

CHPA CANDIDATE Handbook

International Association for Healthcare Security and Safety
Commission on Certification

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Introduction

About the CHPA: Purpose and Scope

The purpose of the Certified Healthcare Protection Administrator certification program is to offer IAHS's highest level of certification intended for healthcare security professionals with management responsibilities. The CHPA designation is awarded to candidates who meet the qualifying criteria and pass a comprehensive certification examination. It affirms the competency these practitioners have demonstrated in the field of healthcare security and safety and is typically achieved by those above entry level and based on a minimum level of experience and education.

Value of Certification

A high-quality certification validates an individual's knowledge, skills, and abilities in a defined profession, occupation, skill, or role. Certified individuals in the workforce reduce risk and enhance consumer protection and public safety and welfare. In addition, these certifications allow employers and other stakeholders to identify individuals with the competencies needed to perform a role or task.

Certification holders may benefit from:

- Increased recognition by peers and respect of colleagues in the profession
- Improved opportunities for employability and advancement
- Greater confidence in their professional competence
- Increased professional trust from employers or the public
- Increased autonomy in the workplace
- Better compensation and career longevity

Consumers may benefit from:

- Objective, independent, third-party evaluation and assessment of professional competence
- Commitment to public safety and welfare and/or consumer protection
- Accountability through ethical conduct standards and/or a disciplinary process
- Recertification requirements for continued or enhanced competence

Employers may benefit from:

- Qualified individuals for employment or advancement
- Recertification requirements for continued or enhanced competence
- Commitment to public safety and welfare and/or consumer protection
- Reduced risk of errors, accidents and/or legal liability
- Reduced employee turnover and increased job satisfaction
- Justification for potential compensation differential

About the IAHS Commission on Certification

The IAHS Commission on Certification (the Commission) is a standing committee of IAHS. The Commission is empowered by the IAHS Board of Directors and Bylaws to provide oversight and governance for the CHPA Certification program and to establish policies related to the certification program as defined in the Commission Charter. The Commission is solely responsible for all essential decisions related to the development, administration, and ongoing maintenance of the CHPA program.

The Commission does not develop, approve, recommend, or endorse certificate programs, courses of study, education, or training leading to certification. The Commission does not require candidates for certification to complete education or training programs offered by IAHS.

Applying for Certification

Eligibility Requirements

Candidates must meet all the following requirements at the time of application to be deemed eligible to take the CHPA examination:

- Completion of the online CHPA application (available at apply.iahss.org)
- A minimum of twenty (20) credits accumulated from the categories of: Education, Experience, Professional Development, and Industry Association Membership. (Details on eligible activities and their credit values within these categories are found on the application site.)
- Payment of the appropriate fee

The successful candidate will demonstrate knowledge across the domains covered in the CHPA examination. Applicants who fail to demonstrate that they have met the eligibility requirements will not be permitted to take the exam. Note: Grandfathering is not permitted; all CHPA candidates must meet eligibility requirements and successfully pass the exam.

Application Process

Applicants for the CHPA are required to complete and submit the official electronic application, meet established deadlines, pay all fees, and provide information required to demonstrate eligibility for certification.

Applicants must apply for the CHPA examination online at apply.iahss.org. If they do not already have an IAHS profile in the system, they will be prompted to create one. Applicants with a disability who require assistance in completing the application should contact IAHS at info@iahss.org. Information provided is confidential and will be handled according to IAHS' Privacy Policy.

Applicants are required to attest that all the information provided in the online application is complete and truthful. If an applicant has falsified or omitted any material information in the application,

sanctions may result, including invalidation of examination score or revocation of certification or eligibility for certification.

The required application fee is non-refundable & includes the cost of the CHPA exam. Fees are payable at the time of application submission and are paid through a portal link provided on the application site.

Application Fees: Members--\$450 USD, Non-members--\$525 USD

Once submitted, IAHS staff will review all applications and will directly contact applicants to provide any information identified as missing in the application. All applications are subject to audit and verification. Failure to respond by the deadline to a request for more information or an audit inquiry will result in the applicant's eligibility being denied; in such cases, the examination fee will be refunded, but the application review fee is non-refundable. Once all information is reviewed by staff, and any missing information provided, the application will be reviewed by a representative of the Commission on Certification, typically the chair.

