



MEMBERSHIP GUIDE

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CONTENTS

BEFORE YOU APPLY	3
UNDERSTANDING CEPNZ MEMBERSHIP	3
HOW TO JOIN?.....	6
PROFESSIONAL MEMBERSHIP APPLICATIONS.....	7
PATHWAY 1: ACCREDITED PROGRAMME PATHWAY	9
PATHWAY 2: INTERNATIONAL ACCREDITATION PATHWAY	12
PATHWAY 3: ALTERNATE PATHWAY	14
REGISTRATION AND ANNUAL PRACTICING CERTIFICATES	19
ASSOCIATE MEMBERSHIP APPLICATIONS.....	20
AFFILIATE MEMBERSHIP APPLICATIONS	22
STUDENT MEMBERSHIP APPLICATIONS.....	24
MAINTAINING YOUR MEMBERSHIP	26
ASSOCIATE, AFFILIATE, AND STUDENT MEMBERS	26
PROFESSIONAL MEMBERS	26
LEAVE OF ABSENCE	27
APPLYING FOR A LEAVE OF ABSENCE	27
DURING YOUR LEAVE OF ABSENCE	27
EXTENDING LEAVE OF ABSENCE	27
RETURN TO PRACTICE	27
ENDING YOUR MEMBERSHIP	29
RENEWING A LAPSED MEMBERSHIP	30
ASSOCIATE, AFFILIATE, AND STUDENT MEMBERS	30
PROFESSIONAL MEMBERS	30
FREQUENTLY ASKED QUESTIONS.....	31
GENERAL APPLICATION QUESTIONS	31
UNDERSTANDING CEPNZ AND CPRB.....	31
INTERNATIONAL APPLICANTS.....	31
MEMBERSHIP MANAGEMENT	32
GLOSSARY OF KEY TERMS / DEFINITIONS.....	33
APPLICATION DOCUMENTS	35
CEPNZ PROFESSIONAL PORTFOLIO.....	35
COMPETENCY EVIDENCE DOCUMENT	47

BEFORE YOU APPLY

UNDERSTANDING CEPNZ MEMBERSHIP

Clinical Exercise Physiology New Zealand (CEPNZ) is the self-regulating professional organisation for clinical exercise physiologists in New Zealand.

CEPNZ's role is to advocate for and promote clinical exercise physiology and develop and publish the scope of practice, professional and ethical standards and disciplinary procedures for the Clinical Exercise Physiology profession in New Zealand in alignment with the principles of the Health Practitioners Competency Assurance Act (2003).

Our membership framework ensures that professionals meet the highest standards of practice, knowledge, and ethical conduct, while also creating a community for students, researchers, and industry partners who are vital to the profession's growth.

MEMBERSHIP CATEGORIES

Professional Member

For qualified Clinical Exercise Physiologists providing clinical services to the public.

Associate Member

For academics, researchers, and others contributing to the CEP field in a non-clinical role.

Affiliate Member

For industry partners, allied health professionals, and organisations who support the CEP profession.

Student Member

For individuals currently enrolled in a recognised clinical exercise physiology programme.

MEMBERSHIP BENEFITS

Joining CEPNZ provides you with a wide range of benefits designed to support your career, enhance your knowledge, and connect you with the professional community. By joining, you are investing in your professional future and contributing to the strength and recognition of clinical exercise physiology in New Zealand.

Benefit	Professional	Associate	Affiliate	Student
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Society Contribution

Voting Rights on Society Matters	✓	✓	x	x
Eligible serve on the Committee	✓	✓	x	x
Eligible to serve on CEPNZ sub-committees	✓	✓	✓	✓

Professional Development

Eligible for registration through CPRB	✓	x	x	x
Access to Member-Only Resources	✓	✓	✓	✓
Discounted Continuing Professional Development and Events	✓	✓	✓	✓
Mentorship	✓	✓	x	x

Networking and Visibility

Networking Opportunities	✓	✓	✓	✓
Representation and National Advocacy	✓	✓	✓	✓
Social media access	✓	✓	✓	✓
Job Advertisement	✓	✓	✓	✓
AIA Vitality Fitness Assessment Provider	✓	x	x	x

MEMBERSHIP FEES

	Professional	Associate	Affiliate	Student
Annual Membership Fee	\$120	\$120	\$100	\$0

Fees are due annually on the renewal date of your membership.

Additional application fees are required for Professional, Associate, and Affiliate membership applications.

HOW TO JOIN?

All membership applications start with submission of the CEPNZ Membership application form (<https://www.cepnz.org.nz/apply>).

Depending on the membership category that is applied for, applicants should then provide the required documents as described in the sections below. To reduce the need for re-assessments or additional information, it is highly recommended to take your time to complete the application carefully and collect all the required evidence before submitting.

CEPNZ requires that all official application documents (i.e., academic transcripts, registration certificates, proof of identification) be translated by an accredited translator into English. All costs of translation are the responsibility of the applicant. For translated documents you must supply the original document, and the translated document. You may self-translate other documents but must still supply the original document with the self-translated version.

As per requirements of the Incorporated Societies Act (2022), every applicant for membership must consent in writing to becoming a Member. Consent is implied with acceptance of an offer of Membership and/or payment of any membership fees.

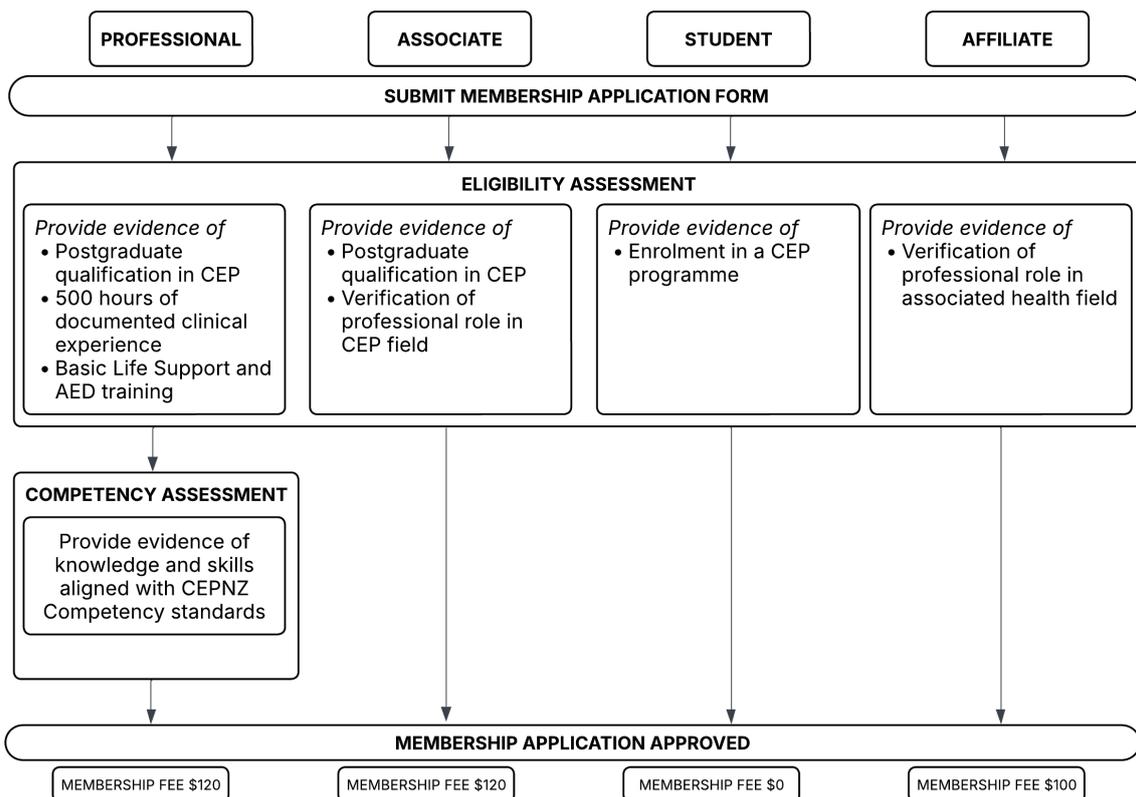
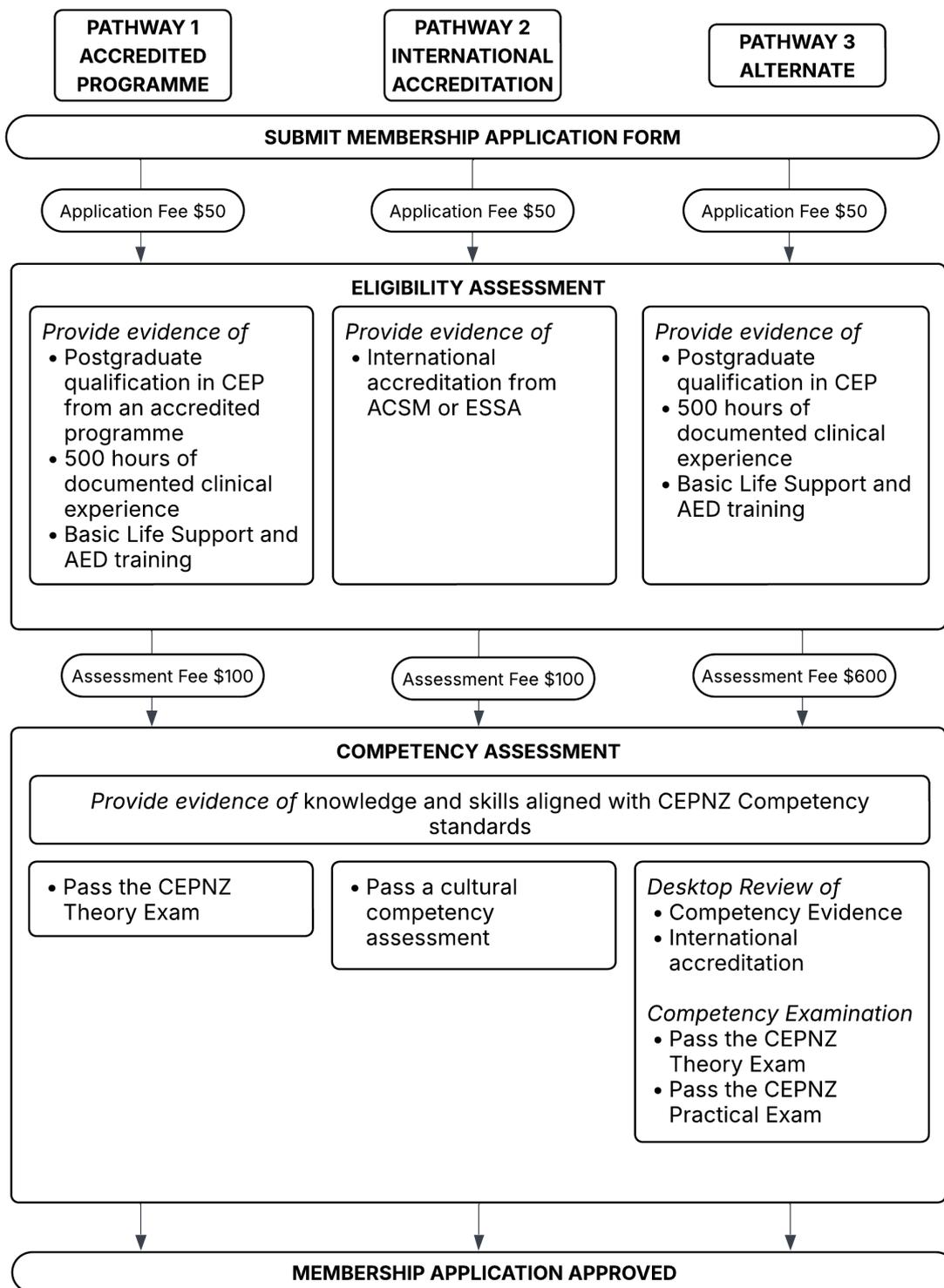


Figure 1: Application process summary

PROFESSIONAL MEMBERSHIP APPLICATIONS

This membership is for qualified Clinical Exercise Physiologists who provide or intend to provide clinical services to the public. The assessment for this category is rigorous to uphold the highest standards of professional practice in New Zealand.

