

Certified Correctional Health Professional Registered Nurse

SPECIALTY CERTIFICATION FOR CORRECTIONAL REGISTERED NURSES



From the Premier National Certification Program for Professionals in Correctional Health Care

Professional Advancement

Specialty certification as a correctional registered nurse provides immeasurable benefits and is highly regarded by management, peers, staff and others. CCHP-RN certification makes a difference — to the patients whose care is provided by certified correctional registered nurses, to employers who desire the most qualified nurses on staff and to the nurses who attain the credential.

This specialty certification recognizes CCHPs who have demonstrated knowledge to deliver specialized nursing care in corrections. The CCHP-RN credential is a highly valued symbol of achievement and leadership demonstrated through ongoing, focused and targeted professional development in this unique field. Specialty certification is a validation of your dedication to continuing competence and quality service delivery.

Eligibility Requirements

Eligibility is extended to all qualified registered nurses. Prior to submitting an application, applicants must have:

- · Current CCHP certification
- Current, active RN license within a U.S. state (for Canada and U.S. territories, credentials will be reviewed on a case-by-case basis); the license must not be restricted to practice in correctional settings only
- · Equivalent of two years full-time practice as a registered nurse
- · 2,000 hours of practice in a correctional setting within the last three years
- 54 hours of continuing education in nursing, with 18 specific to correctional health care, within the last three years

Get Started

Elements of the application:

- Copy of professional licensure
- · Signed application statement

Application deadlines for in-person exams are listed at www.ncchc.org/CCHP/calendar.

Registration and Candidacy

Once the application has been approved, applicants will receive acknowledgment of their candidacy to take the CCHP-RN examination. Candidates must register before the registration deadline for the exam they wish to take.

Preparing for the Examination

Visit the CCHP website to find recommended study materials, including the candidate handbook and on-demand video training.

The Examination

Candidates who meet the basic eligibility and application requirements will take a proctored examination composed of 70 to 100 multiple-choice questions. Candidates are allowed two hours to complete the examination.



www.ncchc.org/CCHP-RN

CERTIFIED CORRECTIONAL HEALTH PROFESSIONAL - REGISTERED NURSE

A program of the National Commission on Correctional Health Care

Your name should be submitted exact	ly as you want it to appear on all official correspondence.		
SalutationName	Degree/Credential		
Company/Facility Name	Job Title		
Business Address	City	State	ZIP+4
Home Address	City	State	ZIP+4
Business Phone	Home Phone		
Fax	Email Address (required)		
Preferred mailing to: ■ Business ■ Home			
Please bill my MasterCard Visa	5 if submitted by mail or fax). Please make check payable to the Co ☐ American Express		ndable.
Card #	V-code	V-code Expiration date	
Billing address (if different from above)			
Signature			
By signing this application, I verify that (1)	n successfully completing all specified program requirements, in the information I have provided in this application is true, accur	rate and complete; (2) I have read and un	derstand the eligibility
requirements for certification; (3) I meet t	he eligibility requirements for certification. I authorize NCCHC and edentials, professional standing, and character and fitness.	nd/or the CCHP Board of Trustees to mal	ke any inquiries and investi-
I understand that any false statement or rination, invalidation of the results of my e	nisrepresentation that I may make during the application or exal xamination, denial or revocation of certification, or other approp	mination process may result in my being riate action, as determined by NCCHC an	barred from taking the examd/or the CCHP Board.
to notify NCCHC and/or the CCHP Board i	tand that I must maintain eligibility for certification throughout to f my eligibility changes at any time before, during or after the aper er appropriate action, as determined by NCCHC and/or the CCH	oplication and examination process. Failu	
I hereby indemnify and hold harmless NCI damage that may result from denial of my	CHC and the CCHP Board of Trustees, and their respective office application for certification, failure to successfully pass the exa	ers, directors, employees and agents, fror amination and/or denial or revocation of	n any or all liability, loss or certification.
Applicant's Signature		Date	

Apply online at www.ncchc.org/CCHP-RN

Mail: CCHP Board of Trustees, PO Box 6233, Carol Stream, IL 60197-6233

Fax: (773) 880-2424

About the National Commission on Correctional Health Care

The National Commission on Correctional Health Care is a not-for-profit organization working to improve the quality of care in our nation's jails, prisons and juvenile detention and confinement facilities. In addition to the CCHP program, the Commission establishes standards for health services in correctional facilities, operates a voluntary accreditation program for institutions that meet these standards, produces and disseminates resource publications, publishes position statements and other support materials, conducts educational programs and provides other services. NCCHC is supported by the leading national organizations representing the fields of health, law and corrections.

Visit www.ncchc.org/CCHP-RN for the most up-to-date information including online application, exam dates and locations, ADA compliance, deferment and cancellation policies, continuing certification, FAQs, specialty certifications and much more!