Applications are evaluated within 45 days of receipt. The application will not be processed if it is submitted incorrectly or without required documentation or payment.

Once approved, candidates are notified of their acceptance and provided information on the testing process and timeline. This includes the testing window, which is twelve months from the acceptance of candidate eligibility.

Scheduling an Exam

The CHPA exam is available year-round and must be scheduled in advance. Candidates take the exam on their own device, using IAHS-approved software (locked-down browser), under the supervision of an approved proctor.

Candidates are responsible for securing a proctor who meets specific qualifications. Proctor guidelines, qualifications, and forms can be obtained here: [2026_03 CHPA Exam Candidate and Proctor Guidelines.docx](#)



2026_03 CHPA Exam
Candidate and Procto

Proctor Qualifications:

A proctor must meet at least one of the following criteria:

- Current CHPA and IAHS member in good standing.
- Human Resources manager, education/training manager, or higher-ranking manager outside the Candidate's chain-of-command, either within or outside the candidate's organization.
- Administrator or faculty member of an accredited institution of higher education.

A proctor MAY NOT be one of the following:

- Anyone in the candidate's chain of command (i.e., supervisor)
- A relative of the candidate
- An instructor of any CHPA study session
- An approved CHPA candidate who has not yet passed the exam

The exam may also be offered at the IAHS Annual Conference & Exhibition (contingent on a minimum number of candidates registering).

Once a proctor is secured and appropriate forms are signed, the proctor guidelines and agreement forms must be returned to IAHS for review and approval.

Testing Accommodations for Candidates with Disabilities

Reasonable accommodations, as defined by the Americans with Disabilities Act (or applicable international regulations), ensure that candidates with a qualifying medical condition or documented disability have a fair and equal opportunity to demonstrate their knowledge and skills in the areas assessed by the examination.

Reasonable accommodation is decided upon based on:

- the individual's specific request
- the individual's specific disability
- documentation submitted

Reasonable accommodation does not include steps that fundamentally alter the purpose or nature of the examination.

Reasonable accommodation generally is provided for candidates who:

- have a physical or mental impairment that substantially limits that person in one or more major life activities (e.g. walking, talking, hearing, performing manual tasks)
- have a record of such physical or mental impairment
- are regarded as having a physical or mental impairment

To apply for accommodation(s), the candidate must

- Submit the Request for Testing Accommodation form on the IAHS website
- Submit documentation provided by an appropriate licensed professional on the
 - professional's letterhead to the Commission which includes a diagnosis of the disability and
 - specific recommendations for accommodations.
- Submit documentation at least 30 days prior to the testing date.
- All documentation is subject to verification.

Requests for accommodations will be reviewed by the certification program staff. Reviews will be confined to verifying that appropriate documentation has been provided by the candidate. Approved accommodation will be communicated to the proctor. The proctor will be responsible for providing accommodation at the designated test site with all agreed upon provisions provided upon the individual's official check-in at the testing site. The proctor will attest to providing the accommodation and report any issues to IAHS staff.

An accommodation request form can be found here: [ADA accommodation request](#)

Content Coverage on the Exam

Content Outline

CHPA Examination Content Outline, resulting from 2023 Job Task Analysis Study

Domain Level (1): The domains (I, II, III, etc.) represent the major areas of the exam.

Task Level (2): The tasks (A, B, C, etc.) represent the specific activities that would be expected of a CHPA.

Domain/Task Statement	Examination Weight (%)
I. Security and Safety in the Healthcare Environment	15%
A. Demonstrate competency of how the security function operates within the healthcare environment.	
B. Conduct security risk, hazard, and vulnerability assessments.	
C. Identify, evaluate, and determine appropriate corrective measures to address the security and safety risks that affect the protection level of the healthcare facility (HCF) personnel, patients, and visitors.	
D. Conduct safety and security inspections, surveys, and site reviews of designated areas to ensure compliance with applicable accreditation and regulatory standards.	
E. Demonstrate competency of how the security function operates within the healthcare environment.	
II. Healthcare Security Leadership	20%
A. Serve as the senior security representative to internal and external stakeholders.	
B. Develop and implement a security awareness program.	
C. Prepare and manage the annual security operating and capital budgets.	
D. Demonstrate an understanding of ethical principles as they apply to the security function.	
E. Develop plans, policies, and procedures.	
F. Collect, monitor, track, and trend appropriate security metrics.	
G. Evaluate and select business partners for integration of new physical and electronic security systems.	
III. Healthcare Security Workforce Management	16%
A. Develop and implement a training program for security staff including initial training and ongoing education.	
B. Develop and mentor security staff for advancement and succession planning.	
C. Supervise staff and daily operations to ensure the safety and security of HCF assets.	
D. Determine appropriate staffing to adequately protect the HCF assets and support efficient	

