of procedures, interventions, and programs related to the <i>practice</i>
T2-20	Evaluate resource needs and conduct assessments based on analysis of <i>practice</i> program information when applicable (e.g. in response to an emergency or disaster)
T2-21	Assist stakeholders in development and implementation of applicable <i>practice</i> plans (such as Food Safety plans and/or Public Health plans for various emergency scenarios incorporating incident management system principles)
T2-22	Review and monitor compliance of practice plans
T2-23	Evaluate tools, equipment, and procedures used in the <i>practice</i>

Table 3: Policy Program Planning, Implementation, and Evaluation (T3)

This category describes the competencies needed to effectively choose options, and to explain, assess, analyze, implement, and evaluate policies, and/or programs in environmental public health. This includes the management of incidents such as outbreaks and emergencies.

Competency Statement - Policy Program Planning, Implementation, and Evaluation	
T3-1	Implement, evaluate, and maintain fiscally responsible programs and projects
T3-2	Identify, explain, and apply priorities to maximize outcomes based on workload assigned
T3-3	Identify and explain effective <i>practice</i> guidelines, policies, and procedures
T3-4	Identify areas to work with others to implement <i>practice</i> policies and ensure continuing quality assurance
T3-5	Explain selected policy and program options that address a specific <i>practice</i> health issue
T3-6	Explain and propose amendments to policy, procedures, operational plans, or existing <i>practice</i> legislation and/or implement changes
T3-7	Recommend proposed activities for the <i>practice</i> operational plan
T3-8	Identify and explain prevention and risk management strategies to address <i>practice</i> incidents, outbreaks, and emergencies
T3-9	Explain relevant data and prepare reports to document actions, keep records, and inform appropriate parties on <i>practice</i> issues
T3-10	Interpret the results of interventions during an audit or inspection to determine if improvements have occurred over time
T3-11	Analyze <i>practice</i> risk and evaluate lessons learned during a public health emergency/outbreak
T3-12	Analyze policy statements and procedures related to <i>practice</i> inspection/assessment activities
T3-13	Analyze <i>practice</i> program data, including investigation procedures and risk reduction, to assess progress and program effectiveness

Competency Statement - Policy Program Planning, Implementation, and Evaluation

T3-14	Evaluate the implementation of continuing quality assurance, and develop a plan to implement recommendations to improve quality assurance and assessment results
T3-15	Evaluate the feasibility and expected outcomes of each <i>practice</i> program policy option
T3-16	Evaluate <i>practice</i> program activity outcomes to determine whether resources budgeted are being maximized/used effectively
T3-17	Develop strategies for determining budget priorities, which are incorporated into a <i>practice</i> program budget (e.g. for food safety budgets)

Table 4: Partnerships, Collaboration, and Advocacy (T4)

This category captures the competencies required to influence and work with others to improve the health and well-being of the public through the pursuit of a common goal. Partnership and collaboration optimize performance through shared resources and responsibilities. Advocacy – speaking, writing, or acting in favour of a particular cause, policy, or group of people – often aims to reduce inequities in health status or access to health services related to *practice* issues.

Competency Statement - Partnerships, Collaboration, and Advocacy	
T4-1	Research, prepare, deliver, and evaluate educational programs on current <i>practice</i> techniques and advances for the general public and applicable stakeholders, and identify and prepare related materials
T4-2	Develop media release materials to promote or provide information on an issue related to the <i>practice</i>
T4-3	Recommend stakeholder participation in <i>practice</i> education programs and other learning opportunities
T4-4	Identify key persons in organizations located in your area and use a coordinated approach to open and maintain communication lines between stakeholders to ensure effective program implementation
T4-5	Describe role and mandate related to any <i>practice</i> issue when queried by public, municipal partners, related agencies, or other professionals
T4-6	Explain and use collaborative techniques with neighbouring agencies, organizations, communities, and professionals, to promote common <i>practice</i> education initiatives/services
T4-7	Use applicable practices to enhance/promote behaviour change
T4-8	Use team building, negotiation, and conflict resolution skills to build community partnerships and facilitate effective team delivery of <i>practice</i> programs
T4-9	Evaluate and advocate for the equitable allocation of resources related to the <i>practice</i> program delivery
T4-10	Develop a dialogue between local governments and community partners regarding identified <i>practice</i> strategies, to attain and sustain behaviour change
T4-11	Evaluate <i>practice</i> issues that need collaboration with communities/partners and other stakeholders to amend legislation/policies and protect the health and well-being of individuals and communities

Table 5: Diversity and Inclusiveness (T5)

This category identifies the socio-cultural competencies required to interact effectively with diverse individuals, groups, and communities. It is the embodiment of attitudes and practices that result in inclusive behaviours, practices, programs, and policies.

Competency Statement - Diversity and Inclusiveness	
T5-1	Apply cultural sensitivity while maintaining the protection of public health as the number one priority
T5-2	Identify how cultural diversity influences <i>practice</i> activities and how they may need to be adapted to respond to diversity issues
T5-3	Evaluate how regional and cultural perceptions of authority may influence how enforcement and attempts for behaviour change are received
T5-4	Apply culturally relevant <i>practice</i> behaviour change requirements with sensitivity and tact
T5-5	Evaluate when to collaborate with related professions, organizations, and communities to effectively address culturally relevant <i>practice</i> issues, e.g. with other agencies/regulators with shared jurisdiction for safe drinking water and/or safe recreational water
T5-6	Identify population, cultural, socioeconomic, and educational diversity when contributing to the development of <i>practice</i> educational and promotional materials
T5-7	Develop policies and program delivery mechanisms that respond to diversity in population, regional, educational, age, gender, health status, and ability-related characteristics
T5-8	Develop strategies and approaches that recognize workplace diversity when dealing with occupational issues
T5-9	Develop strategies to ensure that both professional and support staff understand the importance of using diverse and inclusive approaches that are consistent with <i>practice</i> principles
T5-10	Develop an organizational framework and policy structure that supports a culture of collaboration and partnership across all discipline specific <i>practices</i>
T5-11	Implement opportunities for training and understanding cultural diversity

Table 6: Communication (T6)

Communication involves an interchange of ideas, opinions, and information. This category addresses numerous dimensions of communication including internal and external exchanges (written, verbal, non-verbal), listening skills, computer literacy, providing appropriate information to different audiences, working with the media, and social marketing techniques.

