

# Certified Professional in Age-Friendly Health Care (CPAFH)™ Recertification Handbook

October 2025

**CPAFH** 

Certified Professional in

Age-Friendly Health Care

ihi.org/cpafh

# Contents

Recertification Guidelines	3
Recertification Cycle	3
Application Refusal	3
Credential Revocation	4
Inactive Status Policy	4
Path I: CPAFH Recertification by Continuing Education (CE) Hours	4
Continuing Education (CE) Table (Path I)	5
Path II: CPAFH Recertification by Examination	5
Examination Content Outline	9
CPAFH Recertification Application	12
Path I: Recertification by Continuing Education (CE) Hours	12
Path II: Recertification by Examination	12
Payment (required for Path I: Continuing Education only)	13
Continuing Education Documentation	14

### **Recertification Guidelines**

The Certified Professional Age-Friendly Health Care (CPAFH) program certifies health care professionals who meet the competency requirements in the areas of age-friendly health care, and who demonstrate the ability to apply this knowledge to effectively plan and implement age-friendly health care initiatives.

The CPAFH credential establishes core standards for the field of age-friendly health care, benchmarks requirements necessary for health care professionals, and sets an expected proficiency level. It gives those working in age-friendly health care a means to demonstrate their proficiency and skill in the discipline and provides a way for employers to validate a potential candidate's age-friendly health care knowledge and skill base, critical competencies in today's health care environment.

The purpose of recertification is to promote continued competence in the field of cage-friendly health care. A panel of subject matter experts recommended to CBPPS a three year recertification cycle, given the pace at which best practices, technologies, and age-friendly health care standards evolve, and to balance maintaining rigor and being feasible for busy professionals. This answer helped inform the Board's decision to set the recertification interval to every three years. This decision was further supported by the Board's commitment to a Job Analysis/Study of Practice every 3-5 years. The Board felt these requirements would serve to promote continued competence while not being overly burdensome to the certified professional.

Following successful completion of the CPAFH examination, the certificant is required recertify every three years. There are currently two acceptable paths to recertification. Recertification Path I includes obtaining and maintaining documentation of 45 CE hours over the 3-year recertification cycle and payment of a recertification fee. All CE must relate to areas covered in the most current examination content outline. Recertification Path II requires sitting for and passing the CPAFH examination within one year prior to their expiration date.

#### **Recertification Cycle**

Each recertification cycle is 3 years in length. Certificants must apply for recertification by the end of the month in which they originally received certification (i.e., an individual certified on October 1, 2025, must reapply by October 31, 2028).

#### **Application Refusal**

Applications may be refused, candidates may be barred from future examinations, or candidates or individuals may be sanctioned including revocation of the CPAFH designation, for the following reasons:

- 1. Attesting to false information on the application or on recertification documents
- 2. Unauthorized possession or distribution of any official testing or examination materials
- 3. Representing oneself falsely as a designated CPAFH

#### **Credential Revocation**

If you do not recertify by your expiration date, your certification will be revoked for failure to comply with recertification requirements. Individuals whose credentials have been revoked may not use the CPAFH credential when representing themselves. Recertification applications must be submitted by the end of the calendar month in which you were certified. A grace period exists for up to 30 days post expiration date (additional fees may apply). Beyond the 30 days, CBPPS will not approve any appeals for missed deadlines. You will be required to sit for the examination to use the credential again.

#### **Inactive Status Policy**

Because the field of age-friendly healthcare is changing and evolving continually, the CPAFH must pursue ongoing education to stay current. For this reason, an inactive path, retired path, or waiver of the CE requirement is not available.

Two paths to recertification are available, as described below. Please submit your completed application to certification@ihi.org.

# Path I: CPAFH Recertification by Continuing Education (CE) Hours

To be eligible for recertification by continuing professional education (CE hours), the certificant must obtain and maintain documentation of 45 CE hours over the 3-year recertification period and pay the recertification fee. All CE must relate to areas covered in the most current examination content outline. Please refer to the Continuing Education table on pages 5-8 of this handbook for a complete list of accepted activities.

## All continuing professional education that follows the CPAFH Content Outline is accepted. It is not a requirement to have the hours approved as CPAFH hours.

Activities completed as part of your job or work responsibilities are not accepted for recertification. Continuing professional education for CPAFH recertification may include, but is not limited to, activities such as:

#### **Educational Programs**

Participation in lectures, workshops, education sessions or case presentations provided by a health care association or society, health care facility or provider of services to a health care facility, or an industry-recognized provider of education.

