

EDITORIAL

Central Vetting Beyond Campus Walls: A Transformative Initiative in Preclinical Medical Education at Universiti Putra Malaysia

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INTRODUCTION

In the landscape of medical education, the process of vetting plays a pivotal role in evaluating the competence and readiness of medical students as they progress through their academic journey (1). At Universiti Putra Malaysia (UPM), the vetting process for preclinical medical students traditionally occurred within the confines of the faculty premises, adhering to established protocols and procedures (2). Furthermore, due to being held online, the vetting process lacked focus, extended over a few weeks, and proved difficult to synchronise with everyone's availability due to other commitments. However, as part of ongoing efforts to enhance the educational experience and foster innovation within the curriculum, UPM embarked on a transformative initiative to centralise the vetting process beyond the boundaries of the campus.

This initiative marked a departure from the conventional approach, as the phase I coordinator sought to host the vetting session in Kuala Lumpur, marking the first time such an event had been held outside the faculty. The proposal paperwork for this initiative was presented during the 171st meeting of the Faculty of Medicine and Health Sciences Management Committee at UPM. Typically conducted within the faculty during working hours for a period of one to two weeks, the involvement of all coordinators, subject matter experts, and medical education units aims to ensure participants' focused attention in providing quality examination questions (3). The proposed budget for the workshop is set at RM40000.

The decision to venture beyond campus walls was driven by several factors, including the desire to create a conducive environment within an optimum timeframe

to refine and align the questions prepared to meet the established standards. This editorial aims to provide an overview and analysis of the transformative initiative undertaken by the vetting committees of the Faculty of Medicine and Health Sciences, UPM, to conduct the central vetting process for preclinical medical students outside the faculty for the first time.

OBJECTIVES OF CENTRAL VETTING

The central vetting session for preclinical medical students at UPM was designed with several key objectives in mind. Firstly, the centralisation of the vetting process aimed to streamline and standardise the assessment procedures across different groups of students, ensuring consistency and fairness in the evaluation of their academic progress (4). By conducting the vetting session in a centralised manner, UPM sought to minimize variations in assessment practices and enhance the reliability of the evaluation process, thereby fostering a more equitable learning environment for all preclinical medical students (5).

In addition to promoting consistency and fairness, the central vetting session also aimed to provide a comprehensive evaluation of students' knowledge, skills, and competencies across multiple domains of the medical curriculum (6). Through the inclusion of various assessment modules, such as the final semester two examination and the Professional 1 examination for session 2023/2024, the vetting session sought to assess students' mastery of core medical concepts, their ability to apply theoretical knowledge in clinical scenarios, and their professional demeanour. Ultimately, the objectives of the central vetting session were aligned with UPM's overarching goal of producing competent and well-rounded medical professionals equipped to meet the

challenges of modern healthcare practice (7).

LOGISTIC AND PLANNING

Logistics and planning for the vetting sessions at the hotel, from 3rd to 5th May 2024 were meticulously organised to ensure smooth and efficient operations. The venue, strategically located in the heart of Kuala Lumpur’s city centre, provided an ideal setting for hosting the sessions over the weekend, offering convenient accessibility for participants from various locations. Some participants used faculty transport to and from the hotel accommodation.

Prior to the sessions, detailed arrangements were made to secure the necessary facilities and equipment, including the setup of a sound system, LCD projectors, and display screens to facilitate presentations and discussions. Adequate lighting and seating arrangements were also ensured to accommodate the participants comfortably throughout the sessions. All committee members were provided with a residential meeting package, which included three days and two nights in a complimentary deluxe room. They were also provided with breakfast, morning coffee breaks, lunch, afternoon coffee breaks, dinner, and supper. Additionally, complimentary drinks and sweets were made available throughout the vetting sessions.

In addition to logistical arrangements, upfront planning was undertaken to coordinate the schedules and agenda for the vetting sessions. Timely communication and coordination with all stakeholders, including supporting staff, module coordinators, and participating committee members, were essential to ensure their active involvement and smooth execution of the sessions. Overall, the logistical and planning efforts were instrumental in creating a conducive environment for productive discussions and effective vetting of examination questions.

