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Job Analysis Report

National Certification Corporation (NCC)

Inpatient Obstetric Nursing (RNC-OB®)

July 2024

Submitted to:



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Executive Summary

This report describes the methodology and procedures used to conduct a job analysis and develop the exam specifications for the National Certification Corporation (NCC) Inpatient Obstetric Nursing (RNC-OB®) 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 committee
3. **Development of Examination Specifications** – The development of an Examination Content Outline by the committee 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 Content Outline (Appendix E) indicates a 150-item examination with content distribution requirements at the competency area (content domain) level as well as topic (content subdomain) level. The five competency areas are:

1. Pregnancy Complications, Treatment and Management
2. Fetal Assessment
3. Labor and Birth
4. Recovery, Postpartum, and Newborn Care
5. Professional Practice Issues

Introduction

This report describes the methodology and procedures used to conduct a job analysis and develop the exam specifications for the National Certification Corporation (NCC) Inpatient Obstetric Nursing (RNC-OB®) certification examination.

The job analysis 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, role delineation study, work analysis, or competency profiling) is a scientific inquiry conducted 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 the 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 to practitioners not involved with the SME panel to validate the task and knowledge statements developed by the committee
3. **Development of Examination Specifications** – The development of an Examination Content Outline by the committee 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*. AERA.

² Sackett, P.R., Walmsley, P.T., Laczko, R.M. (2012). *Job and work analysis: Industrial and Organizational Psychology*. In N. Schmitt, S. Highhouse (Eds.), *Comprehensive Handbook of Psychology*, Volume 12. John Wiley and Sons.

Job Analysis Committee Meeting

National Certification Corporation (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.

Prior to the job analysis committee meeting, seven SMEs were interviewed to help provide background information on the job role, the history of the credential, and the anticipated future of the job role. These interviews were conducted between February 28, 2024, and March 6, 2024.

PSI Services LLC (PSI) conducted a job analysis committee meeting on March 12, 2024, 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 exam content outline was used as a resource when developing the knowledge and tasks. See Appendix B for the presentation used to orient the job analysis committee at the beginning of the meeting.

The job analysis committee developed five task statements, as follows:

1. Demonstrate knowledge of biological, physiological, psychological, and sociocultural factors that influence the birthing person/fetus, newborn, and family unit.
2. Identify alterations in the biological, physiological, psychological, and sociocultural status of the birthing person/fetus, newborn, and family unit.
3. Identify patient's actual or potential problems/needs (including social determinants of health) utilizing information received from the patient, family unit, records, and interprofessional team members.
4. Describe a comprehensive plan for individualized nursing care, including diagnostic, therapeutic, and patient educational components.
5. Apply current standards and evidence-based care using quality/safety/ethical/legal principles to provide patient-centered care to the normal and high risk antepartum, intrapartum, and postpartum patient and family unit.

The job analysis committee developed 20 knowledge statements across five content domains, as follows.

1. Pregnancy Complications, Treatment, and Management

- A. Maternal/Birthing Person Complications Affecting the Fetus and Newborn
- B. Maternal/Birthing Person Psychological and Environmental Factors
- C. Preterm Labor
- D. Multiple Gestation
- E. Placental Disorders

2. Fetal Assessment

- A. Antenatal Testing
- B. Electronic Fetal Monitoring
- C. Non-electronic Fetal Monitoring
- D. Acid-base Interpretation

3. Labor and Birth

- A. Physiology of Labor
- B. Assessment and Management of Labor
- C. Obstetric and Perioperative Procedures
- D. Pain Management and Coping
- E. Labor and Obstetric Complications
- F. Induction and Augmentation

4. Recovery, Postpartum, and Newborn Care

- A. Recovery and Postpartum Physiology and Complications
- B. Family Dynamics, Social Determinants of Health, and Discharge Readiness
- C. Lactation and Infant Nutrition
- D. Newborn Physiology and Complications

5. Professional Practice Issues

- A. Legal, Ethics, Evidenced-based Practice, Safety and Quality Improvement

Following the creation of the task and knowledge lists, the committee members were tasked with identifying linkages between the task and knowledge statements. This was done to provide evidence that the knowledge areas were indeed required to perform the tasks identified. This was also done 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. Table 1 shows a matrix of knowledge-task linkages identified.

Table 1.

Linkages Among Knowledge and Task Statements.

	1	2	3	4	5
1					
A	X	X	X	X	X
B	X	X	X	X	X
C	X	X	X	X	X
D	X	X	X	X	X
E	X	X	X	X	X
2					
A	X	X	X	X	X
B	X	X	X	X	X
C	X	X	X	X	X
D	X	X	X	X	X
3					
A	X	X	X	X	X
B	X	X	X	X	X
C	X	X	X	X	X
D	X	X	X	X	X
E	X	X	X	X	X
F	X	X	X	X	X
4					
A	X	X	X	X	X
B	X	X	X	X	X
C	X	X	X	X	X
D	X	X	X	X	X
5					
A	X	X	X	X	X

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. The importance and frequency scale were used to evaluate the appropriateness of the inclusion of each knowledge statement and task.

