



Australian Government

Department of Health, Disability and Ageing



Medicare Urgent Care Clinics

Minimum signage and branding requirements

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Introduction

About Medicare Urgent Care Clinics

The Medicare Urgent Care Clinic (UCC) program aims to provide timely, bulk-billed urgent care services for non-life-threatening injuries and illnesses to communities across Australia.

Purpose and scope of this document

This document outlines the minimum signage and branding requirements for Medicare UCCs, ensuring:

- National consistency in branding and visibility
- Compliance with Commonwealth branding expectations and patient safety protocols
- Safe navigation and clear communication within co-located or complex clinic settings

In addition, the minimum signage requirements will support:

- Accessibility for all users, including people with disabilities (both physical and intellectual) and Culturally and Linguistically Diverse (CALD) groups and non-English speaking backgrounds
- Services are welcoming and inclusive for people identifying as Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual (LGBTIQA+) patients

This document should be read in conjunction with guidance issued by the Department from time to time, including the [Medicare UCC Style Guide](#), [Medicare UCC Stakeholder Kit](#) and [Medicare UCC Communication Resource Handbook](#).

Roles and responsibilities

The table below outlines the responsibilities of each entity in implementing the signage, naming, and branding standards outlined in this document.

Entity	Responsibilities
Medicare UCC Provider	Install and maintain all required signage in line with the minimum requirements outlined in the guidelines.
Commissioners: Primary Health Network (PHN) or State Government	Directly support providers in implementing specified signage and branding requirements. Monitor ongoing compliance with minimum requirements as part of contractual management.
Australian Government Department of Health, Disability and Ageing – Urgent Care Branch	Describe minimum signage requirements for Commissioners participating in the Medicare UCC program. Provide ongoing clarification and support on minimum requirements for on-site signage and branding.
Services Australia	Services Australia is the owner of the Medicare logo. The Medicare logo must not be used in isolation outside of the Medicare UCC logo without prior permission from Services Australia.

Consequences of Non-Compliance

Failure to comply with these requirements may result in formal requests to correct or remove non-compliant signage. Persistent non-compliance may be reflected in performance reporting and may affect future funding allocations. The Department may also seek to recover funds or impose conditions on further funding.

Signage Principles

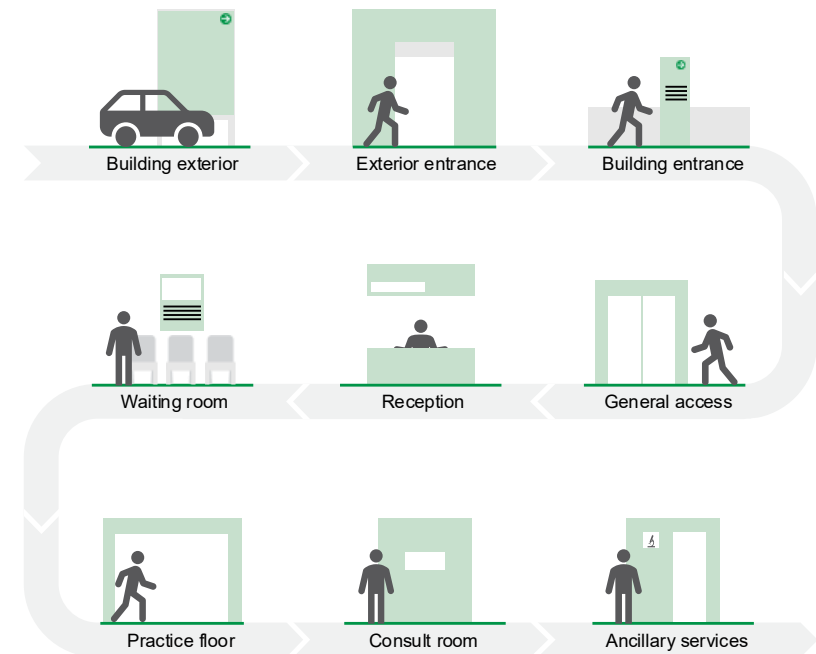
Medicare UCCs operate in diverse physical settings, including standalone centres, GP co-locations, or multi-service health hubs. Having clear, consistent, and visible signage across all Medicare UCCs supports patient navigation, safety and brand recognition.

