EXECUTIVE SUMMARY

The Pediatric Nursing Certification Board's (PNCB's) Certified Pediatric Nurse Practitioner – Primary Care (CPNP-PC®) examination validates the knowledge and expertise of pediatric nurse practitioners in primary care. Certification boards conduct periodic job task analyses (JTAs) to ensure that the examination content accurately represents practice.

PNCB conducted a job task analysis (JTA) of pediatric nurse practitioners from May 2022 through January 2023, in partnership with ACT® Credentialing and Career Services (ACT). Findings from this research will be used to update the test specifications and detailed content outline that is the framework for the CPNP-PC certification examination.

A JTA is designed to obtain descriptive information about the tasks performed in practice. The goals of this JTA were to develop updated test specifications and a detailed content outline for the CPNP-PC examination, and update the inventory of validated:

- tasks (includes validation) performed by primary care pediatric nurse practitioners,
- clinical categories encountered, and
- procedures performed.

Additionally:

- screening and assessment tools commonly used by CPNP-PCs in practice, as well as
- the delineation of knowledge bases needed to perform the job tasks (NEW with this study).

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 pediatric nurse practitioners who deliver evidence-based and family-centered care in a variety of settings.

The existing detailed content outline for the CPNP-PC examination, which described the domains and subdomains of practice and tasks performed by CPNP-PCs, the clinical categories of conditions seen and procedures performed, served as the starting point for the JTA.

Updating the current content outline was primarily 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, geographic location, and other key variables to ensure representativeness in the description of practice.
Survey Development and Delivery

After the Task Force performed its work in updating the examination content outline and delineating knowledge bases and screening and assessment tools, ACT gathered validation evidence by creating a web-based survey instrument, developing appropriate rating scales, and administering the survey to the population of CPNP-PCs.

The survey was open and available for the CPNP-PC population (N=20,263) to take between October - November 2022 and it consisted of 8 areas, as outlined in the table to the right. There were 63 undeliverable invitations and 1,649 completed surveys representing an 8.5% response rate. The obtained number of responses is more than adequate by industry standards.

### Survey Areas

1) **Tasks**
2) **Domains**
3) **Knowledge**
4) **Clinical Categories**
5) **Procedures**
6) **Screening and Assessment Tools**
7) **Completeness of Delineation**
8) **Demographic Questions**

### Results

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=Daily/Many times a day). Participants also rated the importance of each content domain and the percentage of time spent in it. For each knowledge base and procedure, they rated frequency and importance for an entry-level primary care PNP. They indicated their most and least frequently encountered clinical categories. Participants also rated whether they administered and/or interpreted each screening and assessment tool.

See page 3 for result highlights.

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 CPNP-PC examination until the next JTA is performed.

### Summary

This study used a mixed-methods approach to identify tasks performed, clinical categories encountered, screening and assessment tools used, and procedures performed by CPNP-PCs, as well as the knowledge areas required for this role. The study was conducted in conformance with best practice accreditation guidelines for certification programs and led to the creation of an updated content outline for the CPNP-PC examination.
A total of 1,649 CPNP-PCs completed the survey. Of the respondents, 38% had worked as a primary care pediatric nurse practitioner for 5 years or less, while 19% had more than 20 years of experience.

Respondents spent significant amounts of time in each domain and rated all domains as moderately to highly important.

Fifty-five (55) of the 59 tasks achieved importance and frequency ratings above the thresholds for inclusion in the CPNP-PC detailed content outline. Four tasks with frequency ratings below one or both thresholds were retained based on the JTA Task Force’s judgment.

Based on the survey ratings and discussions among Task Force members, all 21 clinical categories, 10 of 27 procedures, and 11 of 19 screening and assessment tools were identified as suitable for testing.

Nearly all survey participants (88%) indicated the survey covered their role as a pediatric nurse practitioner well, very well, or completely.