#### Self-Study

Examples include, but are not limited to:

- Audio conferences/webinars
- Online educational programs
- Writing questions for the CPAFH Examination
- Completion of the CPAFH Practice Examination administered by PSI

#### Professional Speaking/Teaching

Examples include presentations/abstracts made by you at a national, regional, state, or local professional association/society. Credit may be declared for twice the length of the educational program or speech. *Presentations given as part of your job or work responsibilities are not accepted for recertification.* 

#### Formal Publication of Articles or Books

Authoring a chapter in a published book earns 10 CEs. Authoring an article published in peer-reviewed journals or periodicals earns 5.0 CEs. Authoring a blog earns 2.5 CEs. Poster presentations at conferences earn 2.5 CEs.

# Path II: CPAFH Recertification by Examination

To be eligible for recertification by examination, the certificant must sit for and pass the CPAFH examination within one year prior to their certification expiration date.

#### Continuing Education (CE) Table (Path I)

Туре	Type Code	Description	CPAFH CE Calculation	Documentation
Education program And/or Self-study, including audio conference, or online education program	A	Participation in an online or in-person lecture, workshop, or education session provided by a professional health care association/society, health care facility, or an industry-recognized provider of education. Multiple participations in the same	1 hour = 1 CE	Documentation of attendance or completion of program:  Certificate of Completion  or  Official course description and

		course may only be counted once.  Earning a different certification cannot be applied towards your recertification. If you attended a review course preparing for a certification during your recertification cycle, this may be counted if the course content relates to one or more of the exam domains.		proof of registration
Academic coursework (in person or online)	В	From an accredited college or university.	1 semester credit = 15 CEs  1 trimester credit = 12.5 CEs  1 quarter credit = 10 CEs  Completed dissertation, thesis, or graduate-level scholarly project = 30 CEs	Academic transcript (official or unofficial)
Professional speaking/teaching	С	At an educational program or a meeting of a national, regional, state, or local professional association/society. Multiple presentations of the same speech/program may only be counted once.	1 hour presentation = 2 CEs	Letter from the organization to which you spoke or copy of conference book indicating session and your name listed as a speaker.
Academic course development	D	Academic course developed and accepted as part of a curriculum. Content relates to one of the exam domains.	1 hour of course content developed = 2 CEs	Documentation (letter or curriculum outline) from the academic institution in which the course has been presented.
Academic course delivery	Е	Academic course delivery (teaching). Content relates to one of the exam domains.	1 semester credit = 30 CEs 1 trimester credit = 25 CEs	Documentation (letter, website, or curriculum outline) from the academic institution in which the course was

		Teaching at an accredited college or university (permitted only if this is not your full-time job)	1 quarter credit = 20 CEs	taught.
Item writing	F	For a CBPPS/IHI Certification, SAE, or Review Course.	0.5 CEs per submitted item	Letter from CBPPS verifying participation (contact certification@ihi.org to obtain your letter)
Exam Development/ Review Committees	G	For a CBPPS/IHI Certification Examination or SAE.	1 CE per hour of review	Letter from CBPPS verifying participation (contact certification@ihi.org to obtain your letter)
Self-Assessment Examination (Practice Exam)	Н	Completion of a CBPPS/IHI Self-Assessment Examination.	2 CEs	Copy of score report or completion email.
Authoring/ Publishing		Formal publication of articles, books, blogs, or poster presentations.	Authoring a chapter in a published book earns 10 CEs.  Authoring an article published in peer-reviewed journals or periodicals earns 5.0 CEs.  Authoring a blog earns 2.5 CEs.  Poster presentations at conferences earn 2.5 CEs.	Book/Article: Copy of chapter, article, or publication showing your name listed as author.  Blog: Image of or link to blog showing you as the author.  Poster: Letter or email confirmation from the organization to which your poster was accepted indicating acceptance and your name listed.
Research	J	An institutional review board (IRB) research project related to one of the exam domains, completed during your 3-year certification	1 project = 15 CEs	Copy of IRB approval letter or IRB letter of exemption and a onepage abstract, no more than 250 words,

		period, for which you are clearly identified as one of the primary researchers, and research is not a primary component of your employment responsibilities.		describing the research study and findings and the period when the research was conducted.
Professional Service	K	Participation in volunteer service during your certification period with an international, national, state, or local health care related organization in which your certification specialty expertise is required. Accepted volunteer activities including serving on boards of directors, committees, editorial boards, review boards, expert panels, and task forces, as an article/journal reviewer, and/or leading safety improvement (i.e, MIPs).	1 CE credit per hour of service.	The official description of your volunteer duties (e.g., copy of an official letter or other documents from the organization attesting to your service and dates and hours of service).
IHI Conferences	L	Attendance at annual IHI meetings.	CE hours vary.	Certificate of completion.
IHI Certification Review Course	М	Participation in a review course. Live, webinar, or online.	CE hours vary.	Certificate of completion.