Domain/Task Statement	Examination Weight (%)
security operations.	
E. Apply principles of human resources management.	
IV. Physical Security	14%
A. Understand and apply principles of physical security.	
B. Identify gaps and vulnerabilities in the HCF's physical security.	
C. Implement or recommend corrective actions to continuously improve the physical security of the HCF.	
D. Use security design guidelines to influence all phases of new construction and renovation.	
V. Electronic Security System Integration	5%
A. Conduct electronic security systems assessment(s).	
B. Develop and maintain records of system deployment (as-builds), testing, and maintenance.	
C. Plan and budget for system maintenance upgrades and replacement (lifecycle).	
D. Establish security technology standards for an HCF.	
VI. Emergency Preparedness: Planning and Management	10%
A. Apply principles of emergency preparedness and management applicable to the healthcare security function.	
B. Design, collaborate, and conduct security drills and exercises in coordination with the EM function.	
C. Identify human factor risks to the HCF for inclusion on the hazard vulnerability assessment and determine the appropriate risk level.	
D. Recommend and implement corrective actions to improve the HCF response to a future or actual event.	
VII. Healthcare Workplace Violence	15%
A. Develop a comprehensive workplace violence (WPV) prevention program.	
B. Assess the HCF for its overall level of WPV risk and identify specific units/locations or employee populations with a higher risk of WPV exposure.	
C. Develop and implement WPV prevention training programs.	
D. Develop and implement processes to report, assess, respond to, and investigate WPV incidents.	
E. Develop and implement processes to track and trend WPV incidents, evaluate metrics, and use data to support the ongoing development of the program.	
VIII. Investigation Management	5%
A. Implement processes to collect information and evidence to support an investigation.	
B. Manage and document investigations and preserve evidence.	
C. Collaborate with internal and external stakeholders that may assist with or may need to be notified because of an investigation.	
D. Prepare a case to substantiate investigative findings and testimony.	

Reference List/Core Resources

Core resources for the CHPA can be found on the IAHS website at

https://cdn.ymaws.com/www.iahss.org/resource/resmgr/chpa_documents/2025_07_core_resources_list.pdf

Exam Development Process

In 2023, the International Association for Healthcare Security & Safety (IAHSS) contracted with ACS Ventures, LLC (ACS) to conduct a job task analysis study for the Certified Healthcare Protection Administrator (CHPA) program. The job analysis study was conducted to review and update the detailed content outline (DCO) for the CHPA certification to ensure the examination blueprint reflects safe and effective practice for individuals who are newly certified in the industry of healthcare security and safety administration.

The study was designed to be conducted in three phases. In the first phase, a panel of subject matter experts (SMEs) for the IAHS CHPA certification updated the expectations that a healthcare protection administrator was responsible for in an organizational framework. In the second phase, a survey was constructed and sent to currently certified professionals to gain feedback on the draft task list. In the third phase, the responses from the survey were analyzed to determine the relative importance of each task. These measures of relative importance were then used to provide recommendations for the detailed content outline used to construct the certifying examination.

The exam was developed using the following multi-phase process:

- In the first phase, subject matter experts collaborated to define the expectations (knowledge and skills) that would be required of a minimally qualified candidate (MQC) who holds the CHPA designation. These expectations were sent out to the industry for review and input, and the final set of expectations (refer to Exam content outline) was developed incorporating the input from the broader profession. This input included an overall measure of importance of each Domain and subdomain by weighting the importance and frequency of the tasks.
- During the second phase, a test form was assembled. The test content was created and reviewed by subject matter experts following best practices in test item development. These test questions were then piloted to determine how well they measure the targeted knowledge and skills.
- Finally, subject matter experts set the expectation for passing the exam (i.e., the passing standard). The CHPA is a criterion-referenced examination, meaning that the passing score is set beforehand and candidate performance is not compared to the performance of others taking the examination. In a criterion-referenced examination, a candidate must obtain a score equal to or higher than the standard, or cut-score, to pass the test. Subject Matter Experts reviewed the entry-level expectations for the Certified Healthcare Protection Administrator and determined how a professional who is minimally qualified to practice as a CHPA would perform on the examination (Angoff Method).

