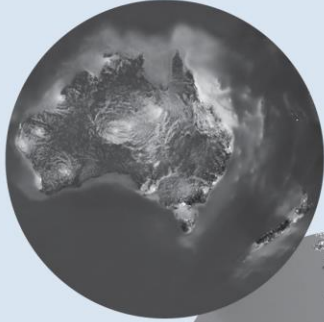


## Strategic Plan 2024 - 2028

### ASCIA MEMBER SERVICES



Website and Communications

AIFA Research Grants

Sustainability

Advocacy and Submissions



### ASCIA PROFESSIONAL DEVELOPMENT

Annual Conferences

Committees and Meetings

Education and Training

Online Resources



### ASCIA COLLABORATIONS

National Allergy Council

ASCIA Immunodeficiency Strategy

Research Groups

Professional and Patient Organisations



[www.allergy.org.au](http://www.allergy.org.au)

ASCIA is the peak professional body for allergy and clinical immunology in Australia and New Zealand since 1990

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## Introduction

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The Australasian Society of Clinical Immunology and Allergy (ASCIA) was established in 1990 as the peak professional body of clinical immunology/allergy specialists in Australia and New Zealand.

ASCIA is a Company limited by guarantee (ACN 608 798 241; ABN 45 615 521 452) and is registered with the Australian Charities and Not-for-profits Commission (ACNC):

[www.acnc.gov.au/charity/charities/74feaaa8-38af-e811-a963-000d3ad24077/profile](http://www.acnc.gov.au/charity/charities/74feaaa8-38af-e811-a963-000d3ad24077/profile)

ASCIA is a member society of the World Allergy Organisation (WAO) and the Asia Pacific Association of Allergy, Asthma and Clinical Immunology (APAAACI). ASCIA is affiliated with the Royal Australasian College of Physicians (RACP) as a Specialty Society.

ASCIA acknowledges and pays respect to past, present and emerging traditional custodians and elders of the lands on which we live and work, and recognises the continuing connection to land, sea and culture of all first nations people.

In recent years ASCIA has worked on developing Strategies for Allergy and Immunodeficiency, which are now being implemented. These collaborations will be a major focus for ASCIA in the next few years.

To ensure that ASCIA can plan for the future, this new **ASCIA Strategic Plan** has been developed, based on:

- ASCIA's Purpose, Strategic Areas of Focus and Priorities within these areas
- Findings from the [ASCIA Priorities Report 2022-2023](#)
- ASCIA Immunodeficiency Strategy
- National Allergy Council projects assigned to ASCIA

ASCIA's work depends on utilising the clinical and academic expertise of ASCIA members and project coordination by ASCIA staff, working together with contractors.

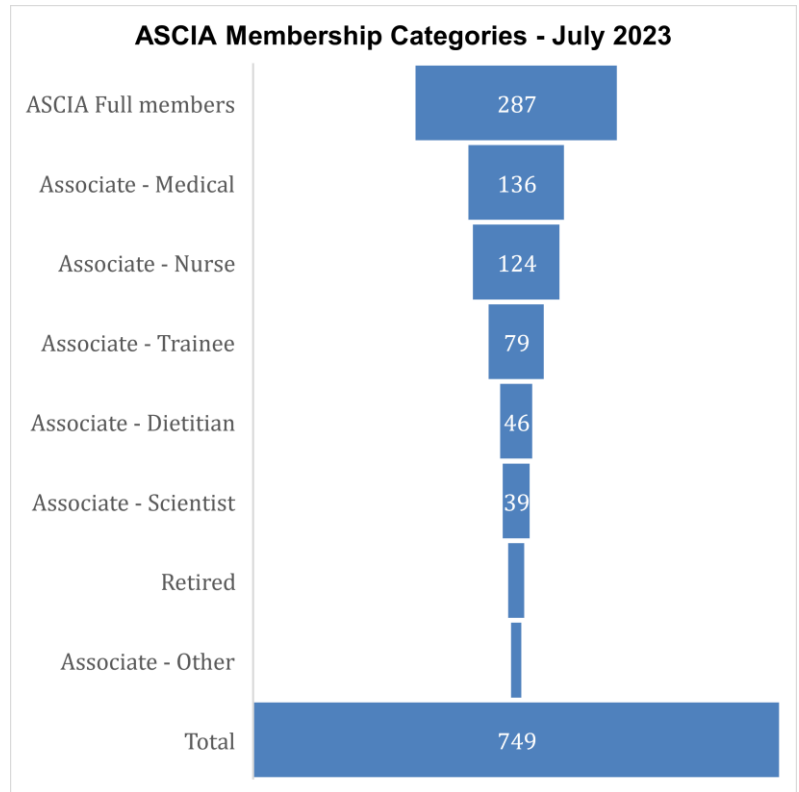
ASCIA is grateful for the immense voluntary contributions from ASCIA Directors, ASCIA Council and other ASCIA members, who work with staff and contractors to contribute to ASCIA's initiatives, which have resulted in ASCIA providing world leading online resources and meetings.