To accommodate different applicant backgrounds, we have three distinct application pathways.



Which Pathway is Right for Me?

If you are...

A recent graduate (within the last 2 years) from an ESSA or CAAHEP accredited academic programme.

Currently holding a full, current registration as an ACSM CEP or an ESSA AEP.

A graduate from an accredited programme more than 2 years ago, a graduate from a non-accredited programme, or registered with an international body other than ACSM or ESSA.

Then you should apply via...

[Pathway 1: Accredited Programme Pathway](#)

[Pathway 2: International Accreditation Pathway](#)

[Pathway 3: Alternate Pathway](#)

Fees

Application fees apply to Professional Membership applications. If additional information is requested during an assessment, a reassessment fee may be due. To reduce the time to process your application, please ensure that all required information is provided upon application.

Fees are due:

- *When you submit your application:* You will be invoiced to pay the Application Fee. This fee covers the administrative costs of assessing eligibility for the membership category and pathway.
- *Prior to Competency Assessment:* You will be invoiced to pay the Competency Assessment fee to cover the costs of hosting and marking your assessment.
- *Upon approval of your membership:* Your annual membership fee will be invoiced from the date of your membership approval. Your annual fee will then be charged on this annual renewal date. You will not be considered an active member until this fee is paid.
- *Annually on the renewal date of your membership.*

PATHWAY 1: ACCREDITED PROGRAMME PATHWAY

This is a streamlined pathway for recent graduates (within the last 24 months) from an academic training programme externally accredited by ESSA (Exercise & Sports Science Australia) or CAAHEP (Commission on Accreditation of Allied Health Education Programs). These external accreditations ensure that the CEP programme meets the high standards of the profession.

Your application will involve a straightforward **Eligibility Assessment** to confirm your qualifications, followed by a **Competency Assessment** to confirm your knowledge and skills aligned with the [CEPNZ Registered Clinical Exercise Physiologist Competency Standards](#).

ELIGIBILITY ASSESSMENT

To be eligible for Professional Membership via the Accredited Programme Pathway, you must meet the following criteria across three areas: academic qualifications, clinical experience, and training in basic life support.

ACADEMIC QUALIFICATIONS

You must hold tertiary qualifications equivalent to **at least four years of full-time study with a specific major in clinical exercise physiology**.

Your academic programme must include extensive training in the assessment, prescription, and delivery of therapeutic exercise to a broad range of clinical populations and be externally accredited by ESSA (Exercise & Sports Science Australia) or CAAHEP (Commission on Accreditation of Allied Health Education Programs).

You can check if your programme has external accreditation by checking the links below

CAAHEP - <https://www.caahep.org/students/find-an-accredited-program>

ESSA - <https://www.essa.org.au/Web/Accreditation/Becoming-accredited/Courses-with-full-or-provisional-accreditation.aspx>

Required Evidence: Official Academic Transcript(s) (For all relevant tertiary study)
Unofficial copies of transcripts, graduation certificated and/or testamurs cannot be accepted. The transcript must state “completed”, “conferred”, or “awarded”.

CLINICAL EXPERIENCE

You must have accumulated and provide evidence of at least 500 hours of supervised clinical training.

Supervised work experience is usually completed throughout your degree. The purpose is to allow you to develop and demonstrate competence in applying your professional knowledge and skills in a real-world setting. We will consider experience completed after completion of tertiary study, so long as it aligns with the practicum requirements outlined below.

The minimum practicum requirements to meet the eligibility requirements are:

Hours

- A minimum of 500 hours undertaken in a variety of activities to attain competency in exercise assessment, prescription, and delivery in clinical populations.

- Experience should cover a broad range of diagnoses, including but not limited to: cardiac, metabolic, pulmonary, musculoskeletal, neurological, chronic pain, cancer, psychological, and renal conditions.
- Hours do not need to be evenly split across different areas of practice or clinical populations but should meet clinical competency requirements.
- All activities must involve active engagement, not observation.

Supervision

- All practicum hours must be supervised by a qualified/experienced clinical exercise physiologist (or equivalent).

Required Evidence: **documented clinical experience** (e.g., a logbook, a signed letter from the placement provider, any other document that meets the requirements below)

CEPNZ highly recommends that applicants record their clinical experience in the CEPNZ Professional Portfolio.

The evidence supplied should include the following information:

- Date range and duration of time spent at the placement site
- Description of the practicum/professional practice site
- Description of your role and responsibilities
- Breakdown of the time working with each clinical population
- Examples of Exercise Assessment and Prescription and Delivery completed
- Description of the client outcomes achieved
- A signature from the supervisor along with details of their: profession, qualifications and experience in exercise delivery.

BASIC LIFE SUPPORT

You must hold a current certificate in Basic Life Support (BLS) and Automated External Defibrillator (AED) training from a recognised provider.

Required Evidence: **A current certificate in Basic Life Support and Automated External Defibrillator training from a recognised provider.**

When submitting your application, you will need to provide evidence to support your claim for Professional Membership aligned with the eligibility criteria.

**PATHWAY 1: ACCREDITED PROGRAMME
ELIGIBILITY ASSESSMENT EVIDENCE CHECKLIST**

- Official Academic Transcript(s) from an accredited programme**
- Documented clinical experience**
- Certificate in Basic Life Support and AED training**

COMPETENCY ASSESSMENT

Applicants must demonstrate their competency to practice safely and effectively in the New Zealand context.

All applicants are required to show they have developed the necessary theoretical knowledge, skills, and experience as detailed in the [*CEPNZ Registered Clinical Exercise Physiologist Competency Standards*](#).

You will be asked to achieve a passing grade in the **CEPNZ Theory Examination**. This exam consists of multiple-choice questions focused on foundational exercise physiology theory and open-ended short answer questions based on typical clinical practice scenarios.

PATHWAY 1: ACCREDITED PROGRAMME COMPETENCY ASSESSMENT CHECKLIST

- Pass the CEPNZ Theory Examination**

PATHWAY 2: INTERNATIONAL ACCREDITATION PATHWAY

This pathway is for applicants who hold a current, full registration as an ACSM Certified Clinical Exercise Physiologist (CEP) or an ESSA Accredited Exercise Physiologist (AEP). This pathway is based on a mutual recognition of the high professional standards set by these international bodies.

Your application will involve a straightforward **Eligibility Assessment and Competency Assessment** to confirm your international accreditation and your readiness to practice in New Zealand.

ELIGIBILITY ASSESSMENT

To be eligible for Professional Membership via the International Accreditation Pathway, you must meet the following criteria.

INTERNATIONAL ACCREDITATION/REGISTRATION

You must hold a current, full, and unrestricted registration with one of the following recognised international bodies:

- **American College of Sports Medicine – Certified Clinical Exercise Physiologist (ACSM-CEP)**
- **Exercise & Sports Science Australia – Accredited Exercise Physiologist (ESSA-AEP)**

Required Evidence: A copy of your [current, official accreditation/registration certificate from ACSM or ESSA](#).

BASIC LIFE SUPPORT

You must hold a current certificate in Basic Life Support (BLS) and Automated External Defibrillator (AED) training from a recognised provider.

Required Evidence: A [current certificate in Basic Life Support and Automated External Defibrillator training from a recognised provider](#).

When submitting your application, you will need to provide evidence to support your claim for Professional Membership aligned with the eligibility criteria for this pathway.

PATHWAY 2: INTERNATIONAL ACCREDITATION ELIGIBILITY ASSESSMENT EVIDENCE CHECKLIST

- Accreditation/registration certificate from ACSM or ESSA.**
- Certificate in Basic Life Support and AED training**

COMPETENCY ASSESSMENT

Applicants must demonstrate their competency to practice safely and effectively in the New Zealand context.

While a formal examination is not required for this pathway, all applicants must still demonstrate their understanding of professional practice in the New Zealand context, as detailed in the [CEPNZ Registered Clinical Exercise Physiologist Competency Standards](#).

You will be required to complete an oral interview on New Zealand specific cultural competency and responsiveness, and knowledge of the healthcare system. This helps us ensure a smooth and successful transition for internationally qualified professionals.

Required Evidence: **An oral interview** on NZ specific cultural competencies and health care knowledge as described in the CEPNZ Registered Clinical Exercise Physiologist Competency Standards.

PATHWAY 2: INTERNATIONAL ACCREDITATION COMPETENCY ASSESSMENT CHECKLIST

- Successful completion of cultural competency course/assessment**

PATHWAY 3: ALTERNATE PATHWAY

This pathway is for applicants who do not meet the criteria for Pathway 1 or 2. This includes those who:

- Completed their academic training from a non-accredited academic programme.
- Graduated more than two years ago from an ESSA or CAAHEP accredited academic programme.
- Are registered with a professional organisation other than ACSM or ESSA.

ELIGIBILITY ASSESSMENT

To be eligible for Professional Membership via Pathway 3, you must meet the following criteria across three key areas: academic qualifications, clinical experience, and training in basic life support.

The first part of the application is not a competency-based assessment. The purpose is to make sure the applicant meets the basic requirements to be eligible to complete the Competency Assessment. The Eligibility Assessment does not guarantee you will pass the Competency Assessment.

ACADEMIC QUALIFICATIONS

You must hold tertiary qualifications equivalent to **at least four years of full-time study with a major in clinical exercise physiology.**

CEPNZ prefers a postgraduate qualification majoring in clinical exercise physiology. For example, a bachelor's degree in science/exercise science PLUS either a one-year postgraduate diploma or a two-year master's degree majoring in clinical exercise physiology. Other programme structures may be eligible, such as a named 4-year Bachelor of Clinical Exercise Physiology (BCEP) or a PhD with a specific clinical focus. Degrees that cover clinical exercise physiology competencies but are not named as a clinical exercise physiology degree will be considered as long as the applicant to provide evidence that the required competencies are met.

Regardless of the degree structure, your academic programme must include extensive training in the assessment, prescription, and delivery of therapeutic exercise to a broad range of clinical populations as detailed in the [CEPNZ Registered Clinical Exercise Physiologist Competency Standards](#).

Required Evidence: Official Academic Transcript(s) (For all relevant tertiary study)

Unofficial copies of transcripts, graduation certificated and/or testamurs cannot be accepted. The transcript must state “completed”, “conferred”, or “awarded”.

CLINICAL EXPERIENCE

You must have accumulated and provide evidence of at least **500 hours of supervised clinical training**.

Supervised work experience is usually completed throughout your degree. The purpose is to allow you to develop and demonstrate competence in applying your professional knowledge and skills in a real-world setting. We will consider experience completed after completion of tertiary study, so long as it aligns with the practicum requirements outlined below.

The minimum practicum requirements to meet the eligibility requirements are:

Hours

- A minimum of 500 hours undertaken in a variety of activities to attain competency in exercise assessment, prescription, and delivery in clinical populations.
- Experience should cover a broad range of diagnoses, including but not limited to: cardiac, metabolic, pulmonary, musculoskeletal, neurological, chronic pain, cancer, psychological, and renal conditions.
- Hours do not need to be evenly split across different areas of practice or clinical populations but should meet clinical competency requirements.
- All activities must involve active engagement, not observation.

Supervision

- All practicum hours must be supervised by a qualified/experienced clinical exercise physiologist (or equivalent).

We recommend you use the CEPNZ logbook and Record of Practicum templates (see Appendix) to record your supervised clinical experience.

Required Evidence: **documented clinical experience** (e.g., a logbook, a signed letter from the placement provider, any other document that meets the requirements below)

CEPNZ highly recommends that applicants record their clinical experience in the CEPNZ Professional Portfolio.

