For Training Units under HKCPsych Training Scheme Only

The Hong Kong College of Psychiatrists

Application for Prior Approval – In-house CME/CPD Activities

To: Honorary Secretary (Attn : Dr. W.C. Chan)
Education Committee
The Hong Kong College of Psychiatrists
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Details of Local CME/CPD Activities

Name of Training Unit: _____

Responsible officer _____ **Fax No** _____

Date/Time	Program Name & Details	CME/ CPD code*	Chairman	Speaker(s)	Venue	CME/CPD points awarded (for official use only)

Copy of the programme is enclosed.

Name of Tutor Signature Date

For Office Use Only
Approved by

Name & Signature Date
Education Committee
Hong Kong College of Psychiatrists

* Please refer to "Principles and Guidelines on CME and CPD", published by Hong Kong College of Psychiatrists for details. The following is a brief summary for your easy reference.

Description	Guideline Reference	Cat Code	CME/CPD awarded	Max/ Cycle
College Passive Participation (List A)	5.2a	PP/CP	"1" per hour	75
College Active Participation	5.3	OT/AP	"3" if no collection of data; "6" if collection of data	75
Quality Assurance and Medical Audits	5.5	OT/QA	See guideline	30
Mortality & Morbidity Meetings	5.11	OT/MM	"1" per meeting	10
Activities for Improvement of Patient Care	5.14	OT/IP	"1" per activity	10
Grand Rounds in Training Units	5.15	OT/GR	"1" per grand round	10