# ASCIA Membership Overview

ASCIA was established in 1990 as the peak professional body of clinical immunology/allergy specialists in Australia and New Zealand, by amalgamating the Australian College of Allergy (ACA) with the Australasian Society for Immunology (ASI) Clinical Immunology Group (CIG). (Reference: Donald, Gwen. ACA Newsletter 9; 1990).

ASCIA is a member based society, comprised of:

- **287 Full ASCIA members**, who are mostly clinical immunology/allergy specialists and listed on the ASCIA website.
- **79 Associate (Trainee) members**, who are completing their advanced training to become clinical immunology/allergy specialists.
- **136 Associate (Medical) members**, who are medical practitioners managing some patients with allergic conditions but are not clinical immunology/allergy specialists.
- **185 Associate (Other Health Professional) members**, including 124 nurses and 46 dietitians.
- **39 Associate (Scientist/Researcher) members**.
- **23 Retired ASCIA members**.



## Full Members

Applicants for ASCIA Full member must satisfy the following criteria:

(a) At the time of his/her nomination, have the following qualifications and requirements:

(i) Be a Fellow of the Royal Australasian College of Physicians (FRACP) with Joint College Training Committee (JCTC) training in clinical immunology and allergy, or equivalent qualifications, and be registered for clinical practice in Australia (AHPRA - Australian Health Practitioner Regulation Agency) or New Zealand (NZMC – New Zealand Medical Council); or

(ii) Be a non-medical graduate (or medical graduate not registered for clinical practice in Australia or New Zealand) with a post-graduate doctoral research degree and at least ten years post graduate experience in clinical immunology and/or allergy; and

(b) Be actively involved in practice, teaching or research relating to clinical immunology and allergy in Australia or New Zealand; and

(c) Not be engaged (either personally or on behalf of another person or organisation) in commercial activity involving the sale or marketing of allergy and clinical immunology related products (except as an incidental or minor subsidiary activity to clinical practice, teaching or research activities).

