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1 Introduction

The National Health Service (NHS) identity is important. It affects how people think and feel about the NHS. Our identity is largely formed by what we do – treating illness and promoting health – but our communications are important too. They need to express the same NHS values: efficiency, professionalism, caring for health, crucially equality and increasingly, choice and responsiveness.

These guidelines set out the design style and technical standards for NHS websites. They will help us to express and support our values and our direction: one NHS, working in partnership to bring quality and equality to our services. It’s part of the corporate identity that reinforces our presence as a strong national service committed to health.

1.1 About this document

The Department of Health (DH) communications team has developed these guidelines for NHS communications professionals, web managers and web design agencies who are building new websites or refreshing existing sites.

The guidelines apply to all NHS branded sites in England, including corporate, campaign and staff-facing websites. They are the lead document for NHS sites. They incorporate elements from the Guidelines for UK Government Websites, published by the e-Government Unit. Site authors, developers and procurers should be aware of the full guidelines, which can be found at www.cabinetoffice.gov.uk/e-government/resources/handbook.

This document will be amended from time to time, in light of changes in guidelines and best practice. All amends will be made to the document held on the NHS identity website, at www.nhs.uk/nhsidentity. Any changes to the guidelines will be highlighted on the nhs.uk web editor noticeboard.

Further help

7 Further Help – Page 40

1.2 Changes since last version

This version of the document has largely been in response to an update to the accessibility section (chapter 2.4) of the Guidelines for UK Government Websites. This now advises that sites should meet all Priority 1 & Priority 2 checkpoints of the WAI Web Content Accessibility Guidelines (version 1.0) from the W3C, i.e. satisfy conformance level "double-A", in line with European Union Recommendation

There have been substantial changes to section 4.2 of this document and further related changes throughout the document.

1 Website Accessibility Initiative

2 World Wide Web Consortium
2 Getting started

2.1 Planning your website
Consider the following issues before you write the brief or specification for the site:

- Is a new website really necessary? Will it duplicate information already provided elsewhere, for example, on nhs.uk or NHS Direct Online? Would your content be better placed on another site in the NHS health community?
- What is purpose of the website? How does it fit in with your overall communications strategy? What other functions, systems and processes will be affected?
- Who is the target audience(s) for the site? What do they need from the site? What do you want the audience(s) to do, know or think about when they are using the site or after they have left it?
- What will the users be able to do or see on the site? What content and functionality do you plan to provide? What content or functionality must be available at launch and what could be developed at a later stage?
- Is the content for the site ‘web ready’? Who is providing the content? How often will it need to be updated? How will the updates be managed?
- Who will manage the site on a day-to-day basis? What maintenance arrangements need to be put in place?
- How will the success of the site be evaluated? What measurements need to be put in place to get an accurate picture of the site’s performance?

2.2 Assigning roles and responsibilities
There are four broad areas of responsibility that need to be allocated when setting up and managing a website. An external supplier may take on some of the operational responsibilities. Clear ownership of the roles and responsibilities will help the site to stay focused on the needs of your target audiences.

1 Site strategy: ensuring they fit with your overall communications strategy. It includes making information publicly available, control mechanisms for sensitive information, budgets and other resources.
2 Editorial strategy: ensuring the site content is appropriate for the audience.
3 Web management: ensuring effective day-to-day site operation, as well as measuring achievement against objectives.
4 Content provision: ensuring all content on the site is current and that it is published or archived in a timely fashion.

Further help

6 Managing your site – Page 36
2.3 Commissioning the work
You can commission external suppliers to design and build your website or you may prefer to use your in-house IT team. If the in-house team is building the site, it may be worth buying in some design expertise to ensure the site follows the NHS identity. Whatever you decide, compliance with these guidelines must be part of the brief.

Maintenance and hosting are important issues to consider. Even if you are commissioning external suppliers, your in-house team may be able to maintain the site on an ongoing basis. If not, maintenance will be an ongoing cost.

Make sure your hosting service is fit-for-purpose. A checklist is available in Appendix B to help you make the right decision. If you are contracting out the website build, ask the supplier to make suitable hosting arrangements as part of the brief. Hosting is usually charged on a yearly basis.

Make sure that the brief is clear and understood by all parties. Any changes to the brief should be agreed in writing.

Further help
Appendix B: Choosing a hosting service – Page 43

2.4 Checklist: getting started
- Is the brief clear and agreed by all parties?
- Is the purpose of your website clear to users and to the management team?
- Is the site integrated into your overall communications strategy?
- Will the site duplicate information available on existing sites or would the content be more appropriate on another site?
- Is there a clear management structure in place? Is everyone clear on their roles and responsibilities?
- Are measurement systems included in the brief?
- Is the hosting service fit for purpose?
3 The NHS identity

All NHS websites must conform to the NHS identity. This is not just about making sure the logo is present and in the right place. All NHS communications – including websites – must express the NHS values and principles.

Our values are:

- **health** – reinforce our support for health and healthy lifestyles
- **care** – provide the best experience for users
- **professionalism** – maintain high standards of design and content
- **efficiency** – provide unique content or services, rather than duplicating information provided elsewhere
- **equality** – ensure all users have access to your content
- **choice**

Our communications must be:

- **clear** – make sure the site and its content can be easily used and understood
- **cost-effective** – use the budget wisely
- **straightforward** – avoid gimmicks and overcomplicated design, structure and words
- **modern** – use everyday language and current images
- **accessible** – make your site technically accessible and usable to as many people as possible
- **honest** – keep your content current and evidence-based
- **respectful** – avoid stereotypes and be sensitive to cultural needs

When designing your site, you should ensure that the information structure, content and navigation – as well as the front-end design – supports these values and principles.

3.1 The NHS logo

All NHS websites should carry the NHS or your organisation’s logo. Your communications/corporate identity lead will have ordered free artwork from the NHS identity team. If they haven’t, they can download an order form from [www.nhs.uk/nhsidentity](http://www.nhs.uk/nhsidentity).

Do not use ‘old’ logos on any new NHS website. Existing NHS websites should change to the new logo as soon as possible. Ambulance trusts may use the Crown badge together with their NHS logo, as outlined in the main NHS identity policy document (NHSGO1). The NHS logo should always be reproduced in its original form. It must never be reproduced in a tint or altered in any way.

The NHS logo has transparent letters, so make sure it is correctly anti-aliased using the background colour of the page (usually white). Use a format that reads the NHS logo correctly (i.e. as transparent) – GIFs do but JPGs do not.
Logos should be carried top right and must appear on every page, as not everyone will come through the homepage. The NHS logo has an ‘exclusion zone’ around it, in which nothing else should appear. The exclusion zone is defined as the height of the NHS logo.

The logo is not intended to be ‘read’ in a phrase. For example, when writing “The NHS working in your community”, the letters ‘NHS’ must not be replaced by the NHS logo.

Initiatives and campaigns should all be clearly owned by the NHS and give support to the reputation of the health service. They should not have a separate symbol, picture or text style that is used as a logo.

3.2 The nhs.uk web address
All NHS websites must use an nhs.uk web address. This will:

- demonstrate clear NHS ownership of content and services
- differentiate NHS sites from commercial or third-party websites
- reinforce the NHS identity on the internet.

If your website uses a different web address, you should change to an nhs.uk address as soon as possible. The NHS Connecting for Health team will help with this. There is no cost and no impact on your hosting arrangements.

Further help

3.2.5 Registering nhs.uk web addresses – Page 9

3.2.1 Choosing a name
NHS websites must adhere to the principles of clarity, honesty, openness and accessibility. This approach applies equally when choosing a web name.

NHS web names should be:

- identifiable with and relevant to your organisation, initiative or campaign
- clear and meaningful to the user
- intuitive and as short as possible.

To help achieve this, NHS web names should not use:

- NHS or nhs in the descriptive part of the web address
- common organisation descriptors, such as ‘NHS Trust’
- uppercase letters
- any punctuation, including hyphens, underscores, ampersands etc.
- any acronyms, unless they are universally or locally recognisable.
3.2.2 Local sites

The format for local NHS web names is www.name.nhs.uk. Organisations with unique names should not include any reference to the type of organisation in the name. For example:

Oxford Radcliffe Hospitals NHS Trust  www.oxfordradcliffe.nhs.uk
North Somerset Primary Care Trust  www.northsomerset.nhs.uk

Differentiating sites with similar names (1)

Some organisations have similar names because they are based in the same area but provide different services. If users may be confused about which organisation they are dealing with, include one of these abbreviations:

<table>
<thead>
<tr>
<th>Organisation Type</th>
<th>Abbreviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance Service Trust</td>
<td>amb</td>
</tr>
<tr>
<td>Dental Access Centre</td>
<td>dental</td>
</tr>
<tr>
<td>Health Promotion Service</td>
<td>hps</td>
</tr>
<tr>
<td>Mental Health Trust</td>
<td>mht</td>
</tr>
<tr>
<td>Primary Care Trust</td>
<td>pct</td>
</tr>
<tr>
<td>Walk-in centre</td>
<td>walkin</td>
</tr>
<tr>
<td>Workforce Development Confederation</td>
<td>confed</td>
</tr>
</tbody>
</table>

For example:

Anyshire Ambulance Service NHS Trust  www.anyshireamb.nhs.uk
Anyshire Mental Health NHS Trust      www.anyshiremht.nhs.uk

‘NHS Trust’ does not have an abbreviation as it is treated as the ‘default’ organisation of the NHS.

Strategic Health Authorities have already been assigned web addresses by the Information Policy Unit at DH. They are published on their web pages.