Importance

How important is this knowledge area in your role?
How important is this task to your role?

- 0 – Not applicable
- 1 – Minimally important
- 2 – Somewhat important
- 3 – Moderately important
- 4 – Very important
- 5 – Critically important

Frequency

How frequently do you use this knowledge in your role?
How frequently do you perform this task in your role?

- 0 – Never
- 1 – Very rarely
- 2 – Seldom
- 3 – Occasionally
- 4 – Frequently
- 5 – Very frequently

Between April 1, 2024, and April 9, 2024, a pilot survey was conducted with the job analysis committee, the interviewees, and NCC staff members to ensure that the survey was operating correctly, and any modifications or corrections were made address the pilot survey reviewers' comments. See Appendix C for a copy of the final job analysis survey.

The live survey was sent using online survey software to a list of 40,290 individuals that was obtained from NCC. The list consisted of certified and noncertified registered nurse providers working in hospital obstetrics. The number of individuals that responded to the survey was 1,984 (.05%). The survey was opened on April 17, 2024, and closed on May 19, 2024. See Appendix D for the email sent to potential respondents.

Following the close of the survey, the data were analyzed to identify any respondents who did not complete the survey or provided responses lacking any variance (i.e., “straight-lining” or providing the same response to every task or knowledge). Responses from 798 respondents were removed from the data set, yielding a usable number of 1186 completed responses. Of those respondents who were removed, 475 were removed due to not completing the survey, 316 were removed due to not being involved in patient care as an Inpatient Obstetric Nurse and 7 were removed due to a lack of variance in their responses.

Table 2 shows the mean ratings provided for frequency and importance of the task statements. Table 3 shows the mean ratings provided for the frequency and importance of the knowledge statements.

Table 2.
Frequency and Importance Ratings for Task Statements.

Task Statements		Importance	Frequency
1	Demonstrate knowledge of biological, physiological, psychological, and sociocultural factors that influence the birthing person/fetus, newborn, and family unit.	4.30	4.52
2	Identify alterations in the biological, physiological, psychological, and sociocultural status of the birthing person/fetus, newborn, and family unit.	4.26	4.38
3	Identify patient's actual or potential problems/needs (including social determinants of health) utilizing information received from the patient, family unit, records, and interprofessional team members.	4.25	4.40
4	Describe a comprehensive plan for individualized nursing care, including diagnostic, therapeutic, and patient educational components.	4.08	4.27
5	Apply current standards and evidence-based care using quality/safety/ethical/legal principles to provide patient-centered care to the normal and high risk antepartum, intrapartum, and postpartum patient and family unit.	4.51	4.65

Table 3.***Frequency and Importance Ratings for Knowledge Statements.***

Knowledge Statements		Importance	Frequency
1	Maternal/Birthing Person Complications Affecting the Fetus and Newborn	4.67	4.50
2	Maternal/Birthing Person Psychological and Environmental Factors	4.16	4.25
3	Preterm Labor	4.44	4.03
4	Multiple Gestation	4.11	3.35
5	Placental Disorders	4.39	3.64
6	Antenatal Testing	3.97	3.63
7	Electronic Fetal Monitoring	4.66	4.84
8	Non-electronic Fetal Monitoring	3.12	2.53
9	Acid-base Interpretation	3.59	3.04
10	Physiology of Labor	4.40	4.55
11	Assessment and Management of Labor	4.56	4.66
12	Obstetric and Perioperative Procedures	4.30	4.27
13	Pain Management and Coping	4.38	4.70
14	Labor and Obstetric Complications	4.70	4.46
15	Induction and Augmentation	4.28	4.52
16	Physiology of Labor	4.45	4.39
17	Recovery and Postpartum Physiology and Complications	3.92	3.92
18	Family Dynamics, Social Determinants of Health, and Discharge Readiness	3.99	3.95
19	Lactation and Infant Nutrition	4.19	3.80
20	Newborn Physiology and Complications	4.19	3.95
21	Legal, Ethics, Evidenced-based Practice, Safety and Quality Improvement	3.97	4.50

The survey included demographic questions regarding professional characteristics relevant to the job role. Table 4 shows a summary of the demographic questions in the survey.

Table 4.
Results of the Demographic Questions in the Job Analysis Survey.

