



TRADITIONAL DAN COMPLEMENTARY MEDICINE COUNCIL
MINISTRY OF HEALTH MALAYSIA

GUIDELINE ON APPLICATION AS IN PERSON CAPACITY BUILDING COURSE (CBC) TRAINING CENTRE AND TRAINER

**Traditional Malay Medicine
Traditional Chinese Medicine
Traditional Indian Medicine
Homeopathy**

**Fifth Edition
(March 2024)**

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I. Introduction

The Traditional and Complementary Medicine (T&CM) Act 2016 [Act 775] provides for the establishment of a T&CM Council to regulate T&CM services in Malaysia and provide for matters connected therewith. The Act is enforced in phases since 1 August 2016.

According to the T&CM Act 2016, a person intending to practise T&CM in any recognized practice area shall apply to the T&CM Council to be registered. The T&CM Council Meeting No.02/2017 and the T&CM Council Meeting No.02/2018 had agreed with the registration methodology for local practitioners whereby traditional medicine practitioners (Malay, Chinese, Indian) and Homeopathic practitioners who do not possess any basic qualification but has years of practice experience as determined by the Council are required to attend the CBC successfully in order to fulfil one of the registration criteria during the transitional period.

The T&CM Council Meeting No.03/2017 agreed that anyone who wishes to organize the CBC will need to get approval from the T&CM Council.

* This guideline is subject to change from time to time without prior notice.

II. Objective

To guide applicants regarding the application procedure as training centre and trainer for CBC in traditional medicine (Malay, Chinese, Indian) and Homeopathy for the purpose of registration of T&CM practitioners who fulfilled the criteria as determined by the T&CM Council.

III. Scope

This guideline is applicable to any interested party wishing to apply as training centre or trainer for CBC in traditional medicine (Malay, Chinese, Indian) and Homeopathy. This guideline is also a reference for officers from the T&CM Division, Ministry of Health Malaysia (MOH) and T&CM branch offices carrying out monitoring activities on CBC implementation.

IV. Definition

In Person Capacity Building Course (CBC)

Refers to a course to be attended in person by a selected group of practitioners in traditional Malay medicine, traditional Chinese medicine, traditional Indian medicine and homeopathy during the transitional period and it is one of the registration criteria for these practitioners.

CBC Training Centre

A company, organization or higher education institution approved by the T&CM Council to provide CBC in traditional Malay medicine, traditional Chinese Medicine, traditional Indian medicine and homeopathy. Also referred to as applicant in the context of this guideline.

Coordinator of CBC Training Centre

An individual who coordinates activities related to CBC in the approved training centre.

Trainer

A person approved by the T&CM Council to teach the CBC in an approved training centre.

Course Venue

The place where the theoretical and practical courses are conducted. It can refer to a tutorial room/ lecture hall/ auditorium/ facility which is equipped with suitable teaching materials.

PART A: APPLICATION AS IN PERSON CBC TRAINING CENTRE

1. Application Requirements

- i) The company, organization or higher education institution has to register with The Companies Commission of Malaysia (CCM) / The Registrar of Societies Malaysia (ROS) / Local Authorities / Ministry of Education Malaysia.
- ii) Operate using a premise licensed by local authorities or relevant agency as the operational office of the training centre and designated venue for the course.
- iii) Applicant must possess at least one designated training room to be used for the course, either theoretical or practical (if relevant) as well as sufficient facilities and teaching instruments.
- iv) Has at least one trainer (registered under all sub areas) or more than one trainer (collectively registered under all sub areas) approved by the T&CM Council to conduct the course throughout the approval period.
- v) The company / organization / higher education institution and trainer must be free from prior revocation of approval due to breach of terms and conditions.

2. Application Procedure

2.1. Application Process

- i. Completed application form as in person CBC training centre must be sent together with supporting documents to the mailing address as follows:

**Cawangan Majlis Perubatan Tradisional dan Komplementari
Bahagian Perubatan Tradisional dan Komplementari
Kementerian Kesihatan Malaysia
Blok E, Jalan Cenderasari
50590 Kuala Lumpur**

- ii. Incomplete applications will not be processed and the applicant will be informed.

2.2. Application Documents

Each application must be submitted together with other documents as follows:

- i. Application as In Person CBC Training Centre checklist (Appendix A)
- ii. Application as In Person CBC training centre form (Appendix B);
- iii. Proposal paper to explain the background of the organization, proof of the ability of the organization to organise the course in terms of finance, venue, human resource, management of student attendance records and details of the course including course fee, course venue, time table etc.;
- iv. Company/ organization/ higher education institution profile which includes organization chart and founding objective;
- v. List of trainers with:

- a. Approval letter as trainer; and
- b. A copy of appointment letter as trainer (permanent post) by the company/ organization/ higher education institution; or
- c. A copy of agreement letter/ contract between company/ organization/ higher education institution and trainer (contract post);
for each trainer stated in the list; and
- vi. A copy of registration certification from CCM/ ROS/ Ministry of Education Malaysia if applicable;
- vii. If the venue/ premise where the course is conducted is not owned by the applicant or is rented; the following document needs to be submitted together with the application:
 - a. A stamped agreement letter between the applicant and landlord of the venue/ premise stating the validity period and other terms agreed by both parties.