The evidence supplied should include the following information:

- Date range and duration of time spent at the placement site
- Description of the practicum/professional practice site
- Description of your role and responsibilities
- Breakdown of the time working with each clinical population
- Examples of Exercise Assessment and Prescription and Delivery completed
- Description of the client outcomes achieved
- A signature from the supervisor along with details of their: profession, qualifications and experience in exercise prescription and delivery.

Optional Evidence: **documented recent practice**

BASIC LIFE SUPPORT

You must hold a current certificate in Basic Life Support (BLS) and Automated External Defibrillator (AED) training from a recognised provider.

Required Evidence: A current certificate in Basic Life Support and Automated External Defibrillator training from a recognised provider.

When submitting your application, you will need to provide evidence to support your claim for Professional Membership aligned with the eligibility criteria for the Alternate Pathway.

PATHWAY 3: ALTERNATE ELIGIBILITY ASSESSMENT EVIDENCE CHECKLIST

- Official Academic Transcript(s)**
- Documented clinical experience**
- (optional) documented recent practice**
- Certificate in Basic Life Support and AED training**

COMPETENCY ASSESSMENT

Applicants must demonstrate their competency to practice safely and effectively in the New Zealand context.

All applicants are required to provide evidence of how they have developed the necessary theoretical knowledge, skills, and experience as detailed in the [CEPNZ Registered Clinical Exercise Physiologist Competency Standards](#).

The Competency Assessment for this pathway occurs over two stages: a **Desktop Review**, where you will provide evidence from your tertiary studies, work experience, continued learning, or existing professional registration/accreditation, and a **Competency Examination**, where you will be asked to complete a theoretical exam, practical exam, oral interview, or combination of the above.

STAGE 1 – DESKTOP REVIEW

Required Evidence: **CEPNZ Competency Evidence document** that summarises your academic and practical experience demonstrating how you meet the Competency Standards.

The

Competency Evidence document should provide evidence for all standards.

Academic and practical experience completed during tertiary study are sufficient evidence of clinical competency when the membership application is within 2 years of study completion.

If applying for Professional membership more than 2 years after study completion, then applicants must demonstrate ongoing professional development.

For international applicants with registration or accreditation with an organisation other than ACSM or ESSA, registration/accreditation can be used as evidence that you meet their competency standards.

Recognised international CEP organisations

- BASES – Certified Exercise Practitioner (CEP)
- CSEP – Certified Exercise Physiologist (CSEP-CEP)
- Biokinetics Association South Africa – Certified Biokineticist

**PATHWAY 3: ALTERNATE
DESKTOP REVIEW EVIDENCE CHECKLIST**

- Submission of CEPNZ Competency Evidence document**

STAGE 2 – COMPETENCY EXAMINATION

The Competency Examination for this pathway is a two-step process:

Theory Examination

You will be required to achieve a passing grade on the CEPNZ Theory Examination. This comprehensive exam includes multiple-choice questions, short-answer questions, and case study scenarios designed to assess your clinical knowledge and reasoning.

Practical Examination

Following successful completion of the Theory Examination, you must pass a skills-based, in-person Practical Examination. This exam assesses your practical skills and is hosted one to two times per year.

PATHWAY 3: ALTERNATE COMPETENCY EXAMINATION CHECKLIST

- Pass the CEPNZ Theory Examination**
- Pass the Practical Examination**

REGISTRATION AND ANNUAL PRACTICING CERTIFICATES

Professional membership with CEPNZ is **not** equivalent to registration. Registration is conferred by, and Annual Practising Certificates (APCs) issued by, the Clinical Physiologist Registration Board (CPRB), an independent body representing clinical physiologists (<http://www.cprb.org.nz/>). A clinical exercise physiologist seeking registration with the CPRB must be a Professional member of CEPNZ and be approved by the CEPNZ Board for registration with the CPRB.

Registration with the CPRB is the next step after your Professional membership is approved. You must hold an APC to maintain your Professional membership.

The registration process with the CPRB is conducted with input from CEPNZ. When registration is awarded by the CPRB, the member's name is listed on the public Register of Clinical Physiologists. Their name will be listed on the Register indefinitely, and may only be removed upon receipt of formal notification of resignation. Only those of the Register can be issued APCs.

Through the APC process, professionals show their Continuing Professional Development (CPD) as adequate to maintain their level of competency to practice. The requirements for the issue of an APC include, but may not be limited to, providing evidence of current membership of the professional society and completion and submission of the APC application form signed by an appropriate clinical supervisor. When requested, registrants must produce: evidence of appropriate CPD, evidence of successful completion of any competency assessments, and evidence of professional society certification.

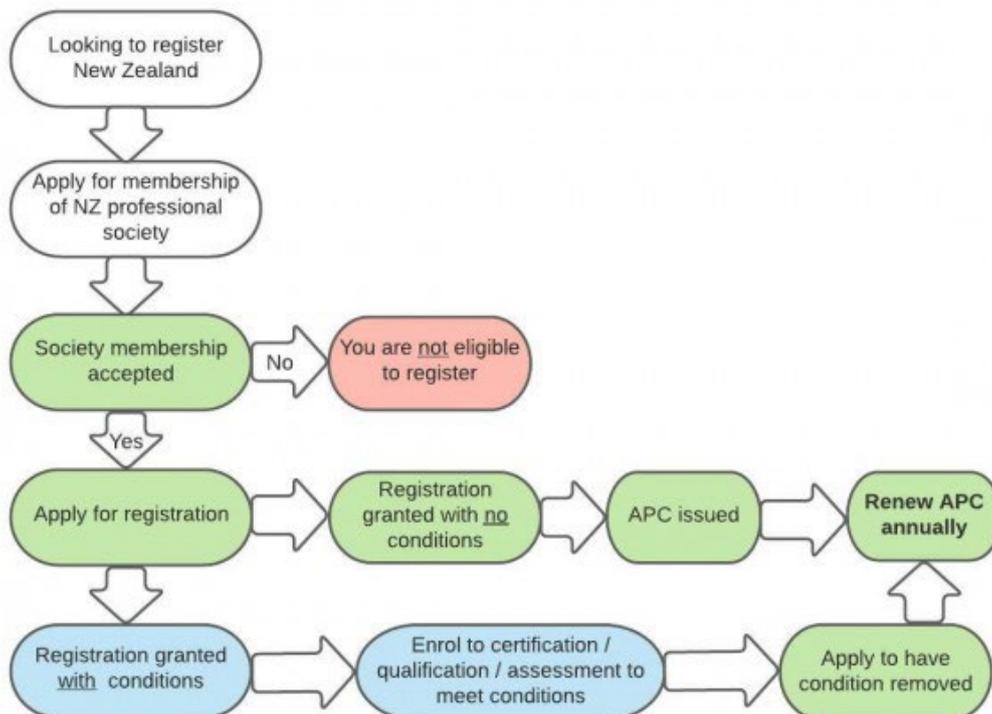


Figure 2: CPRB registration flowchart

ASSOCIATE MEMBERSHIP APPLICATIONS

This membership is for individuals who contribute to the clinical exercise physiology field in a non-clinical capacity. This includes academics, researchers, policy advisors, and those in management roles who do not provide direct clinical services to the public.

This pathway is designed to verify your qualifications and professional role in supporting and advancing the CEP profession in New Zealand.

ELIGIBILITY ASSESSMENT

To be eligible for Associate Membership, you must meet the following criteria:

ACADEMIC QUALIFICATIONS

You must hold a postgraduate qualification (e.g., Master's degree, PhD) in a field relevant to exercise science, clinical exercise physiology, or a related health science discipline.

Unofficial copies of transcripts, graduation certificated and/or testamurs cannot be accepted. The transcript must state “completed”, “conferred”, or “awarded”.

Required Evidence: **Official Academic Transcript(s)** (For all relevant postgraduate study)

ROLE

You must be currently employed or actively engaged in a role that contributes to the field of clinical exercise physiology, such as:

- Tertiary education and academia
- Scientific research
- Health policy and advocacy
- Management of a CEP service or related health service

Required Evidence: A combination of **documents that verify your professional role.**

This may include:

- A current Curriculum Vitae (CV)/ academic CV outlining your employment history, research publications, and professional responsibilities.
- A letter from your employer or a position description to confirm the nature of your role.
- A brief personal statement (approx. 200-300 words) describing how your work contributes to the field of clinical exercise physiology in New Zealand.

When submitting your application, you will need to provide evidence to support your claim for Associate Membership aligned with the eligibility criteria.

Documents must be in English. CEPNZ requires that all official application documents (i.e., academic transcripts, registration certificates, proof of identification) be translated by an accredited translator. All

costs of translation are the responsibility of the applicant. For translated documents you must supply the original document, and the translated document. You may self-translate other documents but must still supply the original document with the self-translated version.

ASSOCIATE MEMBERSHIP ELIGIBILITY ASSESSMENT EVIDENCE CHECKLIST

- Official Academic Transcript(s)** for your postgraduate qualification(s)
- Verification of professional role related to CEP**

Fees are due:

- *When you submit your application:* You will be invoiced to pay the Eligibility Assessment Fee. This fee covers the administrative costs of processing your application.
- *Upon approval of your membership:* Your annual membership fee will be invoiced from the date of your membership approval. Your annual fee will then be charged on this annual renewal date. You will not be considered an active member until this fee is paid.

AFFILIATE MEMBERSHIP APPLICATIONS

This membership is designed for allied health professionals, industry partners, organisations, and individuals who do not practice as Clinical Exercise Physiologists but have a strong interest in supporting and collaborating with the profession.

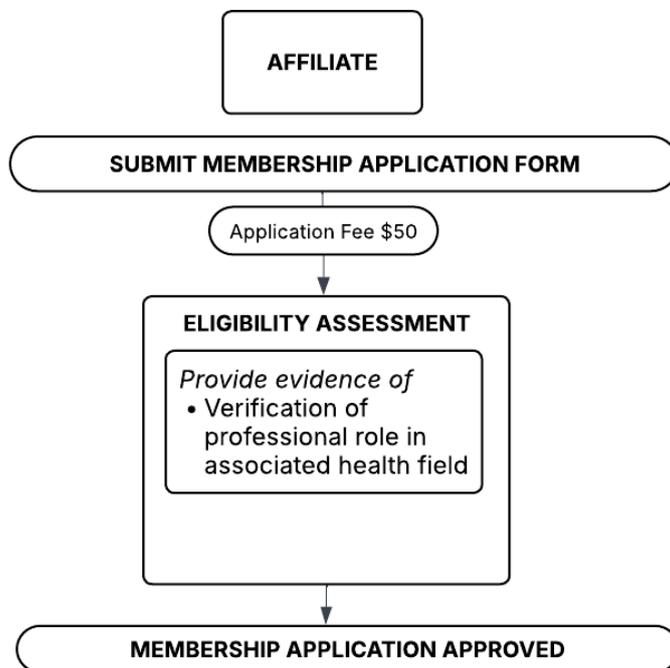


Figure 3: Affiliate Membership Application Summary

This application is a simple verification of your employment/involvement in an associated health or exercise field.

ELIGIBILITY ASSESSMENT

To be eligible for Affiliate Membership, you must meet the following criteria:

ROLE

You must be currently employed or actively engaged in a role that contributes to an associate health or exercise field.

Examples of eligible roles include, but are not limited to:

- Registered Allied Health Professionals (e.g., Physiotherapists, Dietitians, Medical Practitioners).
- Representatives from industry partners (e.g., equipment suppliers, software providers).
- Health service managers or administrators.
- Professionals in related policy, research, or education fields.

Required Evidence: [verifiable evidence of your professional role](#).

This may include:

For Registered Health Professionals: A copy of your current Annual Practising Certificate (APC) or proof of registration with your professional body.

For Other Professionals: One of the following:

- A letter from your employer on company letterhead, confirming your role and the nature of the organisation.
- An official, detailed position description.
- A link to a professional profile (e.g., LinkedIn, official staff webpage) that clearly shows your current role, employer, and the connection to the health/exercise field.