Content Code	CPAFH Content Outline Category
1	Age-Friendly Assessment, Principles, and Considerations
2	Age-Friendly Interventions, Education, and Counseling
3	Age-Friendly Framework, Practices, and Design



# **Certified Professional in Age-Friendly Health Care** (CPAFH) Examination Content Outline

The Certified Professional in Age-Friendly Health Care (CPAFH) examination, informed by the evidence-based *4Ms Framework* (What Matters, Medication, Mentation, and Mobility) is designed to assess the knowledge, skills and competencies essential for health care professionals to deliver person-centered care to older adults. The principles of the 4Ms are woven throughout the exam domains and secondary classifications, reinforcing their relevance across all aspects of age-friendly care.

1	Age-Friendly Assessment, Principles, and Considerations	33
1A	Common Older Adult Conditions and Evidenced-Based Practices (e.g., agefriendly framework)	
1A1	Comprehensive Geriatric Assessment	
1A2	Sensory Systems (e.g., low-vision, hearing loss)	
1A3	Geriatric Syndromes (e.g., delirium, falls, sleep) and Frailty	
1A4	Mental/Behavioral Health	
1A5	Cognition (e.g., mentation)	
1A6	Management of Disease, Advanced Illness, and Multi-Morbidity/Complexity	
1A7	Atypical Presentations of Disease and Conditions	
1A8	Risk Assessment (e.g., elder abuse, neglect)	
1A9	Advance Care Planning and Goals of Care (e.g., what matters)	
1B	Medication	
1B1	Prescription Medications, Over the Counter Medications, and Dietary Supplements	
1B2	Polypharmacy, Drug Interactions, and Medication Management (e.g.,	
	deprescribing)	
	deprescribing) Pharmacokinetics/Pharmacodynamics of Aging	
1B3	Pharmacokinetics/Pharmacodynamics of Aging	40
	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling	40
1B3 <b>2</b>	Pharmacokinetics/Pharmacodynamics of Aging	40
1B3 <b>2</b> 2A	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support	40
1B3 <b>2</b> 2A 2A1	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support  Physical Function Status and Goals, including Mobility	40
1B3 2 2A 2A1 2A2	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support  Physical Function Status and Goals, including Mobility  Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation)	40
1B3 2 2A 2A1 2A2 2A3	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support  Physical Function Status and Goals, including Mobility  Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation)  Medication Support, including Adherence and Pain Management	40
1B3 2 2A 2A1 2A2 2A3 2A4	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support  Physical Function Status and Goals, including Mobility  Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation)  Medication Support, including Adherence and Pain Management  Nutrition, Hydration, and Oral Health	40
1B3 2 2A 2A1 2A2 2A3 2A4 2A5	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support  Physical Function Status and Goals, including Mobility  Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation)  Medication Support, including Adherence and Pain Management  Nutrition, Hydration, and Oral Health  Isolation, Socialization, Engagement, and Connection (e.g., mentation)	40
1B3 2 2A 2A1 2A2 2A3 2A4 2A5 2A6	Pharmacokinetics/Pharmacodynamics of Aging  Age-Friendly Interventions, Education, and Counseling  Care/Interventions, Care Preferences, Wellness, and Wellbeing Support  Physical Function Status and Goals, including Mobility  Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation)  Medication Support, including Adherence and Pain Management  Nutrition, Hydration, and Oral Health  Isolation, Socialization, Engagement, and Connection (e.g., mentation)  Cultural, Spiritual, and Values Considerations	40
1B3 2 2A 2A1 2A2 2A3 2A4 2A5 2A6 2A7 2A8 2B	Age-Friendly Interventions, Education, and Counseling Care/Interventions, Care Preferences, Wellness, and Wellbeing Support Physical Function Status and Goals, including Mobility Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation) Medication Support, including Adherence and Pain Management Nutrition, Hydration, and Oral Health Isolation, Socialization, Engagement, and Connection (e.g., mentation) Cultural, Spiritual, and Values Considerations Caregivers/Care Partners/Guardians/Family Factors and Supports Economic, Social, and Community Resources and Supports Interdisciplinary Care, Care Planning, and Collaboration	40
1B3 2 2A 2A1 2A2 2A3 2A4 2A5 2A6 2A7 2A8 2B	Age-Friendly Interventions, Education, and Counseling Care/Interventions, Care Preferences, Wellness, and Wellbeing Support Physical Function Status and Goals, including Mobility Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation) Medication Support, including Adherence and Pain Management Nutrition, Hydration, and Oral Health Isolation, Socialization, Engagement, and Connection (e.g., mentation) Cultural, Spiritual, and Values Considerations Caregivers/Care Partners/Guardians/Family Factors and Supports Economic, Social, and Community Resources and Supports Interdisciplinary Care, Care Planning, and Collaboration Care Transitions and Continuity of Care	40
1B3 2 2A 2A1 2A2 2A3 2A4 2A5 2A6 2A7 2A8 2B	Age-Friendly Interventions, Education, and Counseling Care/Interventions, Care Preferences, Wellness, and Wellbeing Support Physical Function Status and Goals, including Mobility Mental Health/Cognitive Care, Treatment, and Support (e.g., mentation) Medication Support, including Adherence and Pain Management Nutrition, Hydration, and Oral Health Isolation, Socialization, Engagement, and Connection (e.g., mentation) Cultural, Spiritual, and Values Considerations Caregivers/Care Partners/Guardians/Family Factors and Supports Economic, Social, and Community Resources and Supports Interdisciplinary Care, Care Planning, and Collaboration	40