Note:

All copies of original documents must be certified by one of the following:

- A government officer from the Management and Professional group (Grade 41 or equivalent and above)
- Legal practitioner
- Commissioner of oaths/ Justice of the Peace
- Principal/ headmaster of a government school
- Village head/ *penggawa/ penghulu*/ community leader/ *sidang*
- for Sabah and Sarawak: *ketua kaum/ ketua anak negeri/ kapitan/ pamanca*

2.3. Payment

Application as In Person CBC training centre is **FREE OF CHARGE.**

2.4. Evaluation Meeting

- i. An evaluation meeting at the T&CM Council Section level will be held at least once every 2 months or as when needed to assess applications as training centre.
- ii. Recommendation for approval/ rejection will be forwarded to the T&CM Council for final decision.
- iii. Incomplete application as CBC trainer and training centre will be rejected after being presented 3 times at the Evaluation Meeting.

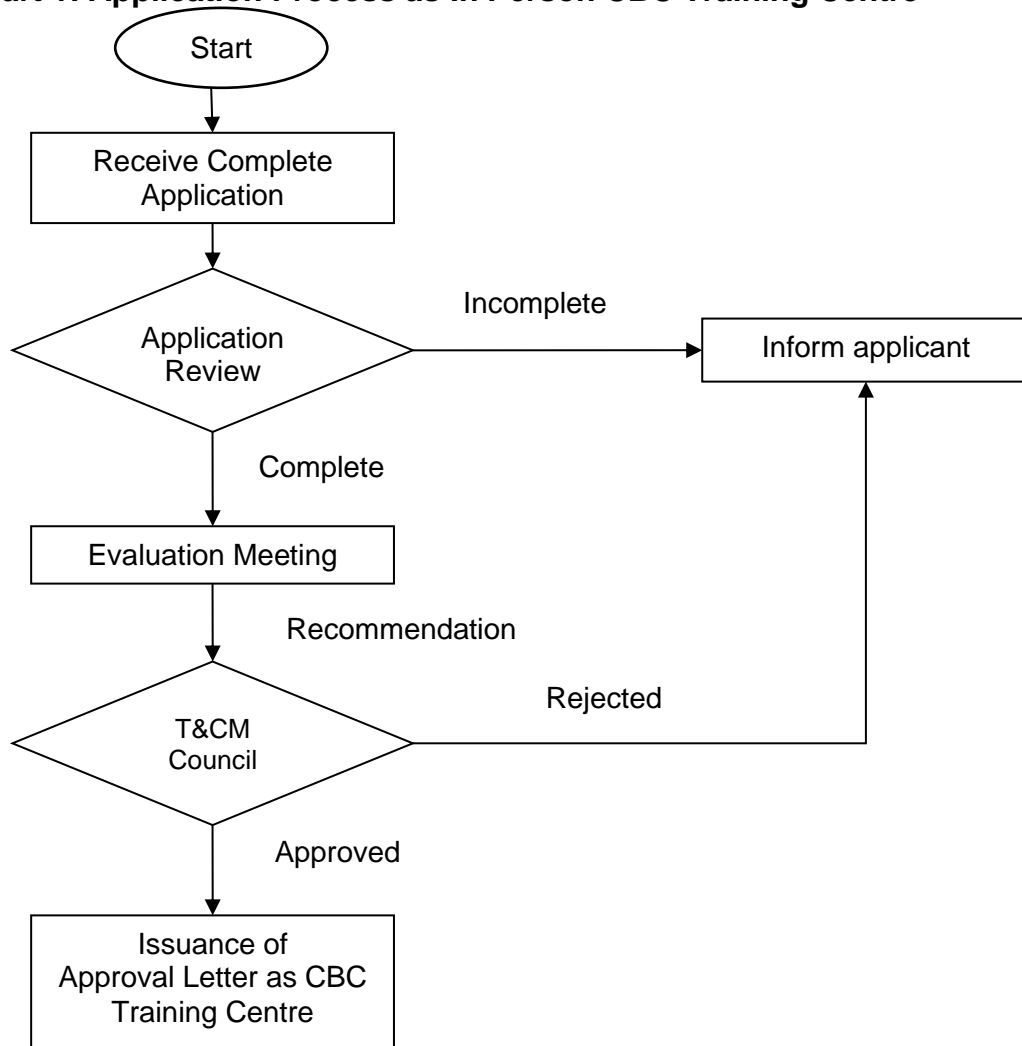
2.5. Training of Trainers (ToT)

- i. ToT session will be organised by the T&CM Council Section to ensure standardised teaching before the issuance of approval letter as training centre.
- ii. Invitation to ToT Session will **ONLY** be issued to the training centre coordinator approved by the T&CM Council.
- iii. Coordinator for the training centre approved by the T&CM Council is required to attend ToT session before the approval letter as a training center is issued.
- iv. The approved coordinator will be contacted by the T&CM Council Section via email to attend this session.

2.6. Issuance of Approval Letter as Training Centre

- i. An approval letter will be issued by the T&CM Council Section once approval is received from the T&CM Council and the course coordinator has attended the ToT session.
- ii. The validity of the approval letter is from the date of the letter until the end of the transitional period which is **28 February 2025**.
- iii. The summary of the application process is described in **Flow Chart 1**:

Flow Chart 1: Application Process as In Person CBC Training Centre



3. Terms and Conditions of Approval

Training centres approved by the T&CM Council must comply with the terms and conditions as follows:

3.1. Management

- i. The training centre has to operate in a premise with a permanent address. If there is a change in the official premise address, the T&CM Council Section should be notified in writing.
- ii. The training centre is NOT allowed to conduct the course at any other place apart from the one specified in the approval letter. However, the training centre can apply for additional premises to the T&CM Council.
- iii. The training centre shall officially inform the T&CM Council about any change of coordinator or addition of trainer.
- iv. Approval letter as training centre must be exhibited at the place where the course is conducted.
- v. The training centre shall allow officers from MOH to do monitoring visits at any reasonable time.
- vi. The training centre shall do marketing ethically and is NOT allowed to misuse the name and logo of the government, MOH, T&CMD and T&CM Council.
- vii. The training centre shall conduct at least **one** CBC within 12 months after issuance of approval letter.
- viii. The training centres that organize CBC are required to ensure that the last session of the CBC ends no later than 31 January 2025 to enable the T&CM Council Section to finalise the processing of practitioner applications.