When submitting your application, you will need to provide evidence to support your claim for Associate Membership aligned with the eligibility criteria.

Documents must be in English. CEPNZ requires that all official application documents (i.e., academic transcripts, registration certificates, proof of identification) be translated by an accredited translator. All costs of translation are the responsibility of the applicant. For translated documents you must supply the original document, and the translated document. You may self-translate other documents but must still supply the original document with the self-translated version.

AFFILIATE MEMBERSHIP ELIGIBILITY ASSESSMENT EVIDENCE CHECKLIST

- Verification of professional role in an associated field**

Fees are due:

- *When you submit your application:* You will be invoiced to pay the Eligibility Assessment Fee. This fee covers the administrative costs of processing your application.
- *Upon approval of your membership:* Your annual membership fee will be invoiced from the date of your membership approval. Your annual fee will then be charged on this annual renewal date. You will not be considered an active member until this fee is paid.

STUDENT MEMBERSHIP APPLICATIONS

This membership is for individuals who are actively training to become Clinical Exercise Physiologists. It is designed to support you on your educational journey by connecting you with the professional community, resources, and networks you need to succeed.

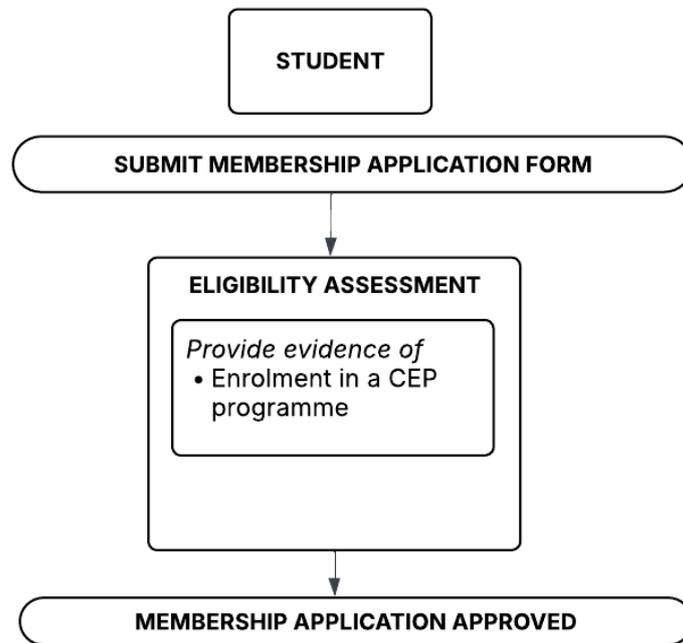


Figure 4: Student Membership Application Summary

This application is a simple verification of your current enrolment status.

ELIGIBILITY ASSESSMENT

To be eligible for Student Membership, you must meet the following criteria:

CURRENT ENROLMENT

You must be currently enrolled, either full-time or part-time, in a tertiary programme in New Zealand that leads to a qualification in clinical exercise physiology.

Recognised Programmes: This typically includes postgraduate diplomas or master's degrees in clinical exercise physiology delivered by a tertiary education institution approved by the Committee on University Academic Programmes (CUAP) or the New Zealand Qualifications Authority (NZQA).

Required Evidence: You must provide **one** of the following documents:

- **A Confirmation of Enrolment letter** from your tertiary institution for the current academic year.
- **A copy of your most recent student invoice** that confirms your enrolment for the current semester.

Note: A student ID card is generally not sufficient as it does not confirm current enrolment.

ELIGIBILITY ASSESSMENT EVIDENCE CHECKLIST

- A Confirmation of Enrolment letter OR**
- A copy of your most recent student invoice**

Student memberships are fees-free to encourage participation in the professional organisation for early stages.

MAINTAINING YOUR MEMBERSHIP

Membership is an ongoing commitment to the profession and your own professional development. This section outlines the key requirements for maintaining your membership in good standing.

ASSOCIATE, AFFILIATE, AND STUDENT MEMBERS

Maintaining your membership is a straightforward process designed to keep you connected to the CEPNZ community.

Your key responsibilities are:

- **Annual Renewal:** Ensure you renew your membership and pay your annual fees by the due date each year to maintain access to all member benefits.
- **Keep Details Current:** Update your contact information with CEPNZ whenever it changes so you don't miss important communications, event invitations, or renewal notices.
- **Uphold the Code of Conduct:** All members, regardless of category, are expected to act professionally and abide by the [CEPNZ Code of Ethics](#).

PROFESSIONAL MEMBERS

Maintaining Professional Membership involves a higher level of professional responsibility to ensure public safety and uphold the standards of the profession.

In addition to the requirements above (annual renewal, current details, and upholding the Code of Ethics), you must also meet the following ongoing requirements:

- **Hold an Annual Practising Certificate (APC)**
Professional Membership with CEPNZ is the primary pathway to obtaining and maintaining an Annual Practising Certificate (APC) with the Clinical Physiologists Registration Board (CPRB). An APC is a requirement to hold Professional membership with CEPNZ. You must renew your APC directly with the CPRB each year.
- **Meet Annual Continuing Professional Development (CPD) Requirements**
To ensure you remain current with the latest evidence and practices, you are required to complete Continuing Professional Development (CPD) activities in line with requirement from the CPRB. Your CPD activities should be relevant to your area of practice and aim to enhance your clinical competency. You are responsible for logging your CPD and may be required to provide evidence during a random audit.
- **Maintain Recency of Practice**
To ensure your clinical skills and knowledge remain current, you must actively practice in the field. The minimum requirement is to complete at least 1000 hours of clinical practice over each 5-year period. If you anticipate taking a break from practice, please refer to the [Leave of Absence Policy](#).
- **Adherence to Professional Standards**
As a representative of the profession, you must continuously practice in accordance with the [CEPNZ Registered Clinical Exercise Physiologist Competency Standards](#) and the [CEPNZ Code of Ethics](#).

LEAVE OF ABSENCE

This policy outlines the process for Professional Members who intend to take a temporary leave from clinical practice (e.g., parental leave, study, research, travel). A leave of absence is designed for members who are not practicing clinically for a set period but intend to return to the profession.

APPLYING FOR A LEAVE OF ABSENCE

If you wish to take a leave of absence, you must notify CEPNZ in writing of your intention. Your application will be reviewed by the CEPNZ Board, and you will be provided with an official approval letter from CEPNZ.

It is your responsibility to forward your CEPNZ approval letter to the Clinical Physiologists Registration Board (CPRB) to place your registration on hold. This allows the CPRB to update your status on the public register.

Once approved, your standard leave of absence is valid for up to two years.

DURING YOUR LEAVE OF ABSENCE

During an approved leave of absence, your membership category will be changed from Professional Member to Associate Member. This allows you to maintain your connection to CEPNZ and access member benefits (e.g., discounted events, newsletters) without the continuing professional development (CPD) and recency of practice requirements of a Professional Membership.

EXTENDING LEAVE OF ABSENCE

You must apply to CEPNZ in writing to extend your LOA beyond the initial two-year period. Extension applications are considered on an individual basis. Approved extensions will include a requirement to undertake specific CPD and agree to a plan for supervision/mentoring upon your return to work.

Leave of absence extensions are granted on a one-year basis, up to a maximum of three additional years (totalling a maximum 5-year leave period).

RETURN TO PRACTICE

Prior to your approved LOA end date, or if you wish to return to practice early, you are required to email CEPNZ to inform them of your intention.

Within 2 years

If you are returning to clinical practice within your approved two-year LOA period you must write to CEPNZ informing them of your return, clearly stating your date of return and your place of work. You must also contact the CPRB directly to apply for the re-instatement of your APC. For a leave of absence period of two years or less, no restrictions or conditions will be applied to your registration.

After an extended LOA of up to 5 years

Before your LOA extension expires, or if you return to work earlier you must inform CEPNZ in writing of your return to work start date and place of work. You will then begin your agreed-upon return-to-practice plan. Typically, Professional Members who return to work after more than 2 years will be

required to complete a period of mentorship/supervision and this will be added as a condition on your APC.

After 5 or more years

If you have not been working in the industry for five years or more, your leave of absence will expire, and you will no longer be on the register. If you intend to return to clinical practice, you must re-apply for Professional Membership with CEPNZ. You must complete a new membership application form and pay the Eligibility Assessment Fee. You are only required to re-submit evidence of certification in Basic Life Support and AED training. You will be required to complete a Competency Examination based on the evidence submitted as part of your Competency Assessment Desktop Review. A plan for supervision/mentoring upon your return to work may be required.

No Longer Planning to Practice?

If you decide to permanently leave the clinical exercise physiology profession, please inform both CEPNZ and the CPRB in writing so you can be removed from the respective registers.

You are welcome and encouraged to remain a non-practising (Associate or Affiliate) member of CEPNZ to stay connected with the professional community.

ENDING YOUR MEMBERSHIP

While we hope you remain a member for your entire career, there are a few circumstances under which a membership with CEPNZ may come to an end.

1. You choose to resign - You can end your membership at any time by sending a signed written notice to the CEPNZ Secretary.
2. Your membership fees are not paid - If annual fees are not paid within 90 working days of the due date, the CEPNZ Committee may vote to end your membership. We will always send reminders before this happens.
3. You bring the profession into disrepute - If the CEPNZ Committee determines that a member's actions have seriously harmed the reputation of the Society or the profession, they may vote to terminate the membership.
4. As the result of a disciplinary process - Membership may be terminated following a formal dispute resolution or disciplinary process, as outlined in our complaints policy.

Membership also automatically ends in the event of a member's death.

RENEWING A LAPSED MEMBERSHIP

This section outlines the process for individuals whose CEPNZ membership has lapsed and who wish to rejoin.

ASSOCIATE, AFFILIATE, AND STUDENT MEMBERS

If your membership has lapsed, the process for renewal is the same as applying for a new membership. Please refer to the relevant section of this guide and complete a new application via the CEPNZ website. You will be required to pay the standard application and membership fees.

PROFESSIONAL MEMBERS

The renewal process for a lapsed Professional Membership depends on the length of time your membership has been lapsed.

If your membership has lapsed for less than 2 years

You must complete a new membership application form and pay the Eligibility Assessment Fee. You are required to re-submit evidence of certification in Basic Life Support and AED training but a Competency Assessment is typically not required. You will be required to pay the annual membership fee upon approval.

If your membership has lapsed for 2 to 5 years

You must complete a new membership application form and pay the Eligibility Assessment Fee. You are required to re-submit evidence of recency of practice and certification in Basic Life Support and AED training. A Competency Assessment may be waived if you can provide sufficient evidence of ongoing professional development and activities related to the field during your time away (similar to the requirements for an extended Leave of Absence). If sufficient evidence is not provided, you may be required to complete a Competency Examination. You will be required to pay the annual membership fee upon approval.

If your membership has lapsed for more than 5 years

You must complete a new membership application form and pay the Eligibility Assessment Fee. You are only required to re-submit evidence of recency of practice and certification in Basic Life Support and AED training. You will be required to complete a Competency Examination based on the evidence submitted as part of your Competency Assessment Desktop Review.

FREQUENTLY ASKED QUESTIONS

GENERAL APPLICATION QUESTIONS

Q: How long does the application process take?

A: Timelines vary by membership type. All members must be approved by the Society Committee at their monthly meeting.

- **Student, Associate, and Affiliate:** Applications are typically processed within 4-6 weeks.
- **Professional:** The process is more complex. Please allow 8-12 weeks for the full assessment process, especially if you have international qualifications. Delays can occur if your initial application is incomplete.

Q: My degree isn't specifically named 'Clinical Exercise Physiology'. Can I still apply for Professional Membership?

A: Yes, possibly. Our assessors review your full academic transcript, not just the degree title. If your coursework and practical experience align with the *CEPNZ Registered Clinical Exercise Physiologist Competency Standards*, your application will be considered. You should provide detailed unit outlines or course descriptions with your application to assist the assessors.