Signage plays a critical role in brand visibility, wayfinding, and establishing trust. Effective signage is essential for streamlining patient flow, reducing anxiety, and ensuring timely medical attention.

The following core principles apply to all minimum requirements for on-site signage and web presence explained in this document and include:

- **Visible and Prominent** – Medicare UCC signage must be clearly visible and prominently displayed, ensuring it can be seen from multiple angles and a reasonable distance. It should be positioned and printed with materials that minimise glare, reflection or visual distortion.
- **Consistent design with Medicare UCC Branding** – Medicare UCCs must be adequately branded as Medicare UCCs. Use approved Medicare UCC logo and colour palette.
- **Supports Service Clarity and Continuity** – Medicare UCC signage must support ongoing service delivery, including during operational interruptions. It should be adaptable to unplanned or unexpected changes such as space reconfiguration and temporary or permanent renovations, patient flow during high-demand periods (e.g. flu season) or temporary changes in workforce composition (i.e. workforce model trials).
- **Supports Accessibility and Cultural Inclusion** – Medicare UCC signage must accommodate the needs of individuals with physical and intellectual disability, as well as those with limited English proficiency. Local adaptations such as Acknowledgement of Country and translated materials should be incorporated to ensure signage is inclusive, accessible and respectful of community diversity. Plain English or plain language should be used in signage and messaging wherever possible.

Signage opportunities



Minimum Requirements

Section 1: Naming Conventions and Logo

Medicare UCCs must be named based on the geographic areas they serve to ensure clinic names are clear, consistent and easily recognisable to the public.

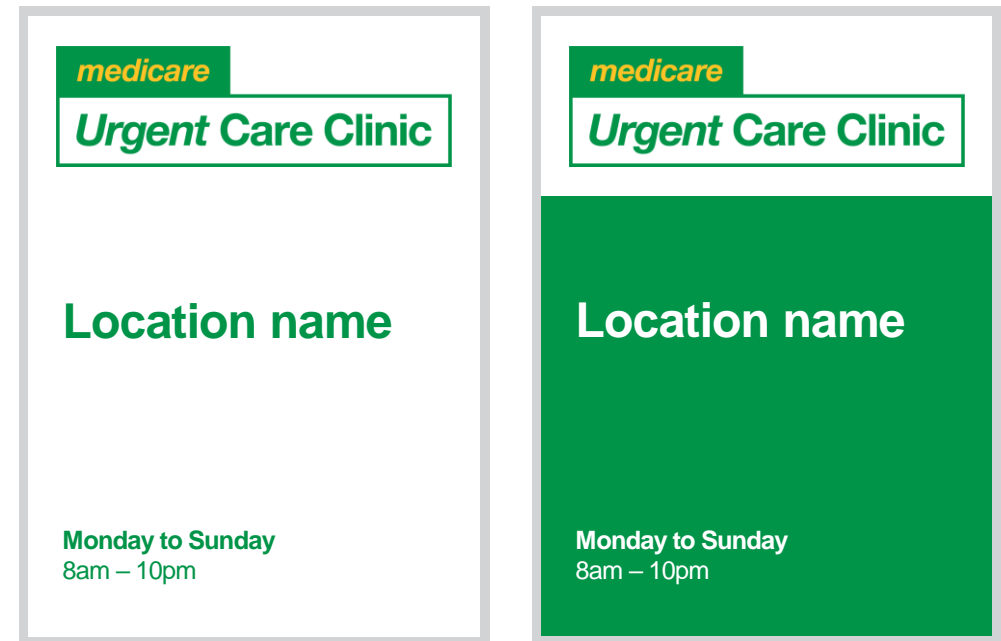
Official Naming Format

- All clinics must use the standard naming convention: Medicare Urgent Care Clinic – [Location Name]
- The location must refer to the suburb, town or region in which the clinic is situated (not the clinic operator or PHN). The location name must be the official UCC name as determined by the Department.
- The phrase “Medicare Urgent Care Clinic” must be the first and most prominent part of the clinic name in signage.
- No substitutions, re-wording, or abbreviations (e.g. UCC Location Name; Medicare Emergency Care).