1. How many years of experience do you have working as an Inpatient Obstetric Nurse?	<i>n</i>	%
1-5 years (If less than 1 year experience please select 1-5 years)	73	6.13%
6-10 years	193	16.20%
11-15 years	164	13.77%
16-20 years	171	14.36%
21 plus years	590	49.54%
	1191	

2. What is the highest level hospital/unit designation in which you practice?	<i>n</i>	%
Birth Center	2	0.17%
Level I (Basic Care)	134	11.25%
Level II (Specialty care for newborns at 32 weeks gestation or more, weighting 1500 g or more with problems expected to resolve rapidly or who are convalescing from higher level care.)	322	27.04%
Level III (Subspecialty care for high-risk newborns needing continuous life support and comprehensive care for critical illness. Including infants weighing less than 1500 g or less than 32 weeks gestation at birth.)	357	29.97%
Level IV (Includes Level III care as well as on-site pediatric medical and surgical subspecialties to care for infants with complex congenital or acquired conditions, coordinate transport systems and outreach education.)	364	30.56%
Do not know	10	0.84%
N/A	2	0.17%
	1177	

3. Which of the following best describes your PRIMARY practice setting?	<i>n</i>	%
Antepartum	46	3.86%
Education	37	3.11%
Labor & Delivery	688	57.77%
LDRP	234	19.65%
Management/Leadership	41	3.44%
OB Triage/OB ED	50	4.20%
Postpartum	30	2.52%
Research/Quality Improvement	6	0.50%
Other (please specify)	58	4.87%
	1190	

4. Which of the following BEST describes your professional primary role?	<i>n</i>	%
Administrator/Management	84	7.05%
Certified Nurse Midwife	6	0.50%
Clinical Nurse Specialist	24	2.02%
Educator	63	5.29%
Nurse Practitioner	10	0.84%
Quality Improvement/Safety Nurse	15	1.26%
Researcher	0	0.00%
Staff Nurse/Bedside Nurse	944	79.26%
Other (please specify)	44	3.69%
	1190	

5. What is your highest level of education?	<i>n</i>	%
Diploma/Certificate	30	2.52%
Associate	137	11.50%
Baccalaureate	735	61.71%
Masters	241	20.24%
Post Masters/Doctorate	10	0.84%
Doctorate - DNP	23	1.93%
Doctorate - PhD	5	0.42%
Other (please specify)	9	0.76%
	1190	

6. On average, how many hours per week do you provide patient care as an Inpatient Obstetric Nurse?
Mean = 30.06 Standard Deviation = 10.96 Minimum = 0 Maximum = 100

7. Which of the following best describes your PRIMARY practice location?	<i>n</i>	%
Region 1: Northeast (ME, NH, VT, MA, RI, CT, NY, NJ, PA)	211	17.72%
Region 2: Midwest (WI, IL, MI, IN, OH, ND, SD, NE, KS, MN, IA, MO)	250	20.99%
Region 3: South (KY, TN, MS, AL, FL, GA, SC, NC, VA, WV, DC, MD, DE, TX, OK, AR, LA)	432	36.27%
Region 4: West (MT, ID, WY, NV, UT, CO, AZ, NM, WA, OR, CA, AK, HI)	294	24.69%
Canada	0	0.00%
Other	4	0.34%
	1191	

8. Do you use Quantitative Blood Loss (QBL) in your practice setting?	<i>n</i>	%
Yes	1061	89.08%
No	63	5.29%
	1124	

9. Do you use a uterine tamponade device (e.g., Bakri) in your practice setting?	<i>n</i>	%
Yes	1061	89.08%
No	63	5.29%
	1124	

10. Do you use a uterine vacuum device (e.g., JADA) in your practice setting?	<i>n</i>	%
Yes	985	82.70%
No	138	11.59%
	1123	

11. Do you use synthetic hygroscopic dilators (e.g., Dilapan) for cervical ripening?	<i>n</i>	%
Yes	193	16.20%
No	929	78.00%
	1122	

12. Do you use laminaria for cervical ripening?	<i>n</i>	%
Yes	189	15.87%
No	937	78.67%
	1126	

Development of Exam Specifications

The Job Analysis Committee met on May 22, 2024, to review the results of the survey, finalize the tasks and knowledge that would comprise the next Examination Content Outline, 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 the target population.

The committee then reviewed the draft content weighting, discussing any adjustments necessary to align the number of items per content area for adequate content coverage on the assessment. The draft content weighting was developed by calculating the criticality value (mean importance rating multiplied by the mean frequency rating) and then determining a percentage weight based on the relative weight of the criticality value for each content area. Weighting was adjusted in some areas to reflect a compromise with the current weights, criticality and depth of each knowledge area as well as testability.

See Table 5 for a summary of the content weighting determination. The final Examination Content Outline can be found in Appendix E.

Table 5.
Content Weighting Determination.