2B4	Quality of Life Activities (e.g., work, leisure, volunteerism, sexual activities)	
2B5	Modifications and Assistive Technology and Aids	
2B6	Activities of Daily Living and Instrumental Activities of Daily Living	
2B7	Palliative/Hospice/End of Life Care/Comfort Care	
3	Age-Friendly Framework, Practices and Design	27
3A	Age-Friendly Practices and Outcomes	
3A1	Evidence-based Tools	
3A2	Documentation and Communication	
3A3	Social Determinants of Health and Equitable Care	
3A4	Advocate for Age-Friendly Care and Continuous Improvement	
3A5	Professional Practice, Ethics, Standards, and Responsibilities	
3B	Systems of Practice and Design	
3B1	Safety Considerations	
3B2	Integration of Age-Friendly Principles (e.g., 4Ms Framework-what matters, medication, mentation, mobility)	
3B3	Accountability and Process Measures	
3B4	Ageism and Bias	



#### **Secondary Classifications**

- 1. Assess older adult's health status, specific health outcomes goals, preferences, and what matters, (e.g., physical, mental, cognitive, psychosocial, spiritual, cultural, end of life).
- 2. Observe older adults for any changes in health status to adjust/modify care plans and align with care goals/preferences.
- 3. Document or use documentation of an older adult's specific health outcome goals and care preferences to align care.
- 4. Facilitate alignment of care based on individual preferences and goals.
- 5. Support delivery of person-centered care to older adults according to their specific health outcomes goals and preferences.
- 6. Communicate, collaborate, and coordinate care with individuals, families, caregivers, guardians, and interdisciplinary care team.
- 7. Assess caregiver burden and provide support.
- 8. Identify levels of care and support systems to support older adults across settings of care.
- 9. Identify and mitigate risks associated with transitions of care and handovers.
- 10. Facilitate and advocate for health equity, inclusion, and diversity for older adults.
- 11. Identify how social determinants of health and available resources may affect the delivery of equitable, age-friendly care for older adults.
- 12. Address health literacy, language skills, and sensory impairments to provide person-centered care, education, and counselling for older adults, families, caregivers, and guardians.
- 13. Review and support an older adult's advance care plan.
- 14. Review and identify medication and dietary supplement use for risk and benefits, polypharmacy, adherence, and deprescribing.
- 15. Assess level of social support to promote mentation through social engagement, wellness, and wellbeing activities.
- 16. Identify and support care for geriatric syndromes and mentation.
- 17. Support older adults to move safely every day to maintain or improve function.
- 18. Assess and optimize environments for older adults, including mitigating risk for harm.
- 19. Measure, monitor, evaluate, and improve quality of age-friendly care.

## **CPAFH RECERTIFICATION APPLICATION**

First	Middle Initial	Last
Organization:		
Contact Phone:		
Email:		
☐ Certificant Information ☐ Completed Continuir	on (page 11) ng Education Documentation Worksl	heet (pages 13-14)
	ntation For Claimed Activity	
☐ Recertification Fee (		
ATH II: Recertification by		
<ul><li>☐ Certificant Information</li><li>☐ PSI Passing Score Remarks</li></ul>	,	
in 1 of 1 assing ocore in	cport	
nereby verify that the informati ocurate.	on contained in this recertification a	pplication is true and
ignature	 Date	

## Payment (required for Path I: Continuing Education only)

Please visit ihi.org/CPAFH to pay online.

Amount:

□ United States: \$175 US□ International: \$225 US\*

\*International fee includes an additional fee to cover higher processing expenses to addresses outside the US.

## **Continuing Education Documentation**

Title and Description of Activity	Provider or Sponsoring Organization	Date of Activity	Content Code (1-3)	Type Code (A-M)	CE Hours	Documentation Attached?

If you encounter any issues completing the Continuing Education table, please use this linked Excel sheet as an alternative to document your CE activities.

Title and Description of Activity	Provider or Sponsoring Organization	Date of Activity	Content Code (1-3)	Type Code (A-M)	CE Hours	Documentation Attached?

If you encounter any issues completing the Continuing Education table, please use this linked Excel sheet as an alternative to document your CE activities.