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and grammar

6.3 A-Z guide to style, punctuation

Digital accessibility

8.3 Accessibility in Design

We are committed to the pursuit of excellence in care for those in need, excellence in teaching and research, and a place of opportunity and inclusion for all those with whom we work.

Monash Health Strategic Plan 2018-23

MELBOURNE

We are Victoria's largest public health service

We provide healthcare to one quarter of Melbourne's population, across the entire life span from newborn and children, to adults, the elderly, their families and carers.

More than 18,000 employees work at over 43 care locations across south-east Melbourne, including Monash Medical Centre, Monash Children's Hospital, Moorabbin Hospital, Dandenong Hospital, Casey Hospital, Kingston Centre, Cranbourne Integrated Centre, and an extensive network of rehabilitation, aged care, community health and mental health facilities.

Our Academic Health Science Centre partnership— Monash Partners, and translational research hub— Monash Health Translation Precinct are world renowned for turning scientific discoveries into clinical practice to benefit patients locally and internationally.



Our guiding principles

Our guiding principles reflect our core aspirations, beliefs, and values. They guide our approach to work, our planning and design, our decision making and our behaviour.

- 01 We consistently provide safe, high-quality and timely care
- **02** We provide experiences that exceed expectations
- **03** We work with humility, respect, kindness and compassion in high performing teams
- **04** We integrate teaching, research and innovation to continuously learn and improve
- **05** We orientate care towards our community to optimise access, independence, and wellbeing
- **06** We manage our resources wisely and sustainably to provide value for our community

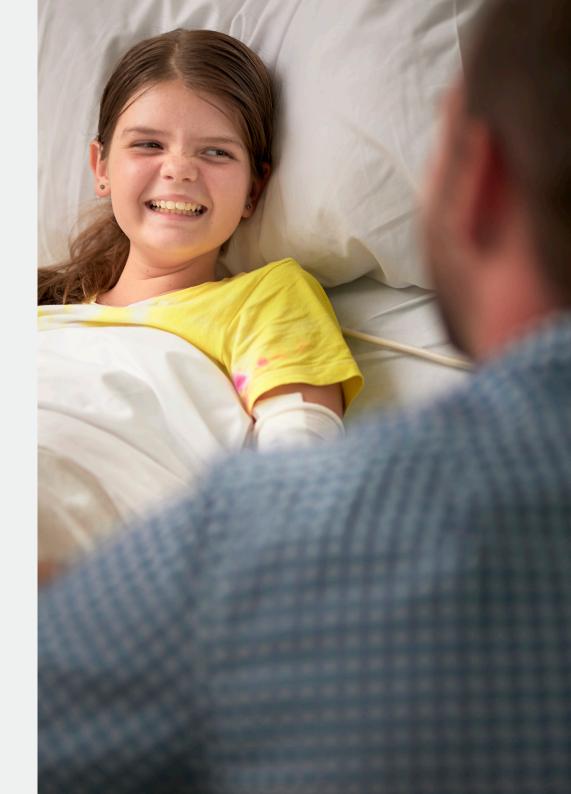


Our identity is much more than a logo

A strong logo is important, but our identity is so much more.

Our identity is not only how we look; it's how we're perceived and how people feel about us. It's every single detail of Monash Health, from our guiding principles, to our people, to the care we provide.

It's also how we engage with our employees, patients and consumers and the environments we work in.



It's all about consistency

The best identities are memorable due to the repetition of the same logo, fonts, colours, and images. Their language sounds familiar, and we know what to expect when we encounter them.

This guide exists to create a common understanding of how the elements of our identity come together, and how to bring it to life when communicating with our people, our patients and consumers, our stakeholders and the communities we serve.

This is a living document and will change as the service it supports evolves. Please ensure you are using the most current version.







onash Health - Identity or idelines

Section 1 Our identity

1.1 Identity architecture

We're a large and sophisticated health service, so we have a system of identities in place to represent ourselves.

Monash Health is our primary identity. It carries the most reputational weight and should be the one we turn to by preference.

Need a logo for your initiative or project?

The primary Monash Health logo is our logo of choice. Initiatives and projects may carry a look and feel that is resonant with their objectives. See section 4: Campaigns.

Unique communication needs will be addressed on a case-by-case basis. If you have any questions or concerns, contact **Public Affairs and Communication**.

Primary identity



Campus Identity



Monash Health Monash Medical Centre



Monash Health
Dandenong Hospital



Monash Health
Casey Hospital



Monash Health
Pakenham Hospital







Service Identities



Monash Health Children's









Monash Health Doctors









Monash Health Imaging











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Section 2 Identity elements

2.1 Primary identity

If in doubt, use this logo.

Our logos are made of two parts, the logo (name and the emblem) and the logomark (just the emblem).

There are three variants of the Monash Health primary identity:

- Full colour.
- Monotone.
- White.

The primary identity can be used in its positive state (colour, monotone) or negative state (white), depending on application.

The primary identity is the highest tier of our brand architecture. The logo is to be used as the leading mark for our communications and should be clearly visible at all times. Use only one of these variants at any given time.

Refer to identity architecture 1.1 for further information.



Full colour

Whenever possible, Monash Health logos should be set in full colour on white or light backgrounds.



Monotone

In situations that do not allow full colour reproductions, a monotone logo using one of the primary colour palette colours should be used.



White

When the logo needs to be placed over a dark graphic or photographic background a white variation of the logo should be used.

2.2 Clear space

Clear space assists to maintain the clarity and integrity of Monash Health logos.

Clear space is the minimum area surrounding the identity elements that must remain free of any other graphic element or text.

Wherever possible, maintain more clear space around the primary identity than specified.

2.3 Minimum size

Minimum size specifications are provided to ensure that logos are reproduced effectively at a small size.



Clear space

A margin of clear space equivalent to half the height of the 'M' is drawn around the emblem to create an invisible boundary of the area of isolation.



Print = 5mm High Screen = 15px High

Minimum size

To ensure the quality of the reproduction is not compromised.

Please ensure logo versions larger than the minimum sizes indicated are used.

2.4 The emblem

The emblem can be applied confidently at scale as a dynamic graphic shape, or subtly as a small icon to extend the visual language of our identity.

There are three variants of the Monash Health emblem:

- Full colour.
- Monotone.
- White.



Clear space is designed to assist in maintaining the clarity and integrity of the Monash Health emblem.

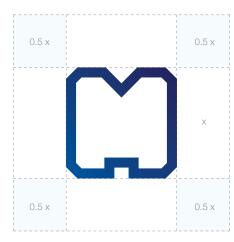
Clear space is the minimum area surrounding the identity elements that must remain free of any other graphic element or text.

Wherever possible, maintain more clear space around the emblem than specified.