Logo

- The use of the Medicare UCC Logo must comply with the requirements as stipulated in the [Medicare UCC Style Guide](#). The Style Guide stipulates how the logo can be used and the instances in which it can be applied.
- The Medicare logo must not be used in isolation outside of the Medicare UCC logo without prior permission from Services Australia.

Sample signage



Minimum Requirements

Section 2: Web presence

Information about the Medicare UCC Program and locations are available on the Department's [website](#).

Individual Medicare UCCs may also establish a dedicated website to provide community members with a place to find up-to-date information about urgent care, when to visit and what to expect.

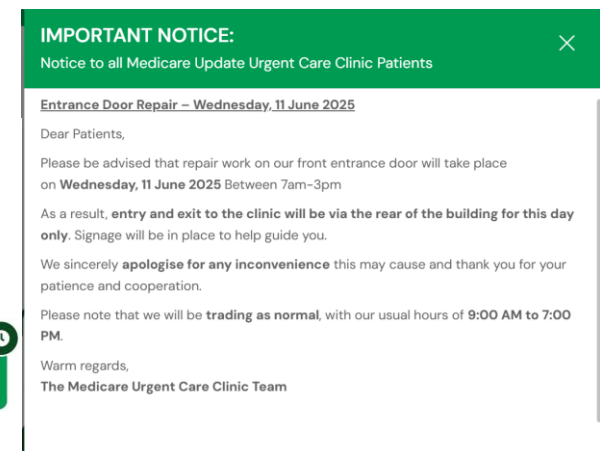
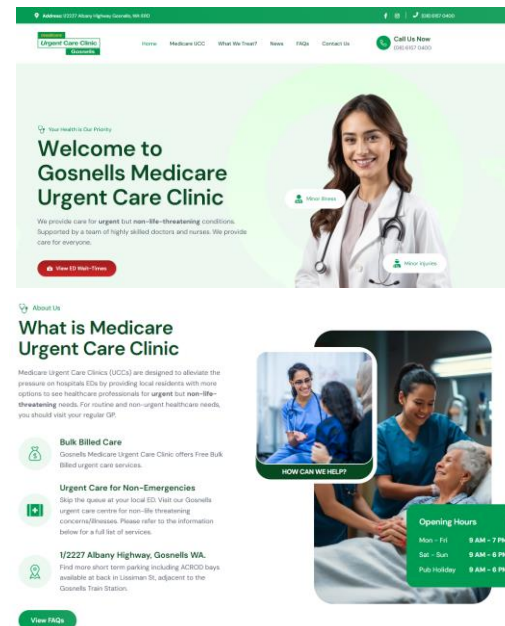
All Medicare UCC websites must:

- Use the full, approved name of the clinic "[Location Name] Medicare Urgent Care Clinic" prominently on the homepage.
- Display the Medicare UCC logo in a visible and primary position in line with the branding principles described in this document.
- Be consistent with branding rules defined in the [Style Guide](#), including use of appropriate colours, typefaces, graphic elements and imagery
- Present essential information that is clear and up to date, e.g. opening hours, location, contact details, 'getting there' information.
- Support user experience by using high-contrast text, plain backgrounds, simple navigation and support mobile/desktop-friendly formats.
- Include the following wording on the homepage: *The Medicare UCC is an initiative funded by the Australian Government. For more information about the Medicare UCC Program, please go to www.health.gov.au/find-a-medicare-ucc*

Medicare UCCs may consider providing website notices to inform patients of temporary changes to service operations or planned disruptions including what aspect of service will be disrupted, duration and expected resolution date.

Medicare UCC websites must not:

- Use alternative names (e.g. Smith Urgent Care) that overshadow the full Medicare UCC name
- Display conflicting information that could mislead patients (i.e. fee-based consults)
- Blend Medicare UCC branding with private service branding in a way that confuses patients about the urgent care service and its offerings/operations
- Blend Medicare UCC branding with corporate branding in a way that misrepresents the national Medicare UCC network.