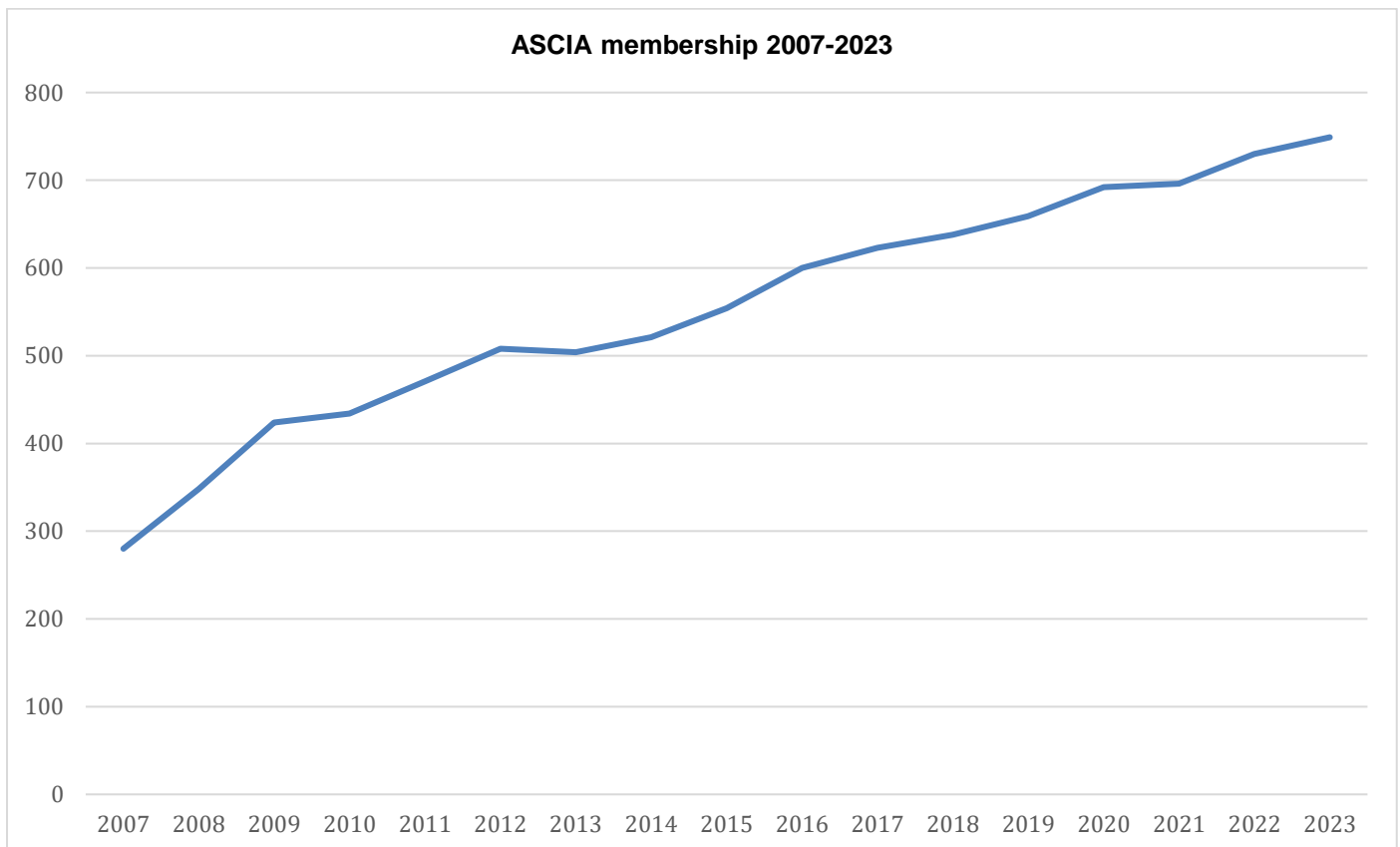
## ASCIA Associates

- (i) Associate – Medical, being persons who are medical practitioners registered for clinical practice in Australia or New Zealand, including persons qualified as general practitioners, or registrars, or with specialist qualifications other than clinical immunology and allergy (e.g. FRACP, FRACS, FRANZCA, FACD);
- (ii) Associate – Other Health Professionals, being persons qualified as allied health professionals (e.g. nurses, dietitians, pharmacists). or medical practitioners working in clinical practice overseas;
- (iii) Associate – Scientists/Researchers, being persons qualified as scientists or with other relevant qualifications and experience working in a field relevant to clinical immunology and allergy;
- (iv) Associate – Trainee, being persons who are advanced trainees in clinical immunology and allergy in Australia or New Zealand; and
- (v) Associate – Retired, being persons who were formally members of the company and have retired from clinical practice.

ASCIA Associate members must not be engaged (either personally or on behalf of another person or organisation) in commercial activity involving the sale or marketing of allergy and clinical immunology related products, except as an incidental or minor subsidiary activity to clinical practice, teaching or research activities.

## ASCIA Membership 2007-2023

As of July 2023 there was a total of **749** ASCIA members located throughout Australia and New Zealand, which is a significant increase since 2007 when there were 280 ASCIA members.





