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**Australian Type 1 Diabetes Clinical Research Network  
Progress Report**

|  |  |
| --- | --- |
| Grant Key | **X-SRA-YYYY-XXX-X-X** |
| Project Title | **ABC** |
| Clinical Trial Registration no. | **ACRN XXXX** |
| Progress Report Date | Click here to enter a date. |
| Reporting Period | **From** Click here to enter a date. **To** Click here to enter a date. |



**A Special Research Initiative funded by the ARC**

# Progress report creation, Review and approval

## RMS360 Reminder

* A progress report reminder will appear in RMS360 under ‘Activities due in 3 months’.  
  In general:  
  Interim Progress Reports are due on 30th Jun; reporting on the previous six months  
  Annual Progress Reports are due on 15th January; reporting on the previous six months up to 31st December.

## Download the Progress Report template

## Download the Progress Report template from[: https://www.t1dcrn.org.au/for-researchers/reporting-templates](https://www.t1dcrn.org.au/for-researchers/reporting-templates)

## Update the Progress Report

## Customise the cover page with the requested information

## Customise the footer with the progress report date and the grant key

## Provide a project update per the Progress Report categories. Not all sections need to be completed for the June Report.

## Other and/or supporting information, such as graphs, tables, figures etc. should be included in the Appendices section

## The Progress Report should be named as follows: Grant Key\_Progress Report\_YYYYMMDD

## send the draft progress report for review

* Send your draft report to the JDRF T1DCRN inbox [crn@jdrf.org.au](mailto:crn@jdrf.org.au) and cc [ychu@jdrf.org.au](mailto:ychu@jdrf.org.au)
* Await approval from JDRF T1DCRN team via email

## Upload and submit the Progress Report in RMS360

* Login into RMS360 and upload the Progress Report

## The Progress Report will be approved within RMS360 and no further action is required by the PI Review and Approval of the Progress Report in RMS360

# Project HIghlights and achievements

Please provide an overview of the main Project highlights and achievements experienced and achieved to date.

## Overview of Highlights and Achievements(maximum 400 words)

# pROGRESS RELATING TO RESEARCH AIMS

Reminder: Other and/or supporting information, such as graphs, tables, figures etc. should be included in section 9 Appendices

**Required: this section must be completed for the December Report**Optional: this section can be completed for the June Report; however, it is not mandatory

Please describe research progress and results over the last 12 months relating to the original aims and any additional aims or hypotheses developed during the course of the project.

## Original Aims (maximum 600 words)

*NB: There is no need to restate the original aims*

## Additional Aims or Hypotheses Developed, If Any (maximum 600 words)

# General Project INFORMATION

## Project information

### Protocol:

|  |  |
| --- | --- |
| Is the Protocol approved? | Yes  No  N/A |
| **If yes,** has a copy been uploaded into RMS360? | Yes  No |
| **If yes,** has a copy of the approval letter(s) been uploaded into RMS360? | Yes  No |
| Comments: | |

### Protocol Amendments:

|  |  |
| --- | --- |
| Has the Protocol been amended? | Yes  No  N/A |
| **If yes**, has the amended Protocol been approved? | Yes  No |
| **If yes,** has a copy of the Protocol been uploaded into RMS360? | Yes  No |
| **If yes,** has a copy of the approval letter(s) been uploaded into RMS360? | Yes  No |
| Comments: | |

### Ethics Approval:

|  |  |
| --- | --- |
| Are the Ethics Approvals current? | Yes  No  N/A |
| **If no,** has the required Ethics approval(s) been applied for? | Yes  No |
| **If yes,** are the Ethics approvals uploaded into RMS360? | Yes  No |
| Comments: | |

### New Ethics Approval:

|  |  |
| --- | --- |
| Have there been any new Ethics Approvals? | Yes  No  N/A |
| **If yes,** have the new Ethics Approvals been uploaded into RMS360? | Yes  No |
| Comments: | |

### Adverse Events:

|  |  |
| --- | --- |
| Have there been any unexpected adverse events? | Yes  No  N/A |
| **If yes,** have you reported these to the appropriate regulatory bodies? | Yes  No |
| **If no,** please comment: | |

### Compliance with JDRF IP Policies:

|  |  |
| --- | --- |
| Has the Trial been registered on an authorized public register? | Yes  No  N/A |
| Comments: | |
| Has the Research Protocol been submitted for publication? | Yes  No  N/A |
| Comments: | |
| Has the Statistical Analysis Plan been submitted for Publication? | Yes  No  N/A |
| Comments: | |
| Does the current Data Sharing Plan reflect the Project’s actual data management activities? | Yes  No  N/A |
| Comments: | |

## Staff and training

### Key Personnel:

|  |  |
| --- | --- |
| Have there been any changes to the key personnel? | Yes  No |
| **If yes**, has this been updated in RMS360? | Yes  No |
| Comments: | |

### New appointments: Please indicate if the person is an Early Mid Career Researcher (EMCR – within 10yr post PhD up to and including A/Prof level)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have there been any new appointments? | | | | Yes  No |
| **If yes,** please complete the following table: | | | |  |
| **Name** | **Role** | **Location** | **Start Date** | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |

### Project Events (Attended by members of the study team):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Since the last reporting period, have any members of the study team **attended** any workshops (including training workshops), project-related meetings, or other project events. | | | Yes  No | |
| **If yes**, please complete the following table: | | |  | |
| **Date** | **Purpose** | **Outcome** | | **No. of**  **Attendees** |
|  |  |  | |  |
|  |  |  | |  |

### Project Events (Organised by members of the study team):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Since the last reporting period, have any members of the study team **organised** any workshops (including training workshops) or project-related meetings | | | Yes  No | |
| **If yes**, please complete the following table: | | |  | |
| **Date** | **Purpose** | **Outcome** | | **No. of**  **Attendees** |
|  |  |  | |  |
|  |  |  | |  |

# Project Progress

## Recruitment

### Recruitment Status

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Is this project recruiting? | | | | | Yes  No  N/A | |
| **If yes**, please provide the current recruitment status: | | | | | | |
| **Recruitment**  **Target** | **Milestone**  **Date** | **Projected**  **Target Date** | **Actual % Complete** | **Recruitment**  **Status** | | **Actual**  **Date** |
| **FPFV** | YYYYMMDD | YYYYMMDD |  | Choose an item. | | YYYYMMDD |
| **25%** | YYYYMMDD | YYYYMMDD |  | Choose an item. | | YYYYMMDD |
| **50%** | YYYYMMDD | YYYYMMDD |  | Choose an item. | | YYYYMMDD |
| **75%** | YYYYMMDD | YYYYMMDD |  | Choose an item. | | YYYYMMDD |
| **100%** | YYYYMMDD | YYYYMMDD |  | Choose an item. | | YYYYMMDD |

### Please comment, if the projected target date is >30 days after agreed milestone recruitment date:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Challenge** | **Mitigation** | **Outcome** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

## Milestones

Please provide an update on the Project’s milestones achieved over the last reporting period.

Please also provide details on progress against milestones planned for the future reporting period.

| **Milestone** | **Projected**  **Completion Date** | **Actual Completion**  **Date** | **Status** | **Please comment on delays or challenges which impacted or will impact on achieving this milestone on time** |
| --- | --- | --- | --- | --- |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |
|  | YYYYMMDD | YYYYMMDD | Choose an item. |  |

# 

# LINKAGES AND CONNECTIVITY

**Required: this section must be completed for the December Report**Optional: this section can be completed for the June Report; however, it is not mandatory

Please provide details on project activities undertaken over the last 12 months and planned for the future reporting period, which has significance in strengthening connection and/or collaboration in the following categories: for example, visiting fellows, engagement with other institutions/hospitals etc.

## International (Consider: new collaborations, new sites, industry meetings)

### Current

### Planned for next 12 months

## National (consider: new collaboration, new sites, hosting any international visiting fellows, industry meetings)

### Current

### Planned for next 12 months

## Regional (consider: new collaboration, new sites, hosting any international visiting fellows)

### Current

### Planned for next 12 months

## Leveraged support

Please provide details on any support for this project provided external to your T1DCRN grant, including in-kind support. For example, additional grants/funding; personnel (including students) with their own fellowships/scholarships working on the project, or providing their services/input without salary support from your T1DCRN grant; external support to attend meetings/conferences to discuss the project; provision of equipment; etc.

Please include both support that has already been received as well as that has been applied for but pending decision

### Opportunities & Support from other funding sources

| **Other Support** | **Support received on** | **Provide details including funding source and fiscal amount (estimated for non-financial support)** |
| --- | --- | --- |
| Choose an item. | YYYYMMDD |  |
| Choose an item. | YYYYMMDD |  |

# 

# Communications

**Required: this section must be completed for the December Report**Optional: this section can be completed for the June Report; however, it is not mandatory

Please refer to the CTRA with respect to the outlined requirements and responsibilities for Publications and Acknowledgements.

Please provide details of publications (including published abstracts), conference presentations and publicity in the form of transcripts, video or other media links over the last reporting period and planned for the future reporting period. Otherwise please enter “Not applicable for this reporting period”.

## Publications (Please include published and submitted for all members of the study team including students)

### Completed

### Planned for next 12 months

## Invited talks/Conference presentations (Please note this refers to Oral Presentations only).

### Completed

### Planned for next 12 months

## Poster presentations.

### Completed

### Planned for next 12 months

## Media releases/Commentaries (Including social media coverage)

### Completed

### Planned for next 12 months

## TID Community (General Public) engagement

### Completed

### Planned for next 12 months

# CERTIFICATion

I, **Click here to enter text.** , certify as the Principal Investigator, the information contained in this Progress Report represents a true account of the research progress conducted to date.

Contact us

For any queries relating to the Progress Report please contact the JDRF T1DCRN research team via email: [crn@jdrf.org.au](mailto:crn@jdrf.org.au) and cc [ychu@jdrf.org.au](mailto:ychu@jdrf.org.au)

# Appendices

Other and/or additional supporting information, such as graphs, tables and figures should be inserted here.