Q: Can I submit my 500 clinical hours from paid work I did after graduating?

A: Yes. We will consider clinical experience completed after you have finished your degree, provided it was appropriately supervised by a qualified clinical exercise physiologist (or equivalent) and meets all the same requirements as practicum completed during study. You must provide clear evidence and supervisor verification for these hours.

Q: What happens if my application for Professional Membership is declined?

A: If your application is declined after the assessment process, this is often due to gaps in academic coursework or clinical experience. We may provide advice on what areas require more evidence. You are welcome to re-apply in the future once you have addressed these gaps. A new application fee will apply.

UNDERSTANDING CEPNZ AND CPRB

Q: What is the difference between CEPNZ membership and CPRB registration?

A: CEPNZ is the professional body that sets the standards, assesses qualifications, and supports members through advocacy and professional development. CEPNZ Professional Membership is the primary pathway to prove you meet these standards.

CPRB (Clinical Physiologists Registration Board) is the regulatory authority that maintains the public register of qualified practitioners.

You must first be approved as a Professional Member of CEPNZ before you can apply to the CPRB for an APC.

INTERNATIONAL APPLICANTS

Q: I am an internationally qualified Clinical Exercise Physiologist. Where do I start?

A: Start by carefully reviewing the requirements for Professional Membership in this guide. You will need to provide translated and certified copies of your academic transcripts and detailed evidence of your

supervised clinical experience. If you hold a current registration with one of the international bodies with ESSA or ACSM then you can follow the simplified [International Accreditation Pathway](#). If you have accreditation with another international organisation (e.g., CSEP, BASA, CEP-UK) you can use your accreditation as evidence of clinical competency, but a full review is still required via the [Alternate Pathway](#).

MEMBERSHIP MANAGEMENT

Q: Can I upgrade my membership later, for example, from Student to Professional?

A: Absolutely. Once you graduate and complete your clinical hours, you can apply to change your membership category from Student to Professional. You will need to complete the full Professional Membership application at that time. Similarly, an Associate Member who wishes to practice can apply to become a Professional Member.

Q: What happens if I forget to renew my membership?

A: We send multiple renewal reminders. If you do not renew by the due date, your membership will become lapsed. This means you will lose access to member benefits. If you are a Professional Member, a lapsed CEPNZ membership will also impact your ability to hold an APC with the CPRB. Please refer to the "[Renewing a Lapsed Membership](#)" section for details on how to rejoin.

GLOSSARY OF KEY TERMS / DEFINITIONS

The following definitions are provided to ensure clarity and consistency throughout this guide.

Accredited Programme

An academic training programme that has been formally reviewed and verified by an external professional body (such as ESSA or CAAHEP) to meet rigorous standards for curriculum, clinical training, and professional preparation.

ACSM (American College of Sports Medicine)

A large sports medicine and exercise science organization based in the United States that provides professional certification, including the Certified Clinical Exercise Physiologist (CEP) - <https://acsm.org/>.

APC (Annual Practising Certificate)

An official certificate issued by the CPRB once Professional Membership is conferred by CEPNZ.

Biosketch

A written summary of an applicant's academic qualifications, clinical training, and professional experience, structured to demonstrate how they meet the *CEPNZ Competency Standards*.

CAAHEP (Commission on Accreditation of Allied Health Education Programs)

A major programmatic accreditor in the United States that accredits clinical exercise physiology and other allied health education programs - <https://www.caahep.org/>.

CEP (Clinical Exercise Physiologist)

A qualified health professional who specialises in the delivery of exercise, lifestyle, and behavioural modification programmes for the prevention and management of chronic diseases and injuries.

CEPNZ (Clinical Exercise Physiology New Zealand)

The professional body responsible for setting and maintaining professional standards for Clinical Exercise Physiologists in New Zealand.

CEPNZ Practical Examination

A skills-based, in-person assessment that evaluates an applicant's ability to perform core clinical competencies in a simulated, real-world setting.

CEPNZ Theory Examination

A comprehensive written assessment that evaluates an applicant's theoretical knowledge, clinical reasoning, and understanding of case-based scenarios.

Clinical Experience / Practicum

Supervised, hands-on professional practice with clinical populations, undertaken either as part of a tertiary degree or post-graduation, to develop and demonstrate practical skills.

Code of Ethics

The formal CEPNZ document that sets the minimum standards of professional behaviour and ethical practice expected of all CEPNZ members - <https://www.cepnz.org.nz/code-of-ethics>.

Competency Assessment

The phase of the application process where CEPNZ evaluates whether an applicant for a Professional

Membership has the required knowledge, skills, and attributes to practice safely and effectively in New Zealand. The requirements of this assessment vary depending on the application pathway.

Competency Standards

The official CEPNZ document that outlines the core competencies and standards of practice required for Professional Membership - <https://www.cepnz.org.nz/professional-standards/competency-standards>.

CPD (Continuing Professional Development)

The ongoing process of learning and development that Professional Members undertake each year to maintain and enhance their professional skills and knowledge.

CPRB (Clinical Physiologists Registration Board)

The independent regulatory authority responsible for registering Clinical Physiologists and issuing Annual Practising Certificates (APCs) in New Zealand - <https://cprb.org.nz/>.

Desktop Review

An assessment of an applicant's written evidence (e.g., transcripts, biosketch, logbooks) conducted by CEPNZ assessors to determine if the documented qualifications and experience meet the required standards.

Eligibility Assessment

The initial stage of membership applications, where CEPNZ assesses an applicant's academic qualifications, clinical experience, and other core documents against the minimum requirements for each membership category.

ESSA (Exercise & Sports Science Australia)

The professional body and accrediting authority for exercise and sports science in Australia, which provides accreditation for Accredited Exercise Physiologists (AEPs) - <https://www.essa.org.au/>.

Leave of Absence (LOA)

A formal, temporary period where a Professional Member is not practicing clinically but intends to return. During an LOA, the member holds an Associate Membership.

Recency of Practice

The requirement for Professional Members to have practiced for a minimum number of hours over a set period (e.g., 1000 hours over 5 years) to ensure their skills remain current.

Scope of Practice

The range of professional services, procedures, actions, and processes that a registered Clinical Exercise Physiologist is qualified and competent to perform. This is individually defined by their knowledge, skills and experience and within the CEPNZ Scope of Practice document - <https://www.cepnz.org.nz/scope-of-practice>.

APPLICATION DOCUMENTS

CEPNZ PROFESSIONAL PORTFOLIO

Instructions for the Applicant

1. Complete the '**Logbook of Practical Experience**' form and a '**Summary of Practical Experience**' for *each* significant practicum, placement, or period of employment you are using to demonstrate your clinical experience.
2. Provide both forms to your designated supervisor for that period.
3. Your supervisor will complete and return the signed form to you for inclusion in your application.

Instructions for the Supervisor

Thank you for supporting this applicant's journey towards Professional Membership with CEPNZ. Your verification of their practical experience is vital to our assessment process.

1. Please review the applicant's completed '**Logbook of Practical Experience**' and '**Summary of Practical Experience**' to ensure it accurately reflects the experience gained under your supervision.
 2. Complete your details and sign the declaration if you agree it is a true reflection of the applicant's experience.
 3. Return the completed form directly to the applicant. Please note that CEPNZ may contact you to verify the information provided.
-

Logbook of Practical Experience

Section 1: Applicant & Placement Details

Name of Student:			
Name of Placement Site:			
Total Hours at Placement Site:			
Date Commenced:		Date Completed:	

Section 2: Supervisor Details & Declaration

Supervisor Declaration and Signature: <i>(To be signed within one month of completing placement)</i>	
Supervisor Name:	
Supervisor Experience & Accreditation(s):	
Supervisor Contact Email:	
<i>I have read the information contained within this logbook and certify that this is a true and accurate reflection of the student's engagement at this placement site.</i>	
Signature:	
Date:	

Logbook of Practical Experience



Clinical Exercise Physiology Practicum Logbook			
Date	No. of Hours	Patient/s Description	Description of what you did/services provided (i.e. A ssessment, P rescription or D elivery)

Logbook of Practical Experience

Section 1: Applicant & Placement Details

Name of Student:	Jordan Taylor		
Name of Placement Site:	Metropolitan Exercise Rehabilitation Clinic		
Total Hours at Placement Site:	150		
Date Commenced:	10/02/2025	Date Completed:	30/05/2025

Section 2: Supervisor Details & Declaration

Supervisor Declaration and Signature: <i>(To be signed within one month of completing placement)</i>	
Supervisor Name:	Alex Morgan
Supervisor Experience & Accreditation(s):	MClinExPhys (2011), RCEP (CEPNZ 2012), 8 years experience in exercise rehabilitation
Supervisor Contact Email:	a.morgan@metropolitanrehab.com
<i>I have read the information contained within this logbook and certify that this is a true and accurate reflection of the student's engagement at this placement site.</i>	
Signature:	A.morgan
Date:	20/06/2025

Logbook of Practical Experience

Clinical Exercise Physiology Practicum Logbook			
Date	No. of Hours	Patient/s Description	Description of what you did/services provided (i.e. Assessment, Prescription or Delivery)
15/02/25	4.5hrs F2F – 3.5hr Prep – 0.75hr Admin – 0.25hr	<p>Exercise Delivery</p> <p>Patient #1 49yr old male, Heart Failure and history of Atrial Fibrillation. Treatment goals: Improve fitness and overall muscular strength.</p> <p>Patient #2 60yr old male, NSTEMI – PCI (1x DES) to LAD. Treatment goals: Improve VO2max and increase upper body strength.</p> <p>Assessment: Cardiopulmonary Exercise Test</p> <p>Patient #3 77yr old male, with type 2 diabetes and hypertension. Pre entry CPX for T2DM research training study.</p>	<p>Cardiac Rehab Exercise Session: Reviewed session plan and patients medical notes. Session goal: Progress aerobic prescription time to 30 mins and ensure resistance exercises are performed with correct technique. Took patient through exercise programme written by supervisor. Set up and monitored patient during aerobic prescription – completing 30mins of MICT divided between treadmill and x- trainer. Measured and recorded HR, BP and RPE for both modalities. Took patient through RT prescription including leg press, chest press, mid row, leg extension, leg curl, cable biceps curl, cable triceps pushdown. Completed treatment note upon finishing.</p> <p>Cardiac Rehab Exercise Session: Reviewed session plan prior to appointment and patients medical notes. Patient in week 6 of 12. Session goal: Introduce HIIT for cycle modality. Weight, blood pressure and heart rate obtained prior to exercise. Took patient though first HIIT session on the cycle, monitored and recorded HR, BP and RPE at peak. Well tolerated. PNF stretches and foam rolling completed on hamstrings muscles. Instructed patient through the following resistance exercises: chest press, shoulder press, bicep curls cable, triceps pull down cable (2 x 12reps). Completed treatment note upon finishing.</p> <p>Assisted MSc student conducting a VO2max test on cycle ergometer. The testing was conducted to determine peak aerobic capacity. The data will also be used to provide heart rate zones for the 12-week exercise training study. Set up mask and calibrated Parvo. Led and obtained spirometry values – FVC, FEV1, MVV. Set up patient with a 12-lead ECG. During test obtained periodic measures of blood pressure, rating of perceived exertion (RPE) and symptoms.</p>