# ASCIA's Purpose, Strategic Areas, and Goals

**ASCIA's purpose is to advance the science and practice of allergy and clinical immunology in Australia and New Zealand.**

This is achieved by promoting the highest standard of medical practice, training, education, and research, to improve the quality of life and health of people with immune system disorders. These include allergies, immunodeficiencies and other immune diseases.

ASCIA works towards achieving its purpose by focusing on the following three strategic areas and goals:

## 1. Member Services

**Goal:** Promote the highest standards of allergy and immunology training, practice and care by providing online ASCIA website resources, communications, advocacy (more than 15 submissions are lodged by ASCIA each year) and AIFA allergy/clinical immunology research grants for ASCIA members.

ASCIA website online resources attract approximately 3 million pageviews and 2 million visits from 1.5 million users (unique visitors) each year.

## 2. Professional Development

**Goal:** Provide continuing professional development (CPD) opportunities including education and training in allergy and clinical immunology for ASCIA members, other health professionals, patients, carers, and community.

ASCIA Annual Conferences are held in early September each year, and have become even more successful since they transitioned to hybrid in 2022, to enable greater access to CPD.

Another source of CPD are ASCIA e-training courses, and there have been more than 1 million registrations since they were first introduced in 2010.

## 3. Collaborations

**Goal:** Work together with other organisations, including patient/carer, professional and research groups to increase the profile of allergy and clinical immunology and improve health outcomes. An example of a successful collaboration is TAPID (Transplantation and Primary Immunodeficiency) which was commenced by ASCIA in 2015.

In recent years ASCIA has worked on developing National Strategies for Allergy and Immunodeficiency, which are now being implemented through the ASCIA Immunodeficiency Strategy and National Allergy Council. These collaborative strategies will be major priorities for ASCIA in the next few years.

All three strategic focus areas listed above depend on utilising the clinical and academic expertise of ASCIA members and project management by ASCIA staff, working together with contractors.



## STRATEGIC AREA 1: Member Services

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**Goal:** Promote the highest standards of allergy and immunology training, practice and care through providing online ASCIA resources, communications, advocacy and allergy/clinical immunology research grants for ASCIA members.

- **Advocacy on behalf of ASCIA members** – ASCIA makes regular submissions to government and other organisations through letters, submissions, and reports.
- **ASCIA online communications** – Each month ASCIA informs members of new and updated allergy and immunology information, mainly via ASCIA e-newsletters and direct emails.
- **Listing on the ASCIA website ‘How to Locate a Specialist’ section** – Full ASCIA members are eligible for one or more listings on the ASCIA website.
- **AIFA research grants** – Only ASCIA members are eligible to apply for Allergy and Immunology Foundation of Australasia (AIFA) research grants.
- **ASCIA immunodeficiency online resources, education and training** – ASCIA members have access to new and updated immunodeficiency information, resources and collaborations, including TAPID, the ASCIA Immunodeficiency Strategy and **information for patients, carers and the community**.
- **ASCIA anaphylaxis/allergy online resources, education, and training** - To support ASCIA members, new and updated ASCIA online information about anaphylaxis and allergy is regularly developed and updated. These include ASCIA Action Plans for Anaphylaxis, ASCIA anaphylaxis e-training courses and **information for patients, carers, and the community**.
- **Access to ASCIA member only resources** - These include ASCIA teaching slides and protocols for food or drug (medication) allergen challenges.
- **Sustainability** - ASCIA has been operating for more than 30 years, to provide services to ASCIA members and the community, whilst ensuring that ASCIA’s operations are financially viable and environmentally sustainable into the future.

## ACTIONS: Member Services

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- ASCIA will continue to prioritise providing ASCIA member services, including advocacy on behalf of ASCIA members, online communications, AIFA research grants and online resources.
- ASCIA will promote accessibility of ASCIA online resources for all ASCIA members, including member only resources.
- ASCIA will promote eligibility of all ASCIA members to join ASCIA committees and participate in the ASCIA Annual Conference.
- The ASCIA website will be reviewed and updated to improve accessibility and the user experience.

## STRATEGIC AREA 2: Professional Development

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**Goal:** Provide professional development opportunities including education and training in allergy and clinical immunology for ASCIA members, other health professionals, patients, carers, and community.

