

TRANSCULTURAL NURSING SOCIETY CERTIFICATION COMMISSION

Certified Transcultural Nurse – Basic (CTN-B)



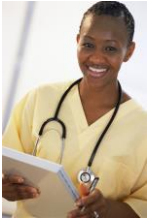
“That the culture care needs of people in the world will be met by nurses prepared in Transcultural Nursing”

--Madeleine Leininger, Founder Transcultural Nursing Society

Re-Certification Guide

Transcultural Nursing Certification Commission Introduction

Certification in Transcultural Nursing began in 1987.



A certification committee was established and developed a multiple choice examination, followed by an oral examination. The first examination was administered in 1988. Testing usually took place at the Annual Conference of The Transcultural Nursing Society (TCNS). In 2004, the Board of Trustees appointed a Certification Task Force to review current practices and make recommendations for future directions in certification. The Task Force completed its work and recommended that a Certification Commission be set up. The Transcultural Nursing Certification Commission (TCNCC) was established by the TCNS Board of Trustees in 2006. The TCNCC began its extensive work of organization and development of a new test and testing process. The basic exam was developed by an expert panel under the TCNCC in 2011. The pilot was conducted in late Fall 2011 and Winter 2012. The basic exam was fully implemented in 2012.

Certification in Transcultural Nursing demonstrates to nurse colleagues, patients, employers, and others, the knowledge, experience, and commitment to transcultural nursing.

Information about TCNS

For further information about the Transcultural Nursing Society (TCNS) please visit the website at www.tcns.org or contact TCNS at:

Transcultural Nursing Society - Global Office
37637 Five Mile Rd., #319
Livonia, MI 48154-1543
PHONE: (888)432-5470 Toll Free
Email (Fastest Response) staff@tcns.org

Purpose of Certification

Certification aims to validate the ability to provide culturally competent and congruent care to clients, families, communities, and organizations. The purposes of transcultural nursing and certification are to:



1. promote and maintain safe and culturally meaningful care with the aim of protecting individuals, groups and communities
2. recognize the expertise of transcultural nurses prepared to care for clients of diverse and similar backgrounds
3. provide quality-based standards of transcultural nursing practices

Certification Administration Program

The Transcultural Nursing Certification Commission (TCNCC) was established to promote the highest level of culturally competent and culturally congruent care. The Commission develops, implements, and coordinates all aspects of certification for transcultural nursing.

The Commission is composed of appointed board members who are knowledgeable and experienced in transcultural nursing.

The Transcultural Nursing Certification Commission supports the National Collegiate Testing Service (NCTS) to offer transcultural nursing certification testing. Members of NCTS (over 240 in the United States and Canada) have a set of standards that all testing sites follow.

Re-Certification Criteria

To become recertified, candidates must meet all five of the eligibility criteria listed below at the time of application. Complete the application form, submit all fees, and agree to participate in any random audits required. No persons shall be excluded from the opportunity to participate in the Re-Certification in Transcultural Nursing Program on the basis of race, color, national origin, religion, sex, age, affiliation, or disability. To be eligible to participate, all criteria listed below must be completed within the prior five year certification period and prior to the application being submitted. Application is located on the last page of this guide.

Basic Level CTN (CTN-B) Criteria

1. Hold a current, active, unrestricted RN license in a state or territory of the United States or the professional, legally recognized equivalent in another country.
2. Hold a diploma, an associate, or BSN degree from a program accredited by the Commission on the Collegiate of Nursing Education (CCNE) or the National League for Nursing Accrediting Commission (NLNAC) if school is in the US; or legally recognized equivalent in another country.
3. Currently employed in nursing, either full- or part-time, at the time of application.

4. Completed at least one course (didactic and/or clinical) in cultural diversity and promotion of cultural competence for a minimum of 3 credits (or equivalent 42 Contact Hours).
5. Completed 2400 hours of transcultural nursing practice as a registered nurse in an administrative, teaching, research, or clinical capacity, either full- or part-time during the **five years prior** to submitting your application.

Description of Practice

The CTN-B practices in diverse settings including primary care, acute care, community settings, rural/remote area nursing, and long-term care across the life span and is actively engaged in education (e.g. patient, staff, students, and colleagues), case management, clinical practice, consultation, research, and/or administration.

DISCLAIMER

Certification and Re-Certification granted by the Certification Commission of the Transcultural Nursing Society is a voluntary process intended solely to test for special knowledge. The Certification Commission of the Transcultural Nursing Society does not license or define the qualifications of any person to practice nursing. The significance of certification in any jurisdiction or institution is the responsibility of the candidate to determine.

APPLICATION INSTRUCTIONS

The application will be considered incomplete if any of the requested information is illegible, not provided, or the appropriate fees are not paid. Applicants will be informed of appropriate measures to complete their applications prior to the certification deadline only. All candidates must apply, either by mail, fax or email. The Certification Commission reserves the right to audit your application and/or verify the employment and licensure of any candidate. Please allow two (2) weeks for acknowledgement of receipt of your application.