Logbook of Practical Experience

			Following the test, I cleaned and put away equipment.
17/03/24	4.5hrs F2F – 3.0hr Prep – 1.25hr Admin – 0.25hr	<p>Exercise Delivery</p> <p>Patient #1 69yr old male, CAD – previously completed Cardiac Rehabilitation. 3-month follow up</p> <p>Patient #2 Male, Knee OA, obesity, hypertension Part of OA Exercise Study</p> <p>Patient #3 84yr female, previous AAA repair, bowel cancer, OA spine, poor balance/mobility – uses frame for walking.</p>	<p>Reviewed session plan prior to appointment and patients medical notes. Session goals: Follow up on the last 3 months of independent exercise and confirm patient has been following exit programme at gym. Pre exercise measures of heart rate, blood pressure and weight obtained. Began session on cycle following previous HIIT protocol to assess whether aerobic fitness has been maintained. He was able to perform 5 x 2:2 protocol at same workloads completed prior to leaving, at similar HR and RPE. Information was gathered about specific exercises and intensities of the exercises he has been performing at gym. His goal is to maintain strength and improve flexibility. Therefore, predicted 1-RM assessment of the chest and leg press were completed alongside a sit and reach test. The results indicated an improvement in upper body strength and maintenance of lower body strength. Sit and reach revealed poor hamstring flexibility therefore I took the patient through two hamstring stretches which he could perform at home or in the gym. Completed treatment note upon finishing. Recommendations and adjustments to the patients exercise prescription were written up and a copy emailed to him.</p> <p>Reviewed session plan prior to appointment and patients medical notes. Session goals: Encourage participation in physical activity and strengthen muscles in lower limb to assist in walking. Pre exercise measures of heart rate, blood pressure and weight obtained. Patient did not take medication this morning which was reflected in slightly elevated resting blood pressure. The patient started with aerobic exercise on the stepper – he completed a longer warm up today (10min) due to higher entry blood pressure; heart rate and blood pressure rechecked at end of warm up. He then completed 10 mins at a higher intensity (RPE 6), heart rate, blood pressure and RPE monitored. Following this he completed machine leg extension and hamstring curls (3x12) with emphasis on breathing technique. Finished with machine hip abduction and adduction ensuring adequate ROM. Throughout session knee pain was checked using VAS 0-10 scale to which he reported 1.</p> <p>Reviewed session plan prior to appointment and patients medical notes. Session goals: Increase exercise volume on stepper and complete prescribed resistance exercises. Pre exercise heart rate was obtained then patient was set up on the stepper. They completed a</p>

Logbook of Practical Experience

		Treatment goals: Improve functional walking capacity; improve balance; improve muscular endurance	brief warm up followed by 12 x 40:20sec intervals. They were completed more energetically than the previous session, so I opted to extend each bout from 30sec to 40sec. Once completed prescribed RT exercises were completed on the cable machine including triceps pushdowns, chest press, leg extension performed unilaterally, followed by seated mid row and leg curls. Finished with seated hip flexion and abduction using the sandbag. Completed treatment note upon finishing.

EXAMPLE

Logbook of Practical Experience

Section 1: Applicant & Placement Summary

Name of Student:			
Name of Placement Site:			
Total Hours at Placement Site:			
Date Commenced:		Date Completed:	

Provide an overview of your time at this practicum site

- Describe the clientele worked with (age ranges, gender, reasons for service provision, client goals)
 - How did you spend your time at this site?
- Summary:

Clinical Competencies

Please tick the knowledge, skills and/or areas of application developed at this practicum site.

Domain 1: Professional Practice

- | | |
|--------------------------|---|
| <input type="checkbox"/> | 1.1 Ethical and Legal Practice |
| <input type="checkbox"/> | 1.2 Culturally Safe and Inclusive Practice |
| <input type="checkbox"/> | 1.3 Communication, Collaboration & Referral |
| <input type="checkbox"/> | 1.4 Professional Development |
| <input type="checkbox"/> | 1.5 Advocacy and healthcare Systems Knowledge |

Domain 2: Foundational Clinical Knowledge

- | | |
|--------------------------|---|
| <input type="checkbox"/> | 2.1 Integrated Scientific Understanding |
| <input type="checkbox"/> | 2.2. Medical Management |
| <input type="checkbox"/> | 2.3 Evidence Based Practice |

Domain 3: Clinical Assessment & Patient Management

- | | |
|--------------------------|--|
| <input type="checkbox"/> | 3.1 Screening & Risk Stratification |
| <input type="checkbox"/> | 3.2 Assessment & Interpretation |
| <input type="checkbox"/> | 3.3 Monitoring |
| <input type="checkbox"/> | 3.4 Patient Management |
| <input type="checkbox"/> | 3.5 Emergency Response & Risk Management |

Domain 4: Exercise Prescription & Delivery

- | | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | 4.1 Programme Design |
| <input type="checkbox"/> | 4.2 Programme Delivery |
| <input type="checkbox"/> | 4.3 Programme Adaptation |

Logbook of Practical Experience

How did this practicum site assist you in developing these clinical competencies?

Please select three attributes from the table above and provide examples.

Summary:

Section 2: Supervisor Details & Declaration

Supervisor Declaration and Signature: *(To be signed within one month of completing placement)*

Supervisor Name:

Supervisor Experience & Accreditation(s):

Supervisor Contact Email:

I have read the information contained within this logbook and certify that this is a true and accurate reflection of the student's engagement at this placement site.

Signature:

Date:

Logbook of Practical Experience

Section 1: Applicant & Placement Summary

Name of Student:	Jordan Taylor		
Name of Placement Site:	Metropolitan Exercise Rehabilitation Clinic		
Total Hours at Placement Site:	150		
Date Commenced:	10/02/2025	Date Completed:	30/05/2025

Provide an overview of your time at this practicum site

During this practicum placement, I worked within a community-based cardiac and metabolic rehabilitation service delivering supervised exercise interventions to adults with chronic and complex medical conditions.

Clientele included:

- Adults aged **49–84 years**
- Both males and females
- Diagnoses included:
 - Heart failure
 - Coronary artery disease (post-NSTEMI, PCI with DES)
 - Atrial fibrillation
 - Type 2 diabetes
 - Hypertension
 - Abdominal aortic aneurysm repair
 - Knee osteoarthritis
 - Obesity
 - Balance and mobility impairments

Reasons for referral included:

- Phase II and III cardiac rehabilitation
- Cardiopulmonary exercise testing
- Functional mobility and strength improvement
- Secondary prevention of cardiovascular disease

Client goals included:

- Improving aerobic capacity (VO₂max)
- Increasing muscular strength and endurance
- Enhancing balance and functional walking capacity
- Maintaining independence
- Reducing cardiovascular risk factors

How I spent my time at this site:

Logbook of Practical Experience

My time was divided between exercise delivery, assessment, preparation, and administration.

Key responsibilities included:

- *Reviewing medical notes and session plans prior to appointments*
- *Conducting pre-exercise screening (HR, BP, weight, symptom review)*
- *Supervising moderate-intensity continuous training (MICT) and HIIT protocols*
- *Delivering and progressing resistance training programmes*
- *Monitoring HR, BP, RPE and symptoms during exercise*
- *Conducting predicted 1-RM testing and flexibility assessments*
- *Assisting with cardiopulmonary exercise testing (CPET), including:*
 - *Spirometry (FVC, FEV1, MVV)*
 - *12-lead ECG setup*
 - *Blood pressure monitoring*
- *Writing treatment notes and updating exercise prescriptions*
- *Communicating exercise recommendations to clients via written summaries*

Clinical Competencies

Please tick the knowledge, skills and/or areas of application developed at this practicum site.

Domain 1: Professional Practice

X	1.1 Ethical and Legal Practice
X	1.2 Culturally Safe and Inclusive Practice
X	1.3 Communication, Collaboration & Referral
X	1.4 Professional Development
	1.5 Advocacy and healthcare Systems Knowledge

Domain 2: Foundational Clinical Knowledge

X	2.1 Integrated Scientific Understanding
X	2.2. Medical Management
X	2.3 Evidence Based Practice

Domain 3: Clinical Assessment & Patient Management

X	3.1 Screening & Risk Stratification
X	3.2 Assessment & Interpretation
X	3.3 Monitoring
X	3.4 Patient Management
X	3.5 Emergency Response & Risk Management

Domain 4: Exercise Prescription & Delivery

X	4.1 Programme Design
X	4.2 Programme Delivery
X	4.3 Programme Adaptation

How did this practicum site assist you in developing these clinical competencies?

Please select three attributes from the table above and provide examples.

Summary:

3.2 Assessment & Interpretation

Logbook of Practical Experience

I assisted in conducting cardiopulmonary exercise testing, including spirometry and ECG setup. I interpreted heart rate responses, blood pressure changes, and RPE during testing and exercise sessions. I also conducted predicted 1-RM assessments and flexibility testing, using results to inform programme adjustments.

3.3 Monitoring

During cardiac rehabilitation sessions, I monitored HR, BP, and RPE during MICT and HIIT protocols. I identified elevated resting blood pressure in one patient who had missed medication and modified the warm-up duration and intensity accordingly. This reinforced the importance of clinical vigilance and real-time decision-making.

4.3 Programme Adaptation

I progressed aerobic prescriptions from 30-second to 40-second intervals when appropriate and introduced HIIT to suitable cardiac patients under supervision. I modified resistance exercises to accommodate knee osteoarthritis and balance impairments, ensuring safe execution while still progressing overload principles.

Section 2: Supervisor Details & Declaration

Supervisor Declaration and Signature: <i>(To be signed within one month of completing placement)</i>	
Supervisor Name:	Alex Morgan
Supervisor Experience & Accreditation(s):	MClinExPhys (2011), RCEP (CEPNZ 2012), 8 years experience in exercise rehabilitation
Supervisor Contact Email:	a.morgan@metropolitanrehab.com
<i>I have read the information contained within this logbook and certify that this is a true and accurate reflection of the student's engagement at this placement site.</i>	
Signature:	A.morgan
Date:	20/06/2025

COMPETENCY EVIDENCE DOCUMENT

[Type here]

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cxcxcxcxsasdasd



COMPETENCY EVIDENCE

Version 2.0 (February 2026)

CONTENTS

INTRODUCTION.....	3
WHO SHOULD USE THIS DOCUMENT	3
HOW YOUR EVIDENCE WILL BE ASSESSED	3
EVIDENCE GUIDELINES	4
YOUR EVIDENCE.....	6

INTRODUCTION

This document is designed to guide you in demonstrating how your experience, knowledge, and skills align with the clinical competencies required of a Professional Member of CEPNZ.

This Competency Evidence document is an important component of your application. It provides you with a structured framework to present detailed evidence of your professional capabilities, ensuring that our assessment panel can thoroughly understand your qualifications and experience.

WHO SHOULD USE THIS DOCUMENT

This document is specifically for applicants seeking Professional Membership via the Alternate Pathway. This includes those who:

- Completed their academic training from a non-accredited academic programme.
- Graduated more than two years ago from an ESSA or CAAHEP accredited academic programme.
- Are registered with a professional organisation other than ACSM or ESSA.

HOW YOUR EVIDENCE WILL BE ASSESSED

Your submission will undergo a desktop review by a panel of experienced CEPNZ assessors.

They will evaluate the evidence you provide against each competency and its specific indicators to determine if you meet the required professional standards. Clarity, relevance, and the strength of your evidence are key to a successful application.

To reduce the need for re-assessments or additional information, it is highly recommended to take your time to complete the application carefully and collect all the required evidence before submitting.

EVIDENCE GUIDELINES

Please read these instructions carefully before you begin. Your attention to detail will greatly assist the assessment process.

General Principles for Providing Evidence

General statements are not sufficient. Provide enough detail to satisfy the assessors requirements. Aim to provide concrete examples, situations, and outcomes from your professional experience.

When discussing client/patient cases, always anonymise identifying information (names, specific dates, unique identifiers). Evidence that is supplied without being deidentified will not be reviewed.

If you refer to documents, reports, or portfolio items not directly included in this form (e.g., in a separate portfolio file), clearly indicate the document name and where it can be found within your application submission.