Further help

DH Information Policy Unit:
www.dh.gov.uk/PolicyAndGuidance/InformationPolicy/fs/en

Differentiating sites with similar names (2)

Some organisations have names that are used across the country. For example:

St. John’s Hospitals NHS Trust, Hertfordshire
St. John’s Mental Health NHS Trust, Truro

If these organisations tried to register www.stjohns.nhs.uk but found that the name was already taken, they would need to add a geographical reference to the web name. For example:

St. John’s Hospitals NHS Trust, Hertfordshire  www.stjohnsherts.nhs.uk
St. John’s Mental Health Trust, Truro        www.stjohnstruro.nhs.uk
3.2.3 National sites and the nhs.uk gateway

All national sites – including those associated with NHS branded publicity campaigns, national initiatives or NHS agencies – must register a www.name.nhs.uk web address. However, national sites should be promoted and accessed through the www.nhs.uk gateway. The format for these sites is www.nhs.uk/name. For example:

Website: NHS Careers
Registered at: www.nhscareers.nhs.uk
Promoted as: www.nhs.uk/careers

Website: NHS Modernisations Agency
Registered at: www.modernnhs.nhs.uk
Promoted as: www.nhs.uk/modernnhs

3.2.4 Microsites on nhs.uk

All hospital trusts, primary care and care trusts and strategic health authorities have a microsite on nhs.uk. The microsites contain the core set of information for each NHS organisation that must be made publicly available.

Organisations that do not have their own website can promote their nhs.uk microsite as their information source on the web. The nhs.uk team can set up a www.nhs.uk/name address for the microsite so that it can be easily promoted (e.g. on stationery). nhs.uk microsites should follow the naming guidelines above.

3.2.5 Registering nhs.uk web addresses

To register a local www.name.nhs.uk web address, contact the nhs.uk programme team by email, entering ‘website registration’ in the subject field. Web addresses are allocated on a ‘first-come, first-served’ basis. The NHS Connecting for Health team and/or the DH communications team will mediate any disputes over unallocated web addresses.

To register a national www.nhs.uk/name web address, contact the nhs.uk programme team by email, entering ‘website registration’ in the subject field.

Further help

nhs.uk programme team: dns@cfh.nhs.uk

3.3 NHS colour palette

There are three levels to the NHS web-safe colour palette.

3.3.1 Corporate colours

<table>
<thead>
<tr>
<th>Colour</th>
<th>HTML Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS Blue</td>
<td>#0066CC</td>
</tr>
<tr>
<td>Black</td>
<td>#000000</td>
</tr>
<tr>
<td>White</td>
<td>#FFFFFF</td>
</tr>
</tbody>
</table>

The corporate colours should form the basis for all NHS website design schemes. As a general rule, backgrounds should be white and text should be black. Navigation areas should be white or NHS blue.
3.3.2 Primary colours

<table>
<thead>
<tr>
<th>Colour</th>
<th>HTML Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dark green</td>
<td>003300</td>
</tr>
<tr>
<td>Green</td>
<td>009933</td>
</tr>
<tr>
<td>Light green</td>
<td>66CC33</td>
</tr>
<tr>
<td>Aqua green</td>
<td>009966</td>
</tr>
<tr>
<td>Aqua blue</td>
<td>0099CC</td>
</tr>
<tr>
<td>Light blue</td>
<td>0099FF</td>
</tr>
<tr>
<td>Dark blue</td>
<td>000099</td>
</tr>
<tr>
<td>Purple</td>
<td>330099</td>
</tr>
<tr>
<td>Dark pink</td>
<td>990066</td>
</tr>
<tr>
<td>Dark red</td>
<td>990000</td>
</tr>
<tr>
<td>Red</td>
<td>CC0000</td>
</tr>
<tr>
<td>Orange</td>
<td>FF6600</td>
</tr>
<tr>
<td>Yellow</td>
<td>FFFF00</td>
</tr>
</tbody>
</table>

The primary colours should be used in conjunction with the corporate colours to highlight key pieces of information. When using the primary colours, make sure they do not overpower or detract from the corporate colours.

3.3.3 Secondary colours

<table>
<thead>
<tr>
<th>Colour</th>
<th>HTML Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS blue (secondary)</td>
<td>6699FF</td>
</tr>
<tr>
<td>Black (secondary)</td>
<td>999999</td>
</tr>
<tr>
<td>Dark green (secondary)</td>
<td>99CC99</td>
</tr>
<tr>
<td>Green (secondary)</td>
<td>CCFFCC</td>
</tr>
<tr>
<td>Light green (secondary)</td>
<td>CCFF99</td>
</tr>
<tr>
<td>Aqua green (secondary)</td>
<td>66CC99</td>
</tr>
<tr>
<td>Aqua blue (secondary)</td>
<td>99CCFF</td>
</tr>
<tr>
<td>Light blue (secondary)</td>
<td>99CCFF</td>
</tr>
<tr>
<td>Dark blue (secondary)</td>
<td>9999CC</td>
</tr>
<tr>
<td>Purple (secondary)</td>
<td>9999FF</td>
</tr>
<tr>
<td>Dark pink (secondary)</td>
<td>CC99CC</td>
</tr>
<tr>
<td>Dark red (secondary)</td>
<td>CC6666</td>
</tr>
<tr>
<td>Red (secondary)</td>
<td>FF6666</td>
</tr>
<tr>
<td>Orange (secondary)</td>
<td>FFCC99</td>
</tr>
<tr>
<td>Yellow (secondary)</td>
<td>FFFFCC</td>
</tr>
</tbody>
</table>

The secondary colours have been developed to support and complement the primary colours. Each secondary colour should only be used with the corresponding primary colour. A secondary colour can also be used to break up a page, which may ensure that the primary colours do not become more prominent than the corporate colours.
3.3.4 Using the colour palette
- Do not combine the colours from the three levels to create new colours
  - use only the specified colours above.
- Do not use tints of any of the NHS web palette colours.
- Do not use any of the colours to create textures, patterns or images.
- Do not use secondary colours in isolation – they should be used with the corresponding primary colour.

3.3.5 Colour and accessibility
- Use a single, solid colour from the NHS colour palette for backgrounds for minor elements, e.g. small tables and graphs.
- Never use patterns, images or textures on your background.
- Ensure there is always excellent contrast between the colours used for the background and foreground or text to maximise legibility.
- Ensure that the chosen colour scheme can be overridden by the user’s browser settings.

Further help

4.2.8 Accessibility and colour – Page 19
Appendix C: NHS web colour palette – Page 44
NHS identity website: www.nhs.uk/nhsidentity

3.4 Typefaces
The NHS font family for websites is Arial/Helvetica. These sans serif fonts are easy to read on screen so use them routinely. The Times family, a serif font, can be used as an occasional alternative. Frutiger and Garamond are the other NHS corporate fonts but only use them for graphics, as they may not always print correctly.

The NHS serves many people whose first language is not English. Just as with Roman typefaces, Asian, Cyrillic and other typefaces have a range of styles. Get advice from a translator or typesetter on commonly used fonts. Use one that is clear and simple – test it on readers if possible. Once chosen, use it consistently.

Make sure all text on the site is big enough to read easily. Text should normally be at least 12pt.

3.5 Images and graphics
Images and graphics are powerful tools that express NHS values just as strongly as colours and typefaces. Make sure the images on the site reinforce our values and principles. For example, a picture of a person enjoying a cigarette would contradict our core message about promoting healthy lifestyles.

Think about how you use images on your site. Ask whether they are relevant to the copy. Do they add anything to the page or are they purely decorative?
Use pictures that show that we care. Although “funny” images are often used to try to lighten a difficult or sensitive subject, they risk being disrespectful. Avoid this approach unless you are sure that you can use it in a way that still shows care, respect and professionalism. Don’t use images that reinforce stereotypes about people.

If you are using drawings, ensure they are straightforward, professional and respectful. Don’t use clip-art images; they don’t add to the NHS reputation as a professional organisation. Try not to use animation, as it will be inaccessible to many users.

Make sure that all images and graphics have appropriate alt-text.

Further help

4.2.3 Alt-text – Page 17
4.2.7 Graphics and multimedia – Page 19

3.6 Tone and style

NHS communications should be clear and concise, honest and open. Use plain language that is appropriate to your audience. Avoid jargon, acronyms and unnecessary technical language, particularly if it is part of your navigation.

Many of our users will be patients who may be worried about their health. Use language that shows empathy and understanding and helps them to find the part of the site that they want quickly.

Further help

5.2 Presentation – Page 28

3.7 Using third-party logos

Often we work with partner organisations to deliver our services. If a partner organisation is making a significant contribution to your site – by providing content or sponsorship, for example – you will need to credit them to uphold our principles of openness and honesty.

If a partner’s logo appears on your site, you will need to respect their identity without compromising the NHS identity. Third-party logos should only appear on the site where appropriate and the relationship between the third party and the NHS should be clearly explained in text. Section 5.6 has further guidance on sponsorship.

Third-party logos should be treated like any other graphics and should have clear, meaningful alt-text. Section 4.2.3 has further details.

Further help

4.2.3 Alt-text – Page 17
5.6 Sponsorship and advertising – Page 32
3.8 Checklist: NHS identity

- Do you have the correct logo? Does it appear top-right on every page?
- Have you registered a www.name.nhs.uk address? If necessary, have you also registered a www.nhs.uk/name address?
- Do all the colours used on your site come from the approved palette?
- Is all text use the corporate fonts?
- Are the images and graphics appropriate? Do they support our values and principles?
- Are you communicating with your audience in appropriate language?
- Have you clearly explained the relationship with any partner or sponsoring organisation’s logo in text?
4 Building the site

This chapter sets out the technical standards laid down for government and public sector websites that NHS websites must conform with. They will ensure that NHS websites are technically accessible to a wide audience range.

