



JOB ANALYSIS REPORT

NATIONAL CERTIFICATION
CORPORATION

WOMEN'S HEALTH NURSE
PRACTITIONER

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PSI SERVICES

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SUBMITTED TO



EXECUTIVE SUMMARY

This report describes the methodology and procedure used to conduct a job analysis and develop the exam specifications for the National Certification Corporation (NCC) Women's Health Nurse Practitioner (WHNP) certification examination.

The three major activities that comprise the job analysis process described in this report are as follows:

1. **Job Analysis Committee Meeting** – A gathering of subject matter experts (SMEs) to discuss and develop a description of the scope of practice
2. **Job Analysis Survey** – A large-scale survey of practitioners not involved with the SME panel to validate the task and knowledge statements developed by the panel
3. **Development of Examination Specifications** – The development of Examination Specifications by the panel based on the results of the survey

Several practitioners were assembled by NCC to serve as SMEs. The individuals selected represent a wide variety of work-related characteristics such as years of experience, work setting, geographic location, and areas of specialty. This helps in developing a scope of practice that is reflective of the roles and responsibilities of the job role and is relatively free from bias. By analyzing the experiences and expertise of current practitioners, the results from the job analysis become the basis of a validated assessment that reflects the competencies required for competent job performance.

The job analysis process utilized in this study yields exam specifications that accurately reflect the scope of practice, allowing for the development of fair, accurate, and realistic assessments of candidates' readiness for certification. The resultant Examination Specifications document (Appendix C) indicates a 150-item examination with content distribution requirements at the competency area (content domain) level as well as topic (content subdomain) level. The six competency areas are:

1. Physical Assessment and Diagnostic Testing
2. Primary Care
3. Gynecologic and Reproductive Health
4. Obstetrics
5. Pharmacology
6. Professional Practice Issues

INTRODUCTION

This report describes the methodology and procedure used to conduct a job analysis and develop the exam specifications for the National Certification Corporation (NCC) Women's Health Nurse Practitioner (WHNP) certification examination.

The procedure was conducted in accordance with principles and practices outlined in the *Standards for Educational and Psychological Testing*¹, which describe principles and guidelines for all aspects of test development, including content validation.

A job analysis (sometimes referred to as a practice analysis, job task analysis, or work analysis) is a scientific inquiry conducted in order to identify the tasks and work activities conducted, the context in which those tasks and activities are carried out, and the competencies (knowledge areas, skills, and abilities) required to perform a job role successfully². Different methods can be used which may differ in the levels of specificity in analyzing and describing different work elements, with the choice of method largely dependent on the intended purpose and use of the results. The methodology of the current analysis was tailored to the creation of exam specifications for test development.

When completed, the job analysis process utilized in this study yields exam specifications that accurately reflect the scope of practice, allowing for the development of fair, accurate, and realistic assessments of candidates' readiness for certification. The job analysis is typically performed every 5 to 7 years so that the content outline represents the current scope of practice. Because it serves as the primary basis for content validity evidence, as required by the aforementioned Standards, the job analysis is a primary mechanism by which a certifying body or regulatory board can ensure the accuracy and defensibility of an exam. It serves as the foundation of the certification exam and is critical to the success of the entire exam development process. All necessary documentation verifying that the validation process has been implemented in accordance with professional standards is included in this report.

This report is divided into three major activities of the job analysis process, which are:

1. **Job Analysis Committee Meeting** – A gathering of subject matter experts (SMEs) to discuss and develop a description of the scope of practice
2. **Job Analysis Survey** – A large-scale survey of practitioners not involved with the SME panel to validate the task and knowledge statements developed by the panel
3. **Development of Examination Specifications** – The development of Examination Specifications by the panel based on the results of the survey

¹ American Educational Research Association, American Psychological Association, National Council on Measurement in Education (2014). *Standards for Educational and Psychological Testing*. Washington, DC: AERA.

² Sackett, P. R. & Laczko, R. M. (2003). *Job and Work Analysis*. Handbook of Psychology. One: 2: 19–37.

JOB ANALYSIS COMMITTEE MEETING

NCC selected subject matter experts (SMEs) to represent a wide variety of work-related characteristics such as years of experience, work setting, geographic location, and areas of specialty to develop a scope of practice that is reflective of the roles and responsibilities of the job and is relatively free from bias.

See Appendix A for a complete list of the SMEs and their qualifications.

PSI conducted a job analysis committee meeting on October 26, 2018 with SMEs to discuss the scope of practice and develop a list of tasks and knowledge areas that reflect the job role. PSI led the SMEs in refining task and knowledge statements and organizing them into a domain and subdomain structure. The outgoing NCC WHNP exam content outline and candidate handbook were used as resources when developing the knowledge areas and tasks.

The job analysis committee developed 34 task statements.

1. Obtain health history
2. Perform comprehensive physical exam
3. Perform problem focused physical exam
4. Perform prenatal assessment
5. Perform postpartum assessment
6. Provide prenatal care management
7. Provide postpartum care management
8. Perform gynecological exam
9. Prescribe medications
10. Provide vaccinations
11. Manage medications
12. Diagnose and manage primary care health conditions
13. Manage or coordinate care of complex antenatal conditions
14. Perform diagnostic study
15. Interpret diagnostic study findings
16. Perform cervical exam
17. Perform cervical cancer screening
18. Manage or provide referral for abnormal findings
19. Refer for colposcopy exam
20. Perform colposcopy exam
21. Provide contraceptive implant counseling
22. Provide contraceptive implant insertion
23. Provide contraceptive implant removal
24. Provide IUD counseling
25. Provide IUD insertion
26. Provide IUD removal
27. Assess fetal well being
28. Perform endometrial biopsy
29. Perform speculum exam
30. Perform Leopold maneuvers
31. Perform male reproductive exam
32. Perform vulvar biopsy
33. Provide education or counseling
34. Perform mental health screening

The job analysis committee developed 16 knowledge statements across six content domains.

1. Physical Assessment and Diagnostic Testing
 - A. Health History and Physical Examination
 - B. Diagnostic Studies
2. Primary Care
 - A. Problem Recognition, Management and Referral
 - B. Health Screening, Education and Counseling
3. Gynecologic and Reproductive Health
 - A. Reproductive Anatomy and Physiology
 - B. Gynecologic Disorders
 - C. Fertility Awareness and Contraception
 - D. Male Sexual and Reproductive Health
4. Obstetrics
 - A. Anatomy and Physiology of Pregnancy
 - B. Prenatal Care
 - C. Assessment of Fetal Well Being
 - D. Medical and Obstetrical Complications of Pregnancy
 - E. Postpartum Care and Complications
5. Pharmacology
 - A. Pharmacokinetics and Pharmacodynamics
 - B. Pharmacotherapeutics
6. Professional Practice Issues (e.g., legal, ethics, safety, quality improvement)

JOB ANALYSIS SURVEY

PSI developed, administered, and monitored a survey to validate the tasks and knowledge areas developed by the job analysis committee and to help determine content weighting. To this end, the survey collected respondents' ratings of the importance and frequency for each task and knowledge area. Below are the prompt and anchors for each rating scale.

What are the importance and performance frequency of each task **at entry to practice** as a WHNP?

What are the importance and frequency of application of these knowledge areas at **entry to practice** as a WHNP?

Importance

- 0 – N/A (Not exposed to)
- 1 - Not Important
- 2 - Minimally Important
- 3 - Moderately Important
- 4 - Very Important
- 5 - Critically Important

Frequency

- 0 - Never
- 1 – Annually
- 2 – Quarterly
- 3 – Monthly
- 4 – Weekly
- 5 – Daily

Between November 2 and 11, 2018, a pilot survey was conducted with the job analysis committee and NCC staff members to ensure that the survey was operating correctly. No modifications were made following the pilot survey.

The live survey was sent using online survey software to a list of 15,067 individuals which was obtained from NCC. The list included all individuals who currently hold the NCC Women's Health Nurse Practitioner credential. The number of individuals that provided acceptable responses (selected 'Yes' to the first two questions described below, completed at least 69% of the task ratings, and worked less than or equal to 80 hours per week) was 1,494 (10%). The survey was opened on November 13, 2018 and closed on December 19, 2018. See Appendix B for the email sent to potential respondents.

The first question of the survey read: *Do you agree to take part in this survey?* The second question read: *Do you currently work as a Women's Health Nurse Practitioner?* These questions served as filters to allow only those who indicated "yes" to both questions to move forward with the rest of the survey.

Table 1 shows the mean ratings provided by the 1,494 respondents for the task statements. Table 2 shows the mean ratings provided by 1,310 respondents for the knowledge statements.

Table 1.
Task Statement Ratings.

Task Statements	Importance	Frequency
1 Obtain health history	4.70	4.71
2 Perform comprehensive physical exam	4.28	4.29
3 Perform problem focused physical exam	4.54	4.73
4 Perform prenatal assessment	3.60	3.64
5 Perform postpartum assessment	3.48	3.33
6 Provide prenatal care management	3.56	3.64
7 Provide postpartum care management	3.44	3.35
8 Perform gynecological exam	4.51	4.53
9 Prescribe medications	4.50	4.77
10 Provide vaccinations	3.41	3.41
11 Manage medications	4.33	4.58
12 Diagnose and manage primary care health conditions	3.03	3.36
13 Manage or coordinate care of complex antenatal conditions	3.13	3.00
14 Perform diagnostic study	3.74	3.86
15 Interpret diagnostic study findings	4.24	4.38
16 Perform cervical exam	4.26	4.38
17 Perform cervical cancer screening	4.45	4.41
18 Manage or provide referral for abnormal findings	4.47	4.24
19 Refer for colposcopy exam	3.94	3.25
20 Perform colposcopy exam	2.00	1.47
21 Provide contraceptive implant counseling	3.97	3.95
22 Provide contraceptive implant insertion	3.39	3.10
23 Provide contraceptive implant removal	3.32	2.90
24 Provide IUD counseling	4.12	4.07
25 Provide IUD insertion	3.65	3.40
26 Provide IUD removal	3.71	3.33
27 Assess fetal well being	3.53	3.50
28 Perform endometrial biopsy	3.10	2.32
29 Perform speculum exam	4.53	4.71
30 Perform Leopold maneuvers	2.55	2.86
31 Perform male reproductive exam	1.47	1.23
32 Perform vulvar biopsy	2.62	1.63
33 Provide education or counseling	4.73	4.87
34 Perform mental health screening	4.14	4.25

Table 2.
Knowledge Statement Ratings.

Knowledge Statements	Importance	Frequency
1A Health History and Physical Examination	4.73	3.79
1B Diagnostic Studies	4.24	3.49
2A Problem Recognition, Management and Referral	4.19	3.37
2B Health Screening, Education and Counseling	4.43	3.67
3A Reproductive Anatomy and Physiology	4.58	3.73
3B Gynecologic Disorders	4.45	3.62
3C Fertility Awareness and Contraception	4.29	3.47
3D Male Sexual and Reproductive Health	2.40	1.41
4A Anatomy and Physiology of Pregnancy	4.20	3.19
4B Prenatal Care	4.14	3.16
4C Assessment of Fetal Well Being	4.06	3.05
4D Medical and Obstetrical Complications of Pregnancy	3.99	2.90
4E Postpartum Care and Complications	3.95	2.82
5A Pharmacokinetics and Pharmacodynamics	4.14	3.54
5B Pharmacotherapeutics	4.27	3.66
6 Professional Practice Issues (e.g., legal, ethics, safety, quality improvement)	3.99	3.09

The survey included demographic questions regarding professional characteristics relevant to the job role. See Table 3 for a summary of the demographic questions in the survey.

Table 3.
Results of the Demographic Questions in the Job Analysis Survey.

1. Do you agree to take part in this survey?	n	%
No	55	2.08
Yes	2584	97.92

2. Do you currently work as a Women’s Health Nurse Practitioner (WHNP)?	n	%
No	564	21.70
Yes	2035	78.30

3. Which of the following best describes your PRIMARY practice setting as a WHNP?	n	%
Academic Clinical Setting	113	7.56
Family Practice Office	56	3.75
Hospital	43	2.88
Independent Practice	74	4.95
Mobile Clinic	2	0.13
OB/GYN Office	684	45.78
Outpatient Clinic	267	17.87
Prenatal Clinic	26	1.74
Public Health Clinic	183	12.25
None	46	3.08

4. Which of the following best describes your basic WHNP training?	<i>n</i>	%
Certificate Based	404	27.08
Graduate Degree	1088	72.92

5. What is your highest level of education?	<i>n</i>	%
Diploma	35	2.34
Associate	77	5.15
Baccalaureate	127	8.50
Masters	1010	67.60
Post Masters	113	7.56
Doctorate - DNP	103	6.89
Doctorate - PhD	20	1.34
Doctorate - Other	9	0.60

6. On average, how many hours per week do you work as a WHNP?
Mean = 33.82 Standard Deviation = 11.20 Minimum = 1 Maximum = 80

7. How many years of experience do you have as a WHNP? (Select 0 for less than 1 year)
Mean = 14.52 Standard Deviation = 10.63 Minimum = 0 Maximum = 49

8. Which of the following best describes your PRIMARY practice location?	<i>n</i>	%
Northeast	295	19.92
South	486	32.82
Midwest	362	24.44
West	338	22.82
Canada	0	0.00

9. What percentage of you practice as a WHNP is devoted to each of the following categories? (Enter whole numbers, without a percent sign, that total 100)	Mean	Standard Deviation	Minimum	Maximum
Primary Care	11.60	19.09	0	100
Gynecology	60.55	28.96	0	100
Obstetrics	27.85	27.99	0	100

10. Does your WHNP practice include providing reproductive health care to men?	<i>n</i>	%
No	1047	70.17
Yes	445	29.83

DEVELOPMENT OF EXAMINATION SPECIFICATIONS

The Job Analysis Committee met on February 20, 2019 to review the results of the survey, finalize the tasks and knowledge that would comprise the next exam content outline, establish linkages among the tasks and knowledge areas, and finalize the content weighting for the examination.

The committee reviewed the demographic results and confirmed that the results matched expectations and impressions of the practitioner population, suggesting that the respondent sample is reflective of those currently working as Women’s Health Nurse Practitioners.

All but one of the task statements were retained by the committee. Task 20 (*Perform colposcopy exam*) was flagged due to low ratings and determined by the committee to be outside of scope for entry level Women’s Health Nurse Practitioners.

All of the knowledge statements were retained by the committee. They noted that the survey results conformed to their expectations.

The committee identified linkages between the task and knowledge statements to ensure that each task was covered by at least one relevant knowledge area and that each knowledge area had at least one relevant task identified. See Table 4 for a summary of the knowledge-task linkages identified.

Table 4.
Linkages Among Knowledge and Task Statements.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1																
1A	x	x	x					x	x		x	x		x		
1B												x		x	x	
2																
2A											x	x		x	x	
2B										x		x				
3																
3A		x	x				x	x								x
3B								x	x							x
3C							x		x							
3D		x	x													
4																
4A		x	x	x	x	x				x	x		x			x
4B				x		x							x			
4C				x		x							x			
4D						x							x			
4E					x		x									
5																
5A									x		x					
5B									x	x	x					
6																
6									x	x	x					

	17	18	19	21	22	23	24	25	26	27	28	29	30	31	32	33	34
1																	
1A		X	X											X			X
1B		X	X							X	X			X	X		
2																	
2A		X	X														X
2B	X			X	X	X	X	X	X							X	X
3																	
3A	X		X	X	X	X	X	X	X		X	X			X		
3B	X			X	X	X	X	X	X		X				X		
3C				X	X	X	X	X	X								
3D														X			
4																	
4A	X									X			X				
4B										X			X				
4C										X			X				
4D										X			X				
4E																	
5																	
5A				X	X	X	X	X	X								
5B				X	X	X	X	X	X								
6																	
6		X	X	X	X	X	X	X	X	X	X			X		X	X

The committee then reviewed the draft content weighting, discussing any adjustments necessary to align the number of items per content area with adequate content coverage on the examination. The draft content weighting was developed by determining a percentage weight based on the relative weight of the mean importance value for each content area.

The committee agreed to make the following adjustments at the domain level, to more accurately reflect the relative focus of each knowledge area for Women’s Health Nurse Practitioners at entry to practice:

- I – Physical Assessment and Diagnostic Testing was decreased from 21 to 18 items.
- II – Primary Care was decreased from 20 to 18 items.
- III – Gynecologic and Reproductive Health was increased from 35 to 52 items.
- IV – Obstetrics was decreased from 46 to 44 items.
- V – Pharmacology was decreased from 19 to 13 items.
- VI – Professional Practice Issues was decreased from 9 to 5 items.

Within each content domain, the committee agreed to item allocation modifications to align with the scope of each knowledge area, as applied at entry to practice. See Table 5 for a summary of the content weighting determination. The final examination specifications can be found in Appendix C.

Table 5.
Content Weighting Determination.