- [ASCIA Annual Conference](#) – This is the main event for allergy and immunology continuing professional development (CPD) in Australia and New Zealand, which also enables important interactions with colleagues. ASCIA members receive discounted registration fees.
- [ASCIA committees and working parties](#) - These play a vital role within ASCIA. Membership is restricted to ASCIA members and participation is on a voluntary basis. Chairs of ASCIA committees are represented on ASCIA Council.
- [ASCIA educational dinner meetings](#) – Only ASCIA members are eligible to attend ASCIA educational dinner meetings, which contribute to CPD and enable interactions with colleagues.
- [ASCIA online meetings](#) - ASCIA Associate members ([Advanced Trainees](#), [Nurses](#) and [Dietitians](#)) and [TAPID members](#) regularly meet by videoconference, which is facilitated by ASCIA and contributes to CPD.
- [ASCIA advanced training meetings](#) – Only ASCIA Associate (Trainee) members are eligible to attend ASCIA advanced training meetings, which are usually held each year.

Providing more opportunities for CPD is more important than ever, due to the Medical Board of Australia and the Medical Council of New Zealand strengthening recertification requirements for medical practitioners, who each require a CPD Home from January 2023:

- RACP Fellows can access Information about the RACP MyCPD program [here](#).
- RACGP Fellows can access information about the RACGP CPD program [here](#).
- Rural and remote medical practitioners can access information from ACCRM [here](#).

## ACTIONS: Professional Development

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- ASCIA will continue to prioritise providing professional development opportunities, including the ASCIA Annual Conference and regular online meetings.
- ASCIA will develop more autoimmunity resources and increase autoimmunity content in ASCIA Annual Conferences.
- ASCIA will promote ASCIA e-training and online resources to all health professionals, patients, carers, and the community to increase knowledge.
- ASCIA will continue to review ASCIA e-training and online resources.
- ASCIA will identify additional educational opportunities as part of implementing the National Allergy Strategy (in ASCIA's role as a partner in the National Allergy Council), and as part of implementing the ASCIA Immunodeficiency Strategy - refer to specific sections in this plan.

## STRATEGIC AREA 3: Collaborations

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**Goal:** Work together with patient/carer, professional and research groups to increase the profile of allergy and clinical immunology and improve health outcomes.

- **National Allergy Council** – This partnership between ASCIA and Allergy & Anaphylaxis Australia implements the National Allergy Strategy by advocating and developing resources that include Nip allergies in the Bub and Allergy 250K.
- **ASCIA Immunodeficiency Strategy** – This collaboration between ASCIA, patient support organisations and other stakeholders aims to improve the health and well-being of people with immunodeficiencies. Implementation of the Strategy commenced in 2022, with an initial focus on newborn screening for severe combined immunodeficiency (SCID).
- **Collaborations with research groups** – ASCIA collaborates with more than 30 other organisations, including research groups such as the Centre for Food & Allergy Research (CFAR) and the National Allergy Centre of Excellence (NACE).
- **Collaborations with other health professionals and organisations** – including the **TAPID** (Transplantation and Primary Immunodeficiency) collaboration.
- **Collaborations with patient/carer support groups** - Each year ASCIA invites up to ten patient/carer support groups to exhibit at the ASCIA Annual Conference.

## ACTIONS: Collaborations

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- ASCIA will continue to prioritise collaborations, including TAPID and research organisations.
- ASCIA will continue to implement the National Allergy Strategy (through the National Allergy Council) - refer to pages 7-8.
- ASCIA will implement the ASCIA Immunodeficiency Strategy - refer to pages 9-10.
- ASCIA will continue to collaborate with other health professionals and organisations – including the TAPID collaboration.
- ASCIA will prioritise collaborations with patient/carer organisations, by:
  - Listing these organisations at the top of new and updated ASCIA information.
  - Providing free ASCIA Annual Conference exhibition stands and exhibitor registrations for up to 10 not for profit (NFP) groups in 2024 and 2025, including patient/carer support organisations and research groups.



