



**College of Intensive Care Medicine
of Australia and New Zealand
ABN: 16 134 292 103**

IRTP-STP Progress Report – Semester 1, 2020

| Section 1: Post Details | |
|--------------------------------|--|
| IRTP-STP Post #: | |
| Location / Site: | |
| Legal Entity: | |

| Section 2: Person Completing the Report | | | |
|--|--|------------|--|
| Prefix: | | | |
| First Name: | | Surname | |
| Title / Position: | | | |
| Location / Site | | | |
| Daytime Phone No: | | Mobile No: | |
| Email: | | | |

| Section 3: Trainee Details | | |
|-----------------------------------|--------------------------|--------------------------|
| Trainee Details | Trainee 1 | Trainee 2 |
| Prefix | | |
| First Name | | |
| Surname | | |
| CICM Reg. No. | | |
| Total FTE | | |
| FTE Rural Area | | |
| Trainee Start Date | | |
| Trainee End Date | | |
| Year / Level | | |
| Medical Indemnity | <input type="checkbox"/> | <input type="checkbox"/> |
| Consent Form | <input type="checkbox"/> | <input type="checkbox"/> |
| Training requirements met? | <input type="checkbox"/> | <input type="checkbox"/> |

Note: FTE is the ratio of hours worked per week to the number of hours in a standard week of full-time work. If the trainee has only worked for part of the rotation, simply enter their FTE during the time they were in the Post.

| Section 4: Provision of Support to the Trainee | |
|--|-----------|
| Expense items / Activities | \$ |
| | |
| | |
| | |
| | |
| | |
| Total provision of support to the trainee in Semester 1, 2020 | \$ |
| Please provide receipts as evidence supporting each item/activity | |

Eligible Support Costs to the trainee may include (but are not limited to): Equipment (videoconferencing, teleconferencing, internet access keys, mobile phones), Travel costs (accommodation/rent subsidies, flights, car mileage, travel costs associated with attending teaching sessions), Trainee activities and/or resources (attendance at seminars)

Ineligible Costs include administration, supervision, salary and CICM training fees.

Please note: Irrespective of provision of support to the trainee, the payment from CICM will not exceed the Maximum Funded Amount for the semester

| Section 5: Invoice Details | |
|---|--------------------------|
| Total Trainee FTE | |
| Salary Support Claim Total (GST Exclusive) | \$ |
| Total Provision of Support to the Trainee (GST Exclusive) | \$ |
| GST Total | \$ |
| Invoice Total (GST Inclusive) | \$ |
| Invoice Attached | <input type="checkbox"/> |

(IRTP-STP funding is calculated based on: Semester = 182 days = \$75,000 Excl. GST = 1.0 FTE)

| Section 6: Performance Data |
|---|
| <p>Feedback from trainees: <i>Please provide feedback received from trainees that have filled the training position during the project period.</i></p> |
| <p>General Comments: <i>Please provide additional comments or information you consider being of note. E.g. comments on the effectiveness or success of the training position, any obstacles or impediments that have been experienced.</i></p> |

| Section 7: Declaration |
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|-------------------------------|

Signed:

Date:

By submitting this report, I declare that:

- The information in this report is true and correct
- The monies received, expended and claimed were appropriately allocated to facilitate the trainees filling the training positions progress on the pathway to CICM Fellowship.
- These activities have been taken in accordance with the terms of the CICM STP Funding Agreement.

Please submit this initial report and accompanying documentation via email to sumithra@cicm.org.au by the **19 July 2020.**

For all enquiries please contact the STP Coordinator on sumithra@cicm.org.au or (03) 9514 2826.