Taking the Exam

What to Expect on Exam Day

- **Exam Format:** The current CHPA exam consists of 200 scored and 20 unscored multiple-choice items. IAHS allows 3 hours (180 minutes) total testing time for the exam.
- Candidates will be required to present government-issued identification, which will be verified by the proctor.
- Candidates are observed at all times while they are taking the exam. Any cheating and/or breach of confidentiality/security or any attempt to subvert the examination process by any candidate violates the purpose and principles of the examination. Any candidate who carries out, takes part in or who witnesses such behavior must report it to the Proctor and/or IAHS as soon as possible.

Exam Security

- Proctors on exam day will:
 - Manage candidate sign-in and verify candidate identity.
 - Administer pre-approved ADA accommodations as directed by the certification program staff member.
 - Ensure that an IAHS approved personal computer is used for the testing and that the lockdown browser software is activated prior to candidate sign-in.
 - Address any candidate or other site problems as needed.
 - Report any exam-related incidents or security concerns directly and promptly to the certification program staff member.
- Monitoring Site Environment. All examination sites meet the following criteria:
 - Examination rooms will be quiet and free of disruption.
 - Rooms will have adequate and comfortable ventilation, lighting, and temperature.
 - All exam administrations will be monitored by approved proctors as noted above.
 - Entrances/exits will be monitored/controlled and working fire exits will be available.
 - The test site will be accessible in compliance with the ADA.
 - Candidates will have access to restroom facilities and are permitted one lavatory break, not to exceed five minutes. If you choose to break to use the lavatory, the time clock on your exam will continue to run. If exam writers leave the room for longer periods, the proctor may discontinue the exam.
 - Candidates are not allowed to possess paper & pen, books/other written materials or other electronic devices including cell phones during the exam.

After the Exam

- Candidates will receive “Pass/Fail” results after submitting the exam and will receive follow-up written communication from IAHS. Failing candidates will be provided with additional information about their performance by content area; specifically, a percent correct score in each content area

or domain will be listed. This information is provided to better help candidates understand their performance on the CHPA exam but is not intended to guide or limit future exam preparation. As candidates prepare for re-exam, they are encouraged to consider the full breadth of expectations contained in the exam content outline (refer to Exam content outline).

- If a candidate fails the first examination, IAHS staff will provide information about retesting options and timing. The candidate will not be required to meet any additional eligibility requirements that may have been imposed since the original application date; however, the candidate will be required to pay an additional \$100 USD fee to retake the exam. The second exam must be completed within 6 months of the initial unsuccessful exam, but candidates must wait at least 30 days to re-test.

This waiting period was created to help protect the security of the exam. Given the computer-based nature of the exam, the limited number of exam forms and the number of individuals taking the exam, a waiting period was created with the goal of creating time between administrations so that exam takers will have less memory of the previous version of the exam.

- If the candidate either does not complete the retest within the specified time limit or fails the retest, he/she must complete the entire initial CHPA application process again, including the following requirements:
 - Submit a new CHPA application
 - Meet current eligibility requirements
 - Pay the full application fee
 - Pass the CHPA exam

Exam-Related Complaints

Candidates with complaints about the examination processes or their testing experience should utilize the comment area(s) provided during the exam. Complaints also can be directed to the certification program staff member at info@iahss.org.

Candidates who fail the exam and believe irregular testing conditions, significant technical problems, or violation of Commission policy were a contributing factor may file a request for reconsideration to the Commission following the Reconsideration of Adverse Decisions policy.

Feedback from candidates regarding the content of the exam or specific questions submitted via the comment screen during the exam administration will be reviewed and considered by The Commission and SMEs as part of the ongoing item review and test development process.

Maintaining Certification

Recertification Requirements

A CHPA must renew every three years by completing an online recertification application (apply.iahss.org) that documents credits earned during the recertification period. A minimum of forty (40) credits from the following categories is required: Experience, Continuing Education, Professional

Development Activities and Industry Association Membership. Details on eligible activities and their credit values within these categories are found on the application website.

Once your recertification application has been approved, any credits earned after you have recertified but before your new cycle starts cannot be carried to your new recertification cycle.