3.2. In Person Capacity Building Course (CBC)

- i. Course Fee
 - a) The training centre can determine the course fee but the payment to attend the full course for a participant shall **not exceed RM1,000 for Traditional Malay Medicine, Traditional Chinese Medicine and Traditional Indian Medicine CBC. For Homeopathy CBC, the fee shall not exceed RM 1,200.**
 - b) Receipt issued for course payment must be signed by the valid coordinator or representative from the training centre.
 - c) Acceptance of course payment must be recorded.
- ii. Course session
 - a) The CBC can only be offered to practitioners who have received the notification letter to attend CBC from the T&CM Council Section.
 - b) Training and learning sessions must be conducted in person.
 - c) Implementation period for a course shall NOT exceed 2 months for a fulltime course and shall NOT exceed 5 months for a part time course.

- d) The number of participants is based on the capacity of the training room.
 - e) The training centre has to submit the planning schedule (**Appendix G**) via email to the T&CM Council Section at smptk@moh.gov.my **at least 30 days** before the course is conducted and the required information must be complete. The 30 days time period will be counted from the date complete information is received. Any changes in the course schedule prior to or during the course being conducted shall be informed to the T&CM Council Section **at least 3 working days** before the changes take effect.
 - f) The T&CM Council Section can issue a stop order to the course provider at any time if the training centre or trainer breaches the terms and conditions, while awaiting the final decision by the T&CM Council.
 - g) The training centre is not allowed to conduct a new CBC series if the documentation of the previous series has not been submitted to the T&CM Council Section.
- iii. Course Venue
- a) Must be fully owned or rented and fully managed by the applicant throughout the approval period;
 - b) Equipped with well functioning air conditioner or fan.
 - c) Adequate space to accommodate participants.
 - d) Has sufficient ventilation and lighting.
 - e) Has suitable and sufficient amount of tables and chairs.
 - f) Has teaching facilities such as computers and LCD projectors as well as other equipment (if needed) such as P.A system, white board etc.
- iv. Course Module
- a) Trainer to use the module, teaching plan and teaching materials issued by the T&CM Council as a basic guide.
 - b) Trainer can use a suitable language medium based on target audience as follows:
 - Traditional Malay Medicine: Malay
 - Traditional Chinese Medicine: Malay/ English/ Chinese
 - Traditional Indian Medicine: Malay/ English/ Tamil
 - Homeopathy: Malay/ English
- v. Certificate of Attendance for CBC
- a) Attendance list (Appendix E and F) must be submitted to the T&CM Council Section within **seven (7) working days** after completion of a course.
 - b) The training centre and participants have to confirm that the personal information of the participants stated in the attendance list is accurate.

- c) Participants need to attend **at least 80% of the total course credit hours** in order to qualify for certificate of attendance.
 - d) Certificate of attendance for CBC (Appendix I) will be issued by the training centre after **the T&CM Council has verified the attendance list** submitted by the training centre according to the specified format.
 - e) Appendix I can only be issued to practitioners who have received the notification letter to attend CBC from the T&CM Council Section.
- vi. Record and Documentation
- a) The training centre must submit all forms (Appendix D, E, F and H) within **seven (7) working days** upon completion of the course.
 - b) The training centre must keep a record of participants attendance in hardcopy or softcopy form for a period of twelve (12) months.
 - c) The training centre must keep all reports, records and specified documents for monitoring at any time.

4. Revocation of Approval

The T&CM Council reserves the right to revoke the approval as training centre subject to breach of terms and conditions of approval criteria or any other terms set by the T&CM Council from time to time. The T&CM Council Section will inform the revocation of approval officially in writing together with justification to the respective training centre.

During the transitional period, if any training centre approved by the T&CM Council receives more than 3 warning letters, the training centre will be removed from the approval list.

5. Monitoring

Monitoring activities will be carried out from time to time to ensure the approved training centre adheres to the specified terms and conditions. The monitoring of course implementation shall be conducted at least once in every twelve (12) months or as deemed necessary for each training centre. The T&CM Council Section will monitor and investigate any training centre if any complaint is received.

The T&CM Council Section can order the conduct of a CBC to be withheld at any time if it is determined that the training centre or trainer has failed to comply with the stipulated terms and conditions while waiting for the final decision from the T&CM Council.

6. Appeal

Written appeal for failure in application, or revocation of approval as training centre can be made to the Director General of Health Malaysia. The decision made by the Director General of Health is final.

7. Relevant Forms for Training Centre

Forms related to the application as training centre are as follows:

i. Application for training centre:

No.	Name	Code	Appendix
1.	Application as In Person CBC Training Centre Checklist	BPTK(CM)-BOR-06 Pin. 1/2024	A
2.	Application as In Person CBC Training Centre Form	BPTK(CM)-BOR-07 Pin. 1/2024	B

ii. Monitoring of CBC implementation:

No.	Name	Code	Appendix
1.	CBC Implementation Monitoring Form	BPTK (SA) – BOR - 01	C

iii. Reports that must be submitted by training centres to the T&CM Council Section:

