

# SESLHD FRAMEWORK COVER SHEET

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<b>KEY TERMS</b>	Web Content; Information Management, Internet, Intranet, Health ICT, Webpages, Content Management System, CMS
<b>SUMMARY</b>	<p>The document provides a Framework to maintain consistency across the SESLHD internet and intranet, ensuring all web content is relevant and meets the needs of SESLHD staff and the public.</p> <p>The Framework outlines the purpose of SESLHD webpages and the principles underpinning the development and approval of web content on the SESLHD internet and intranet sites and pages.</p> <p>It outlines roles and responsibilities, editorial guidelines and standards, processes, reporting mechanisms and the requirement for records management.</p>

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## Section 1 – Background

The vision for South Eastern Sydney Local Health District (SESLHD) websites is to provide current, relevant and accurate information about SESLHD facilities and services, in an easily accessible format that is easy to understand. SESLHD maintains both a public internet site and an extranet for staff.

The previous SESLHD websites were developed more than 10 years ago, during the period when South Eastern Sydney merged with Illawarra Shoalhaven. Following the separation of the Districts in 2011, the SESLHD websites received minimal updates. A combination of immense accumulation of data, an ageing interface and outdated design meant a poor user experience for the public and staff alike.

In early 2015 SESLHD committed to the development of a new, Content Management System (CMS) based internet and intranet. A CMS is a system designed to manage the content of a website or other electronic resource that is used collaboratively by a number of people (*Source: Oxford Dictionaries online*).

The CMS decentralises the ability to create and publish web content. Thus departments and teams can now self-publish, rather than having to rely on a single source (SESLHD Health ICT) for updates and additions.

SESLHD chose the Drupal CMS software and web application from the various technologies available as it is economical, customisable, can be rapidly deployed, is compatible with other applications and programs, is also compatible with many search engines and is mobile-friendly.

SESLHD contracted a marketing company, to assist with the redesign of its websites. Within SESLHD, the development and implementation of the CMS was managed by a multidisciplinary CMS Steering Committee. The CMS has been applied to the internet pages and does not apply to intranet/extranet.

The new SESLHD internet has been designed and implemented with extensive consultation to ensure that the District can continue to conform to accepted standards such as the [NSW Ministry of Health Guideline - GL2005\\_074 Communication Strategy Guidelines - Department of Health](#) and the World Wide Web Consortium's (W3C) Web Content Accessibility Guidelines (WCAG) 2.0.

The incorporation of health literacy for public facing material is an essential component in reaching the vision for the SESLHD websites.

This Framework is intended to provide staff with an instructional manual, reference guide and governance tool. It incorporates, as appendices or references, all documents which will facilitate the efficient and effective use of SESLHD websites. The end result should be a superior user experience – for both the public and SESLHD staff.

## Section 2 – Purpose

This Framework aims to:

- Outline a structure to maintain consistency across the SESLHD internet and extranet
- Maintain an internet site that meets the needs of the public and SESLHD staff
- Ensure all web content on the internet is relevant and appropriate
- Clearly explain the roles and responsibilities of all parties involved in online content management
- Outline processes for online content review, maintenance and development of SESLHD's internet
- Ensure best practice in content management and usability principles are established and adopted by SESLHD.

### EXCLUSIONS

**Policy Documents:** The process of publishing policy documents on the SESLHD internet and extranet remains unchanged by the introduction of the Content Management System. Finalised documents (with supporting documentation where required) are to be forwarded to SESLHD Executive Services.