Recertification applications submitted incorrectly or without required documentation, or more than 90 days before the renewal date, will not be processed.

Recertification Fee

- Member: \$150 USD
- Non-member \$175 USD

Fees are payable at the time of application submission and are paid through a portal link provided on the application site.

Candidate Notification and Updating Contact Information

IAHSS makes every effort to keep candidates informed about recertification deadlines. Email notifications will be sent to the primary email address from your IAHSS membership account. Please make sure to keep your email address current and “whitelist” all emails from iahss.org addresses to keep track of recertification reminders. Ultimately, however, candidates are responsible for keeping up to date on recertification deadlines and submitting the appropriate documentation. Failure to receive IAHSS notifications is not an acceptable reason for missing application deadlines.

Lapsed credentials

CHPAs must renew their credentials prior to the credential expiration date. Recertification candidates will be notified via the email address listed in the IAHSS database within the last six (6) months prior to their expiration date. Within one (1) month after their expiration date has passed, they will receive a final written notification by email stating they are expired, and the individual is to stop using the CHPA credential immediately.

Credentials will be considered lapsed and unable to be renewed via the regular recertification process if not renewed within one (1) year of the credential expiration date. However, the following is the process to renew Lapsed Credentials for up to one (1) year after the credential expiration date:

- a. Within ninety (90) days post credential expiration date, CHPA candidates may submit the regular CHPA Recertification Application and pay the regular renewal rate. They will not be asked to submit proof of additional credits beyond the forty (40) credits required of on-time renewal candidates.
- b. From ninety-one (91) days through twelve (12) months post credential expiration date, CHPA candidates must submit the following in order to renew their CHPA credential:
 - i. Current Recertification Application documenting forty-eight (48) credits [vs fifteen (40) credits required for on-time renewals].
 1. Additional credits may be earned under any section, as long as the section maximum credits are not exceeded.

- ii. Renewal candidates must submit a \$100 penalty fee in addition to the regular renewal fee with their application.
 - iii. Late renewals will not extend the recertification term; the next renewal date will be exactly three (3) years from the date of expiration of the last certification term.
- c. If a CHPA does not successfully renew within twelve (12) months of the credential expiration date, the credential will be considered lapsed, and the candidate must begin the CHPA application process all over again to reinstate their CHPA via the process below:
 - i. Submit a new CHPA application
 - ii. Meet current eligibility requirements
 - iii. Pay the full application fee
 - iv. Re-take and Pass the CHPA examination
- d. Recertification applications may be submitted any time in the third year of the recertification cycle. Once credits have been reviewed and approved, the new certification cycle will start where the current three-year cycle ends (i.e., a new cycle start and end date will not be implemented). All credits submitted must be earned during the official three-year cycle.

Candidates may request a one-time extension of recertification based on a severe hardship (i.e. severe illness, death of an immediate family member or military deployment, which does not apply to military contractors). If a hardship exists, the candidate must submit a detailed explanation to the IAHS Commission on Certification in writing in advance of the end of the eligibility period, if at all practicable. Severe hardship must be documented to IAHS and Commission on Certification satisfaction and be verifiable.

Other Policies

Reconsideration of Adverse Decisions

- Candidates whose eligibility for initial certification or recertification has been denied and who believe the denial is a result of an error in the application review process or a failure to follow application review policies, may appeal/request reconsideration of the decision. Reconsideration requests regarding the examination content outline (e.g., specific questions about the domain weights, specifications, blueprint that results from the Job Task Analysis) are not accepted.
- CHPA Applications/Recertification Applications are approved or denied by the Commission Chair.
- If an applicant disagrees with the Commission Chair's decision, then an appeal may be filed within thirty days of the date applicant was originally notified of denial.
 - A signed letter explaining the reason for the appeal must be submitted to the IAHS office electronically.
 - Any new or additional documentation for consideration must be submitted at this time.
- The IAHS Commission on Certification Appeals Committee shall review and consider a properly filed appeal via virtual meeting. The IAHS staff will notify the Applicant of the Commission's decision, and the reasons therefore, as specified in the appeals time frame.

- An initial response will be provided within thirty (30) days, acknowledging receipt of the complaint.
- There will be a sixty (60) day investigative review period, renewable for another sixty (60) day period based on findings.
- The decision of the IAHS Commission on Certification will be considered final.

