



PEDIATRIC NURSING
CERTIFICATION BOARD

2016-17 Job Task Analysis of the Pediatric Primary Care Mental Health Specialist Executive Summary

The PMHS examination is designed to assess the specialized knowledge required in providing developmental, behavioral, and mental health (DBMH) services to children, adolescents, and young adults. All certification boards conduct periodic Job Task Analyses (JTA) to ensure that the examination content accurately represents practice in the specialty area.

The Pediatric Nursing Certification Board (PNCB) conducted a JTA for the PMHS credential in June through December 2016. Findings from this research will be used to update the test specifications and detailed content outline that is used to build versions of the Pediatric Primary Care Mental Health Specialist (PMHS) certification examination.

A JTA is designed to obtain descriptive information about the tasks performed in practice. The purpose of this JTA was to:

- update and validate the inventory of tasks performed by advanced practice nurses with added specialty expertise who provide DBMH services to children, adolescents, and adults;
- update existing inventories of diagnoses seen and interventions performed in specialty practice;
- create an inventory of screening and assessment tools used by advanced practice nurses in the specialty; and
- develop a new test specifications and detailed content outline for the PMHS examination.

Conduct of the JTA

The JTA consisted of qualitative and quantitative data collection activities. The successful outcome of the JTA depended on the thoroughness of information provided by advanced practice registered nurses who provide early access to DBMH services, most often in primary care or developmental and behavioral specialty clinics. The existing detailed content outline for the PMHS examination, which describes the domains of practice and tasks performed by PMHSs as well as the diagnoses seen and interventions performed, formed the starting point for the JTA.

The work of updating the current PMHS content outline was mainly accomplished through the work of a JTA Task Force comprised of subject-matter experts (SMEs) in the specialty. The Task Force was selected to represent diversity in practice settings and geographic location to ensure representativeness in the description of practice. In addition to updating existing elements of the outline, the Task Force created descriptions of two other aspects of specialty practice: conditions that may adversely affect patients and the screening and assessment tools used.

Survey Development

After the Task Force performed its work in updating the original 2011 examination content outline, ProExam gathered validation evidence for the domains, tasks, disorders, and interventions by incorporating them into a web-based survey instrument, developing appropriate rating scales, and administering the survey to a large sample of APRNs. The survey, administered from October 6 to October 26, 2016, consisted of 10 sections.

Both currently certified PMHSs (N=338) and holders of the CPNP-PC certification who did not also hold the PMHS (N=12,902) were invited to participate in the survey.

A link to the survey was also distributed via a listserv maintained by the National Association of Pediatric Nurse Practitioners (NAPNP) DBMH Special Interest Group (SIG).

Survey Sections
1: Tasks
2: Domains
3: Diagnoses
4: Psychosocial/Environmental Conditions
5: Pharmacological Interventions
6: Non-pharmacological Interventions
7: Screening and Assessment Tools
8: Evaluation of Survey Comprehensiveness
9: Demographic Questions
10: Evaluation of PMHS Eligibility Criteria

Results

Survey Response

A total of 293 advanced practice nurses completed the survey. Nurse practitioners who did not practice in the specialty were exited from the survey.

Survey Ratings

Participants were asked to rate how important each task was on a 4-point scale (1 = Not at all important to 4 = Highly important) and how frequently they performed it on a 5-point scale (1 = Never to 5 = Very Frequently). Participants also rated the importance of each content outline domain and the percentage of time spent in it. They rated the percentage of their patients presenting with each diagnosis and the percentage experiencing each psychosocial/environmental condition. Participants also rated: (a) whether they recommended, prescribed or monitored each pharmacological intervention; (b) whether they performed/monitored or referred/recommended each non-pharmacological intervention; and (c) whether they administered or interpreted each screening and assessment tool.

Content Coverage

Most survey participants indicated the role of the advanced practice nurse providing services to children, adolescents, and young adults with DBMH concerns was adequately to very well covered.

Test Specifications Development

The JTA Task Force convened to review the results of the JTA survey and create an updated content outline that will guide future versions of the PMHS examination until the next JTA is performed.

Summary

This study used a mixed-methods approach to identifying tasks performed, diagnoses seen, interventions performed, and screening and assessment tools used by advanced practice nurses providing advanced assessment, evaluation, diagnosis, treatment, and management of common DBMH problems in children, adolescents, and young adults. The study, conducted in alignment with best practice accreditation guidelines for certification programs, led to the creation of an updated content outline for the PMHS examination.

Results at a Glance

Who Completed the Survey? >>>

On average, respondents had more than 11 years in the specialty and spent 79% of their time in clinical practice. Forty five percent held the PMHS credential.

Task Ratings >>>

All 77 tasks achieved importance and frequency ratings above the thresholds for inclusion in the PMHS detailed content outline.

Diagnoses, Interventions, Screening/Assessment Tools >>>

Based on the survey ratings:

- 28 of 36 diagnoses,
- 11 of 11 pharmacological interventions,
- 6 of 23 non-pharmacological interventions, and
- 12 of 43 screening and assessment tools were identified as suitable for testing.