No.	Name	Code	Appendix
1.	In Person CBC Participant Registration Record	BPTK (SA) – BOR - 02	D
2.	In Person CBC Participant Attendance Record	BPTK (SA) – BOR - 03	E
3.	In Person CBC Summary of Total Participant Attendance	BPTK (SA) – BOR - 04	F
4.	In Person CBC Planning Schedule	BPTK (SA) – BOR - 05	G
5.	In Person CBC Training Schedule	BPTK (SA) – BOR - 06	H
6.	Certificate of Attendance format for In Person CBC	BPTK (SA) – BOR - 07	I

Appendix A
BPTK(CM)-BOR-06 Pin. 1/2024



TRADITIONAL AND COMPLEMENTARY MEDICINE COUNCIL
MINISTRY OF HEALTH MALAYSIA
APPLICATION AS IN PERSON CAPACITY BUILDING COURSE TRAINING
CENTRE CHECKLIST

Coordinator Name			
Name of Training Centre			
FOR USE BY THE T&CM COUNCIL SECTION			
Date of Application Received		Date of Completed Application	
NO.	DOCUMENT (Tick ✓ where applicable)	YES	NO
INFORMATION ON APPLICANT'S OFFICE			
1.	Application Form as Training Centre		
2.	Company/ organization/ higher education institution profile which includes organization chart and founding objective		
3.	A copy of Registration Certificate from CCM/ ROS/ Ministry of Education Malaysia		
4.	A copy of License from Local Authority/ relevant agency		
5.	A copy of Tenancy Agreement (for rented office)		
INFORMATION ON TRAINER			
6.	A copy of approval letter for trainer		
7.	A copy of appointment letter for trainer (permanent post)		
8.	A copy of agreement letter/ contract between the company/ organization/ higher education institution and the trainer (contract post)		
INFORMATION ON COURSE VENUE			
9.	Floor plan with size area		
10.	Photo of course venue (at least 2 photos)		
11.	A copy of license from Local Authority/ Ministry of Education/ relevant agency, if differs from the applicant's office		
12.	A copy of Tenancy Agreement (for rented course venue), if differs from the applicant's office.		
INFORMATION ON COURSE PLANNING			
13.	Proposal on course management		
Remarks, if any (by T&CM Council Section)			
Received by: Officer Name and Signature: Date:			

Appendix B

BPTK(CM)-BOR-07 Pin. 1/2024



**TRADITIONAL AND COMPLEMENTARY MEDICINE COUNCIL
MINISTRY OF HEALTH MALAYSIA
APPLICATION AS IN PERSON CAPACITY BUILDING COURSE
TRAINING CENTRE FORM**

Instruction: Mark (/) in relevant box		
INFORMATION ON COORDINATOR		
Name		
Identification Card/ Passport Number		
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Nationality	<input type="checkbox"/> Malaysian	<input type="checkbox"/> Non-Malaysian
Mobile Phone No.		Position
Email		
INFORMATION ON TRAINING CENTRE		
Company Name		
Company Registration Number		
Email		
Premise	Office	Course Venue
Address		
Phone No.		
Fax No.		
Student Capacity		
Floor Area		
Equipment	Air conditioner/ fan (Amount:____)	
	Computer (Amount:____)	
	LCD projector (Amount:____)	
	Demonstration equipment (if needed)	
	Chairs (Amount:____)	
	Tables (Amount: ____)	
Other equipment (if any)		

INFORMATION ON TRAINER									
Number of Trainers	_____ people								
List of trainers (attach as separate list if insufficient space)	1.	Identification card/ passport No.							
	Subject taught:								
	2.	Identification card/ passport No.							
	Subject taught:								
	3.	Identification card/ passport No.							
	Subject taught:								
SUMMARY OF COURSE PLANNING									
Course Applied	TMM	TCM	TIM - Siddha	TIM - Ayurveda	Homeopathy				
Course fee									
Course mode	Course length (months/ weeks): _____								
	<input type="checkbox"/>	Full time		<input type="checkbox"/>	Part Time				
DECLARATION									
<p>With this, I, _____ bearer of the Identification card/ passport no.: _____ hereby certify that all of the information provided above are correct and true to the best of my knowledge, and I agree and understand that any falsification of information herein will cause the cancellation of my application or revoking of approval IMMEDIATELY. I also promise to adhere to the terms and conditions for approval as training centre set by the Ministry of Health Malaysia</p>									
_____ Signature		_____ Date		_____ Company Stamp					
FOR OFFICE USE									
File Reference No : _____									
<table border="1"> <tr> <td>Approved for Evaluation Meeting</td> <td></td> </tr> <tr> <td>Not approved</td> <td></td> </tr> </table>			Approved for Evaluation Meeting		Not approved		T&CM Council Meeting meeting date: T&CM Council Decision for this application:		
Approved for Evaluation Meeting									
Not approved									
			<table border="1"> <tr> <td>Approved as training centre</td> <td></td> </tr> <tr> <td>Not approved</td> <td></td> </tr> </table>			Approved as training centre		Not approved	
Approved as training centre									
Not approved									
Officer Name : Signature : Date :			Officer Name : Signature : Date :						

Appendix C
BPTK (SA) – BOR - 01



TRADITIONAL AND COMPLEMENTARY MEDICINE COUNCIL
MINISTRY OF HEALTH MALAYSIA
CAPACITY BUILDING COURSE IMPLEMENTATION
MONITORING FORM

Name of Training Centre				
Coordinator Name				
Surveillance Date		Surveillance Time		
Premise	Office	Course Venue		
Address				
Phone No.				
Fax No.				
Trainer Name		Identification card/ passport no.		
Direction: Mark (/) in relevant box				
ELEMENT 1: RECORDS				
No.	Item	Finding		Comment/ Review
		Yes	No	
1.1	Area for records storage			
1.2	Files arranged neatly in a systematic way			
1.3	Good management of records* and complaints *Video recording of classes/ Payment records/ Attendance records			
1.4	Copy of receipt for payment provided			
1.5	Attendance list complied with the format			
1.6	All documents sent to the T&CM Council Section timely			
ELEMENT 2: TRAINER				
No.	Item	Finding		Comment/ Review
		Yes	No	
2.1	Teaching time follows the specified period			
2.2	Uses suitable teaching and course delivery method			
2.3	Neat, clean and well-groomed in appearance during teaching			