Disciplinary Process and Complaints

The Commission on Certification developed its disciplinary procedures to ensure that the enforcement process remains expedient, consistent and fair for all participants and credible to the public.

In order to maintain and enhance the credibility of the CHPA certification program, the Commission has adopted the following procedures to allow individuals to bring complaints concerning the conduct of CHPA certificants to the Commission.

In the event a certificant violates the IAHS Code of Ethics for the Security Professional, or Commission certification rules, requirements, and/or policies, the Commission may reprimand or suspend the individual or may revoke certification.

Grounds for Sanctions

The grounds for sanctions under these procedures may include, but are not necessarily limited to:

- Violation of the established Code of Ethics, Commission rules, requirements, and/or policies.
- Gross negligence, willful misconduct, or other unethical conduct in the performance of services for which the individual has achieved CHPA certification.
- Fraud, falsification, or misrepresentation in an initial application or renewal application for certification.
- Falsification of any material information requested by the Commission.
- Misrepresentation of CHPA status, including abuse of logo.
- Cheating on any certification examination.

Actions taken under this policy do not constitute enforcement of the law, although referral to appropriate federal, state, or local government agencies may be made about the conduct of the certificant in appropriate situations. Individuals initially bringing complaints are not entitled to any relief or damages by virtue of this process, although they will receive notice of the actions taken.

Complaints Submission

Complaints may be submitted by any individual or entity. Complaints must be submitted in writing to the Commission and should include the name of the person submitting the complaint, the name of the person the complaint is regarding and other relevant identifying information, a detailed description of factual allegations supporting the charges, and any relevant supporting

documentation. Information submitted during the complaint and investigation process is considered confidential and will be handled in accordance with Commission's Confidentiality policy.

Preliminary Review

Upon receipt and preliminary review of a complaint involving the certification program the IAHS staff in consultation with the Commission Chair may conclude, in their sole discretion, that the submission:

- contains unreliable or insufficient information, or
- is patently frivolous or inconsequential.

In such cases, the IAHS Staff and Commission Chair may determine that the submission does not constitute a valid and actionable complaint that would justify bringing it before the Commission's Discipline Committee for investigation and a determination of whether there has been a violation of substantive requirements of the certification process. If so, the submission is disposed of by notice from the IAHS Staff and Commission Chair to its submitter. All such preliminary dispositions by the Commission Chair are reported to the Governing Board at its next meeting.

Preliminary review will be conducted within 15 business days of receipt of the complaint.

If a submission is deemed by the IAHS staff member and Commission Chair to be a valid and actionable complaint, the Commission Chair will see that written notice is provided to the certificant whose conduct has been called into question. The certificant whose conduct is at issue also will be given the opportunity to respond to the complaint. The Chair also will ensure that the individual submitting the complaint receives notice that the complaint is being reviewed by the Commission.

Complaint Review

For each complaint that the Chair concludes is a valid and actionable complaint, the Commission authorizes an investigation into its specific facts or circumstances to whatever extent is necessary in order to clarify, expand, or corroborate the information provided by the submitter.

Discipline Committee

The Discipline Committee will investigate and make appropriate determination with respect to each such valid and actionable complaint; the Discipline Committee may review one or more such complaints as determined by the Chair. The Discipline Committee initially determines whether it is appropriate to review the complaint under these Procedures or whether the matter should be referred to another entity engaged in the administration of law. The timeline for responses and for providing any additional information shall be established by the Discipline Committee. The Discipline Committee may be assisted in the conduct of its investigation by other members of the Commission and/or IAHS staff or legal counsel. The Chair exercises general supervision over all investigations.

Both the individual submitting the complaint and the certificant who is the subject of the investigation (or his or her employer) may be contacted for additional information with respect to the complaint. The Discipline, or the Commission on its behalf, may at its discretion contact such other individuals who may have knowledge of the facts and circumstances surrounding the complaint.

All investigations and deliberations of the Discipline Committee and the Commission are conducted in confidence, with all written communications sealed and marked "Personal and Confidential," and they

are conducted objectively, without any indication of prejudgment. An investigation may be directed toward any aspect of a complaint which is relevant or potentially relevant. Formal hearings are not held, and the parties are not expected to be represented by counsel, although the Discipline Committee and Commission may consult their own counsel.