Full colour

Whenever possible, the Monash Health emblem should be set in full colour on white or light backgrounds.



⊘ Emblem Clear space

A margin of clear space equivalent to half the height of the 'M' is drawn around the emblem to create an invisible boundary of the area of isolation.







White



Minimum size

To ensure the quality of the reproduction is not compromised. Please ensure logo versions larger than the minimum sizes indicated are used.

2.6 Incorrect usage

Monash Health logos must not be redrawn or altered in any way. We pride ourselves on consistency.

Monash Health logos may only be reproduced in the ways shown throughout these guidelines.

These examples show various ways in which the Monash Health primary identity might be incorrectly reproduced.

Monash Health

DO NOT remove or adjust components.



DO NOT compress, extend, distort or rotate.



DO NOT reproduce logos in alternative typefaces.



DO NOT use logos over complex or dark background imagery.



Monash Health

DO NOT adjust the spacing between elements.



DO NOT alter the colour.



DO NOT use effects such as drop shadows.



DO NOT use logos within a white box component when displaying over complex or dark background imagery.

2.7 Colour palette

The Monash Health colour palette is a key element in creating consistent and recognisable communications.

The colour palette used in the primary identity is mid blue and dark blue.

A secondary colour palette is predominantly for body copy, accent colours and backgrounds.

Tints of the colour palette in 20% increments allow greater flexibility and range of hierarchy. 20% tints can be used as background colours to enable a subtle and neutral tone. 80% tints can be used for large headlines and call-out statements that are visually less dominant than at 100%.

When preparing artwork for Microsoft Office applications (Word, PowerPoint) and online communications please use the RGB values.

Monash Health
Dark Blue

Pantone: 273 C
CMYK: 100-100-25-25
RGB: 37-33-93
Web: #25215d

Monash Health
Mid Blue

Pantone: 2935 C
CMYK: 100-67-0-2
RGB: 0-93-166
Web: #005ca9

Monash Health Teal Pantone: 3272 C CMYK: 100-4-50-0 RGB: 0-163-154 Web: #00a39a

Monash Health **Light Grey**

Pantone: 40% Cool

Grey 1

CMYK: 5-4-4-0 RGB: 240-239-238 Web: #efeeed

Monash Health Primary Gradient

Mid Blue > Dark Blue Blend Transition Point: 50% Angle: 45°

Monash Health Secondary Gradient

Teal > Mid Blue Blend Transition Point: 50% Angle: 45°

2.8 Iconography and illustration style

Icons or illustration can be used to add another level of engagement and understanding to our communications.

They may also help to provide additional insight to especially to non-english speaking audiences..

Stylistically, icons and illustration should be simple and contemporary. Icons must communicate the idea clearly and be easily identifiable. Avoid using angles or three-dimensional elements.

Thick lines with simple detail create a visually impactful graphic style to complement written content.



























































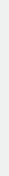












Section 3 Typography

3.1 Primary typeface

Typography plays an important role in supporting the overall look and feel of the Monash Health Identity.

The Primary typeface used across all designed print and communication applications is Helvetica Neue.

Helvetica Neue should be used in sentence case for all communications and display purposes.

3.2 Alternative typeface

Arial should be used to replace
Helvetica Neue in print and
communication situations where
Helvetica Neue isn't available. This
includes on-screen presentations,
internal print templates or where the
user does not have access to, or does
not hold a licence for Helvetica Neue.



ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Helvetica Neue 85 Heavy Suitable for major headings, titles and call to action usage.



ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Helvetica Neue 75 Bold
 Suitable for major headings, titles, sub-titles and call to action usage.

Aa

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Helvetica Neue 55 Regular Suitable for large amounts of body copy.



ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

✓ Helvetica Neue 45 Light Suitable for large amounts of body copy.

3.3 General use (Office documents, email etc)

Calibri is used in day-to-day operational communication and is the default font in Monash Health's Microsoft Office suite and Outlook email client.

Calibri should be used in documents for an internal audience, documents with a limited distribution and documents with a short lifespan. This includes many common documents, such as:

- emails, memos and letters
- meeting agendas and minutes
- papers and reports
- opolicies and procedures
- onotices, posters and presentations.

3.4 Digital/web use

Roboto is used as an alternative font for Helvetica. It is supported on most browsers, and on most devices. This ensures Monash Health's identity is displayed consistently across all the channels our audience uses to connect with us.



ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Calibri Bold

Suitable for major headings, titles and call to action usage.

Aa

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Calibri Regular
 Default office templates usage only.

Aa

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Calibri Light Suitable for major headings, titles, sub-titles, large slabs of copy and call to action usage.

Aa

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Roboto Bold Suitable for major headings, titles and call to action usage.

Aa

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 12345678690!@#\$%^&*(<>:"?)

Roboto Regular

Suitable for major headings, titles, sub-titles and call to action usage.

3.5 Treatment

The treatment of our typography is flexible and adaptive, but there are some key requirements that should be adhered to.

Headlines and large callout statements are to be in bold. Sub-headings can be in a tint of the colour or in a lighter weight to create a visual hierarchy. Our primary colour palette or gradient can be used; the gradient can be adjusted to achieve the desired result.

Body copy can be in light or regular weights, with paragraph headings in bold or regular weights. With regard to colour, dark blue, black or 80% black can be used to ensure legibility at small sizes.

Overall, tracking and line-height should be tight, with headlines and large callout statements slightly tighter than body copy.

We are relentless in our pursuit of excellence.

For more than 165 years Monash Health and its predecessors have been caring for the people of Victoria.

Today, we are proud to be recognised as a leading teaching and research health service of international standing – our reach is far and our impact is profound.

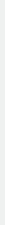
We are relentless in our pursuit of excellence.

For more than 165 years Monash Health and its predecessors have been caring for the people of Victoria.

Today, we are proud to be recognised as a leading teaching and research health service of international standing – our reach is far and our impact is profound.

Typography Treatment

A strong hierarchy is a powerful way to make your content easy to understand. A large, easily readable headline helps your audience recognise what your document is about quickly. Headings and subheadings make it easy to identify which content is important, and navigate the document easily.



Monash Health - Identity quidelines

Section 4 Campaigns

4.1 Campaigns

Campaigns are a series of activities intended to achieve a specific goal, for example, to reduce workplace injuries.

They carry a look and feel that is resonant with the identity they support. These will be developed on a case-by-case basis with the Public Affairs and Communication Team.

Campaigns will bear the primary or secondary logo where appropriate.

Do not develop new logos for campaign purposes.







For more information, ask one of our friendly team members. www.monashhealth.org/EMR









Coologing with Cooling

Section 5
Photography

5.1 Candid portraiture

For use in campaigns or as reusable assets such as headshots.

Mood/style: Friendly, happy, open, bright.

- Subject to be main focus, isolated by tone, depth of field or framing.
- Subject not looking at camera.
- Soft lighting preferable, avoiding midday sun or fluorescent lighting.
- Flash to be used where possible (soft-modified only).
- Environmental portraiture preferred, however when clear backgrounds are needed, mid-grey backgrounds should be used/created.
- Gradient backgrounds are allowed, however avoid using flat white (RGB: 225,225,225 and below), as it looks artificial.









5.2 Posed portraiture

Illustrative, for use in stories about people or as heroes in campaigns.

Mood/style: Intimate, warm, unobtrusive.

- Soft light, window light preferred.
- Subject looking directly at camera.
- Can be low-key* if a tender mood is sought, however the mood must never be gloomy.
- Olours to remain bright where possible, even in low-key images.
- PC/EMR monitors to be blank or showing non-sensitive screensaver.









^{*}Refer to section 5.6 for detailed technical information.

5.3 Factual/descriptive architectural

For use in official documents when a campus or facility is being referenced.

Mood/style: Bright, inviting, bold, open.

- When shooting exteriors, ensure clear skies only.
- When shooting interiors, ensure spaces are light and open. All lighting on, blinds open, flash where necessary. If fluorescent lighting present a flash must be used.
- ✓ Mid-high key* only.
- Avoid capturing identifiable details. For example, visitors' faces, car registration plates must be blurred in post-production.



^{*}Refer to section 5.6 for detailed technical information.

5.4 Illustrative/stylised architectural

For decorative use, can support factual/ descriptive images but must not be used as main visual descriptor of site.

Mood/style: Innovative, bright, abstract, clean.

- Skies can contain light cloud, however these must be white.
- Colours must remain bright. No black and white (historical images excluded).
- Strong emphasis on architectural details and abstract forms should be observed to help increase stock library.
- ✓ Mid-high key* only.
- Avoid capturing identifiable details. For example, visitors' faces, car registration plates must be blurred in post-production.



^{*}Refer to section 5.6 for detailed technical information.

5.5 Equipment/assets

Images of equipment/assets used by Monash Health employees.

Mood/style: Warm, inviting, operational, easy to use.

- Wherever possible item must be imaged in use, preferably by those who will be using it most
- ltems must be on and operational.
- Item must be isolated from rest of the scene tone, depth of field or framing.
- PC/EMR monitors must have blank or non-sensitive screensaver information; no patient details.
- Avoid stock imagery or isolating white backgrounds where possible.









5.6 General guidelines

The following outlines some general guidelines to keep in mind when shooting imagery for Monash Health.

Natural light

Where flashes or hot professional lights cannot be employed, sourcing natural light which is both directional and soft is crucial. Examples of high quality natural light include large windows or doorways, sunrise/sunset light, cloudy outdoor areas (with soft shadows), beneath shade cloth or in general, non-dappled shade. Situations to avoid include high-contrast outdoor scenes, backlit areas, areas lit exclusively by overhead fluorescent lighting.

High Key

Traditionally achieved using flash lighting on bright backgrounds, high-key images are those images which contain predominantly brighter luminance and lighter tones. While typically described in fashion terms, higher key imagery can be implemented for happier, brighter campaigns. This style benefits greatly from a subject that projects the mood sought. For example, a success story involving the children's hospital benefits from a high-key image of a child playing outdoors.

Mid Key to Low Key

Mid to low-key lighting is achieved by either creating a balance between light and dark tones (mid-key) or leaning towards darker tones in an image (low-key).

The two styles are traditionally employed in portraiture and

more serious campaigns. Appropriate uses may include campaigns involving more serious issues and portraiture in which the subject is to be isolated on a darker background.

5.7 Technical tips

There are a few technical tips to keep in mind when shooting imagery for Monash Health collateral.

Use the right equipment

Refrain from using a camera phone to capture photography or video. While the images may look fine on a 5 inch screen held far from your face, the quality drops dramatically for larger formats, print poorly and the image files often lack the capacity for editing. While the fad of 'portrait mode', a fake depth of field filter, is becoming quite popular it is a software trick that becomes apparent on larger scales and irreparably damages the resolution of the image. A wDSLR or mirrorless camera paired with a kit lens should be used at minimum and produces a more reliable result. Always shoot in RAW+JPEG mode keeping a raw file is akin to keeping your negatives back in the film days.

Less is more

Minimise clutter in all your shots. Removing nametags, paperwork, posters and any other distracting or colourful elements of a background is helpful. A shallow depth of field helps separate a subject from the background – the background blur created using an aperture of lower than f/4 (f1.4, f2.8, etc) can assist in hiding distractions and highlighting the subject of the image.

Find a nice spot

Finding suitable photo locations generally involves finding shade or a large window for soft light and taking account the background. Generally it's best to avoid areas that are poorly lit and may contain clutter and/or people walking through the shot, such as fluorescent-tube lit hallways in older buildings. Better choices include tidy meeting rooms with windows, or newer buildings with large, clean and naturally lit open foyers. Try to shoot with your subject facing in to the light - cameras on 'auto' mode will almost always give you a silhouette if the window or light source is behind your subject.

Composition

Where your subject is placed in a frame is important. While looking through a viewfinder, consider centering your subject or placing them where lines meet when applying the 'rule of thirds'. To help out the graphic designers, take multiple shots with the subjects placed on the other side of the frame and centered so they have options when it comes to placement and cropping in a document. Fill the frame with your subject – especially for social media. In the news business it's called 'tight n' bright', and holds a viewer a lot more than a shot with too much negative

Bland group shots

While it's great to get a shot of everyone so they can have a copy, it's rare that such a shot is visually engaging. The more people in a frame, the smaller everyone is and the less points of interest there are for the viewer. The better option is to zoom in on interesting characters (kids and/or people of importance are usually a safe bet) and champion them as an example of what you're trying to describe.

Stock photos

Stock photos are an option of last resort – a photographer should always be engaged where possible for any custom imagery. Stock photos, while often well-crafted, can be generic and sometimes obviously stock-based. This is disengaging to a targeted audience and can appear unauthentic.

5.8 OHS compliance for image capture in clinical settings

Images/video containing employees must:

- show all personnel wearing protective equipment (eye wear during procedures, gloves, etc)
- not show fake nails
- ensure trimmed nails, masks and eye wear in theatre
- feature closed toe shoes only
- ensure blank name tags are in use
- not feature jewellery
- not show scrubs in non-clinical areas
- not show long sleeved shirts, windcheaters or scarves in clinical areas
- not show personal belongings in shots (bags and phones on tables, for example)
- not show laptops featuring emails in background.

Images/video containing patients must:

- ensure consent obtained from patient and or carer/ family member
- ✓ hide or tuck away IV tubing or cabling
- ensure cot sides are up for children and down on beds for adults
- have patients always wearing appropriate footwear and clothing
- never show patients photographed alone in ICU.

Environment should show:

- rooms to be clean and tidy
- patient call bell within reach
- bed tray table is reachable and water jug is full
- bins that aren't overflowing with waste
- areas that are hazard-free such as trip hazards, hanging cords or items that children may be able to
- clear emergency exits and safety equipment, such as fire extinguishers that aren't blocked
- nothing on the resuscitation table
- glove holders, hand sanitiser and paper towel dispensers all full
- communication boards with display writing (nothing that will identify patients)
- whiteboards clear of sensitive information
- current publications/flyers only are visible (such as in a waiting room)
- nurses stations free of visible patient information\
- no linen on ground
- no loose medication, syringes, medical consumables left by the bedside area
- no paper on walls that can't be wiped clean laminated only.

5.9 Using images

When taking your own photographs is not possible, there are a number of ways you can legally source high quality images for use on patient information and promotional material.

Sourcing images

Monash Health online image library

The Monash Health Image Library has an extensive range of high-quality photographs which are available for use on patient information and promotional material.

Go to: monashhealth.imagegallery.me/

Click on 'register' to sign up to use the Image Library.

Once granted access permissions, you'll be able to search and request images.

Taking images from the internet

All images on the internet are covered under copyright. This means you need to check what the terms of use for the image is – guidelines for using text and online images can usually be found under 'terms of use' on a website.

If you can't find any instructions or guidance related to using the image, or are not able to ask for permission from the creator, you must not use that image.

You must credit the author or creator of an image even if you were granted permission to use it.

Images that are royalty-free or covered under licenses are acceptable to use without permission.

Refer to **copyright.com.au** for useful information about copyright myths.

Stock images

If you believe stock images are required, please contact the Public Affairs and Communication team before making any downloads or purchases.

General requirements for images

Natural

Images should preferably be natural and not overly manipulated

Useful diagrams

Vector/cartoon style images are not appropriate unless required for a specific purpose, e.g. a diagram showing digestion in a nutrition document

Illustrative

Where possible, images should add value to the content and not be purely decorative

No clipart

Clipart is not to be used on any Monash Health publications, including online and printed material

Copyright

You must have permission to use images sourced from third parties e.g. images downloaded from the internet must be royalty-free (refer to 'Sourcing images').

For more information

If you need further advice on the use of images, please email **communication@monashhealth.org**





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Section 6 Our voice

6.1 Our voice

Caring, trustworthy and relentless in the pursuit of excellence.

Monash Health's voice is human. It's familiar, straightforward and caring. We communicate confidently about the future, and we are purposeful in pursuing excellent outcomes. Our messages respect our audience by getting to the point and being clear about what we want them to think, feel, do or know.

Our voice is:

- informal but not unprofessional
- straightforward but not insensitive
- caring but not sentimental
- confident but not arrogant
- optimistic but not unrealistic
- intelligent but not pretentious.

Foundational elements

Audience-focused

We put our audience first and communicate clearly.

Consistent

We communicate consistently to reinforce our identity.

Inclusive

We foster an inclusive environment free from bias and discrimination, and this includes the language we use.

Straightforward

We use modern, everyday language that is easy to understand with clear calls to action.

Tonal elements

Authentic

We stick to our values, and we tell the truth—always.

Caring

We are kind, friendly and conversational, but always professional.

Definitive

We are experts who communicate with authority, confidence and humility.

Purposeful

We pursue excellence in everything we do.

6.2 Bringing our voice to life

Plain language

We serve a diverse community who speak 150 different languages, so we need to communicate in a way that most people understand.

Where possible, we:

- use simple words
- use short sentences
- avoid jargon and slang, and
- use the active voice.

Scannable content

We make content easier to read and understand by: using informative headings and sub-headings by:

- creating lists
- writing short paragraphs, and
- placing hyperlinks on separate lines.

Inclusive language

We foster an inclusive environment free from bias and discrimination—this begins with the language we use. We:

- say 'you' and 'your' when talking to consumers, employees and the community
- use 'we' when referring to Monash Health as an organisation
- ✓ use simple contractions like 'you're' or 'you'll'

Referring to employees

Use 'employees' or 'people' rather than 'staff', except where the word appears in a job title.

Referring to patients and consumers

We have both 'patients' and 'consumers'. Use your judgment as to which is most appropriate for the context. This may involve referring to 'patients and consumers'.

Referring to culturally diverse people

'Culturally diverse' is the way we refer to people from culturally and linguistically diverse backgrounds.

Sexuality and gender

We respect, welcome and celebrate people of every gender, gender identity, intersex variation and sexual orientation.

Use gender-neutral terms such as: 'they', 'Supervisor', 'fire-fighter' and 'Chairperson'.

Don't assume pronouns such as 'him', 'her' or 'they' based on someone's name, title or appearance.

Referring to a person with a disability

We don't define people by their disability. Use 'person with a disability' instead of 'disabled', 'deaf', 'blind' or 'mentally disabled'.

Referring to Aboriginal and Torres Strait Islander people

Use capital letters in the same manner as other proper nouns, such as Australian, Aboriginal and Torres Strait Islander and Traditional Owners.

'Aboriginal' is the term for Aboriginal people. Use it as an adjective, rather than a noun, e.g. 'Monash Health's new strategy will support increased wellbeing for Aboriginal people'.

Do not use the term 'indigenous' or the abbreviation 'ATSI'.

6.3 A-Z guide to style, punctuation and grammar

Acronyms

For all acronyms, spell the expanded form out fully at first mention, followed by the acronym in brackets; use the acronym only after this, e.g. Intensive Care Unit (ICU).

If an acronym is not widely recognised, use the expanded form. Avoid full stops in acronyms (ICU) or in abbreviations with all capital letters (NSW, WA).

Abbreviations and contractions

Only use abbreviations of general terms if the abbreviation is the clearer and more common form.

Use a full stop after abbreviations, e.g. Vic., Tas., ed.). Contractions don't require a full stop because they end with the last letter of the expanded word for example, Qld, Pty, Ltd).

Active writing

Good writing uses an active voice to clearly communicate. When using the active voice the subject performs the action denoted by the verb. Because the subject does or "acts upon" the verb in such sentences, the sentences are said to be in the active voice.

- Active voice: Rebecca presented at the RUOK? Day forum.
- Passive voice: The RUOK? Day forum was presented by Rebecca.

Ampersands (&)

Avoid using ampersands, except where space is limited in a table or a name includes an ampersand.

Apostrophes

Apostrophes are used:

- to show ownership or possession
- to show joint ownership
- v to show two or more owners of different things
- in contractions
- to show plural abbreviations of one letter only
- when referring to years and decades, use the expanded form, e.g. 'the 1980s', not ''80s'.

Avoid apostrophes:

- when used for the possessive pronoun 'its', but do use one for the contraction 'it's' ('it is')
- when making an abbreviation plural (TMVs not TMV's).

Capitalisation

Capital letters should be kept to a minimum. Watch out for capitalisation of common nouns or names; if in doubt, prefer lower case to capitals. Note: internet and web are lowercase.

- Job titles should be capitalised, e.g. Chief Executive, Director.
- Professions should be lower case, e.g., dentist, communication advisor, laboratory technician, unless they are used in a person's title.
- The names of organisations and institutions spelled out in full require capitals, e.g. Department of Health or Monash University, but shortened forms used subsequently do not, e.g. the department, the university.
- Adjectives should not be capitalised e.g. federal, departmental.
- The word State is capitalised when referring to territorial divisions of Australia.
- Avoid using all caps for emphasis (e.g. DANGER).

Commas

Commas mark a break between different parts of a sentence. They make the sentence clear by grouping and separating words, phrases and clauses.

Use a comma:

- after a sentence connector (however, therefore, now, etc.)
- to eliminate ambiguity
- to separate items in a simple series
- after a quote where the carrier expression is part of the sentence
- to separate non-defining clauses or phrases.

An Oxford comma is a comma after the second last item. in a list and should only be used if it clarifies the meaning. Avoid using Oxford commas and break up your sentence instead.

Dates

Write without punctuation, e.g. Monday 6 July 2020 not 6th July, 2020.

It is not necessary to include the year in the date if the event will or has occurred in the current year. The year should be included when referring to events that occurred in previous years or will occur in future years.

Disease names

These do not start with initial capitals, unless they contain proper nouns, e.g. hepatitis B, German measles.

Em dashes (-)

You can use an em dash with spaces to add a related idea to a sentence instead of creating a new sentence.

- Be careful the sentence does not become too long.
- Avoid using an em dash to put a separate thought in the middle of a sentence.

En dashes (-)

- ✓ Use spaced em dashes () instead of en dashes (–) to break up sentences.
- Use 'to' in time and date ranges not hyphens or en dashes, e.g. We are open Monday to Friday, 9am to 5pm.
- Avoid the use of en dashes (-).

Full stops

- Use a full stop at the end of a sentence, as a decimal point and at the end of an abbreviation.
- Ensure there is only one space between a full stop and the next sentence.
- On not use a full stop between the initials of a person's name.

Headlines and headings

Headlines, headings and sub-headings should be sentence case unless they contain a title or a name.

Hyphens

Hyphens should be used in compound words to enable the reader to associate words correctly on the first reading (note the different meanings of 'three-year-old buildings' vs 'three year old buildings').

While hyphens are used for compound words (an easyto-use power tool), they are not used when the qualifying words follow the noun (a power tool that is easy to use).

- When adjectives are combined with adjectives, a hyphen is used (high-quality).
- When adverbs are combined with adjectives, no hyphen is used (a thoroughly planned project).
- Spell 'cooperate' and 'coordinate' without a hyphen.
- Spans of numbers should be written as '15 to 20', not '15-20' or 'between 15-20'.

Italics

Avoid use of italics. Italics should only be used for titles of standards, books, magazines, newspapers and TV programs.

Latin words

Avoid the use of Latin abbreviations. Use plain English where possible. If space is limited you can use 'e.g.' (for example, in a table). Only do this if your audience can understand it.

Lists

Bulleted lists break up large blocks of text and make reading complex information easier. Numbered lists are useful for information where the order of steps is important.

Single sentence lists

When we're writing a single-sentence list, we:

- start with a stem sentence that all the points have in common
- start each point in lower case, and only use a full stop on the last point
- check that each point makes a full sentence when read with the stem.

If appropriate:

- use 'and' or 'or' on the second-to-last point
- place a comma after the last word before the 'and' or 'or'.

Multi sentence lists are introduced by a full sentence

- Each point in the list is also a complete sentence.
- Each point can be 1-3 sentences long.
- Each point begins with a capital letter and ends with a full stop.

Lists should be written consistently, e.g. multi-sentence lists shouldn't be combined with single sentence lists.

We use numbered lists for processes, where steps need to be done in order.

- 1. First, you do this
- 2. You do this next
- 3. To finish the process, you do this.

Measurement units

Abbreviated units of measurement do not need a full stop (kg, m, ha) and do not have an 's' in the plural, e.g. '10cm' not '10cms'. However, when units are spelled out in full, a plural 's' is required for numbers greater than one, e.g. '0.5 metre', '1.5 metres' etc.

- Prefer % to percent or per cent.
- Ensure letters do not appear to flow into numbers.
- Unit names and symbols should not be mixed in the same expression, e.g. 'km/h' not 'km/hour'.
- When writing measurements within a clinical setting unit names or symbols should be separated from associated figures by a space (16 mm). In all other instances do not put a space between number and measure.

Names and titles

- When introducing a source within a piece of writing, use their full name (e.g. Dr John Smith) first, and then Dr Smith after that.
- All sites should be spelled out in full. Monash Medical Centre, not MMC.
- ✓ Titles to be spelled out in full for the first mention. e.g., The Honourable David Davis.
- Job titles should be capitalised.
- Professions should be lower case, e.g., dentist, communication advisor, laboratory technician, unless they are used in a person's title.

Numbers

Numbers one to nine are written in words, except to express time, sums of money, weight, distance, measurements, volume, percentages and ages, e.g. '6km', '3kg', '\$8', '3%', or in comparative lists or series, e.g. '17 apprentices, 10 A-Grade electricians, and 4 engineers'.

- The numbers 10 upwards are written as numerals.
- Text containing two series of numbers will be easier to read if one series is in numerals and the other in words, e.g. 'there were six 2kg modules and twelve 9kg modules'.
- Four-digit numbers and above require a comma, e.g. '4,587'.
- Avoid starting a sentence with a numeral. Either spell them out or restructure the sentence.
- For decimal fractions, make sure there is a 0 in front of the decimal point, e.g. '0.25', not '.25'.
- Units of currency: \$USD or \$AUD (for comparative reference); \$15 (single stroke through 'S'); 50c (no stroke through 'c'). Singular/plural

Companies and organisations are single entities that take a singular verb, e.g. 'Monash Health is the largest health service in Victoria', not 'Monash Health are the largest health service in Victoria'.

Spelling

Generally, prefer the first spelling in the Macquarie Dictionary. Use Australian spellings over American spellings (e.g., organise not organize; colour not color).

Underlining

- Underlining should only be used where text is hyperlinked.
- Underlining should never be used in headings or subheadings. Use bold instead.

Quotes and quotation marks

All quotes must be attributed to a person.

Use double quotation marks for all passages of direct speech. Use single quotation marks inside double and for terminology, e.g. 'best-of-class'.

Time

- 2.30 to 3.30pm not 2.30pm-3.30pm.
- ✓ 2pm not 2.00pm.

Web and email addresses

- ✓ Web and email addresses should only be underlined when they are a hyperlink. Refer to 7.11 Web writing styles for more information.
- Include the full address for web addresses. e.g.: www.monashchildrenshospital.org
- ✓ If linking to a longer more complex address, use a clear description for the link, e.g. 'read more about our recycling policy". Do not use 'click here'.
- No full stop at the end of a web address at the end of a sentence.

Hyphens

- Use hyphens when 2 or more words form an adjective, e.g. a first-class experience.
- Do not use a hyphen if the first word of a compound is an adverb ending in ly, e.g. highly intelligent - not highly-intelligent.
- Some nouns are also hyphenated. Check the Macquarie Dictionary, e.g. about-face, airconditioning.
- ✓ Do not hyphenate login or sign in, e.g. You need to use your sign in (noun) to sign in (verb) to the site. You need to use your login (noun) to log in (verb) to the site.
- Hyphens can change the meaning of a verb, e.g. The group is going to re-form (join up again) to reform (change) the policy.
- Use a hyphen when the second word is 'up' or when the first and second words end and start with the same letter, e.g. meet-up, call-up, re-engage.







Writing for the web

7.1 Writing for the web

This guide supports Monash Health employees to develop effective web content for **monashhealth.org** and the intranet.

It provides an overview of how we manage our sites, and guidance on how to develop audience-focused, consistent, inclusive and straightforward web content.

This guide has been developed for use alongside the Monash Health Identity Guidelines and other website content guides (e.g. How to use our WordPress websites).

Refer to the gov.au content guide for guidance on writing web content that isn't covered by this document.

This is a living document and will change as the service it supports evolves.

If you have any questions or feedback about this guide, please contact communication@monashhealth.org

Elements of this style guide have been adapted from the Gov.au Content Guide and Govt.nz Style and Design Guide under Creative Commons CC-BY 4.0 licences.

7.2 The importance of effective web content

Our web content contributes to our identity as a provider of quality health care. It reflects how we engage with our employees, patients and consumers.

Writing for digital is different to writing for print. Content must be user-focused, scannable and accessible across all devices (computer, mobile, tablet).

Well-designed web content:

- is easy to understand and accessible to a wide range of people
- gives the user what they need quickly.

7.3 How we manage our web content

Monash Health uses a decentralised publishing model for websites and where business areas are responsible for publishing and managing their own content.

Authorised Monash Health employees, contractors and consultants are responsible for communicating information about Monash Health via Monash Health websites and/or the intranet. There are four key roles:

1. Website Owner

The Executive Director, Public Affairs and Communication is responsible for governance and overall ownership of all Monash Health websites and intranets.

2. Content Owner

Each unit head or director who manages a department, service, program, site or any other relevant part of Monash Health, is responsible for all intranet and website content that falls within the bounds of their operational area. This role is known as a 'Content Owner'.

Content Owners are responsible for content accuracy, appropriateness and preventing any breaches in patient confidentiality or legal issues that may arise from the publishing of content.

Content Owners are also responsible for nominating Content Authors.

3. Content Author

Content Authors within each business area are responsible for updating and maintaining content within the website's Content Management System (CMS). Content Authors can publish to websites and the intranet.

Content Authors are required to adhere to the guidance provided in this document (How to Write Content for the Web). They must also follow content posting instructions provided by the Public Affairs and Communications team.

4. Administrator

Site administrators manage the technical operation of a website and are responsible for keeping the website functional, secure and user-friendly.

The administrators for monashhealth.org and the Monash Health intranet are Monash Health's Public Affairs and Communications team.

The design of site architecture and navigation (website structure such as menus and arrangement of webpages) and signoff for style rests with the Public Affairs and Communications team.

7.4 General process for managing content

- 1. The Public Affairs and Communication team identify and assign Content Owners
- 2. Content Owners nominate Content Authors
- The Public Affairs and Communication team train Content Authors to use the content management system (CMS) and are assigned editing rights to relevant content
- 4. The Public Affairs and Communication team provide advice and support to Content Owners and Authors and remind them to update their content
- 5. Content Authors develop/update content in line with Monash Health's Identity Guidelines Document
- 6. Content Authors submit content to Public Affairs and Communication team for approval
- 7. Public Affairs and Communication team will review and publish content (where appropriate).

Any new major content development, such as creating new content sections, changing page navigation or revising page structure, must be done in collaboration with the Public Affairs and Communications team.

Please contact:

communication@monashhealth.org to discuss your needs.

Your web content should be reviewed at least once every 12 months. You will receive an automated notification 12 months after you have edited your content as a reminder. Reviewing your content does not mean that it needs to be overhauled, but details should remain accurate and up to date.

Useful Resources

For more information please refer to PROMPT for the **Website and intranet content writing procedure**.

7.5 Where to begin with web content

Web content that is consistent and easy to read helps our patients and consumers gain trust and confidence in using our services.

Web content should be designed for:

Effectiveness

Does it provide the right information/answers and cover what the user needs to know?

Comprehension

Can users understand it?

Engagement

Do users read enough of it to understand, or skim over it?

Findability

Can users easily find it?

7.6 Effectiveness

Effective writing starts with understanding the purpose of the information, the audience you are writing for, and the publishing channel.

Purpose

Think about what you aim to achieve with the information and design content to:

- give the user only the information they need to complete the task
- lead the user to the information they need.

Audience

Understand the user's needs before you write anything. Structure the content around meeting the user's needs first, then meeting requirements around mandated information.

Channel

As a Content Author for Monash Health, you will likely be writing for two key groups of audiences:

External communication:

Audiences

- Patients.
- Consumers.
- · Healthcare professionals.

Publishing channel

monashhealth.org

Internal communication:

Audiences

- Clinical support employees.
- Non-clinical employees.

Publishing channel

Intranet.

External audiences, such as patients, consumers and other healthcare professionals (non-Monash Health employees) access information via monashhealth.org.

Monash Health employees access information about the organisation via the Monash Health intranet. The intranet is not available externally to the public and contains information for internal use.

To help you better understand your audience you can research:

Behaviour

• What the user is interested in so your writing will catch their attention and answer their questions.

Vocabulary

 So that you can use the same terms and phrases they will use to search for information.

The needs of patients and consumers will be different from healthcare professionals. Where possible, design and write separate content. For example, separate pages can be clearly labeled for their specific audience, such as 'patient information' and 'health professional information'.

7.7 Comprehension

Readability is about how easy or hard it is for a user to understand the text. Content with a good readability level helps users know what to do. This includes users with lower comprehension skills.

Aim to make the content as readable as possible. This makes it more accessible for everyone, not only users with low literacy. Using plain language doesn't mean 'dumbing down'

- it helps specialist and technical audiences too.

7.8 Ways to make content easy to understand

Monash Health websites have multiple audiences. Make your writing easy to read and understand so it's accessible to everyone by using language that is:

Plain

Aim for a reading age of 9 years old. Don't assume people will understand health terms, explain them in full, e.g. 'We provide care to people staying in our hospital (inpatients) and to those who come to Monash Health for an appointment or day treatment (outpatients).'

Inclusive

Free from bias and discrimination, e.g. gender-neutral terms

Respectful

Takes differences into consideration, e.g. culturally sensitive, English as a second, third or fourth language.

Writing style, tone and voice

For detailed guidance on writing style, refer to the Monash Health Identity Guidelines Document:

- 6.1 Our voice (p.34)
- 6.2 Bringing our voice to life (p.34)
- 6.3 A-Z guide to style, punctuation and grammar.

7.9 Ways to create scannable content

Engagement

The structure and format of written content helps readers keep engaged.

Short page titles

Short and accurate page titles help users quickly decide if that is the information they need.

Lead summaries

Including a short blurb at the top of the webpage tells the user what the page is about and who it's for.

Headings and subheadings

Readers get a guick understanding of content by scanning headings:

- use only one top-level (h1) heading. Short content should only use two subheading levels (h2 and h3)
- start headings and subheadings with keywords that help the user to make a connection. This will also help search engines find your content
- use sentence case for headings except when using proper nouns.

Simple paragraphs

Write short, simple paragraphs with two or three sentences containing a single idea.

Avoid meaningless words such as 'more' and 'related information'.

Word count

Web content does not need to strictly follow a word count. It is more important to write simple paragraphs and use descriptive subheadings — and if required, add jump links — so that content can be effectively scanned.

A good word count target is around 300 words for most web content. However, pages can be much shorter or longer (including 1,000+ words) if the content is effectively designed.

Use lots of white space

White space, or clear space between content helps the reader move between sections of information.

Consistent formatting

- Use bullet points or numbered lists to break text up.
- Avoid large amounts of text in bold, italics and underlining.
- Avoid second and third-level lists as it makes it harder for the user to understand a list.

7.10 Rewriting to reduce list levels



To register you need to show your referral document to the receptionist.

You also need to show two forms of identification:

- proof of your name
- proof of your address.

You can't use the same form of identification for name and address.

Proof of name:

- driver's licence
- marriage certificate.

Proof of address:

- driver's licence
- bank statement
- bill.



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 - driver's licence
 - marriage certificate.
- Proof of address:
 - driver's licence
 - bank statement
 - bill.

7.11 Engagement

Jump links (anchor links)

Add jump links to content to help users quickly find information on longer webpages.

Informative hyperlinks

- 2 Don't use meaningless terms such as 'click here', 'read more' or 'useful links'.
- 2 Don't make the link text too long. Only link the keywords.
- Be careful of overcrowding paragraphs with links as this can affect readability.

Example of link text length



Attend next month's workshop for developers and writers in Brisbane.

Attend a Brisbane workshop for developers and writers next month.

8

Attend a Brisbane workshop for developers and writers next month.

Click here for more information.

Email addresses as the link

Hyperlink all email addresses by using the email address as the link.

Use mailto: prefix in the URL but not in the link text.



Contact belinda.bloggs@monashhealth.org



Email Belinda, Head of Social Media

7.12 Resources

Useful guides

- Gov.au content guide
- Web Content Accessibility Guidelines (WCAG)
- Monash Health Visual Identity Guide
- How to use our WordPress websites
- Website content writing (PDF)
- Developing a website or social media presence (PDF)
- Social media and internet monitoring and mediation (PDF).

Refer to the **Gov.au content guide** for guidance that isn't covered by this document.

Contact Public Affairs and Communication if you have any questions or feedback about this guide:

communication@monashhealth.org





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Accessibility

8.1 Accessibility overview

More than one million people with a disability live in Victoria. This means that all Monash Health communications need to consider the needs of people with a disability.

When developing any Monash Health communication, you will need to think about how to make it accessible to the widest possible audience.

Accessibility is the practice of websites, designed and written content, tools and technologies being developed so that people with disabilities can understand and use them.

8.2 Digital accessibility

People use a variety of devices to access the information and services on our websites. These include mobile phones, tablet devices (e.g. iPads), desktop computers and laptops.

Responsive design means users can access information regardless of their device's size, type and processing power. Or their internet browser, connection speed and download data.

Ways to create responsive content

Design for mobile devices first

Think about how the content will work on a mobile device first – then how it will translate to a larger screen.

Communicate with text first

Don't rely on video and images to convey important information. Plain text can reformat and resize to fit all size screens (reflow). It's harder to make images and video accessible across different mobile devices. Users may not be able to watch a long video in the context where they are using a mobile device (for example, on a bus).

Get to the point

Keep content short.

Avoid PDFs and other document attachments (where possible)

Don't hide information in PDFs or other documents. PDFs and Word documents are not easily accessible on mobile devices and cannot be read by assistive technologies such as screen readers.

Avoid tables (where possible)

Information contained within a table can often be reformatted into plain text with subheadings. Some tables may be easy to read on a large computer screen, but they may not load correctly on a mobile device.

Accessibility needs

Accessibility goes beyond technical requirements. It can be much harder for some people with disability to use a mobile device than a desktop or laptop computer.

Think about whether your content is accessible for those with:

- visual impairment
- hearing impairment
- ✓ mobility restrictions —
 for example, restricted keyboard access
- sensitivity to flickering and moving content
- language difficulty.

Consider how the user's environment — for example, a noisy location or a workplace where the sound disturbs colleagues, might affect access to your content.

8.2 Digital accessibility (continued)

Ways to make content accessible

Choose relevant and clear images

- Use words rather than images. Only use images that usefully add to the text content.
- Make sure the images are not culturally insensitive to any audience.
- Make sure there is sufficient contrast between any text and the background in images.
- Use real text rather than images of text whenever technically possible (logos are the exception).

Add alt text to all images

Alternative text (or alt text) is important for screen readers and text-to-speech software. It also displays for the reader when images are disabled or fail to load.

If you include images you must create alt text. Images must have alt text to describe the information or function of the image.

Caption images and videos

Add 'Caption: description of the image...' below the image. Don't use the same text in the caption and alt text. Otherwise, a person listening to the page hears the same information twice.

Videos must have:

- transcripts for people who don't want to watch the video, and for search engine indexing
- closed captions for people who can't hear the dialogue and other sounds
- audio description for people who can't see the video that explains any important visual-only detail.

Findability

You can help guide people to the content that is relevant to certain keywords through the process of on-page optimisation. This includes URLs, metadata, headings, internal links, page content and images.

Ways to create findable content

Page content

- Use clear introductions, conclusions and topics to organise content into paragraphs.
- Check for correct spelling and grammar. Cite any sources properly by using links.
- ✓ Use keywords naturally throughout your content
- Use synonyms that Google uses to determine a page's relevancy.

URL path

- The website page's URL should include the main keywords for that page.
- Each word in the URL should be separated using dashes (-) and lower case.
- Length: try to keep it below 100 characters.

Title tags

- Describe what the page is about and use tags that are unique to each page.
- Use your main keywords.
- Length: about 60-70 characters.

Meta description tag

- Use a description that accurately summarises the page content and is unique to each page.
- Use keywords to create a compelling description that a searcher will want to click on.
- Length: up to 300 characters long.

8.2 Digital accessibility (continued)

Header tags

- ▼ Tags gives users a quick overview of the content on the page. It should support the keyword theme from the metadata and use the main keywords.
- ✓ Wordpress: If the website you are editing is based on a Wordpress content management system, h1 heading titles will be automatically assigned when you create the page title. This means that you only need to use h2 and lower in your page content.
- Adding h2 and h3 heading tags helps structure your content more clearly. Try to include main keywords in at least 1 subheading and keyword variations in lower headings.
- Heading tags:

<h1>Heading 1</h1><h2>Heading 2</h2><h3>Heading 3</h3>

<h4>Heading 4</h4>

<h5>Heading 5</h5>

<h6>Heading 6</h6>

Images

Include descriptive captions and keywords in the image alt tag, caption and file name.

Internal links

Link to other pages on your website as appropriate. Try to include two to three links in every page.

Make sure your links use keywords in the link text that is relevant to the page it's linked to.

8.2 Digital accessibility (continued)

PDF accessibility

HTML (standard content on a webpage) should be the default format for all web information. However, if there is a strong user need to provide a PDF (for example for printing) the document must still be accessible.

- Make it clear you're linking to a PDF file. Use the link to tell your users that they are downloading a PDF and how big the file is.
- Offer an alternative format to PDF.
- Provide a contact (an email address) so users can request the information in a different format.
- ✓ If you are relying on PDF as the accessible format, then the document needs a HTML landing page. The landing page should contain an overview of the document and outcomes, as relevant.
- ✓ To make a PDF accessible you must make sure structural elements such as headings are marked-up so that a screen reader can follow the logical order of the content. This is called the structural hierarchy.

Further guidance

Refer to the Web Content Accessibility Guidelines (**WCAG**) for further detail on ways to make digital content more accessible to the broadest audience.

8.3 Accessibility in design

Accessible communication ensures everyone has the same access and opportunity to read publications, use websites, attend events, respond in emergency situations and find out about our work.

Accessibility forms part of equal opportunity.

To do this well, designers need to be aware of the diverse range of needs in the community and how to plan and design our communications with accessibility always in mind.

PDF development

Some people with vision impairment use screen readers and other assisted technologies on their computers to read content aloud to them.

A screen reader uses a Text-To-Speech (TTS) engine to translate on-screen information into a computerised voice which can be heard through earphones or speakers.

To ensure screen readers can read PDF content in logical order, structural elements such as headings and body copy must be tagged in InDesign first. This is called the structural hierarchy.

Paragraph styles must be used for all text when creating accessible documents.

Building accessibility into InDesign files

A few simple steps must be followed to ensure screen readers can read PDFs aloud.

- 1. Using Paragraph Styles
- 2. Adding Tags to Paragraph Styles
- 3. Map Styles when exporting Tags
- 4. Adding Alt Text to images
- 5. Creating bookmarks for documents over 20 pages
- 6. Using the Articles panel to create structural hierarchy
- 7. Exporting the final interactive PDF

Contact Public Affairs and Communication if you require a more detailed guide to building accessible InDesign files:

communication@monashhealth.org

Design accessibility checklist

- Minimum type size of 12 point is recommended for people with a visual impairment.
- ▼ Type sizes a small as 9 point can be utilised only when a compliant PDF build has been conducted and/or an accessible version such as HTML has been supplied.
- When providing a link to a PDF document, the PDF must be accessible. Also provide an alternative format such as HTML.
- No blocks of text written in capital letters information is easier to read if written using a mix of upper and lower case.
- Ample clear space and a simple layout.
- Bold text used for emphasis rather than underlining or italics.
- Margins justified on the left and right-hand margin unjustified.
- Contrasting colours used to increase readability.
- Limit the use of tables and try to use bullet points where possible, for better visibility and for people with low literacy. Where tables are used, design the content so that it is suitable for screen reading software – for example, by formatting rows with headings as heading rows.
- Accessibility disclaimer included in publication to let readers know other formats are available and how to obtain them.
- No text placed over pictures, photos or other images, as this makes the text hard to read.

8.3 Accessibility in design (continued)

Minimum size and spacing for Accessibility to meet WCAG 2.1 Level AA guidelines

- ✓ Line spacing to at least 1.5 times the font size.
- Spacing following paragraphs to at least 2 times the font size.
- ✓ Letter spacing (tracking) to at least 0.12 times the font size.
- ✓ Word spacing to be at least 0.16 times the font size.

Colours accessibility

A colour combination is accessible when the contrast between text and background is over a minimum ratio calculated by 'colour contrast' software.

Colour contrast ratios:

- text at 14 point size and below: at least 4:5
- text at 18 point size and above: at least 3:0
- text that is bold and 14 points and above: at least 3:0.

Colour accessibility checklist for designers

Designers should refer to **Vision Australia's Free Colour Contrast Checker** or **contrastchecker.com**

- Check colour contrast using the colour contrast analyser tool or colour contrast check.
- ▼ To use the colour contrast analyser app only copy and paste hex colours into the boxes.
- Do not use screenshot app for capturing screenshots, as colours do not match colours values in the code.
- Standard text and (images of text) against the background of the text should be 4.5:1 or 3:1 for large text 14pt+ bold or 18pt+ normal.
- Text or images of text that are part of an inactive user interface component (that are pure decoration, or part of a logo or brand name) have no minimum contrast requirement.



Contact us:

If you have any questions or feedback about this guide, please contact communication@monashhealth.org