## ACTIONS: National Allergy Council Projects

### SCHOOLS AND CHILDCARE PROJECT

NAC Project/Activity	ASCIA Actions
<p><b>Education for parents/caregivers</b></p> <p>Provide education to parents/caregivers of children aged 0-18 with severe allergies on best practice allergy management when attending children's education (CEC) services and school</p>	<ul style="list-style-type: none"> <li>• Inclusion of Allergy Aware website link and resources in ASCIA anaphylaxis e-training for first aid (community)</li> <li>• Continue to promote ASCIA anaphylaxis e-training for first aid (community)</li> <li>• Continue to promote ASCIA website patient/carer resources</li> <li>• Promote credible patient/carer support organisations through ASCIA website resources, training and other mechanisms</li> </ul>
<p><b>Education undergraduate training</b></p> <p>Scope the benefits, enablers and barriers for incorporating allergy training for teachers, education assistants and early childhood educators</p>	<ul style="list-style-type: none"> <li>• Conduct a gap analysis to determine current allergy education being provided</li> <li>• Engage with relevant stakeholders to determine the benefits, enablers and barriers for incorporating allergy training</li> <li>• Develop minimum competencies set by the NAC and ASCIA</li> <li>• Provide a report with the findings of the above activities</li> </ul>
<p><b>Encourage uptake of ASCIA anaphylaxis e-training for schools and children's education/care</b></p> <p>Improve uptake of ASCIA online anaphylaxis management training for schools and CEC services as the key training requirement in the Best Practice Guidelines, including refresher e-training</p>	<ul style="list-style-type: none"> <li>• Stakeholder engagement to review current ASCIA courses including appropriateness for CALD, low literacy and low computer literacy, participants through meetings and focus groups</li> <li>• Update ASCIA anaphylaxis e-training for schools and CEC as required based on stakeholder engagement</li> <li>• Maintain ASCIA anaphylaxis e-training for schools and CEC services</li> <li>• Provide support for users of the ASCIA anaphylaxis e-training for schools and CEC</li> </ul>

### DRUG ALLERGY PROJECT

NAC Project/Activity	ASCIA/NAC Actions
<p><b>Drug allergy de-labelling guidelines</b></p> <p>Progress the development of drug allergy de-labelling guidelines</p>	<ul style="list-style-type: none"> <li>• Engagement with Australian Commission of Safety and Quality in Health Care (ACSQHC)</li> <li>• Review of the literature and existing drug allergy de-labelling guidelines (with support from NACE)</li> <li>• Stakeholder engagement via meetings</li> <li>• Review of draft guidelines</li> <li>• Communication to inform health professionals about guidelines once finalised</li> </ul>
<p><b>Drug allergy training</b></p> <p>Develop nationally standardised drug allergy training</p>	<ul style="list-style-type: none"> <li>• Review of existing resources</li> <li>• Stakeholder engagement</li> <li>• Piloting of draft training</li> <li>• Promotion of finalised training</li> <li>• Apply for CPD point allocation</li> </ul>

## SHARED CARE PROJECT – EDUCATION AND TRAINING

NAC Project/Activity	ASCIA Actions
<p><b>Health professional undergraduate education and training</b></p> <p>Scope the benefits, enablers and barriers for incorporating allergy training into undergraduate training for medical and allied health professionals</p>	<ul style="list-style-type: none"> <li>• Conduct a gap analysis to determine current allergy education being provided</li> <li>• Engage with relevant stakeholders to determine the benefits, enablers and barriers for incorporating allergy training into undergraduate training</li> <li>• Develop minimum competencies set by ASCIA, NAC and the HP peak body (e.g. RACGP, DA etc)</li> <li>• Provide a report with the findings of the above activities</li> </ul>
<p><b>Post graduate health professional education and training</b></p> <p>Provide evidence-based, best-practice education resources for managing and treating allergic diseases that can be used by health professionals</p>	<ul style="list-style-type: none"> <li>• Stakeholder consultations to identify education needs via meetings and surveys</li> <li>• Review of existing ASCIA education resources</li> <li>• Develop new training resources and programs including case-based programs</li> <li>• Establishing a mentorship program to support GPs and paediatricians supported by the multidisciplinary approach work.</li> <li>• Apply for CPD point allocation for training courses and programs</li> <li>• Promote credible patient/carer support organisations through ASCIA website resources, training and other mechanisms</li> <li>• Provide support to users of ASCIA e-training courses</li> </ul>