		Final	Survey
1	Physical Assessment and Diagnostic Testing	18	20.37
1A	Health History and Physical Examination	8	10.74
1B	Diagnostic Studies	10	9.63
2	Primary Care	18	19.58
2A	Problem Recognition, Management and Referral	12	9.52
2B	Health Screening, Education and Counseling	6	10.06
3	Gynecologic and Reproductive Health	52	35.70
3A	Reproductive Anatomy and Physiology	10	10.40
3B	Gynecologic Disorders	24	10.11
3C	Fertility Awareness and Contraception	15	9.74
3D	Male Sexual and Reproductive Health	3	5.45
4	Obstetrics	44	46.19
4A	Anatomy and Physiology of Pregnancy	8	9.54
4B	Prenatal Care	12	9.40
4C	Assessment of Fetal Well Being	7	9.22
4D	Medical and Obstetrical Complications of Pregnancy	12	9.06
4E	Postpartum Care and Complications	5	8.97
5	Pharmacology	13	19.10
5A	Pharmacokinetics and Pharmacodynamics	5	9.40
5B	Pharmacotherapeutics	8	9.70
6	Professional Practice Issues	5	9.06
6	Professional Practice Issues (e.g., legal, ethics, safety, quality improvement)	5	9.06

APPENDIX A

SUBJECT MATTER EXPERTS

Name	Job Title	Employer	Years Exp.	State
Susan Peck	WHNP	Summit Medical Group	18	NJ
Suzanne Reiter	APRN specialist (WHNP)	Midcounty/Largo Health Center	32	FL
Jennie Hensley	Associate Professor	University of Texas: Austin	12	TN
Jennifer Clayton	WHNP	Advantia OB-GYN	1	MD
Robin Evenson	Nurse Midwife	Craig Ranch OB-GYN	15	TX
Sharon Allen	WHNP	Davita Medical Group	27	CO
Marcia Clevesy	Assistant Professor	University of Nevada: Las Vegas	8	NV
Gina Fullbright	WHNP	Women's Medical Associates	24	NM

APPENDIX B

SURVEY EMAIL

Date: November 14, 2018
From: info@nccnet.org
Subject: NCC Women's Health Nurse Practitioner Job Analysis Survey

Body: The National Certification Corporation (NCC) invites you to participate in the Women's Health Nurse Practitioner (WHNP) Job Analysis Survey. This survey will be used to identify tasks and knowledge reflective of the professional role of a WHNP.

The results of the survey will help develop the specifications for the NCC WHNP certification exam. This is a great way to contribute to the industry and ensure that a high standard is maintained.

The survey will likely require 15 to 20 minutes to complete. Your individual responses will be kept confidential and will be combined with those of other respondents. The deadline to complete the survey is December 19, 2018.

Please note that participation in this survey is voluntary. At the end of the survey you can choose to provide your name and email for a chance to win a \$100.00 Amazon gift card.

Please read all questions carefully and select responses that best represent entry to practice as a WHNP.

Thank you for your participation. Please direct all inquiries to info@nccnet.org.

APPENDIX C

FINAL EXAMINATION SPECIFICATION

Content Area		# of Questions
1	Physical Assessment and Diagnostic Testing	18
1A	Health History and Physical Examination	8
1B	Diagnostic Studies	10
2	Primary Care	18
2A	Problem Recognition, Management and Referral	12
2B	Health Screening, Education and Counseling	6
3	Gynecologic and Reproductive Health	52
3A	Reproductive Anatomy and Physiology	10
3B	Gynecologic Disorders	24
3C	Fertility Awareness and Contraception	15
3D	Male Sexual and Reproductive Health	3
4	Obstetrics	44
4A	Anatomy and Physiology of Pregnancy	8
4B	Prenatal Care	12
4C	Assessment of Fetal Well Being	7
4D	Medical and Obstetrical Complications of Pregnancy	12
4E	Postpartum Care and Complications	5
5	Pharmacology	13
5A	Pharmacokinetics and Pharmacodynamics	5
5B	Pharmacotherapeutics	8
6	Professional Practice Issues	5
6	Professional Practice Issues (e.g., legal, ethics, safety, quality improvement)	5

Notes:

Each examination form will include one set of 25 unscored pretest items in addition to the 150 scored items. Three hours of testing time. Initial base form passing point will be determined by Angoff method in Q3 of 2019. Future passing points established through pre-equating.