4.1 Mark-up languages

Your website must be designed according to open Internet standards, for example the World Wide Web consortium (W3C). All content must be available in standard HTML. If you provide content in a proprietary format, make an alternative HTML version available.

Where possible, use templates to create HTML files to reduce duplication. HTML file templates must use comment codes to describe their function and version.

The World Wide Web Consortium (W3C) currently recommends XHTML1.0 as the mark-up language used with Cascading Style Sheet 2. However appropriate care must be taken to ensure backward compatibility for older browsers.

4.1.1 Extensible mark-up language (XML)

XML provides a universal, standardised and well-supported mechanism for marking up data, for use on the web and in other applications. Unlike HTML, which is a language based around displaying data in a web browser, XML puts no constraints on the purpose for which the data will be used, but merely describes the structure of the data. XML can therefore be used (and is used) for applications that involve the transfer of data across the Internet either for display or computational purposes.

It is important to understand that XML does not, on its own, constitute a presentation markup language - it is a markup metalanguage. That is, a syntax within which other languages can be defined.

XML is not directly provided to the user, it needs to be parsed through an Extensible Stylesheet Language Transformation (XSLT) to ensure the output is readable by web browsers.

Websites should only consider using XML if direct interoperability with other systems is required.

4.1.2 Extensible hypertext mark-up language (XHTML)

XHTML is the current specification from the W3C that has ‘recommended’ status. It uses many elements and attributes from HTML and has the same three ‘flavours’ (strict, transitional and frameset). ‘Transitional’ is suggested for websites available to the public, as it offers the greatest backward compatibility for older browsers.

All pages should use validate to their specified document type; a validation tool is available from W3C [http://validator.w3.org/].

Old HTML documents can be changed into XHTML 1.0 using W3C’s Tidy utility. This tool also cleans up mark-up errors, removes clutter and
structures the mark-up, making it easier to maintain [http://tidy.sourceforge.net/].

4.1.3 Cascading style sheets (CSS)
Cascading style sheets provide styling elements for a website and help separate the presentation from the content and structure of web pages.

When using CSS, ensure that:

- all CSS pages are ‘backwards compatible’, i.e. they are usable when style sheets are disabled in the browser;
- CSS formatting is centrally managed using an external CSS file; and
- the cascading style sheets are validated by W3C [http://jigsaw.w3.org/css-validator/].

4.1.4 Server-side scripted pages
Larger sites often use some form of server-side scripting to create pages on websites, rather than ‘static’ pages. They are used to provide dynamic pages that can react to input from the user or retrieve variable data from another source, such as a database.

Examples of server-side scripting languages include:

- Active Server Pages (ASP) is a language most commonly used on Microsoft servers.
- Java Server Pages (JSP) is a Java technology (developed by Sun Microsystems) and can be run across different platforms (NB this should not be confused with JavaScript, which is a client-side scripting language).
- PHP Hypertext Preprocessor (PHP) is an open-source programming language, usually deployed on Unix webservers.

The output of these scripts is a normal webpage in (X)HTML, so they do not in themselves effect which browsers they work on. However, some developers also use the VBScript for client-side scripts too – these must be avoided, as they are not cross-browser/cross-platform compatible.

4.1.5 Title tags
Title tags are used to display the title of the page, usually as part of the browser window’s name. They are also the first bit of content read out to a visually impaired user with a screen-reader.

They are valuable for internal management, navigation and search engine positioning. Title tags should:

- be used on every page;
- be appropriate to the page’s content, i.e. do not have a single generic title for every page on a site.
- never be longer than 60 characters and, ideally, less than 30 characters
use a set syntax that describes the owning organisation and the page content, for example, ‘NHS – Anyshire Strategic Health Authority – map’.

4.1.6 Non-HTML file formats

HTML is not always the most suitable way of publishing information on the web. For instance, documents that are large, have complex structures, use columns, lots of graphics, or detailed tabular information, are better published in a print-ready format such as PDF, rich text, plain text, or Microsoft Word.

Adobe’s Portable Document Format (PDF) has become widely accepted as a pseudo ‘industry standard’. To be able to access the content of a PDF, users need additional software – Adobe® Reader® – also referred to as a ‘browser plug-in’. Information about the plug-in and a link to where users can obtain it should be on every page that features a PDF document.

It is important to bear in mind that PDF documents are more difficult for screen-readers to read. Recent versions have made PDFs more accessible, but to get the benefits the PDF files also need to be marked up (tagged). This is not a trivial task and can take up to a day, even for a reasonably simple document, if the PDF is not properly tagged when created. If creating PDFs from Word documents then there are ways of producing better PDFs without the need for the time consuming conversion, such as use of proper styles and providing alt-text for images.

Try to offer alternative formats when using PDFs. Rich Text Format (RTF) files can be read by a number of different word processors and different operating systems. Plain Text (.txt files) is the simplest format for storing text. However information saved as plain text will lose all its formatting, apart from line and paragraph breaks.

Further help

5.4 Downloadable documents – Page 31

4.2 Accessibility issues

NHS websites must be designed with the end-user in mind. Consider the needs of people who might find it difficult to use the web, for example:

- the physically impaired or learning disabled
- inexperienced or older users or those with older technology
- non-English speakers
- users behind strict firewalls.

Furthermore, the Disability Discrimination Act requires us to make “reasonable adjustments” to give the widest scope for access to our sites.

Further help

5.7.5 Disability Discrimination Act – Page 34
4.2.1 Browser compatibility
NHS websites need to work across a wide range of browsers and versions of browsers. Test your site with a range of browsers to make sure that it does. There is no stated minimum browser versions or compatibility, so it is important to consider the potential audience of the site. NB. The design of the site does not need to be identical in every browser, but the site must continue to be usable and functional.

The most common browsers are Netscape Navigator 4.7 and 7, Microsoft Internet Explorer 5, 5.5 and 6, Firefox, Opera, Safari (Mac OS X only browser) and Lynx (text-only browser).

4.2.2 Screen resolutions
Most people have their computer screens set to an 800x600 pixel resolution. However, people with poor vision may set their screen to 640x480 pixels to magnify the content. People using the lower screen resolution may need to scroll across to see all the content.

You can design your site for an 800x600 resolution, but make sure that users with 640x480 resolution can see each page without having to scroll across the screen. The layout in 640x480 may be poor, but it is more important for users to see the information and navigate your site easily.

4.2.3 Alt-text
Alt-text is the descriptions that appear when the mouse cursor rests on images on a webpage (also referred to as mouse ‘hover’) when using Internet Explorer. However, it should be noted that this does not happen in all browsers and is technically an incorrect behaviour according to browser guidelines, so do not rely on this to convey information to the user.

They are beneficial for people who don’t or can’t view images, this includes search engines that cannot see images.

Remember:
- alt-text must be clear, descriptive and meaningful;
- every image or graphic must have an alt-text;
- alt-text should not exceed 100 characters; and
- each element within an imagemap must have its own alt-text.

4.2.4 Assistive technology
People with a visual impairment use a specialist browser, such as a screen reader, to access your site. This software reads out web pages one line at a time through a speech synthesiser or a retractable Braille display. Alternatively, they may use screen magnification software, which will ‘zoom’ onto different parts of the screen.

Assistive technology may only display a small part of the screen, so users may find it difficult to get an overview of your web page. To help these users ensure that:
- all graphics and images have clear and informative alt-text;
- the page uses a proper heading hierarchy to break up the content of the page into sections;
- the page content is written so that the most important information comes first; and
- paragraphs are kept short.

### 4.2.5 Frames and accessibility

Frames allow a set of documents (described as a ‘frameset’) to be shown in a single browser window by splitting the page into two or more sections. Similarly, iframes bring in a separate document to display within a page.

Some assistive technology and text only browsers cannot interpret a site with frames properly. They can only be able to access one document at a time, therefore all the navigation would need to be replicated in the other frames - losing a key ‘benefit’ of using frames.

**NHS websites should not use frames or iframes.**

There is a possible alternative - using an appropriately styled div tag with the overflow property set to ‘show’ provides a similar ‘frame’ type effect. The crucial difference is that when stylesheets are disabled or cannot be rendered all the content remains in the same page and therefore can still be accessed by the assistive technology. However, this technique must be used with care as it could still cause problems for people with mobility difficulties because of the extra scrolling required. Overflow divs can also cause printing problems if not used correctly and compensated for in a print style sheet.

### 4.2.6 HTML tables

Some websites use tables for page layouts, for example, to set content in columns. However, to achieve an ‘AA’ rated site it will be necessary to control layout by using style sheets. This is important as it provides users of assistive technologies with greater flexibility to access the content how they wish.

All new sites should be developed using CSS layout and organisations should have a policy to also make corrective work to older sites when they next come up for review.

Tables should still be used for tabular content and care should be taken to use the correct accessible coding of tables to allow assistive technology to understand the structure of the table and the associations with it.

Some pointers for correct implementation include:

- ensure tabular information is clearly labelled and easy to follow – use correct coding for table headings and summaries (tutorials are available on the web, e.g. [www.usability.com.au/resources/tables.cfm](http://www.usability.com.au/resources/tables.cfm));
- use closing tags in your code – required for (X)HTML validation, but this also minimises problems for older browsers;
- don’t use background images in tables – older browsers don’t support them consistently and text should not be on top of graphics for legibility reasons;
- don’t rely on background colours to provide meaning;
- standardise tabular information throughout your website; and
- avoid nested tables – they will cause difficulties for assistive technology users.
4.2.7 Graphics and multimedia
All graphics on your site must have alt-text to describe their content.