Knowledge Statements		Criticality	Percentage	Initial # Items	Final # Items
1A	Maternal/Birthing Person Complications Affecting the Fetus and Newborn	21.00	6.07%	9.1	9
1B	Maternal/Birthing Person Psychological and Environmental Factors	17.69	5.12%	7.7	8
1C	Preterm Labor	17.91	5.18%	7.8	8
1D	Multiple Gestation	13.75	3.98%	6.0	6
1E	Placental Disorders	16.00	4.63%	6.9	7
2A	Antenatal Testing	14.40	4.16%	6.2	6
2B	Electronic Fetal Monitoring	22.55	6.52%	9.8	10
2C	Non-electronic Fetal Monitoring	7.91	2.29%	3.4	3
2D	Acid-base Interpretation	10.93	3.16%	4.7	5
3A	Physiology of Labor	20.02	5.79%	8.7	9
3B	Assessment and Management of Labor	21.22	6.14%	9.2	9
3C	Obstetric and Perioperative Procedures	18.36	5.31%	8.0	8
3D	Pain Management and Coping	20.59	5.96%	8.9	9
3E	Labor and Obstetric Complications	20.97	6.06%	9.1	9
3F	Induction and Augmentation	19.36	5.60%	8.4	8

Knowledge Statements		Criticality	Percentage	Initial # Items	Final # Items
4A	Recovery and Postpartum Physiology and Complications	19.53	5.65%	8.5	8
4B	Family Dynamics, Social Determinants of Health, and Discharge Readiness	15.35	4.44%	6.7	7
4C	Lactation and Infant Nutrition	15.75	4.56%	6.8	7
4D	Newborn Physiology and Complications	15.91	4.60%	6.9	7
5	Legal, Ethics, Evidenced-based Practice, Safety and Quality Improvement	16.54	4.78%	7.2	7

Appendix A.

Subject Matter Experts

Job Analysis Committee

NAME	RELEVANT CREDENTIALS	YEARS OF EXPERIENCE	EMPLOYER/ AFFILIATION	JOB TITLE	GEOGRAPHIC LOCATION
Ashley Locklear	MSN, RNC-OB, C-EFM, C-ONQS	14	Elsevier	Clinical Editor, Obstetric, Neonatal, GYN Care Planning	Elgin, SC
Caitlin McKay	MSN, FNP-C, RNC-OB, C-EFM	1	Prisma Health Midlands	Nurse Practitioner, Maternal Fetal Medicine	Irmo, SC
Karen Beebe	MSN, RNC-OB, C-EFM, C-ONQS	28	St. Mary Hospital, Southern Connecticut State University, Fairfield University	Nursing Professional Development Specialist, Adjunct Faculty	Manchester, CT
Kimberly Christmas	MSN, RN, RNC-OB, RNC-IAP, C-EFM	11	Putnam Hospital Birthing Center, New York-Presbyterian/ Lawrence Hospital	Manager Patient Care, Staff RN	Putnam Valley, NY
Laura Garifo	MSN, RNC-OB, C-EFM, C-ONQS	6	MedStar Health SiTEL	Obstetric System Education Program Coordinator	Sunderland, MD
Linda Teichroeb	BSN, RNC-OB	4	Samaritan Health Services	L&D RN	Lebanon, OR
Melissa Kelley	MSN, RN, NE-BC, RNC-OB, C-EFM, CBC	18	Northwestern Medicine Lake Forest Hospital	Director of Maternity Services	Buffalo Grove, IL
Nicole Frisbie	MSN, RN, RNC-OB, C-EFM	6	Good Samaritan Hospital, Edward Hospital, Elmhurst University	L&D RN, Clinical Instructor	Countryside, IL

NAME	RELEVANT CREDENTIALS	YEARS OF EXPERIENCE	EMPLOYER/ AFFILIATION	JOB TITLE	GEOGRAPHIC LOCATION
Nicole McCaughin	MSN, RNC-OB, RNC-IAP, C-EFM, C-ONQS	13	John Muir Health, State of California Board of Registered Nursing	L&D Staff Nurse, Expert Practice Consultant	Alamo, CA
Zarina Paltiel Gabay	MSN, RN, RNC-OB, IBCLC	1	Beth Israel Deaconess Medical Center, University of Massachusetts Boston	L&D RN, Clinical Associate Lecturer, and Outreach Clinical Coordinator	Needham, MA

