

**Table summarising changes in CME/CPD Guidelines for the new cycle 2014-2016**

Original guideline (for current cycle 2010-13)	New guideline (for cycle 2014-16)	remarks
<p><b>2.2</b> The College <i>does not</i> accept the following activities for CME/CPD accreditation :-</p> <ul style="list-style-type: none"> <li>- Undergraduate and postgraduate teaching (except.....in section 3.2.E4.5)</li> <li>- Non-clinical administrative activities</li> <li>- Service related ward rounds</li> <li>- Participation as examiner for undergraduate or postgraduate examination</li> </ul>	<p><b>2.2</b> The College <i>does not</i> accept the following activities for CME/CPD accreditation :-</p> <ul style="list-style-type: none"> <li>- Non-clinical administrative activities</li> <li>- Service related ward rounds</li> <li>- Participation as examiner for undergraduate or postgraduate examination (except College organized or supported Specialist examination)</li> </ul>	<p>Undergraduate and postgraduate teaching amended as Cat E activities in E4.5</p>
<p><b>3.2 A.1</b> Academic meetings organised by the Hong Kong College of Paediatricians (HKCPaed), Hong Kong Paediatric Society, paediatric subspecialty societies, International Paediatric Association, Association of Paediatric Societies of South-east Asian Region and meetings organized by international paediatric or paediatric subspecialties societies will be considered by the CME Subcommittee for accreditation. The points allocated will be publicised together with the notice of meetings.</p>	<p><b>3.2 A.1</b> Academic meetings organised by the Hong Kong College of Paediatricians (HKCPaed), Hong Kong Paediatric Society, paediatric subspecialty societies, International Paediatric Association, <i>Asian Pacific Pediatric Association</i>, and meetings organized by international paediatric or paediatric subspecialties societies, <i>medical institutions</i> , <i>Paediatric College approved study groups</i> will be considered by the CME Subcommittee for accreditation. <i>Such activities will be opened to all Fellows. Activities relevant to paediatrics will be accredited.</i> The points allocated will be publicised together with the notice of meetings.</p>	<p>More clear definition of Cat A activities locally and internationally</p>
<p><b>3.2.B.1</b> Approved practice-related academic activities in recognised training units will be accredited. Such activities will be opened to all Fellows.</p> <p><b>3.2.B.2</b> Practice-related academic activities organised by Study Groups need prior approval by the CME Subcommittee. Application for accreditation is required. Please refer to Guidelines of Study Group. (Appendix 1)</p>	<p><b>3.2.B.1</b> <i>Regular pre-approved</i> practice-related academic activities in recognised training units will be accredited. Such activities will be opened to all Fellows.</p> <p><b>3.2.B.2</b> <i>Regular pre-approved practice-related academic activities organised by Paediatric College approved Study Groups will be accredited.</i> Please refer to Guidelines of Study Group. (Appendix 1)</p>	<p>More clear definition</p>

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<p><b>E.4.5.</b> Undergraduate Teaching Development of novel teaching materials for undergraduate teaching. (Max 3 pts per program)</p>	<p><b>E.4.5.</b> Undergraduate Teaching <i>Undergraduate and postgraduate teaching may be accepted as a form of CME/CPD (Pts will be awarded by CME Subcom on prospective application, subject to a quality assurance process and a maximum of 5 pts in a cycle.)</i></p>	
<p><b>E.4.6</b> Quality Assurance and Medical Audits Risk assessment management / Clinical effectiveness studies / Review of sentinel events</p>	<p><b>E.4.6</b> Quality Assurance and Audits <i>QA meetings/Mortality &amp; Morbidity meeting/Risk assessment management / Clinical effectiveness studies / Review of sentinel events. Points will be awarded on submission of a report of the meeting by the chairperson. (3 pts for presenters; 2 pts for chairperson and discussants; 1 pt for all other participants. A maximum of 12 such meetings will be accredited per institution per year.)</i></p>	HKAM recommendation
	<p><i>Alternatively, self-audit projects (on prescription pattern, referral pattern, or investigation pattern over a period of not less than 3 months) will be awarded CME/CPD points on submission of a report. (3 pts per report, subject to a peer review process. Reviewer will also be awarded 3 pts)</i></p>	HKAM recommendation
<p>Self-audit (with report) on prescription pattern over a period of not less than 3 months Self-audit (with report) on referral pattern over a period of not less than 3 months Self-audit (with report) on investigation pattern over a period of not less than 3 months</p>	<p><del>Self-audit (with report) on prescription pattern over a period of not less than 3 months— Self-audit (with report) on referral pattern over a period of not less than 3 months Self-audit (with report) on investigation pattern over a period of not less than 3 months</del></p>	Deleted
<p><b>E.4.7</b> Activities for Improvement of Patient Care</p>	<p><b>E.4.7</b> Activities for Improvement of Patient Care <i>Skill workshop with simulated learning ( eg. PALS, NRP) (Max 6 pts per course)</i></p>	

