



Advertising and marketing claims – registration and regulation forum

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Overview

Advertising:

- National Law
- Roles and responsibilities
- Revised Advertising guidelines
- New Social media policy -

Complaints:

- Types of complaints
- Risk assessment approach
- Self assessment approach

Advertising

The image features a solid teal background. In the lower portion, there are stylized, overlapping wavy shapes in white and light grey, creating a sense of depth and movement. The word "Advertising" is centered in a bold, black, sans-serif font.

Framework of National Law

- Based on title protection rather than practice restrictions or defined scopes of practice
- Very limited restricted practices in National Law –
s. 123 manipulation of the cervical spine

Advertising requirements s. 133

- (1) A person must not advertise a regulated health service, or a business that provides a regulated health service, in a way that—
- (a) is false, misleading or deceptive or is likely to be misleading or deceptive; or
 - (b) offers a gift, discount or other inducement to attract a person to use the service or the business, unless the advertisement also states the terms and conditions of the offer; or
 - (c) uses testimonials or purported testimonials about the service or business; or
 - (d) creates an unreasonable expectation of beneficial treatment; or
 - (e) directly or indirectly encourages the indiscriminate or unnecessary use of regulated health services.

Regulated Health Professions – use common advertising guidelines and *new social media policy*

July 2010

1. Chiropractors
2. Dental care
3. Medical practitioners
4. Nurses and midwives
5. Optometrists
6. Osteopaths
7. Pharmacists
8. Physiotherapists
9. Podiatrists
10. Psychologists

July 2012

1. Aboriginal and Torres Strait Islander health practitioners
2. Chinese medicine practitioners
3. Medical radiation practitioners
4. Occupational therapists

Guidelines for Advertising

Guidelines explain the s. 133 requirements in more detail

For example, advertising may be misleading if it

- creates unwarranted /unrealistic expectations about the effectiveness of services
- misleads, either directly, or by implication, use of emphasis, comparison, contrast or omission
- compares different regulated health professions where there is no evidence for comparison and/or in a way that may mislead or deceive
- claims that a profession's services are better, as safe as or safer than other professions

Guidelines for Advertising (cont)

Unreasonable expectations of beneficial treatment eg

- Exaggerating or providing incomplete or biased information
- Failing to disclose risks
- Containing unreasonable material that is likely to make a person believe their health or wellbeing may suffer
- Making unreasonable claims about treatment effectiveness

Social Media Policy

- New policy developed in response to increasing use of social media
- Policy explains how existing regulation applies to practitioners' use of social media and the internet
- Policy to be published in early 2014

Working together - advertising

National Boards

- Regulatory decision-making in the public interest
- Set registration requirements and standards, guidelines
- Oversees registration, and investigation of notifications
- Approve accreditation standards

AHPRA

- Supports the National Boards, including legal advice and action
- All advertising complaints are made to AHPRA as statutory offences
- AHPRA liaises with Boards and Committees
- Policy/communications advice about issues

** except in NSW which has a co-regulatory arrangement in relation to management of notifications*

Benefit of working together

- Stakeholders and public confidence in regulation
- National approach and consistency
- Cross profession consultation and collaboration
- Consistent and accurate message to public
- Consistent response to campaigns
- Economies of scale and efficiencies
- Osteopathy Board draws on resources of AHPRA in dealing with advertising issues – legal; policy; risk management; communications; collaboration with other Boards

Complaints

The bottom of the slide features a decorative graphic consisting of several overlapping, wavy, horizontal bands. The bands are in shades of light blue, medium blue, and grey, creating a layered, wave-like effect that spans the width of the slide.

Advertising risks

Two broad categories of advertising risks:

- Risk to the public from advertising that breaches the National Law
- Risk to public confidence in the regulatory scheme

Risk assessment approach

- Risk assessment approach involves a tailored regulatory response to identified risks
- Range of possible responses in addition to standard compliance action

Tools to assist compliance

- Boards publish explanatory material such as FAQs
- Questions for practitioners to self-assess their advertising eg
 - Are any claims I make factual and verifiable?
 - Is there any content in my advertising that could be misleading?
 - Am I well qualified in the areas of practice that I offer and promote?
 - Do I only claim treatment capacity for techniques that I am trained and competent to perform?
 - Do I only make claims for effective treatment where this can be verified by good quality evidence?
 - Do I exercise caution when providing scientific information because members of the public may have a limited understanding of that information? If I provide this information, is it clear and easy to understand?

More information



- Website – www.osteopathyboard.gov.au
- Questions and correspondence
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