ELEMENT 3: COURSE SESSION				
No.	Item	Finding		Notes
		Yes	No	
3.1	Course conducted by the trainer at approved training centre (In Person CBC)			
3.2	Course conducted by the trainer at approved training centre or any location with the required internet facility (Online CBC)			
3.3	Teaching period according to course planning as applied			
3.4	Course conducted smoothly without technical issue			
3.5	Number of participant is according to the capacity of the training room (In Person CBC)			
3.6	Uses the module approved by the T&CM Council			
3.7	Uses teaching plan and teaching materials issued by the T&CM Council Section			
ELEMENT 4: FACILITIES AT COURSE VENUE (FOR IN PERSON CBC ONLY)				
No.	Item	Finding		Notes
		Yes	No	
4.1	Well-functioning air conditioner and fan			
4.2	The size of the room is suitable and comfortable			
4.3	Adequate light intensity and good air flow			
4.4	Adequate tables and chairs			
4.5	Suitable table and chair arrangement			
ELEMENT 5: TEACHING EQUIPMENT				
No.	Item	Finding		Notes
		Yes	No	
5.1	Internet connection with a minimum speed of 30Mbps (Online CBC)			
5.2	Camera video and microphone (Online CBC)			
5.3	Computer/ laptop			
5.4	LCD Projector			
5.5	Speaker (if required)			
5.6	Demonstration apparatus (If required)			
5.7	PA System (If required)			
PHOTO EVIDENCE AND OVERALL REPORT				

MOH Officer	Training Centre Coordinator/ Company Representative/ Trainer
Signature: Name: Position: Date:	Signature: Name: Position: Date:

Appendix D

BPTK (SA) – BOR – 02

IN PERSON CAPACITY BUILDING COURSE PARTICIPANT REGISTRATION RECORD

Name of Training Centre: _____
 Course Date : _____ to _____ Course : _____
 Course Location : _____ Reference No. : _____
 Course Topic : _____ (E.g.: Unit 1 – 5)
 Session No. : _____ / _____
 (Session Number/Total Session)

No.	Participant Name	Identification Card No.	Gender		Telephone No.	Mailing Address	Signature
			M	F			
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							

15.							
16.							
17.							
18.							
19.							
20.							
21.							
22.							
23.							
24.							
25.							

Prepared by (To be filled in by the training centre)

Name :

Signature :

Designation :

Date :

Training Centre Stamp :

Notes:

- 1) The Training Centre must ensure all fields are completely filled in.
- 2) Participants and the training centre must ensure all information is correct.
- 3) The Training Centre needs to submit a copy of this record to the T&CM Council Section, Traditional & Complementary Medicine Division within **SEVEN (7) WORKING DAYS** after the completion of the course.
- 4) This record must be kept in the training centre for monitoring purposes. Failure to produce this record can result in the revocation of approval for the training centre.

Appendix E
BPTK (SA) – BOR – 03

IN PERSON CAPACITY BUILDING COURSE PARTICIPANT ATTENDANCE RECORD

Name of Training Centre: _____

Course Date : _____ to _____ Course Field : _____

Course Location : _____ Reference No. : _____

Course Timing : _____ to _____ Name of Trainer : _____

Course Topic : _____ (Eg: Unit 1 – 5) IC/passport no. of Trainer : _____

Session No. : _____ / _____ _____

(Session Number/Total Session)

No.	Participant Name	Identification Card No.	Signature
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			

Prepared by (To be filled in by the training centre)

Name :

Signature :

Designation :

Date :

Training centre stamp :

Notes:

- 1) The Training Centre must ensure all fields are completely filled in.
- 2) Participants and the training centre must ensure all information is correct.
- 3) The Training Centre needs to submit a copy of this record to the T&CM Council Section, Traditional & Complementary Medicine Division within **SEVEN (7) WORKING DAYS** after the completion of the course.
- 4) This record must be kept in the training centre for monitoring purposes. Failure to produce this record can result in the revocation of approval for the training centre.

Appendix F
BPTK (SA) – BOR – 04

**IN PERSON CAPACITY BUILDING COURSE
SUMMARY OF TOTAL PARTICIPANT ATTENDANCE**

Name of Training Centre: _____
 Reference No: _____ Course Field: _____
 Course Date : _____ from _____
 Total number of completed session : _____

No.	Participant Name	Identification Card No.	Practitioner Attendance	
			Total Number of Completed Sessions	Percentage
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				

Prepared by (To be filled in by the training centre)

Name :

Signature :

Designation :

Date :

Training centre stamp :

Notes:

- 1) The Training Centre must ensure all fields are completely filled in.
- 2) Participants and the training centre must ensure all information is correct.
- 3) The Training Centre needs to submit a copy of this record to the T&CM Council Section, Traditional & Complementary Medicine Division within **SEVEN (7) WORKING DAYS** after the completion of the course.
- 4) This record must be kept in the training centre for monitoring purposes. Failure to produce this record can result in the revocation of approval for the training centre.