- You must apply by mail, fax or email.
- Incomplete applications at application deadline, including those without required documentation or payment, will not be accepted.
- You must provide an individual or personal email address where certification information can be sent. Do not list a group email box that is shared in the workplace.
- Provide a telephone number where you may be reached if there are questions regarding your application.
- All information requested on the application form is required.
 - Indicate your full name
 - If you are a member of the TCNS please provide your member number where indicated. If you recently joined TCNS and do not have your number, write “new member” and the TCNCC will verify your membership.
 - Indicate your initial certification date

FEE STRUCTURE: Recertification fees will apply when the applicant is due for recertification and may change.

Recertification Fees:

Current TCNS Members: \$175 USD

Non-TCNS Members: \$300 USD

Returned Check Fee

\$25 Fee is charged for all returned checks.

The fee structure is subject to change. The TCNCC Board of Directors reserves the right to adjust certification and recertification fees as necessary.

DESIGNATION OF RECERTIFICATION

RE-Certification is awarded to those who successfully complete the process by meeting the eligibility criteria, including agreeing to a random audit process and supplying all documentation if requested, and submission of the completed application by the deadline. The designated credential is: CTN-B (Certified Transcultural Nurse-Basic) This credential may be used in all correspondence or professional activities. Certification as a CTN-B is valid for a period of five years. Recertification is available by application and evidence of meeting stated criteria, which may be subject to random audit. Certified nurses will begin to receive recertification notices approximately one (1) year in advance of the expiration of their certification.

It is the **professional responsibility of the certificant to notify TCNCC of any change in name, address, phone and email.** These changes may be made by email, mail or fax. Any changes and questions related recertification programs should be directed to TCNCC at:

**Transcultural Nursing Society Global Office
TCNCC**

37637 Five Mile Rd., #319

Livonia, MI 48154-1543

PHONE: (888)432-5470 Toll Free

Email (Fastest Response) staff@tcns.org

www.tcns.org

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Transcultural Nursing Re-Certification Application



Transcultural Nursing Society
37637 Five Mile Rd., #319
Livonia, MI 48154-1543
PHONE: (888)432-5470

Email: Staff@tcns.org
www.tcns.org

Date: Applying for CTN-Basic(CTN-B) Re-Certification

Name: Credentials:

Address Line 1:

Address Line 2:

City: State/Province:

Zip/Postal Code: Country:

Job Title & Organization:

All materials should be submitted using the contact information listed above.

Email: *Email is our primary form of contact. You must supply a valid email address.*

Primary Phone:

Date of Birth:

Last Four Digits of your Social Security Number:

Transcultural Nursing Society Member

Member Number:

I am not a Transcultural Nursing Society Member

EDUCATION:

Please indicate highest level of nursing education completed.

- Diploma
 Associates Degree
 BSN

Other Please List:

I. BASIC ELIGIBILITY CRITERIA

Applicant must meet **all five** of the criteria listed below. Check each criteria to indicate you have met that requirement during the five years prior to applying for re-certification.

1. Hold a current, active, unrestricted RN license in a state or territory of the United States or the professional, legally recognized equivalent in another country

State:

Country:

License Number:

2. Hold a diploma, an associate, or BSN degree from a program accredited by the Commission on the Collegiate of Nursing Education (CCNE) or the National League for Nursing Accrediting Commission (NLNAC) if school is in the US; or legally recognized equivalent in another country.

3. Currently employed or self-employed in nursing, either full or part time, at the time of application

4. Completed at least one course (didactic and/or clinical) in cultural diversity and promotion of cultural competence with a minimum of 3 credits (or equivalent 42 Continuing Education Hours/Units)

5. Completed 2400 hours of transcultural nursing practice as a registered nursing in administrative, teaching, research, or clinical capacity, either full or part time within the previous five years. Description of practice: The CTN applicant may practice in diverse settings including primary care, community settings/rural/remote area nursing, and long-term care across the life span and is actively engaged in education (e.g. patient, staff, students, and colleagues), case management, clinical practice, consultation, research, and/or administration.

Re-Certification in Transcultural Nursing is achieved by nurses who attest that they will submit a portfolio (if required by random audit) of evidence that meets the criteria they indicated on this application. My signature below indicates that I have documented evidence and will submit to any random audit required. I am also aware that the TCNCC may analyze all data received and that it will be aggregated and so that no individual can be identified.

Signature:

Payment Information

Date: Check Enclosed Credit Card

We can only accept checks from US Banks for US funds. Credit cards can be used from any country. We only accept VISA and MasterCard.

Billing Name:

Billing Address 1:

Billing Address 2:

City: US State:

Zip Code: Country:

Credit Card Information

MasterCard or VISA

Credit Card Number: Expiration Date:

Amount: Three Digit CVW Code on back of Credit Card:

Signature:

FEE STRUCTURE : TCNS Members: \$175 Non - TCNS Members: \$300

Returned Check Fee: \$25.00 Fee is charged for all returned checks.

CANCELLATION: \$75.00 non-refundable administrative fee applies to all cancelled test dates.

Application should be submitted by email, postal mail, or fax to:

Transcultural Nursing Society, 37637 Five Mile Rd., #319, Livonia, MI 48154-1543

Phone: (888)432-5470 Email: Staff@tcns.org

For Office Use Only:

Non-TCNS Member Number Assigned:

Date Received:

CC Processed By:

Amount:

Authorization Number:

Declined/ Reason:

Additional Notes: