**LEADS Equivalency Mapping**

For Individuals

**Background and Purpose**Individuals may have previously completed formal leadership development courses or programs, mapped to the capabilities of each domain of the LEADS Framework. LEADS-aligned experience can be reviewed on a case-by-case basis for assessment of LEADS-aligned equivalency in order to be deemed as meeting the “LEADS Learning” requirement for further learning and training.

**The Benefits of LEADS Learning Equivalency**

### **For the Individual**

Successful completion of LEADS-aligned training and experience, followed by evaluation and approval by CCHL, entitles the individual to receive the LEADS Learning certificate of completion from the CCHL.

Completion of LEADS Learning is one of the requirements for additional CCHL credentials:

1. The Certified LEADS Specialist (CLS) certification – *prerequisite*
2. The Canadian Health Executive (CHE) credential – *component of program*
3. The Organizational LEADS Debrief Coach (OLDC) certification – *prerequisite*.

The certificate of completion does not expire; students may use it at any point to demonstrate proof of completion for the CLS, CHE or OLDC, granting the participant an exemption from the requirement to complete the LEADS Learning component of the program requirements.

## **For an individual to meet the LEADS Learning equivalency requirement, they are required to:**

1. Populate all sections of the LEADS Learning Equivalency Mapping Form for Individuals

**Part A -** Formal Leadership Development Courses

**Part B -** LEADS Domains Learning Experiences

**Part C -** Leadership Initiative and Innovation

1. Upon review by CCHL, a decision will be made regarding LEADS equivalency.

## **LEADS Equivalency Mapping Submission Process**

**Step 1:** Request and pay for review of submission.

**Step 2:** Populate Part A, B, and C of the LEADS Learning Equivalency Mapping Form for Individuals

**Step 3:** Submit completed documentation by e-mail to:

**CLS or OLDC applicants**: Tracy Wightman [twightman@cchl-ccls.ca](mailto:twightman@cchl-ccls.ca)

**CHE applicants**: Stephane Joannette [sjoannette@cchl-ccls.ca](mailto:sjoannette@cchl-ccls.ca)

**Step 4:** CCHL completes LEADS equivalency evaluation process (allow approximately 3-4 weeks) and approves or makes recommendations should it not meet all requirements.

**Step 5:** CCHL provides formal written approval.

**LEADS Equivalency Mapping Form**

## For Individuals

## **Part A – Formal Leadership Development Courses**

*Please list the formal leadership development courses you have completed, mapped to the capabilities of each domain. If the course includes more than one domain, you may list the course multiple times in different domains/capabilities.*

*Refer to the* [*LEADS brochure*](https://cchl-ccls.ca/app/uploads/woocommerce_uploads/2022/12/LEADS_Brochure_2022-cqxwul.pdf) *for description of the LEADS domains and capabilities.*

**For each domain entry, please include:**

* Name of the course or courses.
* Name of the institute that provided the course.
* Date and duration of course.
* Date course was completed. \*

*\*Attach proof of completion for any courses listed below*

**Lead Self Capabilities:**

* Self-awareness
* Managing self
* Developing self
* Demonstrating character

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lead Self** | **Course name** | **Institute** | **Duration of course** | **Course completion date** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |

**Engage Others Capabilities:**

* Fostering the development of others
* Contributing to the creation of health organizations
* Communicating effectively
* Building teams

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Engage Others** | **Course name** | **Institute** | **Duration of course** | **Course completion date** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |

**Achieve Results Capabilities:**

* Setting direction
* Strategically aligning decisions with vision, values, and evidence
* Taking action to implement decisions
* Assessing and evaluating

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Achieve Results** | **Course name** | **Institute** | **Duration of course** | **Course completion date** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |

**Develop Coalitions Capabilities:**

* Purposefully building partnerships and networks to create results
* Demonstrating a commitment to customers and service
* Mobilizing knowledge
* Navigating socio-political environments

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Develop Coalitions** | **Course name** | **Institute** | **Duration of course** | **Course completion date** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |

**Systems Transformation Capabilities:**

* Demonstrating systems/critical thinking
* Encouraging and supporting innovation
* Orienting strategically to the future
* Championing and orchestrating change

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Systems Transformation** | **Course name** | **Institute** | **Duration of course** | **Course completion date** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |

## **Part B – LEADS Domains Learning Experiences**

Please describe your learning experience as it relates to the domain capabilities:

**Lead Self:**

**Engage Others:**

**Achieve Results:**

**Develop Coalitions:**

**Systems Transformation:**

## **Part C - Leadership Initiative and Innovation**

**1. Personal Initiative**

Please provide examples of your role in two situations that clearly illustrate your personal initiative in health leadership.

**2. Significant Initiative**

Innovation can take on many forms in today’s healthcare system; describe two situations that illustrate an innovative approach you have used in dealing with a leadership issue.

**3. Staff Initiative**

Please describe two situations where you supported other staff or colleagues to initiate, implement or adapt innovative approaches to health service delivery.

**4. Promotion of the Profession**

Please provide examples of your promotion and support of health leadership and/or College activities.