Certificants who are found to bring frivolous complaints against other certificants, or the Commission may be subject to disciplinary action by the Commission, up to and including revocation of certification.

Discipline Committee Recommendation

Upon completion of an investigation, the Discipline Committee recommends whether the Commission should make a determination that there has been a violation of Commission's policies and rules. When the Discipline Committee recommends that the Commission find a violation, the Discipline Committee also recommends imposition of an appropriate sanction. If the Discipline Committee so recommends, a proposed determination with a proposed sanction is prepared under the supervision of the Chair and is presented by a representative of the Discipline Committee to the Commission along with the record of the Discipline Committee's investigation.

Commission Determination

Complaint Dismissal

If the Discipline Committee recommends against a determination that a violation has occurred, the complaint is dismissed with notice to the certificant, the certificant's employer (if involved in the investigation), and the individual or entity who submitted the complaint; a summary report is also made to the Commission.

Determination of Violation

The Commission reviews the recommendation of the Discipline Committee based upon the record of the investigation. The Commission may accept, reject, or modify the Discipline Committee's recommendation, either with respect to the determination of a violation or the recommended sanction to be imposed. If the Commission makes a determination that a violation has occurred, this determination and the imposition of a sanction are promulgated by written notice to the certificant, and to the individual submitting the complaint, if the submitter agrees in advance and in writing to maintain in confidence whatever portion of the information is not made public by the Commission.

In certain circumstances, the Commission may consider a recommendation from the Discipline Committee that the certificant who has violated the certification program policies or rules should be offered an opportunity to submit a written assurance that the conduct in question has been terminated and will not recur. The decision of the Discipline Committee to make such a recommendation and of the Commission to accept it are within their respective discretionary powers. If such an offer is extended, the certificant at issue must submit the required written assurance within thirty days of receipt of the offer, and the assurance must be submitted in terms that are acceptable to the Commission. If the Commission accepts the assurance, notice is given to the certificant's employer and to the submitter of the complaint, so long as the submitter agrees in advance and in writing to maintain the information in confidence.

Sanctions

Any of the following sanctions may be imposed by the Commission upon a certificant whom the Commission has determined to have violated the policies and rules of its certification program(s), although the sanction applied must reasonably relate to the nature and severity of the violation, focusing on reformation of the conduct of the member and deterrence of similar conduct by others:

- written reprimand to the certificant.
- suspension of the certificant for a designated period; or
- termination of the certificant's certification.

For sanctions that include suspension or termination, a summary of the final determination and the sanction with the certificant's name and date is published by the Commission. This information will be published only after any appeal has either been considered or the appeal period has passed.

Reprimand in the form of a written notice from the Chair normally is sent to a certificant who has received his or her first substantiated complaint. Suspension normally is imposed on a certificant who has received two substantiated complaints. Termination normally is imposed on a certificant who has received two substantiated complaints within a two-year period, or three or more substantiated complaints. The Commission may at its discretion, however, impose any of the sanctions, if warranted, in specific cases.

Certificants who have been terminated will have their certification revoked and will not be considered for Commission certification in the future. If certification is revoked, any and all certificates or other materials requested by the Commission must be returned promptly to the Commission.

Policy Violation Appeals

Within thirty (30) days from receipt of notice of a determination by the Commission that a certificant violated the certification program policies and/or rules, the affected certificant may submit to the Commission in writing a request for an appeal.

Disciplinary Appeal Committee

Upon receipt of a request for appeal, the Chair of the Commission establishes an appellate body consisting of at least three, but not more than five, individuals. This Disciplinary Appeal Committee may review one or more appeals, upon request by the Chair. No current members of the Discipline Committee may serve on the Disciplinary Appeal Committee; further, no one with any personal involvement or conflict of interest may serve on the Disciplinary Appeal Committee. Members of the Disciplinary Appeal Committee may be reimbursed for reasonable expenses incurred in connection with the activities of the Committee.

Basis for Appeal

The Disciplinary Appeal Committee may only review whether the determination by the Commission of a

violation of the certification program policies and/or rules was inappropriate because of:

- material errors of fact, or
- failure of the Discipline Committee or the Commission to conform to published criteria, policies, or procedures.