Interviewees

NAME	RELEVANT CREDENTIALS	YEARS OF EXPERIENCE	EMPLOYER/ AFFILIATION	JOB TITLE	GEOGRAPHIC LOCATION
Ashley Locklear	MSN, RNC-OB, C-EFM, C-ONQS	14	Elsevier	Clinical Editor, Obstetric, Neonatal, GYN Care Planning	Elgin, SC
Caitlin McKay	MSN, FNP-C, RNC-OB, C-EFM	1	Prisma Health Midlands	Nurse Practitioner, Maternal Fetal Medicine	Irmo, SC
Karen Beebe	MSN, RNC-OB, C-EFM, C-ONQS	28	St. Mary Hospital, Southern Connecticut State University, Fairfield University	Nursing Professional Development Specialist, Adjunct Faculty	Manchester, CT
Melissa Kelley	MSN, RN, NE-BC, RNC-OB, C-EFM, CBC	18	Northwestern Medicine Lake Forest Hospital	Director of Maternity Services	Buffalo Grove, IL
Nicole Frisbie	MSN, RN, RNC-OB, C-EFM	6	Good Samaritan Hospital, Edward Hospital, Elmhurst University	L&D RN, Clinical Instructor	Countryside, IL
Nicole McCaughin	MSN, RNC-OB, RNC-IAP, C-EFM, C-ONQS	13	John Muir Health, State of California Board of Registered Nursing	L&D Staff Nurse, Expert Practice Consultant	Alamo, CA
Zarina Paltiel Gabay	MSN, RN, RNC-OB, IBCLC	1	Beth Israel Deaconess Medical Center, University of Massachusetts Boston	L&D RN, Clinical Associate Lecturer, and Outreach Clinical Coordinator	Needham, MA

Appendix B.

Job Analysis Presentation



Job Analysis

PSI Certification Psychometrics

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Objectives

- Develop a description of the profession
 - Define the relevant tasks
 - Define the relevant knowledge
- Develop all other elements for a survey
 - Develop background information questions
 - Review rating scales
- Establish linkages
 - Identify meaningful connections between the task and knowledge lists



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Job Analysis Process

1. Prepare Draft Materials
2. Conduct Job Analysis Meeting 
3. Conduct Pilot Survey
4. Conduct Live Survey
5. Perform Data Analysis
6. Create Exam Specifications
7. Develop Summary Report



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Introduction



Purpose of Credentialing Examinations

- To protect the public from harm caused by incompetent professional practice
- To assess professional competence in terms of the knowledge and skills required to successfully perform the tasks associated with the job role
- To establish and apply a consistent standard that reflects the competency level required of practitioners who meet the eligibility requirements
- To provide a valid and reliable means of identifying those who are competent to practice in the profession



What is a Job Analysis?

“ Procedure to identify the content of a job in terms of activities involved and attributes or requirements needed to perform the activities. ”

This is the primary source of content validity for a credentialing assessment

This is the process by which the Examination Specifications are created

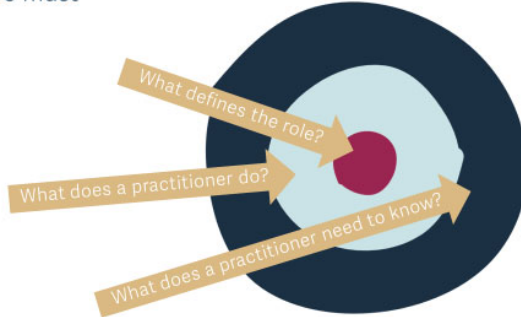
A representative list of knowledge and tasks associated with the job is developed



Multiple Levels of Analysis

To create a comprehensive and accurate representation of the job role, we must identify:

- Target Population
- Tasks Performed
- Knowledge Required



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Terminology

Tasks



Knowledge

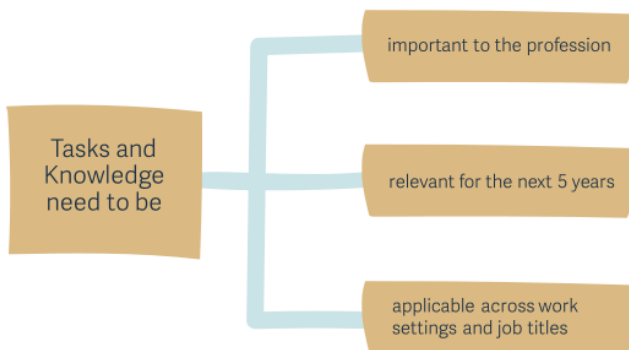


Content Domains (and subdomains)



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Requirements for Tasks and Knowledge



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Rating Scales

Importance

How important is this
[task / knowledge]
to the job role?

- 0 - Not Relevant
- 1 - Minimally Important
- 2 - Somewhat Important
- 3 - Moderately Important
- 4 - Very Important
- 5 - Critically Important

Frequency

How frequently is this
[task performed /
knowledge used]
in the job role?

- 0 - Not Relevant
- 1 - Rarely
- 2 - Seldom
- 3 - Occasionally
- 4 - Frequently
- 5 - Very Frequently



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Why Are You Here?

Subject Matter Experts (SMEs)

You are here to provide your content expertise and your professional experience

Facilitators

We are here to guide you through the process

Client Representatives

You are here to provide additional background information and the certifying body's perspective



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Questions?