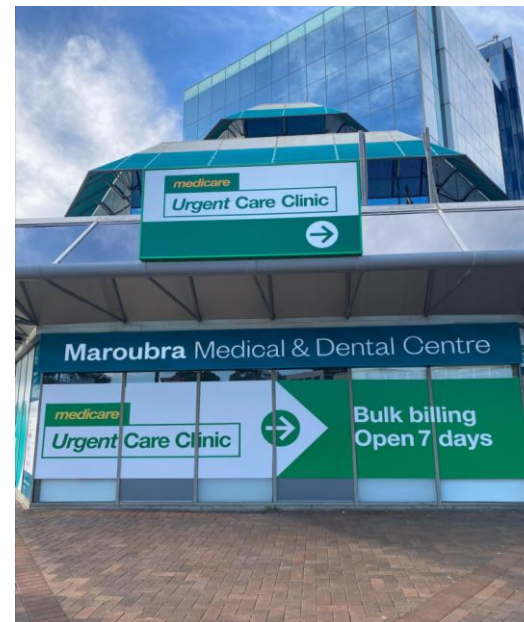


Minimum Requirements

Section 3: External Signage

Clear exterior signage is crucial for efficiently directing patients to the Medicare UCC. External signage must:

- Display clear “Medicare Urgent Care Clinic” signs at all public entrances; visible and prominent from at least 10-15 metres away
 - Cover at least 70% of the width of the available primary external wall or façade that faces the main public approach unless not permitted due to building or heritage regulations.
 - Clearly identify the clinic name and opening periods from at least 10-15 metres away; e.g. Open 7 Days
 - Be visible and prominent from the street and parking areas from at least 10-15 metres away
 - Be visible and prominent both during day and night (lit or backlit where needed) from at least 10-15 metres away
 - Be durable, weather-resistant
 - Include directional signs in parking areas to guide patients toward:
 - Main entrances
 - Accessible parking and entrances
 - Drop-off zones
 - Be positioned for visibility from a standard standing distance (1.5 metres or more)
 - Be compliant with disability access standards (high contrast, braille where required, appropriate mounting height)
- Have accessible entry points clearly marked
 - Clearly mark ambulance entry points and access-only areas using the words “Ambulance Entry Only” or “Emergency Vehicle Access”
 - List [scope of conditions](#) treated at the UCC either at or near the entrance of the clinic.



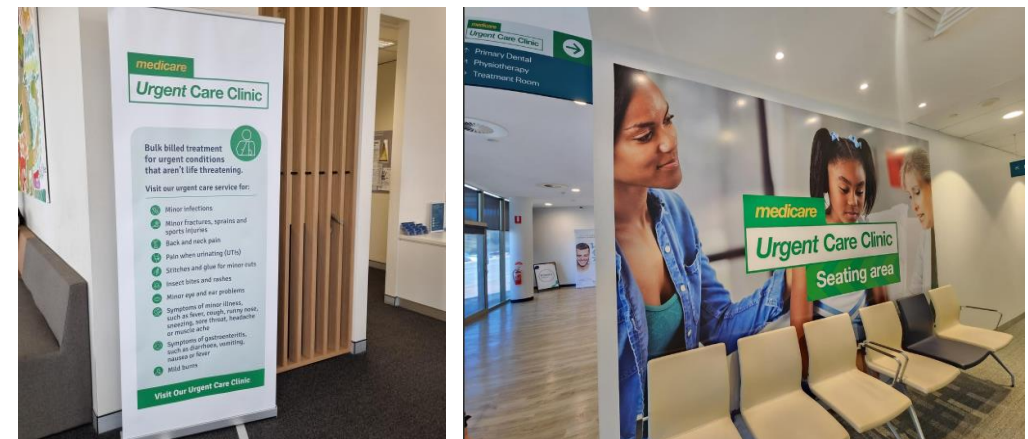
Minimum Requirements

Section 4: Internal Signage

Interior signage is essential for guiding patients through the clinic efficiently and comfortably. It must include:

