



## Middle-Term Progress Report for SCPOR Trainees

The purpose of this form is for trainees to provide SCPOR an update with the progress of their SCPOR-funded patient-oriented research projects. The progress report is required for all trainees who have been awarded SCPOR Graduate Student Scholarship (Masters or PhD) or a SCPOR Postdoctoral Fellow Scholarship. Trainees who were awarded SCPOR funding as a research assistant or graduate assistant are not required to complete this form.

It is the trainee's responsibility to ensure the report is completed and returned to SCPOR at [alicia.husband@usask.ca](mailto:alicia.husband@usask.ca) (and at U of R to [research.office@uregina.ca](mailto:research.office@uregina.ca)). Please note this form is for SCPOR purposes only and does not replace other required reporting with the trainee's home institution.

Trainee Name: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Program Start Date: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Expected Date of Completion: \_\_\_\_\_

### Progress Report

1. Please provide a description of the completed research, the remaining research and a tentative timeline for completion.



**2. How do you plan to, or how have you, engaged with patients in your project?**

**3. How do you plan to or how have you engaged with health system leaders/decision makers in your project?**

**4. What are your expected research impacts? Please elaborate on patient involvement in these outcomes.**

**5. Please provide your completed or planned knowledge translation activities to date. Activities may include community events, newsletters, videos, publishing a journal article, presenting at conferences, etc. Please elaborate on how patient's contributed to these.**



6. Please describe any highlights and/or challenges you have experienced in your project thus far.

7. Please comment if your research project has continued as planned and outlined in the research proposal approved by SCPOR. Note that any significant change to the project is subject to approval by SCPOR and may require further information beyond this form.

**Signatures**

Trainee Signature: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_