Don’t use graphics or active content as the only means to navigate your site or to provide content. Some people switch off graphics because they take too long to load. Others may be unable to access active content either because their browser doesn’t support it or they can’t download the necessary plug-ins.

If you use graphics to convey important content – for example, graphs and charts – provide an alternative format. This might be as alt-text or as a link to another page that has a full text explanation.

Don’t use invisible images to aid page layout.

Don’t use text in images when styled text link will work as well. They both make navigation more difficult for users whose browsers do not support graphics and can harm search engine rankings.

Don’t use moving graphics as they contradict our communications principles. Flickering or flashing images can trigger epileptic fits and are distracting for users.

People with a hearing impairment will have problems with audio and video files. Make sure you provide transcripts or captions.

4.2.8 Accessibility and colour
How you use colour on your site has accessibility implications for users.

- As a general rule, body text should be black on a white background. Text should always be a contrasting colour to the background to avoid any blurring on screen (colour contrast analysing tool available at www.nils.org.au/ais/web/resources/contrast_analyser).
- Always use single, solid background colours rather than textures or patterns.
- Don’t rely on colours to provide meaning because users can change the colour settings of their browser or may not be clear to some users.
- Don’t use red and green together, as this will cause problems for colour-blind users.
- Avoid colour combinations that cause difficulties, including red and green, red and purple, yellow and white/light grey, pastel pink and lavender.

4.2.9 Download speeds
While broadband is much more prevalent now, it is still safest to assume that users connect through slow dialup using 56 kilobit/s modems. You should design web pages and documents that load quickly.

Large files are expensive and time-consuming to download. Large homepages are not acceptable, as users can’t choose a more economical way to access the site. We recommend that:

- homepage total file size should not exceed 40k;
- standard page total file size should not exceed 120k; and
files containing print documents (reports etc.) should not exceed 300k. Warn the user of the file size in advance.

The time it takes to download a page is more important than its file size. The better the HTML construction, the less time it will take for the page to load. Homepages should load within five seconds of a connection and other pages within 20 seconds.

4.2.10 Accessibility testing

It is essential to use a range of techniques to test your web pages for accessibility. Automated testing alone cannot guarantee an accessible site as there are guidelines that cannot be checked by computer, such as appropriateness of alt-text, legibility of text, reliance on colour, etc.

It is also important to understand that there are no accessibility ‘standards’, despite what some validation tools may claim or give the impression of. There are guidelines that could be subject to differing interpretation and the law only states that ‘reasonable adjustments’ must be made, with no definition of what that means in practice.

A range of automated tools and their capabilities are outlined in the Guidelines for UK Government Websites chapter 2.4

4.2.11 W3C WAI recommendations

The World Wide Web Consortium’s (W3C) Web Accessibility Initiative (WAI) Web Content Accessibility Guidelines version 1.0 (WCAG10) has 14 guidelines. Each guideline has checkpoints that are assigned a priority based on its impact on accessibility: Priority 1 – must do, Priority 2 – should do or Priority 3 – may do.

Websites are rated depending on, which checkpoints it meets. A site meeting all only Priority 1 checkpoints is said to be ‘A’ rated, ‘AA’ rating means meeting all Priority 1 and Priority 2 checkpoints, and ‘AAA’ rating is meeting all checkpoints.

NHS websites should work towards the ‘AA’ rating and also some priority 3 checkpoints that are classified as ‘UK best practice requirement’ as specified in the Guidelines for UK Government Websites. You can be challenged on grounds of accessibility (DDA) if your site does not meet the ‘AA’ rating.

Further help


W3C WAI WCAG checkpoints: www.w3.org/TR/WCAG10/full-checklist.html

4.3 Homepage and navigation

All NHS sites should have clear, easy-to-use navigation – information and services on our sites are only useful if users can find them. The guidelines below will ensure that users can navigate your website, regardless of the technology available to them.
4.3.1 Homepage
Homepage file size should not exceed 40k so that they are quick to load.

When planning the homepage, make sure that:

- users don’t need to know the filename of the homepage to find it;
- the homepage is clearly accessible from each page on your site;
- the main navigation menu is on the homepage;
- the main sections of the website should be one click from the homepage;
- it displays your organisation or initiative’s name, logo and links to a page with your contact details; and
- the homepage is linked to both www.nhs.uk and www.nhsdirect.nhs.uk.

4.3.2 Core navigation elements
Each page must have a route or direct link back to the homepage and a link to your contact details. Your navigation should be consistent throughout the site. Have a ‘skip navigation’ link – this is a link that will jump to an anchor at the start of the content to allow users with a screen reader to jump repetitive navigation elements (it could be hidden from other users by making it a 1x1 pixel, with appropriate alt-text, at the start of the page).

4.3.3 Graphic navigation
It is not considered best practice to use images for the navigation, as they cannot be resized in line with the text. It is also more appropriate to use styled text to comply with the WCAG guideline 11 “use W3C technologies”.

However, if it is necessary to use graphic navigation, ensure that:

- graphics are consistent and intuitive;
- they are large enough to display a meaningful alt-text within its width and height - always use alt-text, even when also providing text navigation;
- navigation does not rely on JavaScript and rollovers;

Imagemaps
There are two kinds of imagemaps - server-side and client-side. It is best to use client-side imagemaps as they have defined areas for the browsers. These areas must have appropriate alt-text to describe what it is linking to. It is also important to provide alternative text navigation to accompany the imagemap.

4.3.4 Pop-up windows, drop-down navigation and splash screens
WAI WCAG guideline checkpoint 10.1 states, “Do not cause pop-ups or other windows to appear (spawned windows), and do not change the current window, without informing the user” (this is Priority 2, so is must be complied with to meet AA rating).
Common uses of JavaScript include pop-up windows, dropdown lists that jump the user to a different part of the website and redirecting users from splash screens.

Pop-up windows triggered by JavaScript do not work on all browsers. Pop-ups are useful in certain circumstances, for example linking to external sites. However, they should be used sparingly and with care. A mechanism for both JavaScript and non-script new windows combined can be found at: www.accessify.com/tutorials/the-perfect-pop-up.asp

Drop-down menus using JavaScript change the current window immediately without any warning, this can be disorientating for users with screen readers.

Avoid splash pages; they can be frustrating for users and can harm search engine rankings. If you do use a splash page:

- provide clear instructions to the user on how to proceed; and
- do not automatically redirect the page, this can cause problems for screen reader users.

### 4.3.5 Keyboard shortcuts

Keyboard shortcuts help users with limited physical ability to navigate your site. If you offer this functionality, use the Accesskeys Standard and let users know as soon as they enter your website.

The Accesskeys Standard is:

<table>
<thead>
<tr>
<th>Accesskey</th>
<th>Link</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>skip navigation</td>
</tr>
<tr>
<td>1</td>
<td>homepage</td>
</tr>
<tr>
<td>2</td>
<td>what’s new</td>
</tr>
<tr>
<td>3</td>
<td>site map</td>
</tr>
<tr>
<td>4</td>
<td>search</td>
</tr>
<tr>
<td>5</td>
<td>FAQ’s</td>
</tr>
<tr>
<td>6</td>
<td>help</td>
</tr>
<tr>
<td>7</td>
<td>complaints procedure</td>
</tr>
<tr>
<td>8</td>
<td>terms and conditions</td>
</tr>
<tr>
<td>9</td>
<td>feedback form</td>
</tr>
<tr>
<td>0</td>
<td>access key details</td>
</tr>
</tbody>
</table>

If you extend this system, don’t use additional keys that are already in use by browsers for accessing menus. For example, Microsoft Internet Explorer uses ‘alt h’ to drop down the help menu – other keys used for menus in MSIE and Mozilla Firefox are A, B, E, F, G, T and V.

### 4.4 Construction

#### 4.4.1 Hierarchical structure

NHS websites should have a hierarchical structure, as this is more flexible, expandable and easier to manage than a flat structure.

Have one sub-directory as a central repository for images on the site; this ensures that images and graphics are saved just once and it is easy to
manage subsequent HTML linking. Also consider a central sub-directory for all downloadable documents.

### 4.4.2 Page structure
Each page should stand-alone and also be identifiably part of the site. Users may not come through the homepage to get to the page – they may have bookmarked it, used a search engine or seen the page’s URL in a newspaper or publicity material. Such users won’t have seen your introduction, may not understand your navigation system or even know who the site owner is.

### 4.4.3 File naming conventions
The file naming conventions below are HTML best practice. Follow the conventions, as they will ensure a consistent approach across our sites:

- file names should be all lowercase, as this reduces the risk of broken links;
- file names should be continuous, i.e. with no gaps in the file name;
- file names that are split should use the hyphen character (-): don’t use any other punctuation in file names;
- file names should be descriptive and be a maximum of 50 characters; and
- HTML file extensions (e.g. htm, html, shtml) must be specified and adhered to.

### 4.4.4 Graphics and management
The following technical guidelines apply to using and managing graphics.

- JPEGs and GIFs are the recommended formats. The PNG format is not yet readily supported, so avoid it where possible.
- Images that use a limited palette should be GIFs and should be generated using the web palette.
- A single image should not be larger than 30kb. If you use larger images, warn the user and display the file size – use a thumbnail image for preference. Don’t use large images on the homepage.
- Height and width image dimensions must be included in image tags. Use CSS for positioning images and text. Don’t use transparent spacer GIFs or border parameters.
- Animated GIF files should not exceed 30kb. They should cycle no more than four times before stopping.
- Images that include text must include an HTML text version, except where non-Latin characters are used to provide information in foreign languages that don’t have an HTML equivalent.
- If using a small font on an image, make sure the anti-aliasing is turned off to avoid blurred text.

