

Spleen Australia

**Strategic plan
2026–2031**





Vision

Everyone without a functioning spleen leads a healthy, full life, protected from preventable infection.

Purpose

People living without a functioning spleen can stay well with the right preventive care. The main risk is overwhelming post-splenectomy infection (OPSI), which is rare but can be rapidly fatal. Other preventable problems also arise from life without a functioning spleen.

Spleen Australia exists to prevent OPSI and reduce this wider harm, in partnership with our community. That community includes people living without a functioning spleen, their families and carers, and the clinicians who care for them.

We do this through vaccination, antibiotic prophylaxis, travel advice, and clear education, and we support our community across the full range of health questions that arise from life without a functioning spleen.

We achieve this through three approaches:

- **Education and empowerment.** Equip clinicians, our community, and families with clear, current information.
- **Research and evidence.** Use the Spleen Australia registry and academic partnerships to generate evidence that improves care.
- **Advocacy and access.** Work with policymakers and health authorities to remove barriers to preventive care across Australia.



Strategic Goals (2026–2031)

Over the next five years, Spleen Australia will pursue five goals:

1. **Engagement and awareness.** Engage and empower people living without a functioning spleen, the clinicians who care for them, and the wider public, supported by a strong digital presence.
2. **Quality improvement and service excellence.** Deliver high-quality preventive care and health promotion that integrates with health systems.
3. **Research and innovation.** Generate and translate evidence that improves outcomes, and partner widely on innovation.
4. **Evidence-based guidelines and best practice.** Maintain current, accessible guidelines and drive their use across primary care, hospitals, and key specialties.
5. **Sustainability and growth.** Achieve equitable national coverage, with diversified funding and strong governance.

Our five strategic pillars set out how we will deliver these goals:

Consumer Engagement and Awareness	Quality Improvement and Service Excellence	Research and Innovation	Evidence-Based Guidelines and Best Practice	Sustainability and Growth
• Patient education and resources • Digital engagement • Clinician awareness and training • Consumer input embedded in all activities	• Preventative care delivery • Integration with health systems • Data quality and security • Equity in service delivery	• Registry-based research • Clinical studies and trials • Innovation in patient care • Research capacity and funding • Knowledge exchange	• Guideline updates and publication • National harmonisation • Guideline dissemination • Monitoring and feedback • Global footprint	• Diversify and secure funding • Nationwide coverage • Strengthen Governance • Operational efficiency and capacity • Stakeholder engagement



Pillar 1: Consumer engagement and awareness

Effective prevention starts with engagement. Clinicians need confidence in referring to and using our service. Our community needs accessible information and to feel supported, wherever they live. Families and carers are active partners in care. Our role is to make engagement easy and useful.

Key initiatives

Patient education and resources. Provide clear, accessible, plain-language and translated information on vaccination, antibiotic prophylaxis, travel advice, and wellbeing.

Digital engagement. Build a strong online presence through the website, online education, webinars, and social media to extend our reach and visibility.

Clinician awareness and training. Position Spleen Australia as the trusted point of contact for clinicians, with clear guidance and embedded referral pathways in high caseload settings.

Consumer input embedded in all activities. Involve people with lived experience in shaping our resources, services, and governance.

Measures of success

- Reach across registered people, including in regional and remote populations.
- Proportion of people without a functioning spleen accessing our services.
- Clinician awareness and engagement with our services and guidelines.
- Engagement with digital and online resources.
- Community and clinician satisfaction.



Pillar 2: Quality improvement and service excellence

Even where guidelines exist, real-world adherence to preventive measures can fall short. We will close this gap by integrating Spleen Australia into hospital and primary care pathways, monitoring care delivery using registry data, and building equity into how we work.

Key initiatives

- Quality care. Review our service against best-practice standards on an ongoing basis, drawing on consumer feedback, peer review, and benchmarking, and act on findings to improve how we work.
- Preventative care delivery. Use registry data to monitor vaccination currency and access to emergency antibiotic supply, with regular care audits and feedback to clinicians.
- Understanding missed opportunities. Identify OPSI cases and review them to determine missed opportunities for prevention.
- Integration with health systems. Partner with hospitals and state health departments to embed referral in clinical pathways, including direct integration with electronic health records where possible.
- Data quality and security. Strengthen our internal processes, data governance, and information security as the registry grows.
- Equity in service delivery. Ensure equitable access for our whole community, and establish formal non-clinician consumer representation in governance.
- Develop our people. Ensure our staff have opportunities to build the knowledge and skills they need to provide leading services.