## Section 3 – Definitions

- **Accessibility** – The degree to which the site is available to as many people as possible
- **Administrator** – Web services staff who manage the administrative functions of the CMS and template modifications and design
- **CMS** – Content Management System. This is a system designed to manage the content of a website that is used collaboratively by a number of people
- **Content** – Information, data, documents, images, multimedia, downloadable files, etc.
- **Content Approver** – The staff member authorised to approve the publishing of new/updated website content. Overall responsibility for webpages under their control, usually rests with the Approver
- **Content Author** – The staff member authorised to gather and create webpages, or modify content in the Drupal CMS
- **Extranet** – An intranet that can be partially accessed by authorised outside users, enabling businesses to exchange information over the internet in a secure way.
- **Health ICT Web Support** - The staff within Health ICT who maintains the list of Content Authors, Administrators and Approvers. This team will also provide technical support to the above-mentioned roles when required
- **Information Architecture** -The structure of a website, including the organisation and labelling of content to support usability
- **Internet** – A global computer network providing a variety of information and communication facilities, consisting of interconnected networks using standardised communication protocols. Generally speaking, internet sites are viewable by any member of the public. An internet is ‘outward’ facing
- **Intranet** – A local or restricted communications network, especially a private network created using World Wide Web software. In SESLHD, the intranet is restricted to staff, some contractors, students and volunteers. An intranet is ‘inward’ facing
- **Metadata** – Information about content, pages and files, used to describe and categorise content
- **Public** – Patients, clients, their families and carers, volunteers, community members and organisations that represent or serve them, potential staff, visitors and vendors
- **Special Content Approver** – Tier 2 Director, or their delegate, who is authorised to approve content that may be considered sensitive, or needs to be published urgently
- **Reviewer** - The staff member designated to review proposed new/updated website information to ensure its accuracy, relevance and appropriateness
- **URL** – Uniform Resource Locator. This is the unique address that identifies a page on the website, known as ‘the web address’
- **User** – Descriptive term for a Content Author, Content Approver or Special Content Approver
- **Usability** – The extent to which individuals can use, navigate and interact with the site to achieve their goals
- **Workflow** - The sequence of industrial, administrative, or other processes through which a piece of work passes from initiation to completion. (*Source: Oxford Dictionaries online*). In the CMS, the workflow outlines the steps required to publish content to the website.

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## Section 4 – Responsibilities

The CMS contains four roles for the creation, updating, approval and administration of the District's website. These include: Content Author, Content Approver, Special Content Approver and Administrator.

### **Content Authors are responsible for:**

- Completing appropriate training prior to being granted access to the CMS
- Instigating the appropriate workflow process
- Activating the approvals process for new web sub-sites or pages
- Coordinating the development of content, including seeking content from colleagues
- Creating and maintaining content relevant to their work areas in a timely, professional manner
- Seeking assistance from the web team when assistance is needed.
- Ensuring content complies with all relevant policies and guides as outlined in this document
- Ensuring content that is externally facing is in line with health literacy and consumer engagement standards of SESLHD
- Ensuring that each webpage includes the minimum content required
- Maintaining the accuracy and currency of web content under their control
- Archiving outdated content.

### **Content Approvers are responsible for:**

- Completing appropriate training prior to accessing the CMS
- Ensuring that content provided by Authors is accurate, up-to-date and appropriate. Any clinical information needs to have been checked to ensure accuracy and safety and quality
- Advising Authors of any changes required to content before it is suitable for publication
- Approving the publication of content in a timely and professional manner
- Authorising the creation of new web sub-sites or pages for their facility, service, department, unit or team websites
- Ensuring that content does not breach any SESLHD or NSW Ministry of Health policies or State and Federal legislation
- Tier 2 Directors and General Managers are the Content Approvers for their respective home pages.

### **Special Content Approvers are responsible for:**

- Reviewing, approving and publishing content on the internet home pages under their control
- Reviewing, approving and publishing content that has been identified by the Author or Approver as being special content, including content that needs to be published urgently (e.g. natural disaster).

### **Administrators are responsible for:**

- Assisting with changes to the District home page and landing page for hospital and other service microsites, due to the complexity of these templates
- Ensuring that appropriate systems are implemented to support webpage content management
- Ensuring relevant staff are trained to create and manage web content
- Providing technical support to Content Authors and Approvers

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- Developing new templates and making structural changes at the request of the CMS Steering Committee or Manager Media and Communications
  - Maintaining a master list of Content Authors, Content Approvers and Special Content Approvers
  - Creating permissions.

#### **Manager Media and Communications:**

- Has Executive Sponsorship of the SESLHD internet home page content
- Will ensure visual consistency is applied throughout the sites
- Has the authority to remove inappropriate material on any SESLHD website
- Has authority to add or edit content in urgent situations (e.g. natural disaster)
- Has the authority to archive webpages that are not reviewed within an appropriate timeframe.

#### **Manager Executive Services:**

- Has sponsorship of the About Us page
- Has sponsorship of the 'Contact Us' details
- Is responsible for management of the District's generic email inbox
- Ensures response is provided to email correspondence received through the 'Contact Us' link.

#### **Tier 2 Directors:**

- Maintaining oversight of internet and intranet sites within their area of responsibility
- Ensuring appropriate corporate governance and corporate record processes are in place
- Providing the required staff and other resources necessary to manage the content of internet and intranet pages under their control, including notification to the web team of nominated Content Authors, Content Approvers and Special Content Approver
- Ensuring appropriate resources are allocated to manage content on the internet to ensure it remains up to date
- Ensuring web users attend training and have the skills necessary to create and update webpages
- Approving content on their respective internet and extranet home pages.

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## Section 5 – Editorial Guidelines and Standards

### Compliance

Compliance with use of this Framework, is the responsibility of all staff using the CMS and is a mandatory requirement.

Operationally, this compliance is localised to the relevant facility / service / department / team.

Overarching compliance for the CMS as a key communication and marketing system for SESLHD rests with the Manager Media and Communications.

### Minimum Content Criteria – Internet

- All SESLHD internet websites need to be hosted under the domain (web address/URL) [www.seslhd.health.nsw.gov.au](http://www.seslhd.health.nsw.gov.au).
- Branding is to be in line with the District Corporate Branding Guide and consistent across all SESLHD internet pages and is to include the District logo so that site visitors can easily identify that they are visiting a facility or service of SESLHD. Requests for additional logos are to be forwarded, with a rationale, to the Media and Communications Unit for consideration.
- Staff who are CMS users have a range of pre-determined templates to choose from when creating content. Templates cannot be modified by Content Authors. Requests for any other elements (e.g. new sub-sites or custom designs), or a new template, must in the first instance be directed to SESLHD Web Services by calling the State-Wide Service Desk on 1300 28 55 33.
- Templates have been designed to incorporate the District Corporate Branding Guide and logo to ensure consistency across all SESLHD internet pages. Requests for changes to a template or development of a new template must be directed to SESLHD Web Services, via the State-Wide Service Desk (refer to Special Requests).
- Content should deliver a key message and/or provide information of general public interest and/or provide an identified benefit to the target audience.
- Health service organisations need to communicate with patients in a way that supports effective partnerships and is responsive to the diversity of consumers who use SESLHD. Content for the general public should incorporate health literacy and further the goals of the SESLHD Community Partnerships Framework.
- Be concise, user friendly, easy to understand (plain English, free from health jargon) and be written for an 11-12 year old reading level. Wherever possible staff should work in partnership with consumers when developing health information and education resources for public use.
- Content is to support the NSW Ministry of Health Core Values of Collaboration, Openness, Respect and Empowerment.
- All content published on SESLHD internet sites must be available to all visitors to the site. Therefore, no password protection or restricted documents are permitted.
- News articles should only be included on internet pages if they are timely, relevant and provide some benefit to the reader.
- Internet sites must allow members of the public to contact SESLHD (and/or the relevant service) and must provide information in line with relevant NSW Ministry of Health policy documents and NSW Government Information (Public Access) Act 2009 (GIPA Act) and Regulations.



- Metadata must be correctly and appropriately assigned to all content pages, including a title and description at the least.
- PDF documents should not have inbuilt security applied to prevent content copying unless there is a strong and valid business need (applying such security reduces the efficacy of the search facility). It is responsibility of the author to make sure that PDF documents meet accessibility guidelines. Tagged or accessible PDFs are easier to read for people who use adaptive technologies. Scanned PDFs should not be allowed on websites unless an alternative is provided.
- For more information refer to: **Appendix C** (SESLHD Web Writing Style Guide).

### Special Requests

Staff who have access to the CMS have the ability to create and edit content and add pages to existing sections of the internet. Requests for changes to homepages and landing pages and any other elements (e.g. new sub-sites or custom designs) must in the first instance be directed to Health ICT by calling the State-Wide Service Desk on 1300 28 55 33.

Health ICT will gather information about the request and forward this to the Media and Communications Unit for consideration. If the request is approved, Health ICT will work directly with the relevant service / department to negotiate a solution.

### Images

If images are required for the internet they may be sourced from the relevant hospital / service photo library or from a photo subscription service. If budget allows, facilities / services / departments / teams may choose to have photos taken specifically to suit the project. Images are only to be published on the internet if they:

- Are optimised for the web
- Are relevant, compelling and add value
- Comply with accessibility standards
- Do not infringe copyright laws
- Clinical images or photographs must not compromise patient privacy legislation
- Are of the correct specification (Refer to **Appendix E**). The web team can assist with resizing images (from larger to smaller).

Always ensure proper written consent has been obtained from any photographic subjects. Photograph release consent forms and media consent forms can be found on the SESLHD intranet [here](#).

### Translated Materials

If translated materials are required for internet pages, consultation must be undertaken with the SESLHD Multicultural Health Service in the first instance to ensure that approved translated materials are not already available.

Google translate, and other online translation services, are not to be used.

### Linking to External Websites

It is best practice to provide **links to external websites** (rather than publishing external documents on SESLHD pages) to avoid duplication of information, and to provide access to the most accurate and up to date source of information.

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External websites must only be linked to in circumstances where:

- Valuable content is being offered
- The information provided is relevant, credible and accurate
- The information provided does not conflict with information or advice published on SESLHD websites.

