



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery  
Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

Australian Health Practitioner Regulation Agency

## Response template: Public consultation - revised *Guidelines for advertising regulated health services*

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

This response template is an alternative to providing your response through the online platform available on the consultation [website](#).

### IMPORTANT INFORMATION

#### Privacy

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

The information collected will be used by AHPRA to evaluate the revised guidelines. The information will be handled in accordance with AHPRA's privacy policy available [here](#).

#### Publication of responses

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

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

Please see the [public consultation papers](#) for more information about publication of responses.

#### Submitting your response

Please send your response to: [AHPRA.consultation@ahpra.gov.au](mailto:AHPRA.consultation@ahpra.gov.au)

Please use the subject line: Feedback on guidelines for advertising regulated health services

Responses are due by: **26 November 2019**

### General information about your response

Are you responding on behalf of an organisation?	
<b>Yes</b>	What is the name of your organisation? Australian Society of Plastic Surgeons
<b>No</b>	Are you a registered health practitioner? Yes/No If yes, which profession(s)?  Are you a student? Yes/No If yes, which profession?
We may need to contact you about your response. Please write your name and contact details below. <b>(Skip if you wish to remain anonymous)</b>	
Name (optional)	██████████
Contact details (optional)	████████████████████

## Public consultation questions

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.

Use the corresponding text boxes to provide your responses. You do not need to answer every question if you have no comment.

<b>1. How clear are the revised guidelines?</b>
The revised guidelines are a vast improvement on the version published in May 2014.
<b>2. How relevant is the content of the revised guidelines?</b>
<p>The content of the revised guidelines is very relevant.</p> <p>The definitions have been moved from the appendix and it is now clear that advertising also refers to 'electronic public communication that seeks to attract a person to a health service provider'.</p> <p>The revised guidelines also clearly articulate who is an advertiser, i.e. that this includes businesses that advertise regulated health services and why patient testimonials are not appropriate in advertising.</p>
<b>3. Please describe any content that needs to be changed or deleted in the revised guidelines.</b>
<p>Refer to tracked changes version of the guidelines included in this submission.</p> <p>The last dot point under 4.4.1 <i>Images and photographs</i> and the use of 'before and after' images could be deleted. The guidelines refer to such images being less likely to be misleading if the images are used within an individual consultation. The definitions on p.16 state that advertising excludes material issued to patients when they have the opportunity to discuss and ask questions about the material. Therefore in this circumstance, the images would not strictly be advertising.</p>
<b>4. 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?</b>
<b>If yes, please describe what should be moved and your reasons why.</b>

No. The information contained within the guidelines document is appropriate.

**5. How helpful is the structure of the revised guidelines?**

The structure is much more helpful.

Content is ordered as per the legislation and the explanation included is a significant improvement.

**6. Are the flow charts and diagrams helpful?**

**Please explain your answer.**

Not particularly.

Flow charts are most helpful when there are a variety of possible responses and each response results in a different pathway. The flow diagrams state the obvious. However, they do not lengthen the document significantly and may serve to emphasise important points.

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

In relation to the use of images and photographs, the guidelines still focus on 'before and after' images. The use of single images that create unreasonable expectations of beneficial treatment could be addressed better.

Advertising which glamorises treatment or procedures may encourage the indiscriminate or unnecessary use of regulated health services, especially for younger members of the population who regularly engage with social media. This is noted under the subheading of 'Advertising' within the *Guidelines for registered medical practitioners who perform cosmetic medical and surgical procedures* and could be included in these guidelines. It is equally relevant for other medical specialities and health professions.

Referring to the advertising financing schemes such as loans or commercial payment plans would be a worthy inclusion. Providing finance (other than credit card facilities) may encourage the indiscriminate or unnecessary use of regulated health services.

Including a warning statement for surgical or invasive procedures could still be relevant. Could 'high risk procedures' be defined, so the statement can be used when most appropriate?

While the revised guidelines refer to 'acceptable evidence' to substantiate claims made in advertising (such information does not have to be within the actual advertisement), the section on using scientific information in advertisements from the previous version is a different concept and probably still warrants inclusion. It referred to ensuring such information was presented in an

accurate, balance manner and uses terminology that is understood readily by the target audience. This is still pertinent.

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

**Is this reasonable?**

**Please explain your answer.**

It is suggested that guidelines should be reviewed every 3 years.

Electronic advertising is progressing quickly and often in ways that are not predicted. It has been five years since the last review and the guidelines have been inadequate for some years due to the increased use of social media.

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

The National Boards must consider a thorough evaluation of enforcement strategy for the National Scheme. It is noted that in April 2017 this document referred to ongoing evaluation and an evolving approach, and a flexible strategy to respond to new or different types of risks. This document has been published again in June 2019 with no amendment (and is now inaccurate). It is disappointing that there has been no change and no consultation. The enforcement strategy is the key to compliance with the advertising guidelines. The current risk-based approach and fines promulgate a short-term view of potential public harm and provide very little disincentive for businesses (who are not registered health practitioners) to continue with unlawful advertising.

It is pleasing to note that review of the social media policy will proceed separately.

The Medical Board of Australia could publish specific examples and create a page '*Check your Advertising: Cosmetic medical and surgical procedures*', similar to the pages prepared for Chinese medicine, chiropractic and osteopathy.

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

**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.