Certified Correctional Health Professional
Registered Nurse

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

A Program of the National Commission on Correctional Health Care
Your name should be submitted exactly as you want it to appear on all official correspondence.

Salutation __________________________________________ Name __________________________________________ 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

Payment Information

The CCHP-RN examination fee is $330 ($345 if submitted by mail or fax). Please make check payable to the CCHP Board of Trustees. This fee is not refundable.

Please bill my ☐ MasterCard ☐ Visa ☐ American Express

Name as shown on the card (please print) __________________________________________

Card # __________________________________________ V-code __________________________________________ Expiration date __________________________________________

Billing address (if different from above) __________________________________________

Signature __________________________________________

Verification

I understand that certification depends on successfully completing all specified program requirements, including but not limited to application, investigation and examination. By signing this application, I verify that (1) the information I have provided in this application is true, accurate and complete; (2) I have read and understand the eligibility requirements for certification; (3) I meet the eligibility requirements for certification. I authorize NCCHC and/or the CCHP Board of Trustees to make any inquiries and investigations deemed necessary to verify my credentials, professional standing, and character and fitness.

I understand that any false statement or misrepresentation that I may make during the application or examination process may result in being barred from taking the examination, invalidation of the results of my examination, denial or revocation of certification, or other appropriate action, as determined by NCCHC and/or the CCHP Board.

If certification is granted, I further understand that I must maintain eligibility for certification throughout the entire period of certification and that I have a continuing obligation to notify NCCHC and/or the CCHP Board if my eligibility changes at any time before, during or after the application and examination process. Failure to do so may result in denial or revocation of certification or other appropriate action, as determined by NCCHC and/or the CCHP Board.

I hereby indemnify and hold harmless NCCHC and the CCHP Board of Trustees, and their respective officers, directors, employees and agents, from any or all liability, loss or damage that may result from denial of my application for certification, failure to successfully pass the examination and/or denial or revocation of 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!