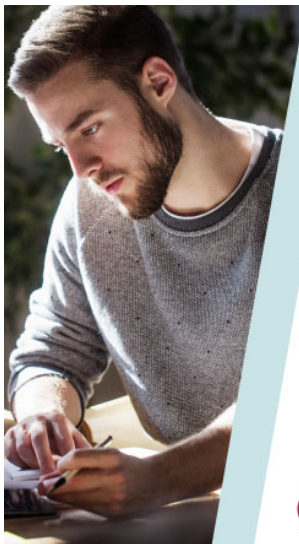
psionline.com

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Linkage Process



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Linkage Analysis

Knowledge vs. Task

- The list of Knowledge areas is used to delineate what content will be directly assessed by the exam
- Tasks provide additional context for the application of those knowledge and skills

Purpose of Linkage Analysis

- To establish evidence that the Knowledge areas are applicable to the Tasks
- To determine any potential gaps in either inventory



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Linkage Matrix

- We will identify connections among tasks and knowledge

The Outcome Looks Something Like This

Each linkage represents that the knowledge is required in order to complete the task

	T1	T2	T3	T4	T5
1A1	X				
1A2		X			
1A3		X		X	
1B1			X		
1B2			X		X
1C1				X	
1C2				X	
2A1	X		X		
2A2		X			
2B1			X	X	
2B2		X			
2B3			X	X	X
2B4		X	X		



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Linkage Thought Process

Doesn't everything apply to everything?

- Not exactly

	Grilling	Baking
Knife Techniques	X	-

Consider this example:

- I need knowledge of Knife Techniques to Prepare Ingredients For Grilling
- I don't need knowledge of Knife Techniques to Mix Baking Ingredients



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Questions?



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Appendix C.

Survey Text



NCC Inpatient Obstetric Nursing (INP) Job Analysis Survey

Welcome

The purpose of this survey is to identify tasks and knowledge reflective of the nurse who is specializing in caring for inpatient obstetric patients. The results of this survey will be used to help develop the specifications for the INP certification exam. Those who complete it will have a chance to win an Amazon gift card.

The survey will likely require 10 to 15 minutes to complete. You can complete each part of the survey in separate sittings at the same computer. Please be aware that you must completely finish a page before clicking on "Next" to save your responses up to that point. If you need to review your responses, you can use the "Prev" button to move back through the survey. There is no limit on the number of times you can use the link to go back to the survey before clicking on "Done" to submit your survey.

Your individual responses will be kept confidential and will be combined with those of other respondents. Only staff persons from PSI Services and NCC will have access to the data collected. Aggregated data from this survey will be published in a report that summarizes the process used to develop the specifications for the INP certification exam. For more information about PSI's privacy and data protection policy, please click [here](#).

Please direct all inquiries to: info@nccnet.org

The deadline for completion of the survey is **end of day May 19, 2024**.

Do you agree to participate in the survey?

- Yes
- No



Currently Working

For the purposes of this survey, the role of a registered nurse who is specializing in caring for inpatient obstetric patients is defined as follows:

A licensed registered nurse with specialized knowledge and skills who cares for the hospitalized pregnant person during the antepartum, intrapartum, postpartum and newborn periods.

Are you currently involved in patient care as an Inpatient Obstetric Nurse?

Yes

No



Demographics

Please answer the following demographic questions before proceeding to the next page to start the survey.

How many years of experience do you have working as an Inpatient Obstetric Nurse? (Select one)

- 1-5 years (If less than 1 year experience please select 1-5 years)
- 6-10 years
- 11-15 years
- 16-20 years
- 21 plus years

What is the highest level hospital/unit designation in which you practice?

- Birth Center (Peripartum care of low-risk pregnant patients with uncomplicated singleton term pregnancies with a vertex presentation who expect an uncomplicated birth).
- Level I (Basic Care) Uncomplicated pregnancies with ability to detect, stabilize and initiate management of unanticipated maternal-fetal or neonatal problems and transfer as needed.
- Level II (Specialty Care) Level I facility plus care of appropriate high-risk antepartum, intrapartum or postpartum conditions both directly admitted or transferred in.
- Level III (Subspecialty Care) Level II facility plus care of more complex maternal conditions, obstetric complications and fetal conditions. Advanced imaging.
- Level IV (Regional Health Care Centers) Level III facility plus on-site medical and surgical care of the most complex maternal conditions and critically ill pregnant patients and fetuses throughout antepartum, intrapartum and postpartum. Onsite ICU care, maternal referral and transport, outreach.
- Do not know
- Not applicable

Which of the following best describes your PRIMARY practice setting?

- Antepartum
- Education
- Labor and Delivery
- LDRP
- Management/Leadership
- OB Triage/OB ED
- Postpartum
- Research/Quality Improvement
- Other (please specify)

Which of the following BEST describes your professional primary role?