Acceptable Forms of Evidence:

We encourage a variety of evidence types to demonstrate your competence. Strong evidence typically includes:

- **Academic Transcripts / Course Descriptions** - For relevant modules, particularly if they directly address specific competencies.
- **Case Studies** - Detailed descriptions of client/patient scenarios you've managed, outlining your assessment, intervention, and outcomes.
- **Reflective Practice Examples** - Descriptions of a specific situation or challenge, your actions, and your learning from it.
- **Work Portfolio Excerpts** - e.g., redacted assessment reports, exercise programmes, clinic procedures, educational materials you've developed.
- **Lecture Slides / Assignments** - From relevant educational programmes, demonstrating specific knowledge.
- **Specific Project Descriptions** - Details of projects you've led or significantly contributed to, demonstrating relevant skills.

- **Continuing Professional Development (CPD) Records** - Logs of relevant courses, workshops, or conferences with brief descriptions of key learnings.
- **Performance Reviews / Testimonials** - e.g., from supervisors, peers, or medical professionals you've collaborated with, ideally on official letterheads.
- **Specific Reports/Publications** - Any professional reports, publications, or presentations you have authored or co-authored.

YOUR EVIDENCE

This section outlines the CEPNZ Professional Competency Standards. For each competency, please provide your detailed evidence in the spaces provided for Knowledge, Skills, and Application.

DOMAIN 1: PROFESSIONAL PRACTICE

STANDARD: A Clinical Exercise Physiologist (CEP) applies their knowledge and skills professionally, ethically, and inclusively across clinical and virtual settings. They demonstrate leadership through advocacy and collaboration, uphold ethical standards, maintain confidentiality, and engage in reflective practice to ensure evidence-based, culturally responsive, and equitable care for all New Zealanders.

1.1 ETHICAL AND LEGAL PRACTICE

Knowledge: Understands the CEPNZ Code of Ethics, CEPNZ Scope of Practice, and all relevant New Zealand legislation (e.g., Privacy Act, Health and Disability Commissioner Act, Health and Safety at Work Act), along with the professional and legal implications of practicing outside these boundaries.

- **Evidence (Knowledge):** Describe your understanding of the CEPNZ Code of Ethics and relevant NZ legislation. Provide examples of the professional and legal implications of working outside the CEPNZ Scope of Practice.

Skills: Identifies and navigates ethical dilemmas, maintains professional boundaries, and ensures ongoing informed consent for all services. Implements appropriate record-keeping, data security, and confidentiality practices.

- **Evidence (Skills):** Describe a time you identified and navigated an ethical dilemma in practice, maintaining professional boundaries. Explain your approach to ensuring informed consent and maintaining confidentiality (e.g., data security measures).

Application: Consistently upholds professional integrity and accountability, ensuring all documentation is effective, concise, respectful, and legally compliant. Applies principles of safe and ethical digital service delivery for telepractice, including risk management and quality assurance.

- **Evidence (Application):** Provide a redacted example of your documentation (e.g., SOAP notes, patient report) that demonstrates effectiveness, conciseness, respect, and legal compliance. If applicable, describe your experience applying ethical principles and risk management for telepractice.
-

[Insert your detailed evidence here for Standard 1.1 (max. 750 words, or refer to attached documents).]

1.2 CULTURALLY SAFE AND INCLUSIVE PRACTICE

Knowledge: Demonstrates a working knowledge of the Treaty of Waitangi principles (Tiriti o Waitangi), Māori health models (e.g., Te Whare Tapa Whā, Whānau Ora framework), and the concept of cultural safety. Recognises the impact of diverse ethnicities, cultures, belief systems, and socio-economic factors on health and well-being in New Zealand.

- **Evidence (Knowledge):** Explain your understanding of the Treaty of Waitangi, Māori health models (e.g., Te Whare Tapa Whā), and the concept of cultural safety in the New Zealand context.

Skills: Critically self-reflects on personal biases, values, and privilege to ensure culturally safe and competent service delivery. Adapts communication strategies to effectively engage with individuals from diverse cultural backgrounds, fostering psychologically safe and trauma-informed environments.

- **Evidence (Skills):** Describe a time you engaged in critical self-reflection regarding personal biases. Provide an example of how you adapted communication strategies to serve a patient from a diverse cultural background, fostering a safe environment.

Application: Integrates cultural safety measures and culturally responsive, person-centred practices into all aspects of clinical exercise physiology service provision, ensuring equitable and respectful care, particularly for Māori patients. Makes appropriate referrals to Māori health providers or other culturally relevant services when indicated.

- **Evidence (Application):** Describe how you integrate cultural safety measures and person-centred practices into your service delivery, particularly for Māori patients. Provide an example of when you made an appropriate referral to a culturally relevant service.

[Insert your detailed evidence here for Standard 1.2 (max. 750 words, or refer to attached documents).]

1.3 COMMUNICATION, COLLABORATION, & REFERRAL

Knowledge: Understands effective verbal and non-verbal communication strategies for diverse audiences, including patients, whānau, and other health professionals. Knows the roles and scopes of practice of other health professionals within the broader healthcare system, and appropriate referral pathways.

- **Evidence (Knowledge):** Discuss your understanding of effective communication strategies for different audiences. Outline the roles and scopes of practice of other health professionals you commonly interact with and relevant referral pathways.

Skills: Differentiates and selects communication strategies that are contextually appropriate, culturally responsive, timely, and accessible. Identifies when a patient's needs require input or referral to (or from) other health professionals.

- **Evidence (Skills):** Provide an example of how you differentiated and selected an appropriate communication strategy in a complex patient situation. Describe a scenario where you identified the need for a referral to or from another health professional.

Application: Practices collaboratively within multidisciplinary care teams, effectively seeking and providing feedback to inform decision-making, delegation of tasks, and appropriate referrals. Collaborates with patients and their whānau in shared care planning and decision-making, ensuring clear, respectful, and informative communication.

- **Evidence (Application):** Describe your experience collaborating within a multidisciplinary care team, including how you seek/provide feedback and contribute to shared decision-making. Provide an example of shared care planning with a patient and their whānau.

[Insert your detailed evidence here for Standard 1.3 (max. 750 words, or refer to attached documents).]

1.4 PROFESSIONAL DEVELOPMENT

Knowledge: Understands the importance of ongoing professional development, reflective practice, and the self-regulated nature of the CEP profession in New Zealand. Recognises the value of continuous learning, critical self-evaluation, and peer feedback for maintaining competence and advancing practice.

- **Evidence (Knowledge):** Explain your understanding of the importance of ongoing professional development and reflective practice for CEPs in New Zealand.

Skills: Engages in self-reflection and actively seeks feedback from supervisors, colleagues, and patients to critically evaluate service delivery and outcomes. Stays informed about advancements in clinical exercise physiology practice and relevant research.

- **Evidence (Skills):** Describe a recent instance of self-reflection on your service delivery and how you actively sought feedback (e.g., from a supervisor or patient) to critically evaluate outcomes.

Application: Actively participates in continuous learning, teaching, mentoring, and peer learning activities. Models professional behaviours, problem-solving, and contributes to the continuous improvement of personal practice and the profession.

- **Evidence Required (Application):** List recent continuous learning activities (e.g., courses, workshops, conferences) you have undertaken. Describe how you have contributed to peer learning or mentored others.

[Insert your detailed evidence here for Standard 1.4 (max. 750 words, or refer to attached documents).]

1.5 ADVOCACY AND HEALTHCARE SYSTEMS

Knowledge: Knows the value of advocating for the profession and patient access to services. Understands the structure, funding mechanisms, and referral pathways within New Zealand's primary, secondary, and tertiary healthcare, aged care, and disability sectors, including relevant compensable schemes (e.g., ACC) and their implications for CEP service delivery.

- **Evidence (Knowledge):** Explain your understanding of the structure, funding mechanisms, and referral pathways within New Zealand's healthcare system, including relevant compensable schemes like ACC.

[Insert your detailed evidence here (max. 250 words, or refer to attached documents).]

Skills: Stays informed about national and local healthcare frameworks and their impact on CEP practice and funding. Identifies opportunities to articulate the role and value of clinical exercise physiology within interprofessional teams and to policy makers.

- **Evidence (Skills):** Describe how you stay informed about healthcare frameworks and identify opportunities to articulate the value of clinical exercise physiology.

[Insert your detailed evidence here (max. 250 words, or refer to attached documents).]

Application: Advocates for equitable patient access to CEP services and justifies the integration of exercise physiology as a sustainable healthcare solution within the NZ health system. Effectively explains the health system and compensable scheme frameworks to patients and other stakeholders to facilitate appropriate access to services.

- **Evidence (Application):** Provide an example of how you have advocated for patient access to CEP services or justified the integration of exercise physiology within the NZ health system. Describe how you explain healthcare funding or compensable schemes to patients.

[Insert your detailed evidence here for Standard 1.5 (max. 750 words, or refer to attached documents).]

DOMAIN 2: FOUNDATIONAL CLINICAL KNOWLEDGE

STANDARD: A CEP critically evaluates and applies the clinical exercise physiology evidence base, integrated scientific knowledge, and patient safety considerations to develop effective exercise-based interventions in a range of healthcare settings for individuals with chronic health conditions.

2.1 INTEGRATED SCIENTIFIC UNDERSTANDING

Knowledge: Possesses integrated knowledge of functional anatomy, physiology, pathophysiology, biomechanics, motor control/learning, and behaviour change theories. Understands how acute and chronic diseases, injuries, and impairments (across cardiac, pulmonary, metabolic, musculoskeletal, neurological, oncological, immune/haematological, and psychological/mood disorders) impact physiological responses and adaptations to exercise across the lifespan.

- **Evidence (Knowledge):** Discuss your integrated knowledge of exercise science disciplines (e.g., anatomy, physiology, biomechanics) and how various chronic conditions impact physiological responses to exercise. Provide examples across at least three different disease categories.

Skills: Systematically analyses complex patient presentations, integrating knowledge from multiple scientific disciplines.

- **Evidence (Skills):** Describe a complex patient presentation you analysed, explaining how you integrated knowledge from multiple scientific disciplines (e.g., pathophysiology, biomechanics, behaviour change) to understand their condition.

Application: Applies foundational scientific knowledge to inform clinical decision-making, ensuring person-centred care approaches and safe, effective exercise programming for diverse patient needs.

- **Evidence (Application):** Provide a case study demonstrating how you applied foundational scientific knowledge to inform clinical decision-making and develop safe, effective, person-centred exercise programming for a patient with diverse needs.

[Insert your detailed evidence here for Standard 2.1 (max. 1000 words, or refer to attached documents).]

2.2 MEDICAL MANAGEMENT

Knowledge: Understands the effects of commonly prescribed medications, diagnostic procedures, medical and surgical interventions, and other treatments on resting and exercise-related physiological responses. Knows the primary, secondary, and tertiary healthcare environment in New Zealand and the roles of CEPs within it.

- **Evidence Required (Knowledge):** Explain your understanding of the effects of commonly prescribed medications (e.g., for cardiac or metabolic conditions) and common medical/surgical interventions on exercise responses.

Skills: Critically evaluates and interprets medical information from various sources to understand its implications for exercise safety and prescription.

- **Evidence Required (Skills):** Describe a time you critically evaluated and interpreted medical information (e.g., from a medical report or patient history) to understand its implications for exercise safety and prescription.

Application: Utilises this knowledge to tailor exercise interventions, manage potential interactions, and effectively collaborate within multidisciplinary and interdisciplinary care teams.

- **Evidence Required (Application):** Provide an example of how you used your knowledge of medical management to tailor an exercise intervention, manage a potential medication interaction, or collaborate with a multidisciplinary care team.

[Insert your detailed evidence here (max. 250 words, or refer to attached documents).]

[Insert your detailed evidence here for Standard 2.2 (max. 750 words, or refer to attached documents).]

2.3 EVIDENCE BASED PRACTICE

Knowledge: Understands the principles of evidence-based practice, research methodology, and the hierarchy of scientific evidence.

- **Evidence Required (Knowledge):** Explain your understanding of evidence-based practice, research methodology, and the hierarchy of scientific evidence.

Skills: Accesses, critically evaluates, and interprets scientific literature from credible sources.