### 4.4.5 Cookies
Cookies are small files that websites send to users’ browsers when a web page is delivered. They allow servers to store and retrieve information, such as preferences or session IDs, from a user’s computer. Whether users are
asked whether to accept cookies is a browser preference setting. There are also two types of cookie:

- **Persistent cookies** - there remain on the users computer for a period of time to allow a website to recognise them when they return and can allow the presentation of appropriate customised pages, for example.

- **Session-specific cookies** - there are deleted when the user closes the browser. These are often used on sites where the user is required to log in; the cookie ensures that the users stays logged in throughout that visit.

If your site uses cookies, it should still work if users decline to accept them.

There are privacy and usability issues to consider when using cookies:

- **Anonymous session tracker**: contains no personal information and doesn’t elicit or store information from users. It is useful in detecting repeat visitors.

- **Session tracker**: relates page and other requests to user preferences stored on the server. There are no additional privacy considerations but you will need additional authentication and data encryption techniques if the application transfers private information over the internet.

- **Cookies containing private data**: cookies that store private or potentially private data should be avoided on NHS sites.

- **Third-party cookies**: advertisers or sponsors providing content on your site may use a cookie to track users across the web. It will use an identity that is unrelated to your DNS server and may impinge upon your privacy policy.

Inform users whether your site is using cookies, of which type, and what they are be used for in the privacy policy of the site.

4.4.6 **Pages under construction**

Never have pages marked ‘under construction’ on a live site. Not only is this annoying for users, it undermines our professional values.

4.5 **Getting users to your site**

Users need to be able to find your information and services. Some people will know your site well but most will rely on search engines and directories to find it. This has implications for the formatting of your site.

4.5.1 **Consistent metadata**

Metadata is descriptive information that enables search and directory systems to categorise data on each page of the site. It can also help with administration, for example, by flagging review dates for content that needs to be updated.

NHS websites should use metadata that conforms to the e-Government Metadata Standard (e-GMS), which is based on the Dublin Core model. Metadata should be added to the top of each HTML file; the description of the page must be relevant to the page’s content.

*Further Help*
4.5.2 Search engines and directories
Search engines use software to visit and collect information from new and updated websites, as well as to maintain searchable databases of web resources. Directories are structured lists of categories maintained by human editors.

People use a range of search facilities so the more services your site is registered with the greater your chances that users will find your site. The Search Engine Report website tells you the criteria that the most popular search engines use. Rearranging the content on a page or restructuring the HTML may make a difference to your site’s search engine rankings.

Regular search engine registration is important and your search engine entries need to be checked on a regular basis. However, registering can be laborious and repetitive, so it is advisable to use an external supplier to do this.

Further help

Search Engine Report: www.searchenginewatch.com

4.5.3 Content certification
Some users set up their browsers to filter out or block pre-defined content. These filters may make some NHS content – for example, sexual health, alcohol or drugs issues – inaccessible to these users.

The W3C Platform for Internet Content Selection (PICS) specification allows web managers to set a certification rating for their content. A filter configured to use the PICS rating system reads the certification rating and only displays the page if it meets the user-defined specifications.

The ICRA system allows the author of a page or site to identify content of the website or document in each of the following categories:
- nudity and sexual material
- violence
- language
- other topics (e.g. tobacco or gambling advertising)
- chat

The rating system uses a neutral binary system, so that elements in each category are marked as either present or absent from the website.

Further help

PICS: www.w3.org/PICS
ICRA: www.icra.org
4.6 Usability

Usability is not about making your site technically accessible. It is about using good design to create a positive user experience. You should test your site with users at regular intervals during its development and evolution.

These pointers will help you to increase the usability of your site.

- Keep things consistent – navigation, look and feel and other key elements should not change. Each page should be readily identifiable with the rest of the site and as ‘belonging’ to your organisation or initiative.
- Be obvious – don’t make users think too hard about what to do next. Make the cues for the next stage or function clear and easy to spot. Make sure that links and labels are not misleading or can be confused with other links and labels on the site.
- Don’t try to be all things to everyone – design your site to focus on the key objectives and audience.
- Be helpful – if you are using error messages, rewrite them so they provide meaningful information to users. Tell them what has gone wrong and what they need to do to complete the task successfully.
- Speed things up – construct your site to minimise download times.
- Watch out for information overload – cut down the text on screen as much as you can. Make sure all text is big enough to be read easily.
- Don’t be too technical – users like good and useful functionality but they’re not interested in how the functionality works! Make sure that the functionality on your site is easy to use.

Further help


4.7 Future considerations

This section outlines some of the ‘new’ technologies that are already with us or that will become commonplace in the foreseeable future.

4.7.1 Dynamic publishing

Dynamic publishing enables websites to deliver personalised content to individual users. Users can customise the content, navigation and appearance of the site against their own preferences. The site can also be customised to work optimally with the user’s browser and Internet connection.

Dynamically published websites usually use databases to store the site’s content, structure and appearance data. They may also include a content management system, which allows website managers to update and manipulate the content of their sites easily. They will also automate much of the routine website management work.

Dynamically generated websites cost much more than static sites. However, for large, national and/or frequently updated sites, there will be savings in
running costs, for example, efficiency gains in managing content updates and changes to the site structure.

### 4.7.2 Digital television

Practically everyone in the UK has access to a television; it is the main source of information and entertainment in the home. Interactive digital television (iDTV) will undoubtedly be a popular way of using the web.

However, compared to a computer display, a TV display is very limited. For example, on average, only 40 words will fit per screen; text takes 25% longer to read on TV and navigation takes much longer. Repurposing content from a website for iDTV will need careful thought and specialist expertise.

### 4.7.3 Other digital media

In an ideal world, a website could be repurposed to allow all channels to use the same content but, unfortunately, this is not always possible. Web managers should be aware that many of the new browsing modes will totally alter the end-view of the website.

Games consoles and PDA browsers can only view a small area at any one time and users can find it difficult to scroll up and down. WAP is a completely different protocol and will not interact with a standard HTML website.

To support all methods of browsing the web, you will need to maintain several versions of a website. Content management systems and XML may well make this easier, but much of the technology is quite new and untested.

### 4.8 Checklist: building the site

- Does the site conform to open Internet standards? Does the site use standard (X)HTML?
- Have the cascading style sheets been validated?
- Is your site accessible? Has it been tested against a range of browsers? Do all the graphics have meaningful alt-text?
- Do the pages download quickly?
- Have you taken the W3C WAI recommendations into consideration?
- Does the site use appropriate metadata?
- Has your site been tested with users?
5 Content

The most important part of your site is the content you provide. Clear, understandable and targeted content is essential to meeting your audiences’ needs and ensuring they return to your site.

5.1 Minimum content requirements

All NHS organisations have a core set of information that must be held and regularly updated on www.nhs.uk. This information can be replicated as necessary on an organisation’s own website. Make sure there is no discrepancy between the content on your own site and nhs.uk.

As a general outline, NHS websites, including staff-facing sites and those associated with publicity campaigns or other initiatives, should contain:

- an NHS logo and use the nhs.uk web address;
- full contact details for the organisation that owns and/or manages the site;
- a clear statement of the purpose of the site and an outline of the information and services it provides; and
- any policies, such as terms and conditions, privacy policies, etc. that are relevant to the use of the site.

It is also worth considering these content areas:

- about us – explain your organisation or campaign’s objectives and responsibilities
- site map – enable users to orientate themselves to your website’s structure
- what’s new – highlight new content to encourage users to return to your site
- help – provide useful tips on how to use the site
- search – provide a link to the search facility from every page
- access keys – help people with limited mobility to navigate the site.

5.2 Presentation

- Do not use large blocks of italic or all-caps text, as it is difficult to read.
- All-caps text is also likened to shouting at your audience.
- Avoid underlined text – it can easily be confused with a link.
- Never use flashing or scrolling text as it contradicts our communication principles and may not be visible to those with older technology.

5.2.1 Scannable text

Users don’t read web pages word for word. Instead, they scan for key points, so text must help scanning and comprehension – as well as those who use assistive technology. Users should be able to make sense of text on their first reading.

The following pointers make text easier to understand:
• summarise the key points in the first paragraph;
• put the most important point first, and the rest in descending order of importance;
• cut text down to at least 50% shorter than the print equivalent;
• break text up with clear headings and sub-headings;
• use bullet point lists where possible; and
• make sure that each page makes sense in isolation in case the user has not seen the rest of the site.

5.2.2 Plain English pointers
Think about the audience you are writing for and use the words you would use if you were speaking to them. This will help you write clearly and succinctly in a way that they will easily understand.

The following points will help all users understand your meaning:
• don’t use long or difficult words when shorter or simpler ones will do;
• avoid jargon and explain any technical terms, even if you think your audience will understand them;
• avoid words that can have more than one meaning;
• use the active rather than passive voice;
• use short sentences containing one main idea - sentences in a paragraph should have a common theme;
• use minimum punctuation, preferably just commas, capitals and full stops
• only use capital letters where they are really needed - avoid acronyms and abbreviations;
• never assume the gender of your reader – use ‘they’ or include both genders.

5.3 Links policy
Links enrich the content of any website and users find them valuable, especially when set in context. We recommend that links are provided on the page itself, rather than on a separate ‘Useful links’ page.

Links within body text can be distracting so insert links after the text they relate to. Make sure your links are relevant to the copy they follow. Ensure that the actual text of the link would make sense if taken out of the context of the preceding copy.

Make sure that links are easily recognisable and consistent throughout the site – do not use different colours for each section of a website, for example. Consider following the established convention of highlighting them in blue, underlined text and reserve this style just for links.

Check regularly for broken links and ensure that links go to the expected page or site. Make sure the site has an easy-to-use way for users to report link problems.
5.3.1 Where to link
All NHS sites should link to nhs.uk and NHS Direct Online (www.nhsdirect.nhs.uk) from the home page.

If you wish to obtain a copy of the NHS Direct logo, please contact your local NHS Direct communications lead or email sarah.armitage@nhsdirect.nhs.uk

The nhs.uk graphic is available from the NHS Connecting for Health team.

Link freely to other NHS, DH and other government sites, as well as local authority, academic or non-commercial sites. Don’t overwhelm users with links. Make sure they are all useful and relevant.

Take care with controversial issues and areas where there is significant divergence between the NHS and non-NHS organisations. Provide balance give due weight to the official NHS view. However, where the opposing viewpoint is based on poor evidence, rumour, hearsay, or uncorroborated personal opinion, don’t link to sites supporting it.

Many sites publish their links policy on the site. Make sure you follow their guidance on linking to their site. If no guidance is given, contact the web manager for permission to link to their site.

NHS sites should not directly link to commercial sites, unless you are working with a commercial partner. There are two reasons for this:

1. commercial sites may contain biased or unbalanced content (e.g. promoting particular products, services or companies over others). You can deny endorsement through a disclaimer but users may still believe the link implies some level of approval.

2. it would be unfair to link to one commercial site and not its competitors. A perceived ‘NHS endorsement’ could give the owning organisation competitive advantage and it is impractical to link to all competing sites.

5.3.2 Bringing users back to NHS sites
Users can become disorientated or lost when exploring links. In the worst case, they might unintentionally leave your site and be unable to return. There are two solutions to this problem:

1. rely on the user’s ability to use the ‘back’ button on their browser to get back to your site. This is an internet convention but it will be frustrating for users who explore links in depth.

2. open the link in a new window. Your site stays visible and accessible but users can end up with multiple open windows, which may crash some PCs.

5.3.3 Using logos as links
There is no restriction on using logos as links to approved sites. Follow the guidance on using third-party logos in section 3.7. Don’t give out the NHS or your organisation’s logo to any organisation outside the NHS to use as a link without the prior consent of the DH branding team.

Further help
5.3.4 Disclaimers
It is not practical to use a disclaimer wherever there is a link. Hold disclaimer information in one place that is clearly visible, preferably from every page. Alternatively, display a disclaimer message when the user is leaving your site (unless the link goes to another NHS site).

The Government’s web guidelines recommend using this disclaimer:

“[Organisation name] is not responsible for the contents or reliability of the linked web sites and does not necessarily endorse the views expressed within them. Listing should not be taken as endorsement of any kind. We cannot guarantee that these links will work all of the time and we have no control over the availability of the linked pages.”

5.4 Downloadable documents
PDFs are the most common format for downloadable documents: they retain their formatting, are ‘read-only’, so cannot be amended and are compressed, so are smaller than the original files.

When using PDFs, remember to:

- provide a text summary on the web page so that users know whether the document is relevant to them;
- show the size of a PDF file to indicate how long it will take to download the file; and
- offer the Adobe Acrobat plug-in, as some users may not have it.

Further help

4.1.6 Non-HTML file formats – page 16

5.5 Bulletin and discussion boards
Bulletin boards and discussion groups are an excellent way of opening up communication with your audience. However, they need careful thought and management: if you give people the opportunity to tell you what they think, they will expect their views to have a tangible impact. State the purpose of the board or group clearly. Section 6.1.2 has more detail on managing this functionality.

Further help

6.1.2 Moderating discussion groups – Page 36
5.6 Sponsorship and advertising

5.6.1 Sponsorship
Sponsorship is acceptable as part of a joint venture or in-kind support through services or equipment. It must add significant benefit and be an addition to core funding. Where possible, it should be restricted to staff-facing sites.

Any sponsorship arrangement must be transparent and not open to misinterpretation of preferential treatment by suppliers, ministers or the media. Sponsors should not have significant commercial relations with your organisation or initiative.

Sponsors may request that their logo be displayed on your site. See section 3.7 for further details.

Further help

3.7 Using third-party logos – Page 12

5.6.2 Advertising
NHS websites should not carry advertising. Selling advertising space on websites is highly uneconomical in the current climate – it is not easy and needs dedicated, trained sales people. Before advertising on NHS websites can be authorised, we will need to investigate the potential impact on the brand and the resources required to manage this function efficiently.

If you commission an external supplier to design and build your website, they may ask for a credit to be displayed. As this is a form of advertising, you should refuse such requests.

NHS websites are not barred from buying advertising on other websites. However, it is unlikely that NHS organisations will need to advertise their sites. Websites associated with national publicity campaigns or initiatives may need to advertise on other websites as part of their marketing plan. In this case, take note of the guidance on advertising from the Government Communication Network.

Further help

Government Communication Network:
www.comms.gov.uk/guidance/marketing

5.7 Legal issues

5.7.1 Terms and conditions
The terms and conditions set out the management policies and procedures for how a website is run. They detail the responsibilities of both the management team and/or site owner as well as the users.

Terms and conditions should be clearly visible to users. They can include statements on:

- use of your website;
- intellectual property;
5.7.2 Copyright

Copyright is an intellectual property right and in the UK it automatically applies to original work. Copyright doesn’t protect ideas or facts, just their presentation.

NHS organisations own their copyright status and they are not necessarily covered by Crown copyright, unless it is specifically signed over. Websites commissioned by DH are covered by Crown copyright. Her Majesty’s Stationery Office (HMSO) can provide guidance on copyright.

If you commission content from a supplier, make sure that copyright is assigned to your organisation as part of the contract. If you have permission to use material or images, make sure it covers use on the internet. For example, if you have used a photograph of a patient or member of staff etc. in a leaflet, annual report or other document, you must seek further permission before publishing the document on the web. It is advisable to get all permissions in writing.

If you provide a copyright statement, it should state how material can be reproduced and tells users where to apply if a licence is required. You should also identify any copyright material owned by third parties (for example, photographs) in situ.

Further help

HMSO: [www.hmso.gov.uk](http://www.hmso.gov.uk)

5.7.3 Defamation and Libel

Any content on your site that could injure a person’s reputation should be thoroughly checked. Seek legal advice if you are unsure. If there is any doubt, remove it from the site until a properly informed decision is reached. This will help preserve available defences such as innocent dissemination.

5.7.4 Data Protection Act

The Data Protection Act covers processing of individuals’ personal information, including obtaining, holding, use and disclosure of such information. It covers information published on the site, as well as information you might gather through the site, for example, through feedback mechanisms and usage data.

- Information that you have on or collect through the site must only be used for the purpose for which it was obtained.
You should specify the purpose on the site and, where possible, give users the opportunity to ‘opt out’ of the data collection.

You should not collect or store more personal data than you need for the specified purpose.

All personal information should be accurate, up-to-date and available to the individual on request.

For further information on issues relating to data protection please contact your local data protection lead.

5.7.5 Disability Discrimination Act
The Disability Discrimination Act requires us to make adjustments to our websites if they are unreasonably difficult or impossible for disabled people to access. By following these guidelines and working towards the WAI level A rating, NHS sites should not need to make further adjustments. However, user feedback may be useful to highlight ‘problem’ areas on your site.

Further help

4.2 Accessibility issues – Page 16
Disability Rights Commission: www.drc-gb.org

5.8 Other languages
Most web content is written in English, yet we serve a large number of users who speak English as a second or third language and may not be able to read it at all.

If you are considering providing information in other languages, first weigh up:

- the advantages of providing this content on the web;
- the size of the audience who will use this content;
- your ability to source and manage foreign language content; and
- the budget implications.

If you do publish content in other languages, remember that:

- all languages do not translate word-for-word – a paragraph in English could be 30% longer in German and 40% longer in Hindi;
- some languages – for example, Urdu and Arabic – are read from right to left;
- each language should have a bookmarkable index page;
- not all web browsers can display a wide range of character sets; and
- not all character sets can be published in standard HTML formats - you may need alternatives such as PDF.

Unless your organisation, campaign or initiative covers Wales as well as England, you do not need to provide content in Welsh.
5.9 Checklist: content

- Have the minimum content requirements been covered? Does it match what is held on nhs.uk (if appropriate)?
- Is your content easily scannable and written in plain language?
- Have you followed the links policy? Do you have links to nhs.uk and NHS Direct Online from the homepage? Are there any broken links on the site?
- Have you complied with the sponsorship and advertising policy?
- Are the legal issues covered? Has copyright been assigned appropriately? Have the data protection issues been covered?
- Do you have a bookmarkable index page for each non-English language?
6 Managing your site

6.1 Information and content management

6.1.1 Effective content
As well as having a stable of reliable content providers, you should also have controls to ensure that submitted content:

- is cleared for publication;
- meets editorial standards;
- is in line with overall communication strategy;
- is reviewed regularly by the information provider;
- is removed or archived when appropriate; and
- is easily accessible, navigable and has no broken links.

6.1.2 Moderating discussion groups
Your hosting service may be able to host this functionality but you may have to use another service provider. However the service is delivered, it will have to be well managed and moderated, especially if it is available to all users.