- Administrator/Management
- Certified Nurse Midwife
- Clinical Nurse Specialist
- Educator
- Nurse Practitioner
- Quality Improvement/Safety Nurse
- Researcher
- Staff Nurse/Bedside Nurse
- Other (please specify)

What is your highest level of education?

- Diploma/Certificate
- Associate
- Baccalaureate
- Masters
- Post Masters/Doctorate
- Doctorate - DNP
- Doctorate - PhD
- Other (please specify)

On average, how many hours per week do you provide patient care as an Inpatient Obstetric Nurse?

Which of the following best describes your PRIMARY practice location?

- Region 1: Northeast (ME, NH, VT, MA, RI, CT, NY, NJ, PA)
- Region 2: Midwest (WI, IL, MI, IN, OH, ND, SD, NE, KS, MN, IA, MO)
- Region 3: South (KY, TN, MS, AL, FL, GA, SC, NC, VA, WV, DC, MD, DE, TX, OK, AR, LA)
- Region 4: West (MT, ID, WY, NV, UT, CO, AZ, NM, WA, OR, CA, AK, HI)
- Canada
- Other (please specify)



Knowledge

Please use the following rating scales to indicate how frequently you use each knowledge area and how important it is to your professional role providing care for inpatient obstetric patients .

Frequency: How frequently do you use this knowledge in your role?

- 0 - Never
- 1 - Very rarely
- 2 - Seldom
- 3 - Occasionally
- 4 - Frequently
- 5 - Very frequently

Importance: How important is this knowledge area to your role?

- 0 - Not applicable
- 1 - Minimally important
- 2 - Somewhat important
- 3 - Moderately important
- 4 - Very important
- 5 - Critically important

Pregnancy Complications, Treatment, and Management

	Frequency	Importance
Maternal/Birthing Person Complications Affecting the Fetus and Newborn	<input type="text"/>	<input type="text"/>
Maternal/Birthing Person Psychological and Environmental Factors	<input type="text"/>	<input type="text"/>
Preterm Labor	<input type="text"/>	<input type="text"/>
Multiple Gestation	<input type="text"/>	<input type="text"/>
Placental Disorders	<input type="text"/>	<input type="text"/>

Fetal Assessment

	Frequency	Importance
Antenatal Testing	<input type="text"/>	<input type="text"/>
Electronic Fetal Monitoring	<input type="text"/>	<input type="text"/>
Non-electronic Fetal Monitoring	<input type="text"/>	<input type="text"/>
Acid-base Interpretation	<input type="text"/>	<input type="text"/>

Labor and Birth

	Frequency	Importance
Physiology of Labor	<input type="text"/>	<input type="text"/>
Assessment and Management of Labor	<input type="text"/>	<input type="text"/>
Obstetric and Perioperative Procedures	<input type="text"/>	<input type="text"/>
Pain Management and Coping	<input type="text"/>	<input type="text"/>
Labor and Obstetric Complications	<input type="text"/>	<input type="text"/>
Induction and Augmentation	<input type="text"/>	<input type="text"/>

Recovery, Postpartum, and Newborn Care

	Frequency	Importance
Recovery and Postpartum Physiology and Complications	<input type="text"/>	<input type="text"/>
Family Dynamics, Social Determinants of Health, and Discharge Readiness	<input type="text"/>	<input type="text"/>
Lactation and Infant Nutrition	<input type="text"/>	<input type="text"/>
Newborn Physiology and Complications	<input type="text"/>	<input type="text"/>

Professional Practice Issues

	Frequency	Importance
Legal, Ethics, Evidenced-based Practice, Safety and Quality Improvement	<input type="text"/>	<input type="text"/>

What critical knowledge area, if any, do you think is missing from this list?



Tasks

Please use the following rating scales to indicate how frequently you perform each task and how important it is to your professional role providing care for inpatient obstetric patients.

Frequency: How frequently do you perform this task in your role?

- 0 - Never
- 1 - Very rarely
- 2 - Seldom
- 3 - Occasionally
- 4 - Frequently
- 5 - Very frequently

Importance: How important is this task to your role?

- 0 - Not applicable
- 1 - Minimally important
- 2 - Somewhat important
- 3 - Moderately important
- 4 - Very important
- 5 - Critically important

Task Ratings

	Frequency	Importance
Demonstrate knowledge of biological, physiological, psychological, and sociocultural factors that influence the birthing person/fetus, newborn, and family unit.	<input type="text"/>	<input type="text"/>
Identify alterations in the biological, physiological, psychological, and sociocultural status of the birthing person/fetus, newborn, and family unit.	<input type="text"/>	<input type="text"/>
Identify patient's actual or potential problems/needs (including social determinants of health) utilizing information received from the patient, family unit, records, and interprofessional team members.	<input type="text"/>	<input type="text"/>
Describe a comprehensive plan for individualized nursing care, including diagnostic, therapeutic, and patient educational components.	<input type="text"/>	<input type="text"/>
Apply current standards and evidence-based care using quality/safety/ethical/legal principles to provide patient-centered care to the normal and high risk antepartum, intrapartum, and postpartum patient and family unit.	<input type="text"/>	<input type="text"/>

What critical task, if any, do you think is missing from this list?