## SHARED CARE PROJECT – MBS ITEM NUMBERS ALLERGY CHALLENGES

NAC Project/Activity	ASCIA/NAC Actions
<p><b>MBS (Medicare Benefits Schedule) item numbers for food allergen challenges</b> (with support from NAC)</p> <p>An application will be submitted to MSAC (Medical Services Advisory Committee) for MBS item numbers for food allergen challenges</p>	<ul style="list-style-type: none"> <li>• Define current issues</li> <li>• Review existing ASCIA resources for food allergen challenges</li> <li>• Review data from recent surveys of ASCIA members</li> <li>• Develop clinical justification for a new MBS item number.</li> <li>• Assess economic and social benefits of new MBS item numbers</li> <li>• Submit an application to MSAC</li> </ul>
<p><b>MBS item numbers for drug allergy challenges</b> (with support from NAC)</p> <p>An application will be submitted to MSAC (Medical Services Advisory Committee) for MBS item numbers for drug allergy challenges</p>	<ul style="list-style-type: none"> <li>• Define current issues</li> <li>• Review existing ASCIA resources for drug allergy challenges</li> <li>• Review data from recent surveys of ASCIA members</li> <li>• Develop clinical justification for a new MBS item numbers</li> <li>• Assess economic and social benefits of new MBS item numbers</li> <li>• Submit an application to MSAC</li> </ul>

## ACTIONS: ASCIA Immunodeficiency Strategy

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The [ASCIA Immunodeficiency Strategy for Australia and New Zealand](#) meeting was held on Friday 28th April, to coincide with World Primary Immunodeficiency Week 2023. The meeting was attended by a range of stakeholders including clinicians (clinical immunologists, specialist nurses and allied health), patient/carer organisations (AusPIPs, IDFA and IDFNZ), and researchers. The meeting was supported by ASCIA and an unrestricted educational grant from CSL Behring. As a result of this meeting a list of proposed prioritised actions was developed which are outlined below,

### Why was the ASCIA Immunodeficiency Strategy initiated?

The ASCIA Immunodeficiency Strategy for Australia and New Zealand was established to address the needs of patients and their families affected by immunodeficiency in a targeted collaborative way. The development of the Strategy was built on the experience from the successful implementation of the National Allergy Strategy.

The first ASCIA Immunodeficiency Strategy meeting was held on Friday 8 March 2019 and was attended by a wide range of stakeholders including clinicians, patient/carer organisations and researchers. Despite the disruptions of the COVID pandemic over the last three years, there has been significant progress in some of these areas, but there are still substantial issues that need to be addressed.

The ASCIA Immunodeficiency Strategy for Australia and New Zealand document was developed from 2019-2021 and launched in April 2022. The Strategy includes eight goals to address key issues, as listed below.

### ASCIA Immunodeficiency Strategy Goals

**Goal 1:** Enable early diagnosis of severe combined immunodeficiency (SCID) by newborn screening

**Goal 2:** Enable early diagnosis of other PID/IEI disorders through recognition of early warning signs of PID/IEI disorders, appropriate testing and treatment.

**Goal 3:** Improve access to expert genetic diagnosis by using genomic and immune testing for patients with suspected or recently diagnosed PID/IEI disorders, or people with a family history of PID/IEI.

**Goal 4:** Ensure equitable access to specialist and multi-disciplinary care for patients with PID/IEI disorders, including those living in regional, rural and remote areas.

**Goal 5:** Ensure equitable access to treatments, that are appropriately supported and funded for patients with PID/IEI disorders.

**Goal 6:** Increase support for PID/IEI education and training for patients, carers, and health professionals.

**Goal 7:** Increase support for multi-disciplinary clinical and laboratory PID/IEI research and collaborations.

**Goal 8:** Ensure that the priorities of first nations people of Australia and New Zealand are represented in PID/IEI diagnosis, care and research.