An open discussion allows anyone to take part. Access to a closed group is by invitation only. Participation in closed but read-only groups is by invitation only, but everyone can read the contributions.

The site publisher is liable for comments posted on a discussion group or bulletin board. You will need clear ground rules, known as an Acceptable Use Policy, which users sign up to before participating.

Most discussion groups have policies that forbid the following:

- insulting, threatening or provocative language;
- inciting hatred on the basis of race, religion, gender, nationality, sexuality, etc.;
- swearing, hate-speech and obscene or vulgar comments;
- libel, condoning illegal activity, contempt of court and breach of copyright;
- spamming, i.e. sending the same comment repeatedly or across groups;
- advertising and product or service endorsement;
- impersonating or falsely claiming to represent a person or organisation;
- posting in a language other than English;
- invading a person’s privacy; and
- posting off-topic comments.

You also need to moderate the board or group. There are two options:
1. post-moderation, or checking comments after they have been published. This risks inappropriate material sitting in your group for some time. However, it does allow the group to be fast moving and is less of a drain on resources.

2. pre-moderation, or checking comments before they are published. This reduces the risk of publishing offensive comments; however, you may need to employ a full-time moderator or make participants wait a long time for their comments to appear.

6.2 Operational management

6.2.1 Effective day-to-day operation
Your web team’s broad responsibilities should include:
- maintaining the integrity of the website’s structure, content and availability;
- publishing content and ensuring its consistency and accuracy;
- setting and maintaining your organisation’s style guidelines for the web;
- managing the contract with the hosting service;
- monitoring bandwidth availability and usage statistics; and
- keeping internal stakeholders informed of performance against targets.

6.2.2 Contingency planning
Contingency plans should cover both technical resilience and public relations. You may want to use the site to react quickly to public-interest stories. Make sure that the site is factored into your emergency communication procedures and that your hosting service can cope with a sudden increase in the number of visitors.

Equally, contingency planning should provide disaster recovery processes to restore service if your server is compromised.

6.2.3 Establishing a security policy
A security policy will ensure that your website:
- respects the privacy of individuals, as required by legislation
- undertakes a duty of care towards information provided by users
- does not release sensitive information to the wrong people
- does not damage the reputation of your organisation.

A robust security policy will cover software and hardware, day-to-day operation, access control, published content and business interruption. It will probably cover risk assessment, technical and legal rules for users, procedures and practices for dealing with e-transaction information, and procedures for password generation and use.

Make sure your web server security is checked. Include its application, operating system, local area network, database applications, domain name server (DNS) and remote administration.
6.3 Evaluation and ongoing development
Evaluating all aspects of the site regularly will help you to:

- show value for money
- demonstrate success in meeting users' needs
- plan the evolution of your site.

6.3.1 Web server log limitations
Web server logs provide detailed information about visitors, visit duration, popular and unpopular content, referring websites, navigation routes, site errors, bandwidth use, and technical preferences such as browser type. However, there are limits on the reliability of this data.

Most ISPs use dynamic IP addressing. This means they loan out an IP number for the duration of each dial-up call. An IP number can be used by different users and users can use the site website using different IP numbers.

Most ISPs use perimeter caches to conserve bandwidth and improve the download speed for users. Perimeter caches store a copy of pages fetched by users’ systems. Requests for these pages from other users are served from the cache and not from your website. Therefore the server log file won’t capture all the visits to the page.

Some organisations assign proxy devices dynamically during a user’s internet session. This means that a sequence of page requests from a single user may appear to come from several users during the course of one visit.

Some clients use anonymisers, which deliberately send false browser and referrer data to a website.

6.3.2 Checklist for auditing and statistical analysis
Regular analysis of these items will provide good data on performance and usage:

- standards of performance over 28.8 and 56.6kbit/s modems using an open line and domestic ISP/hosting service. This will replicate the access experience of large numbers of users;
- access levels with different browsers and screen resolutions and with features such as scripts and images disabled;
- broken links and error messages;
- traffic analysis, focusing on peak times and dead times, to assess bandwidth requirements and optimal times for maintenance; and
- server log file analysis, including number of visitors, unique visits, page impressions, successful and unsuccessful page requests, most and least frequently visited pages, top entry pages, top referring websites and types of browsers used.

6.4 Formal documentation
Whether your website is produced internally or by an external agency, we recommend full documentation at each stage. This will be a useful reference both for current team members and future staff.

Additionally, the following processes and procedures will be useful:
• editorial and publishing process;
• HTML production process;
• production process for other document formats;
• house style;
• roles and responsibilities;
• archiving;
• backup;
• management of external suppliers (including hosting);
• records of software and licence agreements;
• record of all domain names and sub-domains registered;
• record of permissions granted by third parties for links to their websites;
• record of intellectual property rights permissions obtained for materials such as text, graphics, audio and video clips; and
• management of passwords.

6.5 Checklist: managing your site

- Do you have an effective content management strategy?
- Is your bulletin board or discussion group moderated effectively? Do you have a clear acceptable use of policy on the site?
- Are the day-to-day operational responsibilities clearly assigned?
- Has the site been integrated into your contingency planning? Do you have an appropriate security policy?
- Will you receive useful data to enable you to evaluate the success of your site? How frequently will the site be evaluated?
- Do you have a full set of management documentation?
7 Further Help

7.1 Department of Health
The communications technologies team is the first point of call for general queries about these guidelines and other issues you may have with your site.

Email: webteam@dh.gsi.gov.uk

The branding team advise on use of the NHS logo and other identity issues.

Email: nhs.identity@dh.gsi.gov.uk

All guidance on the NHS identity policy is held on the DH website.

Web: www.nhs.uk/nhsidentity

7.2 Connecting For Health
The nhs.uk Connecting for Health team run www.nhs.uk, set up nhs.uk web addresses for national sites and can provide an approved graphic for you to link to www.nhs.uk.

Email: dns@cfh.nhs.uk

7.3 Other helpful resources
This is a summary of links from throughout the document.

- Full Guidelines for UK Government Websites: www.cabinetoffice.gov.uk/e-government/resources/handbook
- DH Information Policy Unit: www.dh.gov.uk/PolicyAndGuidance/InformationPolicy/fs/en
- (X)HTML validation: http://validator.w3.org
- CSS validation: http://jigsaw.w3.org/css-validator
- HTML to XHTML tidying tool: http://tidy.sourceforge.net
- W3C accessibility checkpoints: www.w3.org/TR/WCAG10/full-checklist.html
- Search Engine Report: www.searchenginewatch.com
- Content certification: www.w3.org/PICS and www.icra.org
- Government Communication Network: www.comms.gov.uk/guidance/marketing
- HMSO (for copyright guidance): www.hmso.gov.uk
- Disability Rights Commission: www.drc-qb.org
Appendix A: Specimen terms and conditions

Terms and conditions, especially privacy statements, should be clearly visible to all users. If you have any doubts about terms and conditions, seek legal advice.

Copyright
© [Owning organisation] [year of publication]

The material on this site is subject to copyright protection of [owning organisation/the Crown] unless otherwise indicated. The [owning organisation/Crown] copyright protected material (other than the Royal Arms and departmental or agency logos) may be reproduced free of charge in any format or medium for research, private study or for internal circulation within an organisation. This is subject to the material being reproduced accurately and not used in a misleading context. Where any of the [owning organisation/the Crown] copyright items on this site are being republished or copied to others, the source of the material must be identified and the copyright status acknowledged.

The permission to reproduce [owning organisation/the Crown] protected material does not extend to any material on this site that is identified as being the copyright of a third party. Authorisation to reproduce such material must be obtained from the copyright holders.

[Owning organisation] encourages users to establish hypertext links to the site.

Links policy
All links from this website are selected using our links policy. Links are provided for information and convenience only. We cannot accept responsibility for the sites linked to, or the information found there. A link does not imply an endorsement of a site; likewise, not linking to a particular site does not imply lack of endorsement.

You do not have to ask permission to link directly to pages hosted on this site. However, we do not permit our pages to be loaded into frames on your site. The pages must load into the user’s entire window. You must not use the NHS logo to link to our site without prior permission.

Accuracy
Every effort is taken to ensure that the information contained in this website is both accurate and complete.

Availability
We cannot guarantee uninterrupted access to this website, or the sites to which it links. We accept no responsibility for any damages arising from the loss of use of this information.

Intellectual property
The names, images and logos identifying [owning organisation] are the proprietary marks of the NHS. Copying our logos and any other third party logos accessed via this website is not permitted without the prior approval of the relevant copyright owner.
Virus protection
We make every effort to check and test material at all stages of production. It is always wise for you to run an anti-virus programme on all material downloaded from the internet. We cannot accept any responsibility for any loss, disruption or damage to your data or your computer system that may occur while using material derived from this website.

Privacy statements
[Owning organisation] website does not store or capture personal information, but merely logs the user’s IP address that is automatically recognised by the web server.

We do not use cookies for collecting user information and we will not collect any information about you except that required for system administration of our web server.

