

ALL SAINT CLINIC

AU Marketing Compliance

Review draft · Version 1.2 · 25 September 2026

01 / Purpose & scope

Purpose

Help the team publish clear, responsible marketing while protecting patient choice and clinical integrity. This edition restructures the Medical Director's "Marketing Risk Management DRAFT" and updates its regulatory distinctions. It is an internal working framework, not regulatory approval or a substitute for advice on a specific campaign.

Document control

AU Medical Director / final clinical approver: Dr Stephen Crimston, NSC BSCN MBBS FRACGP FCPCA. AHPRA Registration: MED0001665130. Final internal approval for high-risk, novel or complex cases: Practice Principal. Approval and effective date: pending. Source draft: 10 July 2025; revised 25 September 2026. This revision does not imply policy sign-off. [\[A8 A9\]](#)

Where it applies

Websites and booking pages; organic and paid social; search advertising; email and SMS campaigns; print; events; PR; and commissioned creator content. Apply the same review to captions, images, hashtags, links and landing pages. Review training materials before adapting them for public use; genuinely internal training is not automatically public advertising.

Who regulates what

Ahpra and the National Boards set requirements for advertising regulated health services. Additional guidelines apply to advertising higher risk non-surgical cosmetic procedures. TGA requirements apply when a service advertisement also promotes therapeutic goods. Australian Consumer Law applies to misleading claims. State and territory medicines requirements may also be relevant; refer medicine-specific questions to the Medical Director. [\[A1 A3 A5 A6\]](#)

Regulatory rules and clinic policy

The following pages separate regulatory requirements from the clinic's proposed internal controls. A conservative internal rule may go further than the legal minimum. Internal approval cannot authorise prohibited advertising. If applicability is uncertain, hold the content for qualified regulatory or legal advice.

The guiding decision

Promote the consultation, people, place and approach with accurate information. Do not use euphemisms, images or indirect suggestions to promote a medicine that cannot be advertised to the public. [\[A1\]](#)

02 / Content boundaries

Prescription medicines

Public advertising must not directly or indirectly promote prescription-only medicines. Review product names, nicknames, treatment descriptions, hashtags, booking labels and implied outcomes. An ingredient name is not a universal prohibited word: the product, scheduling and promotional context matter. Do not assume every injectable is classified identically. [\[A1 A2\]](#)

Clinical testimonials and tags

Do not use testimonials about clinical aspects of a regulated health service. For higher risk cosmetic procedures, accounts of the experience, reason, outcome or practitioner skill may be clinical testimonials. Service-only comments are not automatically clinical testimonials. Assess tags and reposts that become part of clinic advertising; the clinic's creator arrangements require review. [\[A3 A4\]](#)

Images and results

Do not publish imagery that promotes a prohibited prescription medicine, including implied results. For other higher risk cosmetic procedures, Ahpra conditions include genuine patients, comparable photography, no result-enhancing editing, appropriate before/after prominence and timing information. Do not use images of under-18s for those procedures. Consent does not make a prohibited advertisement permissible. [\[A1 A5\]](#)

Claims, titles and credentials

Support claims with appropriate evidence and accurately describe benefits and limits. Do not invent superiority, guaranteed results or specialist status. When higher risk procedure advertising identifies an individual performer, include their registration details, including registration number, as required by the specific guideline. This is not a universal rule that every brand post must carry a registration number. [\[A5 A6\]](#)

Pricing and offers

A price is not automatically unlawful. General Ahpra rules require conditions for gifts or discounts and prohibit encouragement of unnecessary or indiscriminate use. Higher risk procedure requirements and medicine restrictions also apply. Proposed clinic policy: no urgency-led medical offers or treatment incentives without Medical Director and Practice Principal review. Therapist-led services are not automatically exempt. [\[A7\]](#)

Education and vocabulary

Educational intent or a disclaimer does not exempt promotional content. Consider the full message and linked service. Words such as "rejuvenation" or "plumping" require context; assess the actual claim and any medicine implication rather than rely on a blanket word blacklist. [\[A2\]](#)

03 / Risk at a glance

All Saint Clinic / SYDNEY

Use the highest applicable risk level for the complete asset, including its imagery, caption, links and landing page. These are internal review categories, not a likelihood score or regulatory approval. Colour is supported by a written rating and action.

Risk rating, action and reviewer

Risk	Content / trigger	Required action	Reviewer / escalation
High / Stop	Prohibited medicine promotion; prohibited clinical testimonials; misleading treatment imagery or unsupported guarantees.	Do not publish. If live, preserve an appropriate record and remove or pause. Resolve the issue before reconsidering publication.	Dr Crimston / final clinical approval + Practice Principal
Medium / Review	Ambiguous benefits; education linked to a service; new treatment pages; creator collaborations or proposed offers.	Hold the complete asset and landing page for review. Check evidence, context and permissions. A disclaimer alone does not resolve an issue.	Dr Crimston / final clinical approval; Practice Principal for novel or complex cases
Low / Routine	Verified clinic hours, architectural imagery and factual team introductions without clinical claims.	Check facts, permissions and context. Save the reviewed version and decision before publishing.	Saint Studio

Practical examples / All Saint Clinic

Scenario	Risk	Next step
A public All Saint Clinic post promoting a prescription medicine	High / Stop	Withhold or remove; escalate to the Medical Director and Practice Principal.
A treatment-related creator tag proposed for an All Saint Clinic repost	Medium / Review	Hold for review. A prohibited clinical testimonial must not be reposted.
A Mosman architectural photograph with a factual location caption	Low / Routine	Verify the location, image rights and caption; complete the standard check and record it.