- **Evidence Required (Skills):** Describe how you access, critically evaluate, and interpret scientific literature from credible sources to inform your practice. Provide an example of a recent article you reviewed and its relevance.

Application: Applies research findings to develop evidence-informed and safe recommendations and exercise interventions that optimise health status, function, recovery, independence, and participation.

- **Evidence Required (Application):** Provide a case study demonstrating how you applied research findings to develop an evidence-informed and safe exercise intervention for a patient, optimising their health and function.

[Insert your detailed evidence here for Standard 2.3 (max. 750 words, or refer to attached documents).]

DOMAIN 3: CLINICAL ASSESSMENT & PATIENT MANAGEMENT

STANDARD: A CEP conducts comprehensive screening, assessment, and evaluation of patient function, capacity, and health status to inform safe, effective, and tailored clinical exercise-based interventions, appropriate onward referrals, and robust patient support strategies.

3.1 SCREENING & RISK STRATIFICATION

Knowledge: Understands the principles and components of health appraisal, risk stratification, and prognosis evaluation for individuals of all ages and with various chronic health conditions. Knows infection control principles.

- **Evidence Required (Knowledge):** Discuss your understanding of the principles of health appraisal, risk stratification, and prognosis evaluation for diverse patient populations, including infection control principles.

Skills: Applies appropriate screening processes to evaluate, stratify, and manage risk for participation in assessments and interventions. Formulates safe, inclusive, and effective communication strategies to collect relevant social, cultural, historical, and health information.

- **Evidence Required (Skills):** Describe the screening processes you apply to stratify and manage risk for patient participation. Provide an example of using inclusive communication to collect patient information.

Application: Differentiates between normal deconditioning and abnormal physiological responses requiring medical evaluation. Utilises this information to plan and justify safe assessment protocols, ensuring patient safety across the full health spectrum.

- **Evidence Required (Application):** Provide a case example where you differentiated between deconditioning and an abnormal physiological response, and how this informed your planning and justification of a safe assessment protocol.

[Insert your detailed evidence here for Standard 3.1 (max. 750 words, or refer to attached documents).]

3.2 ASSESSMENT & INTERPRETATION

Knowledge: Understands the methodology, contraindications, and interpretation of various clinical functional tests and exercise assessments, including ECG, gas analysis, strength, aerobic capacity, and body composition evaluations.

- **Evidence Required (Knowledge):** Explain your understanding of the methodology, contraindications, and interpretation for at least three different clinical functional tests or exercise assessments (e.g., ECG, strength, aerobic capacity tests).

Skills: Conducts accurate and safe exercise tests using appropriate protocols, identifies absolute and relative contraindications, and expertly interprets results. Assesses movement patterns, major joints for stability/functionality, and identifies when clinical evaluations (e.g., ECG, expired gas analysis) are warranted.

- **Evidence Required (Skills):** Describe your ability to conduct a comprehensive musculoskeletal assessment (movement patterns, joint stability/functionality) and safely conduct an exercise test, identifying contraindications and interpreting results.

Application: Evaluates, records, and interprets assessment outcomes in a timely and accurate manner to inform clinical reasoning. Recognises abnormal test results or signs/symptoms inconsistent with expected health status and refers for medical assessment or calls emergency services if appropriate. Documents findings accurately using structured notes (e.g., SOAP).

- **Evidence Required (Application):** Provide a case study where you accurately evaluated, recorded, and interpreted assessment outcomes to inform clinical reasoning. Describe an instance where you recognised abnormal test results or signs/symptoms and initiated appropriate action (referral or emergency services).

[Insert your detailed evidence here for Standard 3.2 (max. 750 words, or refer to attached documents).]

3.3 MONITORING

Knowledge: Understands the physiological and symptomatic indicators of patient change, deterioration, or improvement during exercise and throughout a programme.

- **Evidence Required (Knowledge):** Discuss your understanding of physiological and symptomatic indicators that signal patient change, deterioration, or improvement during exercise (e.g., vital signs, O2 saturation, pain, glucose levels).

Skills: Systematically monitors patients before, during, and after exercise for changes in status, including vital signs, O2 saturation, dyspnoea, pain levels, glucose/ketone levels, and mental state.

- **Evidence Required (Skills):** Describe your systematic approach to monitoring patients before, during, and after exercise, including the specific indicators you track and why.

Application: Recognizes and responds appropriately to changes in patient status by identifying, recording, and managing emerging risk factors or adverse signs/symptoms. Modifies exercise prescriptions or initiates emergency procedures as necessary.

- **Evidence Required (Application):** Provide a case example where you recognized a change in patient status during exercise, identified/managed an emerging risk factor or adverse sign, and responded appropriately (e.g., modified prescription, initiated emergency procedure).

[Insert your detailed evidence here for Standard 3.3 (max. 750 words, or refer to attached documents).]

3.4 PATIENT MANAGEMENT

Knowledge: Understands factors affecting patient engagement, motivation, adherence, and self-management, including health and digital literacy, and accessibility barriers.

- **Evidence Required (Knowledge):** Discuss your understanding of factors that affect patient engagement, motivation, adherence, and self-management, including health/digital literacy and accessibility barriers.

Skills: Formulates appropriate patient support strategies tailored to individual needs, preferences, and cultural background.

- **Evidence Required (Skills):** Describe how you formulate patient support strategies tailored to individual needs, preferences, and cultural background.

Application: Develops strategies to facilitate engagement with CEP services, considering patient needs, preferences, health and digital literacy, and factors related to accessibility (including for virtual care). Integrates health technology, mobility aids, and appropriate equipment to allow patients to safely achieve physical activity goals.

- **Evidence Required (Application):** Provide an example of how you developed strategies to facilitate patient engagement, considering accessibility (e.g., for virtual care), or how you integrated health technology/mobility aids to help a patient achieve goals.

[Insert your detailed evidence here for Standard 3.4 (max. 750 words, or refer to attached documents).]

3.5 EMERGENCY RESPONSE AND RISK MANAGEMENT

Knowledge: Understands common medical emergencies and adverse events that may occur during exercise assessment and intervention (e.g., cardiac arrest, stroke, hypoglycaemia, severe asthma exacerbation, anaphylaxis). Knows emergency response protocols, the appropriate use of emergency equipment (e.g., AED, supplemental oxygen), and the chain of command for medical assistance. Possesses knowledge of infection control principles in emergency situations.

- **Evidence Required (Knowledge):** Discuss your understanding of common medical emergencies, emergency response protocols, and the appropriate use of emergency equipment (e.g., AED, supplemental oxygen).

Skills: Holds and maintains a current Level 3 First Aid/Basic Life Support/AED certification. Rapidly assesses emergency situations, identifies critical signs and symptoms, and initiates appropriate first responder actions. Implements safety protocols to minimise risk during assessments and interventions, including pre-screening for contraindications and establishing clear emergency action plans.

- **Evidence Required (Skills): Attach a copy of your current Level 3 First Aid/Basic Life Support/AED certification.** Describe your ability to rapidly assess an emergency situation and initiate appropriate first responder actions.

Application: Responds effectively and immediately to medical emergencies, following established protocols (e.g., activating emergency services, performing CPR, using an AED). Manages risk by consistently applying safety guidelines, adapting interventions in real-time based on patient status, and clearly documenting all incidents and responses. Communicates effectively with emergency personnel and the patient's care team during and after an adverse event.

- **Evidence Required (Application):** Describe a scenario where you responded effectively and immediately to a medical emergency, following protocols and clearly documenting the incident. Explain how you consistently apply safety guidelines and adapt interventions in real-time.

[Insert your detailed evidence here for Standard 3.5 (max. 750 words, or refer to attached documents).]

DOMAIN 4: EXERCISE PRESCRIPTION & DELIVERY

STANDARD: A CEP designs and delivers safe, effective, and tailored evidence-based clinical exercise interventions in collaboration with patients and relevant others. CEPs continuously evaluate the effectiveness of their services and employ continuous improvement measures.

4.1 PROGRAMME DESIGN

Knowledge: Understands the principles of exercise prescription modification for all clinical populations (e.g., elderly, those with specific chronic conditions, pre/post-surgery, amputees, neurological impairments, cancer) and all stages of training. Knows the relationship between oxygen cost, biomechanical efficiency, and performance.

- **Evidence Required (Knowledge):** Discuss your understanding of exercise prescription modification principles for various clinical populations (e.g., elderly, post-surgery, neurological impairments), including oxygen cost and biomechanical efficiency.

Skills: Designs evidence-based exercise interventions and recommendations that effectively address health and treatment-related patient needs, preferences, goals, abilities, and assessment findings. Formulates incremental goal setting using the SMART guide.

- **Evidence Required (Skills):** Describe your ability to design evidence-based exercise interventions tailored to patient needs, preferences, and assessment findings. Provide an example of formulating incremental SMART goals.

Application: Develops case-specific exercise prescriptions, providing clear rationale for modifications based on a patient's requirements, functional limits, medical status, and identified limiting factors. Accurately plans and implements work/sport-specific and occupational rehabilitation programmes, adapting for post-surgical vulnerabilities or assistive device use.

- **Evidence Required (Application):** Provide a case study demonstrating how you developed a case-specific exercise prescription, clearly justifying modifications based on patient needs and functional limits. Include how you adapted for post-surgical vulnerabilities or assistive device use, if applicable.

[Insert your detailed evidence here for Standard 4.1 (max. 1250 words, or refer to attached documents).]

4.2 PROGRAMME DELIVERY

Knowledge: Understands the importance of appropriate supervision levels, safety protocols, and outcomes monitoring for clinical populations, including emergency procedures and the use of supplemental oxygen.

- **Evidence Required (Knowledge):** Discuss your understanding of appropriate supervision levels, safety protocols, and outcomes monitoring for clinical populations, including emergency procedures and supplemental oxygen use.

Skills: Delivers, monitors, and adapts safe and effective movement, physical activity, and exercise-based interventions for patients with complex presentations, multi-morbidity, and varying levels of deconditioning. Provides appropriate supervision and instruction.

- **Evidence Required (Skills):** Describe your ability to deliver, monitor, and adapt safe and effective exercise interventions for patients with complex presentations or multi-morbidity, providing appropriate supervision and instruction.

Application: Implements exercise programmes safely and effectively, consistently monitoring patient responses, using symptom limits, and making immediate adjustments or initiating emergency procedures as necessary. Counsels individuals on warning signs and symptoms and the proper use of medication related to their condition.

- **Evidence Required (Application):** Provide a case example demonstrating how you implemented an exercise programme, consistently monitored patient responses, used symptom limits, and made immediate adjustments or initiated emergency procedures. Include how you counselled on warning signs/medication use.

[Insert your detailed evidence here for Standard 4.2 (max. 750 words, or refer to attached documents).]

4.3 PROGRAMME ADAPTATION

Knowledge: Understands methods for evaluating programme effectiveness, selecting appropriate outcome measures, and continuously adapting interventions based on patient progress.

- **Evidence Required (Knowledge):** Discuss your understanding of methods for evaluating programme effectiveness, selecting appropriate outcome measures, and continuously adapting interventions based on patient progress.

Skills: Formulates and applies strategies to manage risk, evaluate progress using specific outcome measures, and adapt recommendations and interventions based on evolving patient needs and measured outcomes.

- **Evidence Required (Skills):** Describe your ability to formulate and apply strategies to evaluate patient progress using specific outcome measures and adapt interventions based on evolving needs.

Application: Consistently evaluates the quality and effectiveness of exercise interventions through follow-up testing and patient-reported outcomes, reporting results to patients, care teams, and other health professionals. Collaborates with patients to adapt exercise prescription and health behaviour strategies to increase engagement and empower self-management.

- **Evidence Required (Application):** Provide an example of how you consistently evaluate the effectiveness of exercise interventions (e.g., through follow-up testing, patient-reported outcomes) and report results. Describe how you collaborate with patients to adapt strategies for self-management.

[Insert your detailed evidence here for Standard 4.3 (max. 750 words, or refer to attached documents).]