IMPLEMENTATION PROCESS

The central vetting was conducted in four groups, with the list of members and their respective numbers tabulated in Table I (4). Each group was assigned four to eight modules, including the final semester two examination and the Professional 1 examination for 2024 (Table II). All modules include question formats comprising four options for single best answer questions (SBAQ), seven to fourteen options for extended matching items (EMI), and short answer questions (SAQ). Additionally, the systemic modules feature an additional variety of question types, including modified essay questions (MEQ), objective structured practical examinations (OSPE), and objective structured clinical examinations (OSCE). The number of all types of questions was prepared based on the blueprint coordinated by question bank coordinators. Emphasis was placed on the integrity and confidentiality

Table I: List of members and their assigned numbers to be included in the panel of the central vetting committee for each group

Members Central Vetting Committee	Number
Chairperson	1
Representative from phase coordinator	1
Representative from medical education	1
Module coordinators	1
Subject experts	2 or 3

of the sessions, and each participant was asked to sign the Official Secrets Act form.

The vetting sessions involved all expert panels (3). Each vetting session was handled by the expert panels within each group, with the involvement of experts from other groups whenever the need arose. Authors of the questions were also invited to join the group vetting whenever their questions were queried. The vetting committee aims to thoroughly examine test items multiple times at various stages of vetting to ensure they are flawless and as clear and understandable as possible (8). The questions were read either by the module coordinator or a volunteer selected from the group leader or members. Subsequently, members engaged in discussions regarding the alignment of the questions with the learning objectives, the clarity and relevance of the questions, and the adequate representation of the questions at the cognitive level and within their respective disciplines.

A few ambiguous questions were improvised on the spot by contacting the authors. However, there were still a few questions that required improvement and modification and were sent back to the authors for restructuring. The coordinator highlighted and documented these questions to be revisited in the subsequent meeting of the next level, ensuring that the concerns raised by the previous committee members are addressed satisfactorily. The

Table II: List of modules allocated to each group. Each module is designated for either the Professional I examination or for the final semester 2 examination, which are taken together

Group	Module
1	Cardiovascular System (Final Semester and Professional I) Haematology and Immunology (Final Semester and Professional I)
2	Respiratory System (Final Semester and Professional I) Central Nervous System (Final Semester and Professional I)
3	Human Biology (Professional I) Alimentary System (Final Semester and Professional I) Infectious Disease (Final Semester and Professional I)
4	Biochemistry and Human Genetic (Professional I) General Pathology (Professional I) General Pharmacology and Biochemistry (Professional I) Musculoskeletal System (Professional I) Urinary System (Professional I) Reproductive System (Professional I) Endocrine System (Professional I) Fundamental Community Medicine (Professional I)

finalised vetted examination questions, both for the final and professional examinations, are then submitted back to the question bank and phase coordinator, respectively for compilation and final formatting before printing (9).

OUTCOME AND FUTURE DIRECTION

The central vetting outside the campus initiative has not only yielded significant improvements in the vetting process but has also sparked discussions about the potential for its continuation and expansion. Many participants have expressed the sentiment that the collaborative and productive atmosphere cultivated during the vetting session would be beneficial if sustained regularly. Thus, there is growing support for the idea of making the vetting meeting a yearly event, allowing for ongoing collaboration and refinement of assessment practices.

The suggestion to hold the outside vetting meeting annually aligns with UPM's commitment to continuous improvement and excellence in medical education. By establishing this event as a recurring fixture on the academic calendar, UPM can provide stakeholders with regular opportunities to come together, share insights, and collectively enhance the quality of assessment materials. Moreover, the annual vetting meeting can serve as a platform for fostering professional networking, and knowledge exchange among faculty members, module coordinators, and authors.

Additionally, the importance of a conducive environment and quality amenities, such as good food, cannot be overstated in facilitating productive academic gatherings. The positive feedback regarding the venue, food, and overall environment underscores the role of these factors in creating an atmosphere conducive to collaboration and effective vetting. As such, future iterations of the vetting meeting should prioritize selecting venues that offer comfortable accommodations, amenities, and catering services to ensure participants can focus their energy on meaningful discussions and deliberations.

Looking ahead, the central vetting initiative beyond the boundary has laid a solid foundation for future advancements in medical education at UPM. By embracing collaboration, spare time utilisation, and interdisciplinary consultation, UPM can continue to refine its curriculum, assessment practices, and educational experiences to meet the evolving needs of students and the healthcare industry. With ongoing support from stakeholders and a commitment to

excellence, UPM is well-positioned to lead the way in shaping the future of medical education in Malaysia and beyond. Furthermore, we keep and are in the process of filling up all good questions for future reference. Hence, the good quality of vetting sessions also contributes to this effort.

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