Recommended Practices for Assessing Procedural Competency

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Core Foundational Skills

- Competency involves more than technical skill—it includes judgment, autonomy, and knowing when to seek help
- Knowledge: indications, risks, complications.
- Communication: education, consent.
- Performance: technique, asepsis, teamwork.

Skills are transferable across procedures

Structured Individualized Pathways to Competency

- No fixed number of procedures guarantees competency.
- Each resident progresses at a different pace.
- Assess confidence in each procedural step.
- Combination of numbers (simulation and live), BSQs or other scales

Curricular Approaches

- Traditional methods might not always work
- Map where residents are exposed to procedures or procedural skills, and where supplements are needed
- Use simulation, workshops, supervised practice.
- Deliberate practice improves skill acquisition.

Assessment Tools

- Use PCAT, BSQ, and other structured tools.
- Ensure objective criteria and consistency – requires a system.
- Invest in faculty development and calibration.

Program Strategies

- Ensure exposure via clinics, rotations, scheduling.
- Combine didactics with clinical practice.
- Support faculty development.

Conclusion & Recommendations

- Focus on foundational skills and individualized learning.
- Use structured curricula and validated tools.
- Share and refine assessment tools across institutions.