Competency Statement - Communication	
T6-1	Identify and use teaching as part of regulatory functions of environmental public health program delivery activities
T6-2	Explain basic concepts of the various environmental public health <i>practices</i> and the value and importance of possible consequences and resolutions to clients and the public, using both written and oral communication
T6-3	Conduct all communications utilizing appropriate verbal and written language relevant to each situation while reflecting the needs of both the end-user and the need to protect and promote public health
T6-4	Use effective listening skills when participating in a situation related to a health issue/action
T6-5	Use polite, prompt, and professional communication
T6-6	Develop <i>practice</i> communication protocols, e.g. emergency preparedness communication protocols
T6-7	Use flexibility when preparing public health educational programs and information
T6-8	Explain resolution of conflicts within the agency, in the community, and with regulated parties
T6-9	Assess the needs of learners and teach environmental public health concepts to persons of all ages, genders, cultures, and educational backgrounds, in various settings and with available resources
T6-10	Apply appropriate risk communication principles/strategies and exchange information with colleagues, other professionals, and clients
T6-11	Explain the goals, purposes, problems, and needs for effective and efficient delivery of the various <i>practice</i> components
T6-12	Interpret amended concepts related to an identified <i>practice</i> issue to policy-makers using current technology

Competency Statement - Communication

T6-13

Research, interpret, and prepare information related to an identified *practice* issue that requires immediate action to reduce risk for distribution to the community

T6-14

Design, develop, and implement community networks to receive and provide information about issues that may affect the health of citizens

Table 7: Leadership (T7)

This category focuses on leadership competencies that build capacity, improve performance, and enhance the quality of the working environment. They also enable organizations and communities to create, communicate, and apply shared visions, missions, and values.

Competency Statement - Leadership	
T7-1	Identify solutions to environmental public health problems, with guidance from other CPHI(C) holders as applicable
T7-2	Explain performance standards in all public health programs
T7-3	Explain the CIPHI Code of Ethics to manage self in all areas of environmental public health, and act ethically with clients, information, and resources
T7-4	Explain the mission and priorities of the environmental public health organization where one works
T7-5	Assist employer organization to become/stay evidence based
T7-6	Explain the key values of the organization (employer) and follow a shared vision in the planning and implementation of environmental public health programs and policies in the community
T7-7	Explain and share knowledge, tools, expertise, and experience, e.g. in mentoring situations
T7-8	In committees, evaluate, explain and use best practices and incorporate relevant guidelines into policies and practice
T7-9	Assess issues and recommend policies and practices that advance public health goals and organizational learning
T7-10	Recommend and apply key values of environmental public health programs and policies in the community
T7-11	Research and apply learning opportunities for environmental public health staff to build strong teams with different skill sets, and to promote sharing of knowledge, tools, expertise, and experience

Competency Statement - Leadership

T7-12	Analyze program activity data for inclusion in the organization's annual performance report
T7-13	Design, develop, and implement continuing education sessions for peers and related stakeholders on successes and challenges in delivering applicable environmental public health programs
T7-14	Design, implement, and evaluate quality assurance processes of all programs, policies, and best practices
T7-15	Evaluate the historical development, structure, and interaction of environmental public health and health care systems at the local, provincial/territorial, national, and international levels
T7-16	Implement and evaluate information about the economic and political implications of decisions
T7-17	Evaluate and provide direction and empathy when presented with staff concerns related to situations experienced in the field

Table 8: Legal and Regulatory (T8)

This category includes key knowledge and critical thinking skills related to the regulatory and legal context of the *practice*.

Competency Statement - Legal and Regulatory	
T8-1	Identify, explain, and follow the legal and regulatory context of the legislation applicable to the <i>practice</i>
T8-2	Identify and explain the relevant legislative infrastructure and roles of authority at the municipal, provincial, federal, and multi-jurisdictional levels
T8-3	Use legal and regulatory discretion when dealing with issues and problems in the <i>practice</i>
T8-4	When other strategies have been exhausted, identify and explain enforcement procedures (including applicable litigation processes) according to policy
T8-5	Identify and explain rationale for enforcement action on non-compliant practices
T8-6	Apply the underlying principles of <i>practice</i> legislation and hazard analysis/risk assessment
T8-7	Evaluate recent legislative changes related to the <i>practice</i> , as applicable
T8-8	Apply enforcement procedures applicable to the situation
T8-9	Recommend specific actions or amendments to legislation based on the analysis of information
T8-10	Apply selected policies and applicable regulatory tools and options when non-compliance is observed
T8-11	Assess and provide recommendations in response to proposed policies, legislation, and standards that affect <i>practice</i> program delivery
T8-12	Analyze <i>practice</i> interventions that include enforcement leading to litigation
T8-13	Research, advocate, and apply proposed <i>practice</i> policies, legislation, and standards that improve current levels to protect the health and well-being of individuals and communities
T8-14	Implement and evaluate the limitations and uses of public health legislation, policies, and standards