Additional Questions

Do you use Quantitative Blood Loss (QBL) in your practice setting?

- Yes
- No

Do you use a uterine tamponade device (e.g., Bakri) in your practice setting?

- Yes
- No

Do you use a uterine vacuum device (e.g., JADA) in your practice setting?

- Yes
- No

Do you use synthetic hygroscopic dilators (e.g., Dilapan) for cervical ripening?

- Yes
- No

Do you use laminaria for cervical ripening?

- Yes
- No



Thank You!

Thank you for completing the 2024 NCC INP Job Analysis Survey!

If you need to review your answers, you can use the "Prev" button below to move back through the survey.

If you would like to join the Content or Item Writing Team, please provide your name and email?

Name

Email

Those who complete the survey can enter a drawing for a chance to win a \$100 Amazon gift card. Your name and email address are requested for this drawing and will be used for this purpose only.

Do you agree to provide your name and email address in order to enter the drawing?

Yes

No



Drawing Information

Enter the drawing for a \$100 Amazon gift card.

Your name

Your email

Please re-enter your email address



Comment Box

Thank you very much for your responses.

Please provide any additional comments in the text box below.

Please click on **Done** to complete the survey and submit your responses.

Please provide any additional comments here.

Appendix D.

Survey Invitation Email

DATE:	April 17, 2024
FROM:	NCC
SUBJECT:	NCC Need Your Input on Inpatient Obstetric Nursing!
BODY:	<p>This is your opportunity to be heard about the work YOU do in the field of Inpatient Obstetric Nursing!</p> <p>The National Certification Corporation (NCC), together with its certification testing vendor PSI Services, is conducting a job analysis study to identify tasks and knowledge reflective of the role registered nurses who specialize in caring for inpatient obstetric patients. Your input will shape the exam specifications for the Inpatient Obstetric Nursing (RNC-OB®) certification program. It will only take 10-15 minutes to complete and completed entries will be entered in a gift card drawing.</p> <p>Please complete the survey by Sunday, May 19th, 2024.</p> <p>Link: https://www.research.net/r/XM9926W</p> <p>Questions about the survey or the certification can be directed to: info@nccnet.org</p>

Appendix E.

Exam Content Outline

10.00	1	Pregnancy Complications, Treatment, and Management	42	28%
	1A	Maternal/Birthing Person Complications Affecting the Fetus and Newborn	16	
	1B	Maternal/Birthing Person Psychological and Environmental Factors	5	
	1C	Preterm Labor	11	
	1D	Multiple Gestation	3	
	1E	Placental Disorders	7	
11.00	2	Fetal Assessment	26	17%
	2A	Antenatal Testing	5	
	2B	Electronic Fetal Monitoring	16	
	2C	Non-electronic Fetal Monitoring	3	
	2D	Acid-base Interpretation	2	
12.00	3	Labor and Birth	54	36%
	3A	Physiology of Labor	5	
	3B	Assessment and Management of Labor	16	
	3C	Obstetric and Perioperative Procedures	8	
	3D	Pain Management and Coping	7	
	3E	Labor and Obstetric Complications	10	
	3F	Induction and Augmentation	8	
14.00	4	Recovery, Postpartum, and Newborn Care	24	16%
	4A	Recovery and Postpartum Physiology and Complications	9	
	4B	Family Dynamics, Social Determinants of Health, and Discharge Readiness	4	
	4C	Lactation and Infant Nutrition	4	
	4D	Newborn Physiology and Complications	7	
15.00	5	Professional Practice Issues	4	3%
	5A	Legal, Ethics, Evidenced-based Practice, Safety and Quality Improvement	4	

Secondary Classifications – Task List

1. Demonstrate knowledge of biological, physiological, psychological, and sociocultural factors that influence the birthing person/fetus, newborn, and family unit.
2. Identify alterations in the biological, physiological, psychological, and sociocultural status of the birthing person/fetus, newborn, and family unit.
3. Identify patient's actual or potential problems/needs (including social determinants of health) utilizing information received from the patient, family unit, records, and interprofessional team members.
4. Describe a comprehensive plan for individualized nursing care, including diagnostic, therapeutic, and patient educational components.
5. Apply current standards and evidence-based care using quality/safety/ethical/legal principles to provide patient-centered care to the normal and high risk antepartum, intrapartum, and postpartum patient and family unit.



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