Appendix G
BPTK (SA) – BOR - 05

**PLANNING SCHEDULE OF IN PERSON CAPACITY BUILDING COURSE
TRADITIONAL MALAY MEDICINE/ TRADITIONAL CHINESE MEDICINE/
TRADITIONAL INDIAN MEDICINE (AYURVEDA)/ TRADITIONAL INDIAN MEDICINE
(SIDDHA)/ HOMEOPATHY**
(cross out whichever not applicable)

Name of Training Centre	Prepared by:				
	Coordinator Name				
Course Location	Identification card/ passport no.				
Reference No.	Signature				
Date	Name of Trainer	Subject Taught	Course Timing (start-end)	Language	Comment

Note:

The training centre needs to register details of course planning at least 30 days before the course is conducted.

A new CBC series can only be conducted after completion of the previous series.

Appendix H
BPTK (SA) – BOR - 06

IN PERSON CAPACITY BUILDING COURSE TRAINING SCHEDULE

Name of Training Centre: _____
 Course: TMM/ TCM/ TIM-A/ TIM-S/ Homeopathy (Cancel whichever is NOT applicable)
 Course Duration: From _____ to _____
 Reference No: _____

No.	Date	Name of Trainer	Course Timing (start - end)	Topic (Unit)	Number of Practitioners Attended	Comments
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Prepared by :

Name :

Signature :

Designation :

Date:

Training Centre Stamp

Notes:

- 1) The Training Centre must ensure all fields are completely filled in.
- 2) Participants and the training centre must ensure all information is correct.
- 3) The Training Centre needs to submit a copy of this record to the T&CM Council Section, Traditional & Complementary Medicine Division within **SEVEN (7) WORKING DAYS** after the completion of the course.
- 4) This record must be kept in the training centre for monitoring purposes. Failure to produce this record can result in the revocation of approval for the training centre.

FORMAT

**CERTIFICATE OF ATTENDANCE FOR IN PERSON CAPACITY BUILDING
COURSE**

To
Traditional & Complementary Medicine Council
Ministry of Health Malaysia

This document certifies that _____ (PARTICIPANT NAME) _____, bearer of the Identification Card No. _____ has successfully attended the Capacity Building Course in the field of * _____ from (DATE) to (DATE) held at (NAME & ADDRESS OF TRAINING CENTRE) and has achieved attendance percentage of ____%.

Reference No. : _____

Signature

.....
(COORDINATOR NAME)

Coordinator

Name and Training Centre Stamp:

Date:

* Please fill in only one: Traditional Malay Medicine/ Traditional Chinese Medicine/ Traditional Indian Medicine (Ayurveda)/ Traditional Indian Medicine (Siddha)/ Homeopathy

PART B:	APPLICATION AS CBC TRAINER
----------------	-----------------------------------

1. Application Requirements

Any individual who is interested to apply as a trainer for CBC needs to fulfil the criteria as follows:

1.1. Qualification in relevant practice area:

a. Traditional Malay Medicine	<ul style="list-style-type: none"> – minimum qualification recognised by the T&CM Council or qualified to be registered as a practitioner with the T&CM Council according to the relevant guidelines; and – have at least five (5) years of working experience in the field of traditional Malay Medicine. – those with teaching experience will be given priority
b. Traditional Chinese Medicine	<ul style="list-style-type: none"> – minimum qualification recognised by the T&CM Council or qualified to be registered as a practitioner with the T&CM Council according to the relevant guidelines; and – have at least five (5) years of working experience in the field of traditional Chinese Medicine. – those with teaching experience will be given priority
c. Traditional Indian Medicine (Ayurveda)	<ul style="list-style-type: none"> – minimum qualification as recognised by the T&CM Council or qualified to be registered as a practitioner with the T&CM Council according to the relevant guidelines; and – have at least five (5) years of working experience in the field of Ayurveda. – those with teaching experience will be given priority
d. Traditional Indian Medicine (Siddha)	<ul style="list-style-type: none"> – minimum qualification as recognised by the T&CM Council or qualified to be registered as a practitioner with the T&CM Council according to the relevant guidelines; and – have at least five (5) years of working experience in the field of Siddha – those with teaching experience will be given priority

-
- | | |
|---------------|---|
| e. Homeopathy | <ul style="list-style-type: none">– minimum qualification recognised by the T&CM Council or qualified to be registered as a practitioner with the T&CM Council according to the relevant guidelines; and– have at least five (5) years of working experience in the field of Homeopathy.– those with teaching experience will be given priority |
|---------------|---|
-

*The information on experience must be detailed including stating the duration and place of practice in Application as a CBC Trainer Form (Appendix K) or in Curriculum Vitae (CV). Incomplete or part-time working experience or working experience not related to Traditional and Complementary Medicine field will not be counted.

2. Application Procedure

2.1. Application Process

- i. Each completed application form must be submitted together with required documents as in Application as CBC Trainer Checklist (Appendix J) to the mailing address as follows:

**Cawangan Majlis Perubatan Tradisional dan Komplementari
Bahagian Perubatan Tradisional dan Komplementari
Kementerian Kesihatan Malaysia
Blok E, Jalan Cenderasari
50590 Kuala Lumpur
(Att: Standard & Accreditation Unit)**

- ii. Incomplete applications will be not be processed and the applicant will be informed.

2.2. Application Documents

Each application must be submitted together with documents stated below:

- i. Application form for CBC Trainer (Appendix K).
- ii. A copy of certified identification card / passport.
- iii. A copy of certified academic qualification.
- iv. A copy of certified academic transcript.
- v. *Curriculum vitae* of the applicant.

**If the original documents are not in either Bahasa Melayu or English, the documents need to be translated to Bahasa Melayu or English and be submitted together with certified copies of the original documents in the original language.

2.3. Fee

Application as CBC trainer is **FREE OF CHARGE**.

2.4. Training of Trainers (ToT)

- i. ToT session will be organised by the T&CM Council Section to ensure standardised teaching before the issuance of approval letter as trainer.
- ii. Invitation to ToT Session will ONLY be issued to the trainer approved by the T&CM Council.
- iii. A practitioner approved by the T&CM Council as a CBC trainer is required to attend the ToT session before being approved as a trainer.
- iv. The approved trainer will be contacted by the T&CM Council Section via email to attend this session.

2.5. Evaluation Meeting

- i. Evaluation meeting will be held at least once every two months or as needed to assess applications for trainers.
- ii. Recommendation for approval/rejection will be forwarded to the T&CM council for final decision.

2.6. Issuance of Approval Letter as Trainer

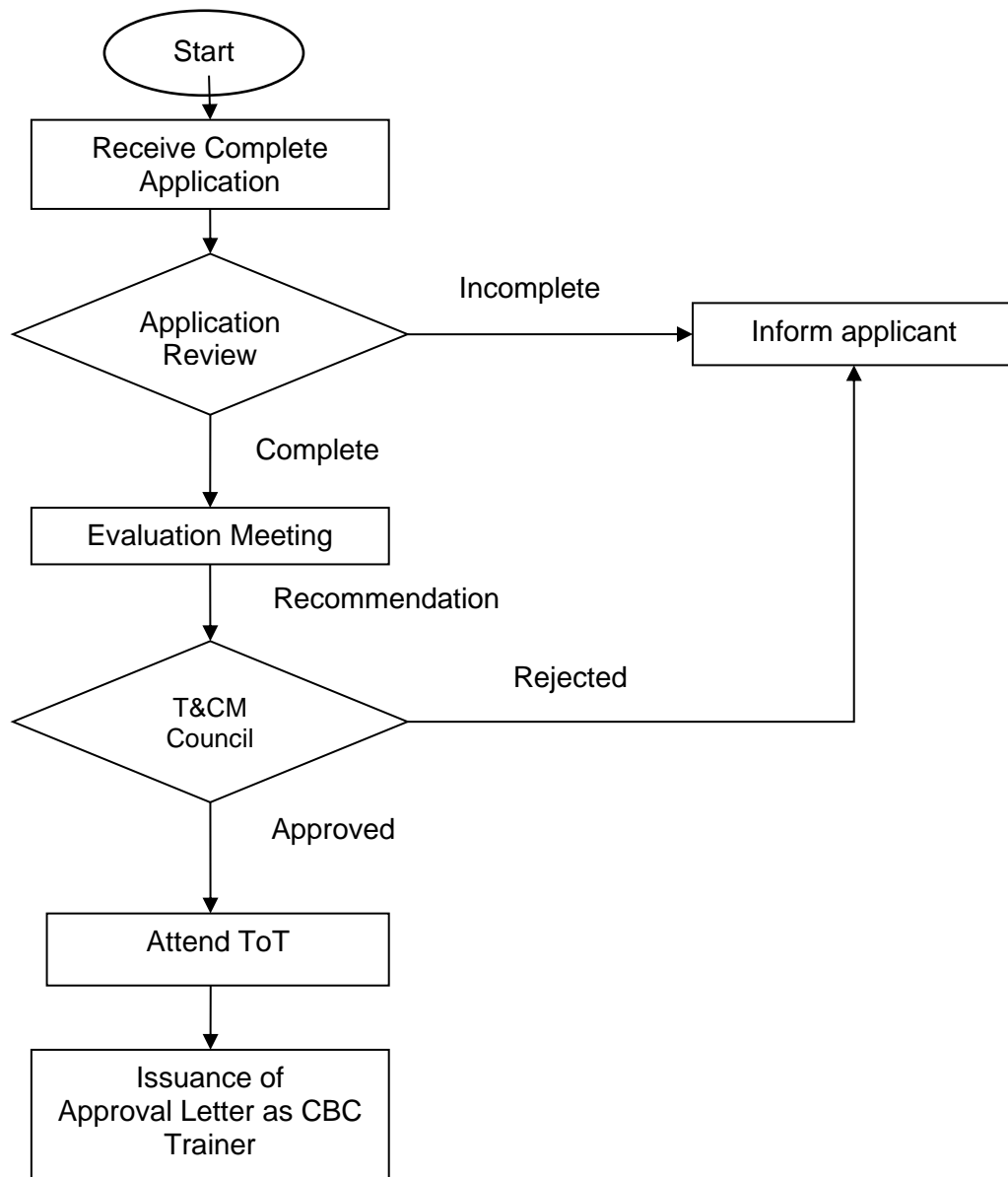
- i. An approval letter will be issued by the T&CM Council Section once approval is received from the T&CM Council and the trainer has attended the ToT session.
- ii. The validity of the approval letter is from the date of the letter until the end of the transitional period on **28 February 2025**.
- iii. The summary of the application process for CBC trainer is described in **Flow Chart 2**:

Note:

All copies of original documents must be certified by one of the following:

- A government officer from the Management and Professional group (Grade 41 or equivalent and above)
- Legal practitioner
- Commissioner of oaths/ Justice of the Peace
- Principal/ headmaster of a government school
- Village head/ *penggawa/ penghulu*/ community leader/ *sidang*
- for Sabah and Sarawak: *ketua kaum/ ketua anak negeri/ kapitan/ pamanca*

Flow Chart 2: Application process for CBC Trainer



3. Terms and Conditions of Approval

Trainers approved by the T&CM Council must comply with terms and conditions as follows:

3.1. Knowledge and Disposition

- i) Maintain good self-image, appearance and personality during CBC sessions.
- ii) Dress neatly when conducting the CBC.
- iii) Have good physical and mental health when conducting the course.
- iv) Only teach in approved practice area/ subarea/ subfield.