For more information about the Strategy visit <https://nationalimmunodeficiencystrategy.org.au/>

## ASCIA Immunodeficiency Strategy Actions

Project/Activity	ASCIA Actions
<p>1) <b>Standards of care</b> for Inborn Errors of Immunity (IEI), also known as primary immunodeficiencies (PID). (Goals 2, 3, 4, 5, 8)</p>	<ul style="list-style-type: none"> <li>• Develop an ASCIA Standards of Care for IEI/PID to assist in benchmarking and advocating for optimal services and treatment. which includes care by GPs and other health professionals.</li> </ul>
<p>2) <b>Specific working groups</b>, including genetic testing and severe combined immunodeficiency (SCID) newborn screening (NBS) clinical implementation. (Goals 1, 2, 3, 8)</p>	<ul style="list-style-type: none"> <li>• Develop resources for SCID NBS and genetic testing that can be used in AU and NZ, which take into account regional differences.</li> <li>• Address issues for better access and funding of genetic testing and implementation of clinical aspects for SCID NBS.</li> </ul>
<p>3) <b>Education program for transition</b> from paediatric to adult care and advocacy for resourcing of improved transition services based on the Standards of Care (Goal 4, 6)</p>	<ul style="list-style-type: none"> <li>• Improve many aspects of transitioning from paediatric to adult services for complex patients with IEI and their families.</li> <li>• Develop programs addressing education and support for patients, families and service providers and advocacy for funding of appropriate supportive multidisciplinary resources utilising the ASCIA Standards of Care.</li> </ul>
<p>4) <b>Advocacy</b>, including discussions regarding Chronic Disease Strategy, patient/carer support organisations, health economics, barriers to access and Indigenous Australian/Maori involving clinicians and patients. (Goals 4, 5, 8)</p>	<ul style="list-style-type: none"> <li>• Advocate using the ASCIA Standards of Care document, collaborations with patient/carer support organisations and the Chronic Disease Strategy.</li> <li>• Continue to develop and lodge submissions and work with other organisation to advocate for patients with IEI/PID, and their families</li> </ul>
<p>5) <b>Research initiatives</b>, to improve management of IEI/PID by increasing research and data collection, including an audit of access to testing/care and rejuvenation of ASCIA Immunodeficiency (ID) Register. (Goal 7)</p>	<ul style="list-style-type: none"> <li>• Develop a new Immune Deficiency Registry for Australia and New Zealand (IDRANZ) to optimise the entry of data, with recognition of the need for project officer support and the need to change from the existing waiver of consent to a formal consent process.</li> <li>• Audit access to testing and access to care, to better understand the inequities identified and the differences between access in public versus private healthcare systems.</li> </ul>

## SUMMARY OF ACTIONS

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### 1. Member Services

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- ASCIA will continue to prioritise providing ASCIA member services, including advocacy on behalf of ASCIA members, online communications, AIFA research grants and online resources.
- ASCIA will promote accessibility of ASCIA online resources for all ASCIA members, including member only resources.
- ASCIA will promote eligibility of all ASCIA members to join ASCIA committees and participate in the ASCIA Annual Conference.
- The ASCIA website will be reviewed and updated to improve accessibility and the user experience.

### 2. Professional Development

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- ASCIA will continue to prioritise providing professional development opportunities, including the ASCIA Annual Conference and regular online meetings.
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- ASCIA will continue to review ASCIA e-training and online resources.
- ASCIA will identify additional educational opportunities as part of implementing the National Allergy Strategy (in ASCIA's role as a partner in the National Allergy Council), and as part of implementing the ASCIA Immunodeficiency Strategy - refer to specific sections in this plan.

### 3. Collaborations

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- ASCIA will continue to prioritise collaborations, including TAPID and research organisations.
- ASCIA will continue to implement the National Allergy Strategy (through the National Allergy Council) - refer to pages 7-8.
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  - Providing free ASCIA Annual Conference exhibition stands and exhibitor registrations for up to 10 not for profit (NFP) groups in 2024 and 2025, including patient/carer support organisations and research groups.