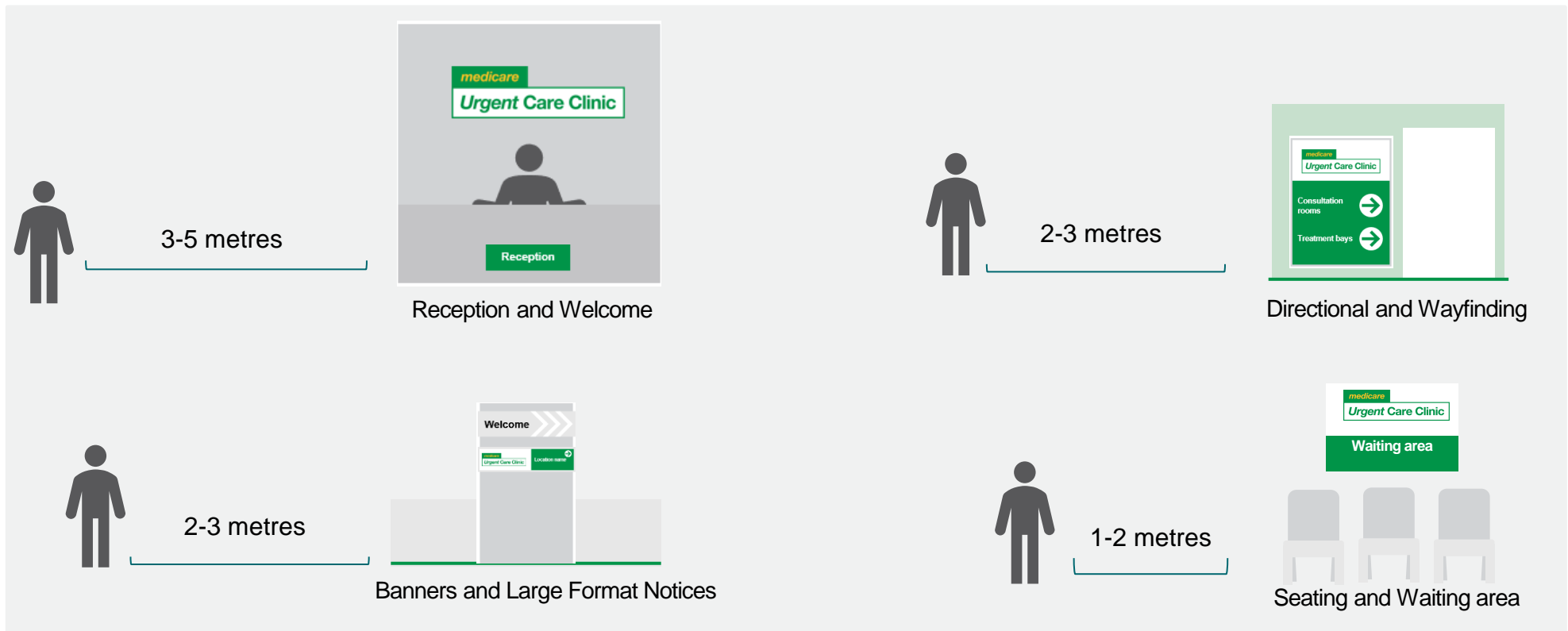
- Welcome and [Triage](#) signage displayed at or near the main reception and incorporates “Medicare Urgent Care Clinic” and includes simple check in instructions. These can include banners, stickers and overhead signage.
- Wayfinding signage must include directional signs that align with the style guide to identify key areas within the UCC, incorporate universal health symbols and use colour-coded signage to reduce confusion.
- Wayfinding signage should be used for waiting rooms, consultation rooms, treatment bays, examination rooms, ancillary services, reception, toilets, nappy change facilities and exits.
- Informational signage must provide instructions on how patients will be called when their consultation is ready to commence (e.g. GP calls them verbally, screens with a number, SMS) if not otherwise addressed via communication with reception staff;
- Display safety and hygiene notices such as hand sanitising stations, mask requirements, physical distancing (where applicable) and include patient rights and privacy information written in accessible language.