3.2. Attitude and Ethics

- i. Possess good values such as integrity, honesty and polite demeanour.
- ii. Maintain professionalism while conducting the course.
- iii. Trainer cannot be replaced by anyone who is not approved to teach the CBC.
- iv. Give full cooperation to Ministry of Health officers during monitoring activities on the implementation of CBC.
- v. Use effective teaching and delivery techniques to convey the learning objectives.
- vi. Does not teach anything that is against MOH policy.

4. Revocation of Approval

The T&CM Council reserves the right to revoke the approval as trainer subject to breach of terms and conditions of approval criteria or any other terms set by the T&CM Council from time to time. The T&CM Council Section will inform the revocation of approval officially in writing together with justification to the trainer.

5. Monitoring

Monitoring will be carried out from time to time to ensure trainers adhere to the specified terms and conditions. Monitoring of trainers will be done in a random manner.

6. Appeal

Written appeal for failure in application or revocation of approval as trainer can be made to the Director General of Health Malaysia. The decision made by the Director General of Health is final.

7. Relevant Forms for Trainer

Forms related to the application as trainer are as follows:

No.	Name	Code	Attachment
1.	Application as CBC Trainer Checklist	BPTK (CM) – BOR - 08	Appendix J
2.	Application as CBC Trainer Form	BPTK (CM) – BOR - 09	Appendix K



**TRADITIONAL AND COMPLEMENTARY MEDICINE COUNCIL
MINISTRY OF HEALTH MALAYSIA
APPLICATION AS CAPACITY BUILDING COURSE TRAINER
CHECKLIST**

Name of Applicant :			
Practice Area :			
FOR USE BY THE T&CM COUNCIL SECTION			
Date of Received Application		Date of Application Completed	
NO.	DOCUMENT (Tick ✓ where applicable)	YES	NO
APPLICANT INFORMATION			
1.	Application as CBC Trainer Form		
2.	A copy of Identification Card/ Passport		
3.	A copy of academic qualification		
4.	A copy of academic transcript		
5.	Curriculum vitae		
Remarks, if any (T&CM Council Section):			
Received by: Officer Name & Signature: Date:			

Appendix K
BPTK (CM) – BOR – 09



**TRADITIONAL AND COMPLEMENTARY MEDICINE COUNCIL
MINISTRY OF HEALTH MALAYSIA**

**APPLICATION AS CAPACITY BUILDING COURSE TRAINER
FORM**

RECENT
PHOTOGRAPH OF
APPLICANT
(PASSPORT SIZE)

Note: Tick (/) where applicable				
FOR USE BY THE T&CM COUNCIL SECTION				
Application Received Date		Date of Completed Application		
REQUESTED COURSE				
TMM	TCM	TIM (Siddha)	TIM (Ayurveda)	Homeopathy
APPLICANT DETAILS				
Applicant Name				
Identification card / passport no.				
Age				
Gender	<input type="checkbox"/> Male			<input type="checkbox"/> Female
Nationality	<input type="checkbox"/> Malaysian			<input type="checkbox"/> Non Malaysian
Home Address				Postcode:
Current Occupation				
Employer Name				
Employer Address				Postcode:
Corresponding Address	<input type="checkbox"/> Home			<input type="checkbox"/> Employer
Mobile Phone No.				
Office No.			Fax No.	
Email				
Academic Qualification				
Working Experience (Please provide attachment if space is insufficient)				
No.	Company/Agency	Designation	Duration	

APPLICANT DECLARATION									
<p>A. Attached herewith are the documents needed for the application as capacity building course trainer:</p>									
ii.	A copy of identification card/ passport								
iii.	A copy of academic qualification								
iv.	A copy of academic transcript								
v.	<i>Curriculum vitae</i>								
<p>B. With this, I _____ bearer of the Identification Card/Passport No. hereby certify that all information provided above are correct and true to the best of my knowledge, and I agree and understand that any falsification of information herein will cause the cancellation of my application or revoking of approval IMMEDIATELY. I promise to adhere to the terms and conditions of being a trainer as set by the Ministry of Health Malaysia.</p>									
<p>_____</p> <p>Signature</p>	<p>_____</p> <p>Date</p>								
FOR OFFICE USE									
<p>File Reference No. _____</p> <p style="text-align: center;">:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="padding: 5px;">Approved to attend ToT</td> <td style="width: 50px;"></td> </tr> <tr> <td style="padding: 5px;">Not approved</td> <td></td> </tr> </table> <p>Officer Name : _____</p> <p>Signature : _____</p> <p>Date : _____</p>	Approved to attend ToT		Not approved		<p>TOT Attendance date: _____</p> <p>T&CM Council Meeting meeting date: _____</p> <p>T&CM Council Decision for this application:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="padding: 5px;">Approved as CBC trainer</td> <td style="width: 50px;"></td> </tr> <tr> <td style="padding: 5px;">Not approved</td> <td></td> </tr> </table> <p>Officer Name : _____</p> <p>Signature : _____</p> <p>Date : _____</p>	Approved as CBC trainer		Not approved	
Approved to attend ToT									
Not approved									
Approved as CBC trainer									
Not approved									

For further enquiries, please contact:

Traditional & Complementary Medicine Council Section
Traditional & Complementary Medicine Division
Ministry of Health Malaysia
Block E, Jalan Cenderasari
50590 Kuala Lumpur
(Att: Standard & Accreditation Unit)

Tel. No.: 03 – 2279 8100 ext 487/654

Email: smptk@moh.gov.my

Website: www.moh.gov.my/tcm