



Aboriginal and Torres Strait Islander health practice	Occupational therapy
Chinese medicine	Optometry
Chiropractic	Osteopathy
Dental	Paramedicine
Medical	Pharmacy
Medical radiation practice	Physiotherapy
Nursing and Midwifery	Podiatry
	Psychology

Australian Health Practitioner Regulation Agency

Q13.

Guidelines for advertising regulated health services: public consultation

National Boards and the Australian Health Practitioner Regulation Agency (AHPRA) are seeking feedback about the revised *Guidelines for advertising regulated health services*.

Please ensure you have read the [public consultation papers](#) before providing feedback as the questions are specific to the revised guidelines.

Q23.

Privacy

Your response will be anonymous unless you choose to provide your name and/or the name of your organisation.

Privacy notice

This consultation is being conducted by AHPRA and is hosted on a third-party website, provided by Qualtrics. The information collected will be used by AHPRA to evaluate the revised guidelines. The information will be handled in accordance with the privacy policies of AHPRA accessible [here](#) and Qualtrics [here](#).

Q25.

Publication of responses

National Boards and AHPRA publish responses at their discretion. We generally publish responses on our websites to encourage discussion and inform the community and stakeholders.

We will not publish responses that contain offensive or defamatory comments or which are outside the scope of the consultation. Before publication, we may remove personally-identifying information, including contact details.

We can accept responses made in confidence. These responses will not be published. Responses may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential response will be determined in accordance with the Freedom of Information Act 1982 (Cth), which has provisions to protect personal information and information given in confidence.

You must let us know if you do **not** want us to publish your responses.

Published responses will include the name (if provided) of the individual and/or the organisation that made the response.

Q25.

Contact details

We may contact you about your response.

Please write your name and contact details.

(Skip if you wish to be anonymous)

Q24. Publication of responses

Please select the box below if you do **not** want your response to be published.

Please do **not** publish my response

Q15. About your response

Q23. Are you responding on behalf of an organisation?

- Yes
 No

Q24. Which of the following best describes your organisation?

- Health services provider
 Professional indemnity insurer
 Legal services provider
 Professional body (e.g. College or association)

Education provider

Regulator

Government

Other

Q22. Please write the name of your organisation

Q17.

Which of the following best describes you?

This question was not displayed to the respondent.

Q19.

Which of the following health profession/s are you registered in, in Australia?

You may select more than one answer

This question was not displayed to the respondent.

Q8.
Before you answer questions about the guidelines

Please ensure you have read the [public consultation papers](#) before providing feedback as the questions are specific to the revised guidelines for advertising regulated health services.

The following questions will help us to gather feedback about the revised guidelines.

Q9.

How clear are the revised guidelines?

somewhat clear. It takes quite a considerable amount of reading to reach the important points. A summary would be useful. We are busy professionals!

Q10.

How relevant is the content of the revised guidelines?

relatively, depending on the topic. Most of it we were not really practicing in our advertising anyway

Q12.

Please describe any content that needs to be changed or deleted in the revised guidelines.

no use of specialist titles: please REMOVE this. Some of us have YEARS of experience and expertise of over 20 years in autism testing and therapy for example and should be allowed to state "autism specialist" is this is in fact our focus area. It is only detrimental to patients who are trying to save time by searching for and contacting an allied health professional who specialises in a specific area. Specialising is NOT the same as advising we have an endorsement. That is completely different language and wording. And it's not even the same term for the focus area. We understand not saying we are a clinical psychologist for example as that is an endorsement. But not being allowed to say a specialist in autism for example is too extreme and unreasonable. And quite unfair to patients and professionals who are experts with the skills and experience. It only frustrates patients when a professional cannot tell them we specialise in an area - because - we do!

Q27.

Should some of the content be moved out of the revised guidelines to be published in the advertising resources section of the AHPRA website instead?

- Yes
- No

Q29.

If yes, please describe what should be moved and your reasons why.

Q22.

How helpful is the structure of the revised guidelines?

a summary with bullet points would be more helpful with more concise information. Big paragraphs of text are more difficult to read and can mean important points are missed.

Q32. Are the flow charts and diagrams helpful?

- Yes
- No

Q34.

Please explain your answer.

Q16.

Is there anything that needs to be added to the revised guidelines?

No, just please REMOVE the not allowed use of "specialist" or 'specialised" titles: please REMOVE this. Some of us have YEARS of experience and expertise of over 20 years in autism testing and therapy for example and should be allowed to state "autism specialist" is this is in fact our focus area. It is only detrimental to patients who are trying to save time by searching for and contacting an allied health professional who specialises in a specific area. Specialising is NOT the same as advising we have an endorsement. That is completely different language and wording. And it's not even the same term for the focus area. We understand not saying we are a clinical psychologist for example as that is an endorsement. But not being allowed to say a specialist in autism for example is too extreme and unreasonable. And quite unfair to patients and professionals who are experts with the skills and experience. It only frustrates patients when a professional cannot tell them we specialise in an area - because - we do!

Q38. It is proposed that the guidelines will be reviewed every five years, or earlier if required.

Is this reasonable?

- Yes
- No

Q40.

Please explain your answer.

earlier than 5 years as social media and digital advertising changes all the time

Q24.

Please describe anything else the National Boards should consider in the review of the guidelines.

Please recognise that skills and experience count! Use of the term "specialist" or 'specialised": should be allowed to be used in advertising. Some of us have YEARS of experience and expertise of over 20 years in autism testing and therapy for example and should be allowed to state "autism specialist" is this is in fact our focus area. It is only detrimental to patients who are trying to save time by searching for and contacting an allied health professional who specialises in a specific area. Specialising is NOT the same as advising we have an endorsement. That is completely different language and wording. And it's not even the same term for the focus area. We understand not saying we are a clinical psychologist for example as that is an endorsement. But not being allowed to say a specialist in autism for example is too extreme and unreasonable. And quite unfair to patients and professionals who are experts with the skills and experience. It only frustrates patients when a professional cannot tell them we specialise in an area - because - we do!

Q36.

Please add any other comments or suggestions for the revised guidelines.

Q27.

Thank you!

Thank you for participating in the consultation.

Your answers will be used by the National Boards and AHPRA to improve the *Guidelines for advertising regulated health services*.