Sample internal signage



Minimum Requirements

Section 4: Internal Signage



Internal Signage Element	Signage to be visible and legible from at least
Reception and Welcome Signage	3-5 metres away
Directional and Wayfinding Signage	2-3 metres away
Banners and Large Format Notices	2-3 metres away
Seating and Waiting Area Notices	1-2 metres away

Minimum Requirements

Section 5: Priority Populations

While consistency in signage is important to establish national recognition and patient confidence in Medicare UCCs, it is acknowledged that some local contexts may require adapted approaches. Specific circumstances may necessitate tailored signage solutions. Adaptations may be considered in the following situations:

Cultural Safety

Clinics may propose signage that incorporate culturally safe visual elements (e.g. local artwork, Acknowledgement to Country) to support creating a culturally safe and welcoming environment.

Inclusivity

Clinics may also consider using visual symbols (e.g. rainbow or inclusive symbols) to represent priority groups and community-driven translations to ensure that patients feel seen, safe and supported.

Community-driven Accessibility Needs

Clinics servicing specific populations such as people with intellectual and/or physical disabilities, CALD populations, or areas with low literacy may enhance signage with:

- Pictorial-based signage systems.
- Translated signage panels.
- Have hearing loop or interpreter availability signage displayed at reception where possible.

Example signage



When to consult with Commissioners

Where clinics wish to substantially deviate from these minimum requirements to support cultural safety, clinics should engage their Commissioner and seek departmental agreement through the Commissioner.

Minimum Requirements

Section 6: Renovations and Temporary Signage

Medicare UCCs undergoing refurbishments, temporary relocation, or staged opening may use professionally produced temporary signage that complies with visibility, accessibility, and branding requirements.

Renovations or Temporary Signage must:

- Include the Medicare UCC logo and be updated as works progress.
- Use branded, high-contrast colours that align with Medicare's visual identity.
- Avoid handwritten or unclear text where possible.
- Clearly mark temporary entrances, detours, and restricted areas.
- Not be obstructed by equipment or barriers.

Arrangements must be made to replace temporary signage with permanent signage consistent with the minimum requirements described in this document once renovations are completed or when practicable.