Measures of success

- Care audit performance against vaccination and antibiotic prophylaxis standards.
- Hospitals with integrated Spleen Australia referral pathways.
- OPSI case identification and review.
- Number of OPSIs in Australia
- Active consumer representation in governance.



Pillar 3: Research and innovation

The Spleen Australia registry is a unique resource, covering more than 12,000 people across multiple jurisdictions. It offers an unparalleled view of outcomes, risk factors, and the effectiveness of preventive interventions. Our research generates the evidence that informs our guidelines, supports our advocacy, and improves care.

Key initiatives

- **Registry-based research.** Use registry data to characterise outcomes, identify risk factors, and evaluate preventive strategies.
- **Clinical studies and trials.** Conduct and contribute to studies that address key knowledge gaps in OPSI prevention and management.
- **Innovation in patient care.** Pursue novel diagnostics, risk-stratification tools, and digital interventions for our community.
- **Research capacity and funding.** Build sustainable research capacity through competitive funding and partnerships, nationally and internationally.
- **Knowledge exchange.** Share findings through publications, conferences, and stakeholder networks, and translate them into practice.

Measures of success

- Peer-reviewed publications and conference presentations.
- Innovation projects initiated and progressed.
- Active national and international research partnerships.
- Findings incorporated into guideline updates and service improvement.



Pillar 4: Evidence-based guidelines and best practice

Spleen Australia has been a leader in developing guidelines for the prevention of sepsis in people living without a functioning spleen, including our 2017 comprehensive guidelines. The challenge for the next five years is twofold: keeping our guidelines current as evidence evolves and getting them used in everyday clinical practice.

Key initiatives

- **Guideline updates and publication.** Move to an annual review cycle, with structured incorporation of new evidence and stakeholder feedback.
- **National harmonisation.** Align our guidelines with state and territory health service guidelines and engage with the Australian Centre for Disease Control (ACDC).
- **Guideline dissemination.** Deliver targeted education for high-yield clinical groups, including trauma and surgical specialties, interventional radiology, infectious diseases, haematology, and immunology, and broaden reach to general practitioners, hospital doctors, and junior medical officers.
- **Monitoring and feedback.** Track guideline use through download metrics, clinician surveys, and structured stakeholder feedback, with results feeding into the next update.
- **Global footprint.** Share Australian experience and learn from international programs to strengthen guidelines and practice.

Measures of success

- Guideline updates completed against the annual review cycle.
- Guideline access and download metrics.
- Clinician awareness and self-reported use of our guidelines.
- Reach of education into priority clinical groups.



Pillar 5: Sustainability and growth

Spleen Australia is currently funded by the Victorian state health department, with fixed-term funding in Queensland, Tasmania, and Western Australia. This has supported a registry of more than 12,000 people but leaves people in New South Wales, South Australia, the Northern Territory, and the Australian Capital Territory without full access. It also leaves the service vulnerable. Closing this equity gap and establishing a sustainable national model are central to the next five years.

Key initiatives

- **Diversify and secure funding.** Build a diversified funding base alongside state contracts, including philanthropic, research, and partnership income.
- **Nationwide coverage.** Engage directly with non-funded jurisdictions (NSW, SA, NT, ACT) about what would enable participation and explore partnerships with existing services where they exist.
- **Strengthen governance.** Develop the governance structures, including consumer representation, that a national service requires.
- **Operational efficiency and capacity.** Build the workforce, systems, and operational capacity to deliver our model of care at national scale.
- **Stakeholder engagement.** Sustain visibility and trust with funders, policymakers, and the public through clear reporting and active engagement.

Measures of success

- Progress toward service coverage in currently non-funded jurisdictions.
- Diversification of funding sources.
- Engagement with the ACDC and other national bodies.
- Internal capacity and governance benchmarks aligned with a national service model.



Looking ahead

By 2031, Spleen Australia will be a truly national service: deeply engaged with our community and with the clinicians who care for them, supported by current evidence-based guidelines and a sustainable funding base.

Two decades of experience show that our model works. With concerted national effort, we are well placed to extend its reach and to eliminate preventable OPSI cases. This plan is a guide for our team and a call to action for governments, healthcare providers, and the wider community to join us. Together, we can ensure that every person living without a functioning spleen stays safe, informed, and well supported.