

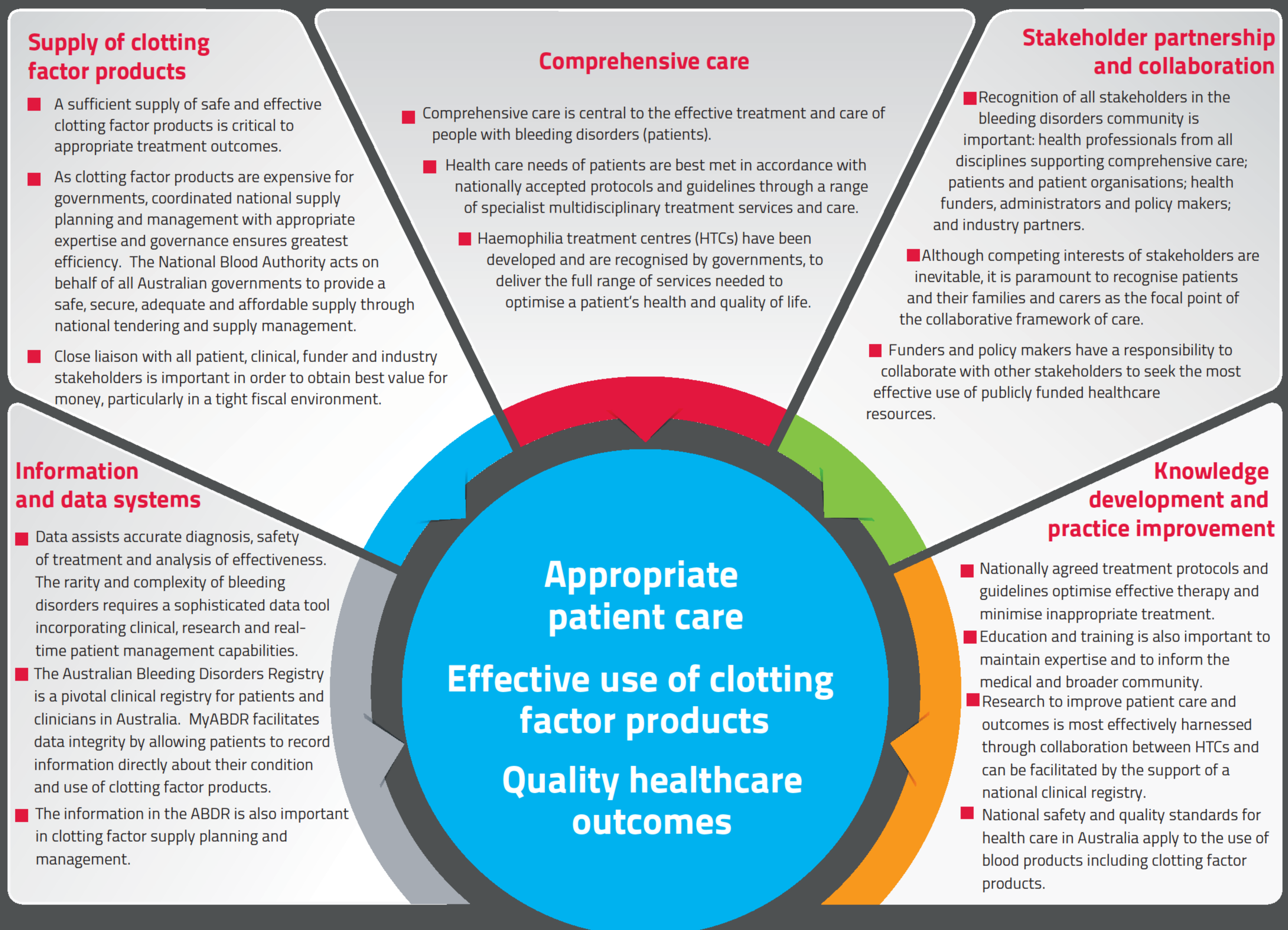
Australian Framework for Management of Bleeding Disorders

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Introduction

Close collaboration between stakeholders can provide the environment to optimise patient care. Providing care for haemophilia and other bleeding disorders is complex, difficult and expensive.

An 'Australian Framework for Management of Bleeding Disorders' is in development to highlight the various inputs necessary for appropriate patient care and effective use of clotting factor products.



Historical and future development

A number of significant past milestones support the strength of the Australian framework for management of bleeding disorders today:

- Recognition by all governments in 1998 of the benefit of providing comprehensive care through dedicated Haemophilia Treatment Centres
- The establishment, and ongoing operation and resourcing of:
 - state and territory haemophilia foundations and Haemophilia Foundation Australia
 - Australian Haemophilia Centre Directors' Organisation
 - Australian Haemophilia Nurses Group
 - Australian and New Zealand Physiotherapy Haemophilia Group
 - Australia/New Zealand Haemophilia Social Workers' and Counsellors' Group
 - ABDR Data Managers' Group
- Implementation of the National Blood Agreement between all Australian governments in 2003 to enable national policy setting, supply planning and management, and improvement programs for blood products including clotting factors, including establishment of the National Blood Authority to act on behalf of all governments to provide a safe, secure, adequate and affordable supply of clotting factor products
- The decision to provide funding for full access to recombinant Factor VIII and Factor IX products in 2004
- The national redevelopment stages of the Australian Bleeding Disorders Registry in 2008 and 2012, and development of MyABDR in 2014
- The development of national Factor VIII and Factor IX guidelines in 2006, and the commissioning of a project to develop updated national haemophilia care guidelines in 2013

The optimal management of bleeding disorders will not remain static. The framework described above will be developed and used over time as a means of identifying current and future challenges and opportunities. This will facilitate the development of forward strategies for national priority setting, collaboration and improvement.

Conclusion

Describing the Australian Framework for Management of Bleeding Disorders as outlined above can be used as a vehicle to consider the elements required to provide effective treatment and care for patients within the arrangements and approaches applying in Australia.

The framework will be developed and used as a tool to facilitate examination and improvement of what is already in place, and to develop future strategies and measures, in a manner which recognises and balances all stakeholder interests.

Collaboration between stakeholders with different and competing interests may at times be challenging but is essential to optimise the care and outcomes for people with bleeding disorders.

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