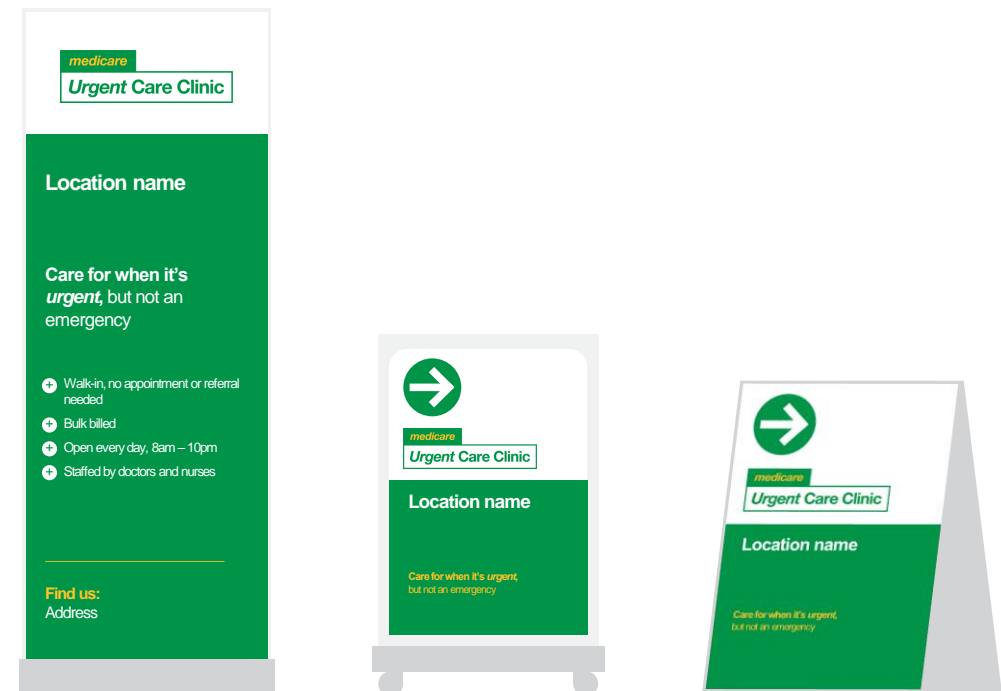
Emergencies or Temporary Hazards

In emergency situations or temporary hazard conditions, temporary signage should be used to ensure patient safety, operational continuity, and compliance with public health directives. Such scenarios include:

- Natural Disasters or Severe Weather (e.g. flood, fire).
- Public Health Emergencies.

Signage must be aligned with current state / territory guidance as appropriate and be placed at all entry points and key patient areas.

Sample temporary signage



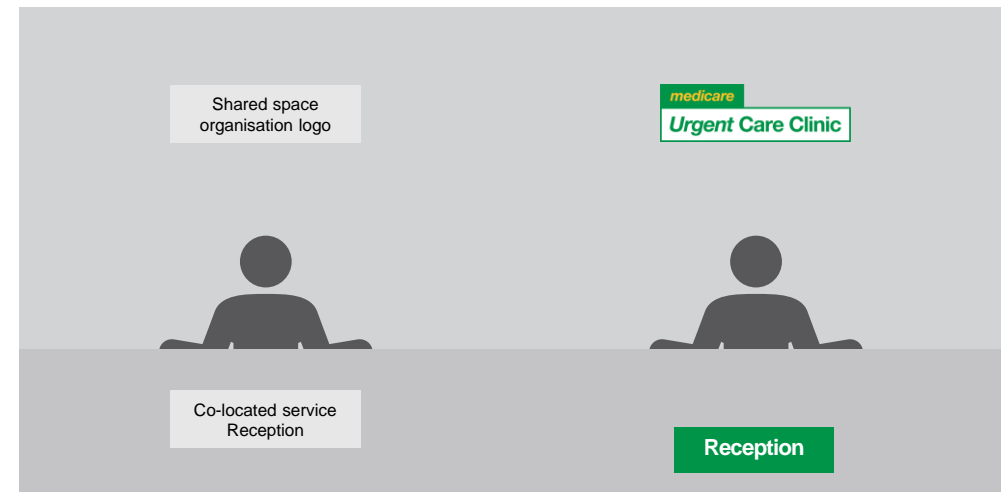
Minimum Requirements

Section 7: Co-location

When Medicare UCCs are co-located with other health services, signage must clearly distinguish between the two services to reduce confusion and support smooth navigation.

- Shared signage must clearly differentiate the Medicare UCC component i.e.:
 - Mark separate entrances, if applicable.
 - Display operating hours for each service individually.
- Have clear instruction regarding which areas, services, or check-in processes relate to the UCC.
- Indicate when a room is being used for UCC patients only.
- Include Medicare UCC branding in consultation rooms.
- Explain waiting area or patient flow distinctions e.g. green zone for UCC waiting area.
- Signage of co-located services (e.g. Smith Medical Centre; Smith Family Medical Practice) must not overshadow the Medicare UCC title in any format, including digital banners, signage, uniforms, brochures or other communication materials.