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<p><b>E.4.8</b> Reviewer of Hong Kong Medical Journals (HKMJ) and Indexed Journal Participation in reviewing articles submitted to HKMJ, HKJPaed and other indexed journals</p>	<p><b>E.4.8</b> Reviewer of Hong Kong Medical Journals (HKMJ) and Indexed Journal Participation in reviewing articles submitted to HKMJ, HKJPaed, <i>Journal of Academy Colleges</i>, and other indexed journals (2 pts per article (max. 15 pts per 3-yr cycle))</p>	Amended
<p><b>4.2</b> Fellows will commence their first cycle immediately upon their admission to Academy Fellowship; and the required CME points for the first cycle</p>	<p><b>4.2</b> Fellows will commence their first cycle immediately upon from <i>the 1st day of the month following their admission to Academy Fellowship</i>; and the required CME points for the first cycle...</p>	Amend as required by Academy guidelines
<p><b>4.6</b> It is strongly recommended that Fellows should maintain a balanced CMECPD profile with a mix of different activities, including 5 points in a cycle from activities involving “ Quality Assurance, Audits and Activities for improvement of Patient/Medical Care” as outlined in E4.6 and E4.7</p>	<p><b>4.6</b> It is strongly recommended that Fellows should maintain a balanced CMECPD profile with a mix of different activities, including 5 points in a cycle from activities involving “ Quality Assurance, Audits and Activities for improvement of Patient/Medical Care” as outlined in E4.6 and E4.7. <i>The Academy sees the need and benefits of requiring Fellows to regularly review and evaluate their practice in order to improve quality of their patient services and advance their practice. It is planned that in the long run, review and evaluation of practice would be made part of CPD profiles of all Fellows.</i></p>	Amend as required by Academy guidelines

Original guideline (for current cycle 2010-13)	New guideline (for cycle 2014-16)	remarks
<p><b>8.2 Prolonged Illness</b>  a) The Fellow concerned will not be required to do CME/CPD. However the Academy will report to the Medical Council for the purpose of Specialist Registration. Upon recovery and resumption of his/her medical practice, the Fellow will be required to re-start his/her CME/CPD cycle and to obtain at least 40 CME/CPD points in the first year of the cycle.</p>	<p><b>8.2 Acute / Prolonged Illness and Permanent Disability</b>  a) <i>A Fellow who falls behind CME/CPD because of acute/prolonged illness or permanent disability can be exempted from the CME/CPD requirements, on condition that he is not in active practice.</i>  b) <i>An illness can be accepted as “prolonged illness” provided a sick leave of at least 6 months has been formally granted within a 3-year cycle (pro-rata count may apply in case the cycle is less than 3 years);</i>  c) <i>Partial exemption will be considered on a case by case pro-rata basis depending on the extent of the illness and its impact on practice. The guiding principle of exemption is that when a Fellow is not in active practice because of the illness, CME/CPD requirement of that total period of “not in active practice” will be exempted for CME/CPD in that cycle, while pro-rata count of CME/CPD requirement will be applied to the period(s) during which the Fellows are in active practice.</i></p> <p><del>The Fellow concerned will not be required to do CME/CPD. However the Academy will report to the Medical Council for the purpose of Specialist Registration. Upon recovery and resumption of his/her medical practice, the Fellow will be required to re-start his/her CME/CPD cycle and to obtain at least 40 CME/CPD points in the first year of the cycle.</del></p>	