This system will record your email address and other information if volunteered to us by you. This shall be treated as proprietary and confidential. It may be used for internal review and to notify you about updates to this [owning organisation] website.
Appendix B: Choosing a hosting service

- This checklist is intended to help you when choosing a hosting service. Ask the supplier provides answers in writing and write them into your service level agreement (SLA).
- Are you transferring your existing domain names and your content?
- What type of server and operating system are you getting? What are the performance levels?
- What type of environment is the server in i.e. security, power, cooling, time standards?
- Is support helpful and available 24/7? Is local call rates or email available? Do you have detailed maintenance procedures? Is a named person responsible for support?
- What access speeds can you expect?
- How quickly can bandwidth and server space be expanded and at what cost?
- How often will your site be backed-up and what physical security is provided for the back-up?
- Do you have a documented disaster recovery plan and statement of redundancy?
- Do you have a security statement covering usernames and password protection, virus protection, etc.?
- Do you have a planned response to incidents?
- How often are server log files and traffic analysis reports provided? Are they available server-side?
- Do you have site update procedures?
- Do you have an option for a secure socket server connection?
- Do they provide email accounts and list server facilities?
- Can databases be integrated into your facility?
- Do they provide facilities to host discussion groups?
- What are your integrity and availability requirements?
- Have costs been broken down into details such as buying or leasing licences?
- Are you using cookies? Do the hosting arrangements fully comply with your published privacy statement?
- How much is the service going to cost?
Appendix C: NHS web colour palette

Colour can be used on websites to create different looks whilst still clearly remaining NHS in terms of its tone and appearance.

The palette shows the range of colours available to use within the NHS identity.

The palette is in two sections:
• core
• supporting

This section provides guidance and examples on how colours can be used to develop an NHS website.

Core Palette

<table>
<thead>
<tr>
<th>Colour</th>
<th>HTML Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS Blue</td>
<td>#0066CC</td>
</tr>
<tr>
<td>Black</td>
<td>#000000</td>
</tr>
<tr>
<td>White</td>
<td>#FFFFFF</td>
</tr>
</tbody>
</table>

Core palette

The core palette consists of white, black and NHS blue.
This palette forms the basis of all NHS website design schemes, giving it a uniform and cohesive look.
Backgrounds to body copy should always be white.
Navigation areas should be primarily in either white or NHS blue.

Supporting palette

The supporting palette provides two ranges of colour, primary and secondary, that can be used together to highlight and differentiate parts of the website.

Primary colours are for use with the core palette colours to highlight key information on a web page.

Secondary colours are used to break up sections within the website and help to make sure that the primary colours are never more prominent than the core palette.
Example One (Home Page)

Example 1 reflects a more formal look to an NHS website, using the NHS Blue from the core palette, with supporting blue of the secondary palette.

Feedback
Your view on the site
Services
Hospital Services
Community Services
General Practitioners
Social Services
Patient & Carer Support
Voluntary Orgs
Local NHS Trusts
Healthy Living
Health Improvement
Health Promotion
My Health
Patient Information
Patient Advice (PALS)
Publications: FDI
Leaflets ON-LINE
Anytown CSA
General
Vacancies
Maps & Directions
Useful Links A-Z
Help
Health Professionals
Clinical Coding Templates
Anytown Practice
Information Governance
Internal Audit Training

Welcome to
Anyshire Health Authority

What’s new...

**National Sexual Health and HIV Awareness Campaign.**

*Lorem Ipsum* - is simply dummy text of the printing and typesetting industry. *Lorem Ipsum* has been the industry’s standard dummy text ever since the 1500s.

**Monthly Topic...**

**“Just eat more (fruit and veg)”**

*Lorem Ipsum* is simply dummy text of the printing and typesetting industry. *Lorem Ipsum* has been the industry’s standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type.

**Voluntary Organisations**

*Lorem Ipsum* is simply dummy text of the printing and typesetting industry. *Lorem Ipsum* has been the industry’s standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book.

The homepage should primarily use the core colour palette of NHS blue, black and white. This will demonstrate a clear relationship with the NHS.

In this example, the navigation bar uses the NHS blue with its supporting secondary blue to differentiate the sections and sub sections within them.

Feedback Vacancies
Site Search
Telephone Directory
Hospital Services
Community Services
Around Anytown
Find GP
Find Dentist
Find Pharmacy
Find Optician
Find Hospital

Your logotype should be clearly displayed on a white background on every page. The usage of the identity must follow the main NHS corporate guidelines.

It is advisable to illustrate the search box in a different colour. This will help differentiate this valuable navigation tool from your own specific information.

The quick access navigation bar uses the NHS blue with its supporting secondary blue to differentiate the titles from the subjects.

Reference links to the main NHS site and to NHS Direct should be clearly displayed on the homepage.
Healthy Living

Healthy Improvement
Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s,
- Contrary to popular belief
- Lorem Ipsum is simply
- Dummy text of the printing and typesetting industry
...more

Health Promotion
- Lorem Ipsum has been the industry’s standard dummy text
- Ever since the 1500s
- When an unknown printer took a galley of type
- and scrambled it to make a type specimen book
...more

My Health
Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived not only five centuries, but also the leap into electronic typesetting.
...more
Healthy Living

Health Promotion
Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s,
- Contrary to popular belief
- Lorem Ipsum is simply dummy text of the printing and typesetting industry
- Lorem Ipsum is simply dummy text of the printing and typesetting industry
- Contrary to popular belief

BBC Health
- Lorem Ipsum has been the industry’s standard dummy text
- Ever since the 1500s
- When an unknown printer took a galley of type and scrambled it to make a type specimen book
- ...more

Acupuncture
Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived for more than five centuries unchanged.
...more

Herbal Medicine
Alternative Medicines - Herbal Medicine
Health World On-line

Reflexology
Advanced Reflexology Training
British Reflexology Association
International Institute of Reflexology (UK)
Reflexology Clinic
Welcome to Anyshire Health Authority

What's new...

National Sexual Health and HIV Awareness Campaign

Lorem Ipsum - is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s.

Monthly Topic...

"Just eat more (fruit and veg)"

Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book.

Voluntary Organisations

Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book.

Reference links to the main NHS site and to NHS Direct should be clearly displayed on the homepage.
Healthy Living

Healthy Improvement
Lorem Ipsum has been the industry's standard dummy text ever since the 1500s,
• Contrary to popular belief
• Lorem Ipsum is simply
• Dummy text of the printing and typesetting industry
...more

Health Promotion
• Lorem Ipsum has been the industry's standard dummy text
• Ever since the 1500s
• When an unknown printer took a galley of type
• and scrambled it to make a type specimen book
...more

My Health
Lorem ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived not only five centuries, but also the leap into electronic typesetting.
...more
Example Two (Sub Section Page)

Healthy Living

Health Promotion

Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s, • Contrary to popular belief • Lorem Ipsum is simply dummy text of the printing and typesetting industry • Lorem Ipsum is simply dummy text of the printing and typesetting industry • Contrary to popular belief

BBC Health

• Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s • Ever since the 1500s • When an unknown printer took a galley of type • and scrambled it to make a type specimen book • ...more

Acupuncture

Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived for more than five centuries unchanged. ...more

Herbal Medicine

Alternative Medicines - Herbal Medicine Health World On-line

Reflexology

Advanced Reflexology Training British Reflexology Association International Institute of Reflexology (UK) Reflexology Clinic

When you select a sub section within the the section ie. Health Promotion within Healthy Living - the sub section title changes to green and the background to white.

Within a sub section the section header is still clearly displayed in a solid green header block at the top of the page.

The sub section you are in is shown in bold and green directly underneath the header block.

The section header block is a constant feature on all pages whilst you are in that section. The sub sections below change accordingly.

By following this hierarchy you will ensure that at all times the user knows where they are on the site.

The body copy within the article should be shown in black.

Any links will remain in blue.

To create interest on the page and further use the supporting colour green the titles within the body copy are displayed in the secondary green.
Example Three (Home Page)

Welcome to
Anyshire Health Authority

What’s new...

National Sexual Health and HIV Awareness Campaign
Lorem Ipsum - simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s. ...more

Monthly Topic...

“Just eat more (fruit and veg)”
Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s, when an unknown printer took a galaxy of type and scrambled it to make a type ...more

Voluntary Organisations
Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry’s standard dummy text ever since the 1500s, when an unknown printer took a galaxy of type and scrambled it to make a type specimen book. ...more

Reference links to the main NHS site and to NHS Direct should be clearly displayed on the homepage.

Your logotype should be clearly displayed on a white background on every page. The usage of the identity must follow the main NHS corporate guidelines.

The main navigation bar on the home page clearly displays all the sections within the site and the sub sections within them.

The homepage should still use the core colour palette of NHS Blue, Black and white. This will demonstrate a clear relationship with the NHS.

In this example the navigation bar uses colours from the supporting palette for the section titles. The supporting secondary blue is used to show the sub sections.
A solid red header block is shown at the top of the page to display the section you are in i.e. “Healthy Living”

All sub-sections below are shown in red.

The section header block is a constant feature on all pages whilst you are in that section. The sub-sections below change accordingly.

This ensures that at all times the user knows where they are on the site.
Healthy Living

Health Promotion
Lorem Ipsum has been the industry's standard dummy text ever since the 1500s,
• Contrary to popular belief
• Lorem Ipsum is simply
dummy text of the printing and
typesetting industry
• Lorem Ipsum is simply
• Contrary to popular belief

BBC Health
Lorem Ipsum has been the industry's standard dummy text ever since the 1500s,
• When an unknown printer took a
galley of type
• and scrambled it to make a type specimen book
...more

Acupuncture
Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived for more than five centuries unchanged.
...more

Herbal Medicine
Alternative Medicines - Herbal
Herbal Medicine
Health World On-line

Reflexology
Advanced Reflexology Training
British Reflexology Association
International Institute of Reflexology (UK)
Reflexology Clinic

Within the sub section the section header of 'Healthy Living' is still clearly displayed in a solid red header block at the top of the page. The 'Health Promotion' sub section heading is shown in red and bold type directly underneath the header block. The article headings are shown in the secondary red.
The section header block is a constant feature on all pages whilst you are in that section. The sub sections below change accordingly.