Sample co-located reception signage



Sample co-located waiting room signage



Minimum Requirements

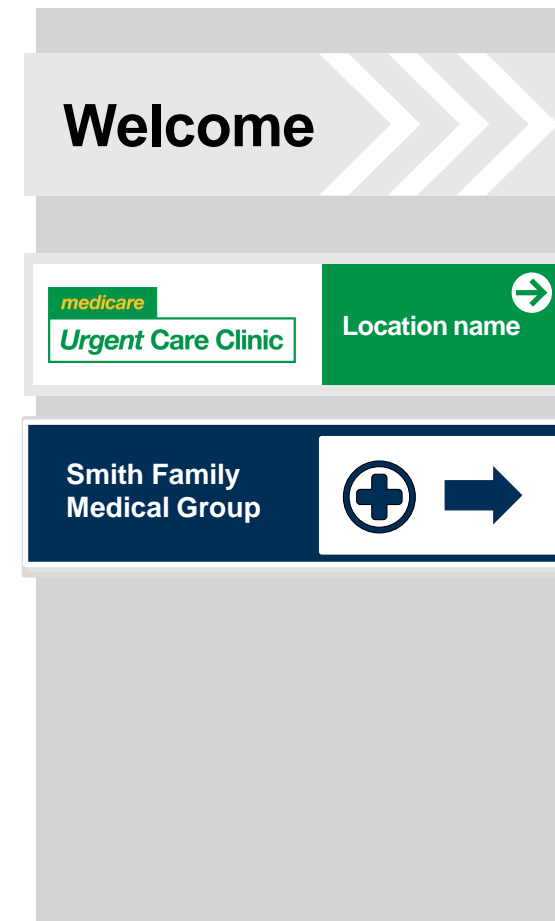
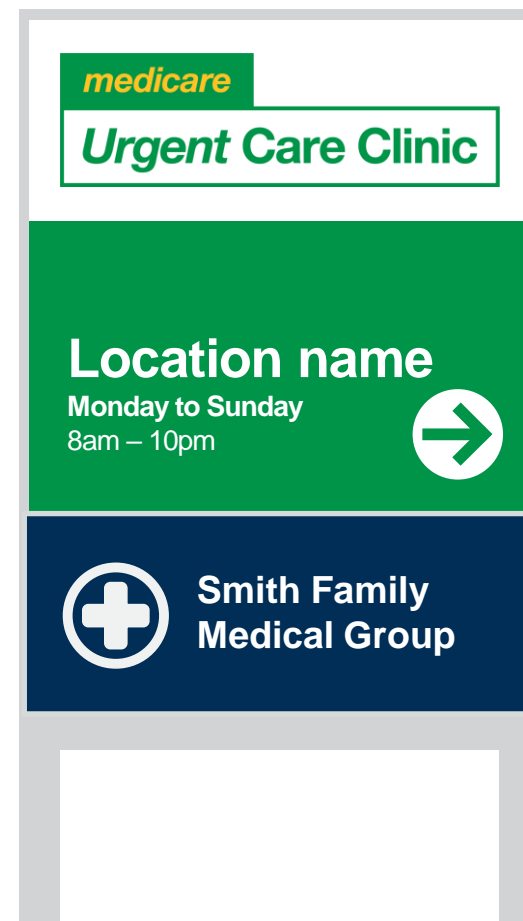
Section 8: Co-branding

In some circumstances, where two or more organisations feature their logos, names or branding elements together on a product or service, co-branding may be appropriate and should be implemented in accordance with approved visual identity guidelines to ensure consistency and clarity.

Medicare UCC branding must:

- Be prominently placed – larger than the provider's logo
- Be unobstructed and clearly legible
- Identify Medicare UCCs as the lead brand
- Use the standard naming convention: Medicare Urgent Care Clinic – [Location Name]. The location must refer to the suburb, town or region in which the clinic is situated (not the clinic operator or PHN).
- Appear first (left-aligned or top-aligned) in all interiors, exterior signage and websites
- Not be altered or stylised to match the provider's visual identity
- Not be overshadowed by provider branding in any format, including digital banners, signage, uniforms, brochures or other communication materials

Sample co-branded signage



Minimum Requirements

Section 9: Offboarding

In the event of contract cessation, the following offboarding requirements shall apply:

Removal of Branding:

- The Provider must remove all branding, logos, and references to the Medicare UCC from digital platforms, printed materials, signage, and any other media or assets within 10 business days of contract termination.

Verification:

- The Commissioner reserves the right to verify the complete removal of branding. The Provider must cooperate fully and provide evidence of compliance upon request.

Responsibility and Costs:

- The Provider shall bear all costs associated with the removal of branding and any related offboarding activities.

For more information



Email: urgentcareclinics@health.gov.au