Appeal Procedure

Only facts and conditions up to and including the time of the Commission's determination as represented by facts known to the Commission are considered during an appeal. The appeal will not include a hearing or any similar trial-type proceeding. Legal counsel is not expected to participate in the appeal process, unless requested by the appellant and approved by the Commission and the Disciplinary Appeal Committee. The Commission and Disciplinary Appeal Committee may consult legal counsel.

The Disciplinary Appeal Committee conducts and completes the appeal within ninety days after receipt of the request for an appeal. Written appellate submissions and any reply submissions may be made by authorized representatives of the member and of the Commission. Submissions are made according to whatever schedule is reasonably established by the Disciplinary Appeal Committee. The decision of the Disciplinary Appeal Committee either affirms or overrules the determination of the Commission but does not address a sanction imposed by the Commission. The decision of the Disciplinary Appeal Committee, including a statement of the reasons for the decision, is reported to the Commission.

The Disciplinary Appeal Committee decision is binding upon the Commission, the certificant who is subject to the action, and all other persons.

Resignation

If a certificant who is the subject of a complaint voluntarily surrenders his or her certification(s) at any time during the pendency of a complaint under these Procedures, the complaint is dismissed without any further action by the Discipline Committee, the Commission, or a Disciplinary Appeal Committee established after an appeal. The entire record is sealed, and the individual may not reapply for certification. However, the Commission may authorize the Chair to communicate the fact and date of resignation, and the fact and general nature of the complaint, which was pending at the time of the resignation, to or at the request of a government entity engaged in the administration of law. Similarly, in the event of such resignation, the person or entity who submitted the complaint are notified of the fact and date of resignation and that Commission has dismissed the complaint as a result.

Code of Conduct and Certification Code of Ethics

- The Commission on Certification has adopted the IAHS Code of Ethics for the Security Professional for CHPA certificants. CHPA certificants who violate the Code of Ethics for the Security Professional are subject to disciplinary action.
- Ethics and Rules violations: See Disciplinary & Complaints Policy

Nondiscrimination and Fairness

IAHSS shall admit candidates without regard to age, sex, race, color, national origin, disability, religion, sexual orientation, or marital status to all rights, privileges, programs, and examinations. IAHSS will not discriminate on the basis of age, sex, race, color, national origin, disability, religion, sexual orientation, or marital status in the administration of its certification and recertification policies.

Confidentiality

The Association or Commission will not disclose confidential applicant, candidate or certificant information unless authorized in writing by the individual or as required by law. The Association or Commission will only release information about an applicant or candidate to the individual unless the release of the information is authorized in writing by the individual or required by law. Personal information submitted by applicants or candidates with an application or recertification application is considered confidential. The Association and Commission restricts access to any personal information obtained as part of the application process confidential.

Use of CHPA Credential and Certification Mark

- a. The CHPA credential may be used by individuals who have earned the designation as long as certification remains valid and in good standing. Individuals may not use the CHPA credential until they have received specific written notification that they have successfully completed all requirements, including passing the exam. Certificants must comply with all recertification requirements to maintain use of the credential.
- b. Individuals whose credential has lapsed may no longer use the CHPA credential as part of their signature, social media account(s), etc.
- c. After meeting all requirements and passing the examination, individuals may use their credential in all correspondence and professional relations. The credential is typically used after the certificant's name following any academic degrees and licensure (e.g. Mary Smith, CHPA).

Distinguished CHPA

The status of Distinguished HPA is granted to healthcare security professionals who have maintained an active CHPA certification consistently for 18 or more years. All Distinguished CHPAs are able to recertify at no charge for their 7th and all subsequent recertifications. The application for recertification (including meeting all requirements) must be completed and approved by the Commission to maintain an active CHPA status. To apply for Distinguished CHPA, submit your request to info@IAHSS.org.

NCCA Accreditation of the CHPA Certification Program

NCCA was created in 1987 by the Institute for Credentialing Excellence (I.C.E.) to ensure the health, welfare, and safety of the public through the accreditation of certification and credentialing programs that assess professional competence. Certification and credentialing programs that receive NCCA Accreditation demonstrate compliance with the NCCA's Standards for the Accreditation of Certification Programs.



NCCA accreditation provides impartial, third-party validation that the CHPA program meets or exceeds recognized national credentialing industry standards for development, implementation, and maintenance. The CHPA Program underwent NCCA's extensive review process to demonstrate continued compliance with NCCA Standards for the Accreditation of Certification Programs and was awarded full accreditation.