Review before release

Low risk still requires the standard check. Review is not permission to publish, and internal sign-off cannot authorise prohibited advertising. Reassess the rating when the copy, image, audience or context changes.

04 / Assess, approve & record

Responsibilities

Saint Studio drafts, classifies and maintains the register. Under the clinic's internal approval system, Dr Stephen Crimston, Medical Director, gives final clinical approval for Medium and High-risk clinic-controlled marketing requiring clinical/regulatory oversight. Specialist review may inform, but does not replace, that approval. High-risk issues must first be resolved; approval cannot authorise prohibited advertising. The Practice Principal retains final internal sign-off for high-risk, novel or complex cases. Routine Low-risk brand activity remains with Saint Studio. The Social Media Coordinator monitors published content, tags and comments and flags concerns. Genuinely independent journalism outside clinic control does not require pre-publication Medical Director approval. Assess clinic-controlled paid content and our own excerpts, captions or reuse through the risk framework.

Workflow

1. Draft the complete asset and identify channel, audience and service.
2. Classify risk and log the rationale.
3. Obtain required review and resolve every material issue. For Medium/High-risk clinic-controlled content requiring clinical/regulatory oversight, obtain Dr Crimston's final clinical approval; obtain Practice Principal sign-off where required.
4. Save the exact final version, decision, named clinical/internal approvers and approval dates.
5. Publish that version only; substantive changes return for review.
6. Monitor, correct and document any subsequent concern.

Decision tree

Medicine promotion or a prohibited clinical testimonial? Stop.

Potentially misleading image, claim or offer? Hold for review.

Uncertain status or a new use? Escalate.

Otherwise, complete the standard check and record the decision. A reviewer cannot waive a regulatory prohibition.

05 / Everyday checks & oversight

Before publication

Confirm the correct entity and audience; verified services and credentials; evidence for claims; lawful imagery and recorded permissions; accurate prices and relevant conditions; no prohibited medicine promotion or clinical testimonials; the correct reviewer; and a saved final version. Check the landing page as well as the post.

Advertising Compliance Register

Record asset ID, market, channel, intended publication date, copy and screenshot/file, relevant service or product, evidence and permission references, risk rating and reason, reviewer name and role, decision, date, published URL and corrections. Restrict access to patient information; keep only what the review record needs.

Can we use a before-and-after image without naming a product?

Not if it directly or indirectly advertises a prohibited prescription medicine. Other procedure imagery needs separate review against the applicable Ahpra rules. Proposed clinic policy: all outcome imagery requires Medical Director review.

Can we repost a review or a creator's tag?

Do not republish prohibited clinical testimonials. Neutral service comments still need context review. Proposed clinic policy: pre-review creator collaborations and treat treatment-related tags as an escalation trigger, rather than automatic permission to repost.

Can we show equipment or make an offer?

Assess the whole message. A vial, syringe, label or caption may imply a prohibited medicine; an offer may encourage inappropriate treatment. Proposed clinic policy: route procedure-equipment imagery and medical promotions for review. Do not treat a neutral fee statement as automatically prohibited.

Training, incidents and review

Retain the source draft's internal target to update training within 14 days of a major regulatory change; act on an immediate risk without waiting for that period. Review this framework annually in July and sooner after a material update or incident. The overdue July 2026 review should be resolved when this revision is adopted. Saint Studio Lead and Medical Director arrange periodic audits, including older posts. Notification decisions require case-specific advice; not every correction is automatically reportable.

06 / Revision notes & references

Changes from the Medical Director's draft

Preserved the three-level risk approach, accountable owners, escalation route, register and training framework. Clarified that prices, comparative claims, ingredients and individual words are not universally banned; meaning and context matter. Distinguished clinical testimonials from service-only comments. Replaced blanket imagery wording with the separate TGA and Ahpra tests. Scoped registration-detail requirements to the relevant advertising. Removed automatic low-risk treatment of "education" and the suggestion that a disclaimer cures a problem. Removed the blanket exemption for therapist services. September 2026 update: named Dr Stephen Crimston as Medical Director and clarified final clinical approval for relevant Medium/High-risk clinic-controlled content.

Status of internal rules

The stricter review triggers are carried forward as proposed clinic controls. They are not presented as statements that every such asset breaches the law. The Medical Director and Practice Principal should confirm the revised policy before adoption.

Official references

Checked on 22 September 2026. Use the live guidance for the actual campaign. The higher risk advertising guidelines took effect on 2 September 2025. The sources below support the regulatory distinctions; the workflow, examples and review targets are internal governance proposals.

A1 / TGA — Advertising health services that involve therapeutic goods

www.tga.gov.au

A2 / TGA — Cosmetic injection advertising FAQs

www.tga.gov.au

A3 / Ahpra — Advertising a regulated health service

www.ahpra.gov.au

A4 / Ahpra — Higher risk non-surgical cosmetic procedure resources

www.ahpra.gov.au

A5 / Ahpra — Higher risk cosmetic procedure advertising guidelines

www.ahpra.gov.au

A6 / ACCC — False or misleading claims

www.accc.gov.au

A7 / Ahpra — Summary of advertising requirements

www.ahpra.gov.au

A8 / Ahpra — Registers of practitioners / search MED0001665130

www.ahpra.gov.au

A9 / All Saint Clinic — Dr Stephen Crimston / Medical Director

allsaintclinic.com