In general terms, links to the following are acceptable:

- Educational institutions (.edu / edu.au)
- Government organisations and institutions (.gov.au)
- Non-profit / community managed organisations e.g. external SESLHD partners in health provision (.org/org.au)
- NSW and Commonwealth legislation
- Examples of best practice
- Research publications, discussion papers etc.

Remember that some external websites (e.g. those containing research papers) may require a paid subscription to allow material to be viewed, so these should be avoided.

Links to commercial websites may be considered in rare circumstances if they are a credible and valuable source of information. Consult the Media and Communications Unit for advice.

Do not enter into reciprocal linking arrangements. This is not supported by SESLHD.

### **Intellectual Property**

All content prepared by SESLHD staff, or persons engaged by SESLHD, for publication on the internet remains the intellectual property of SESLHD.

In the event that the content includes information derived from third parties (known as 'third party information'), the intellectual property of the third party information shall remain with the third party unless it has been specifically assigned to SESLHD. The third party information does not necessarily reflect any policies, procedures, standards or guidelines of SESLHD.

The term 'content' is used synonymously with the term 'information' in the SESLHD website disclaimer. Therefore, content is defined as "information, data, documents, policies, procedures, guidelines, images and general health promotion material pages prepared by the South Eastern Sydney Local Health District".

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## Section 6 – Processes / Workflow

The Drupal CMS provides an automated process for content to be added, updated, reviewed and published. It does not incorporate other content approval processes, such as department manager sign off prior to the content being submitted to the Content Author. An example of an internal process for the governance of web content is included in **Appendix F**.

### CMS Workflow

The workflow to create and update content is detailed in **Appendix A**. The workflow includes provision for fast-tracked processes when content needs to be published urgently.

### Regular content

A two-step workflow is applied for the publishing of regular content. This requires approval and publishing from the Content Approver only.

### Special Content

For sensitive or urgent content a three-step workflow is applied to the publishing of certain types of content which may be sensitive in nature or urgent and requires senior management approval. This involves approval by the Content Approver and then review and publishing by the Special Content Approver.

### Create, Update and Archive Content

- Only staff who have designated CMS roles and have undertaken appropriate training are to participate in the publishing process (see Section 4 – Responsibilities).
- The CMS creates an audit trail of content creation, updates and edits (see Section 10 – Records Management, Documentation and References, Revision and Approval History).
- Authors should not use an Approver or Special Content Approver's login details to approve content that they have developed. The Approver or Special Content Approver should not share their login details. The governance process is in place because it is not always possible for someone who develops content to see errors in their work. Following the workflow will enhance the quality of content published on the SESH internet.
- While staff with designated roles may archive internet content, only Health ICT with approval from Media and Communications may delete content if it is either still in draft form (unpublished), a test page or an error (see Section 10 – Records Management, Documentation and References, Revision and Approval History).

### Content Review and Maintenance

- It is vital that Content Authors and Approvers regularly review content published on the website.
- Content is to be reviewed at least annually. Where content has not been reviewed or edited for 12 months the system will send a reminder to the Content Author. If no action is undertaken an escalation process will occur which may result in the Media and Communication Unit arranging for the information to be archived without further consultation.

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## Section 7 – Technical Matters

### Adding Sub-Sites

- Requests for new sub-sites must in the first instance be directed to the Web Team by calling the State-Wide Service Desk on 1300 28 55 33.

### Adding Authors, Approvers and Special Content Approver

Staff can be added to the CMS workflow or have their access altered if required.

- **New Access:** Staff who require new access to the CMS as either an Author, Approver or Special Content Approver need to complete the Internet Content Management System (CMS) Access Form (<http://sesinet/sites/Forms/Lists/CMS/Newform.aspx>) **(Note this is a link to ICT Sharepoint. Click on CMS form in the left hand navigation)**
- A username and password will be emailed to the user when the application is processed.
- **Change Access:** Staff who already have access to the system but required changed access (e.g. from Administrator to Approver) need to complete the CMS Access Change Form. (<http://sesinet/sites/Forms/Lists/CMS/Newform.aspx>) **(Note this is a link to ICT Sharepoint. Click on CMS form in the left hand navigation)**
- Content Authors, Approvers and Special Content Approvers who discover technical issues (e.g. incorrect or no access, broken links, pages not loading / loading too slowly, incorrectly formatted content) should contact Health ICT by calling the State-Wide Service Desk on 1300 28 55 33.

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## Section 8 – Reporting Inappropriate Content

All SESLHD staff have an obligation to immediately report, to their manager, content they believe is incorrect, misleading or inappropriate. It is the manager's responsibility to escalate by either contacting the page owner (if known), or Health ICT (if unknown). If the information is not updated or corrected by the page owner in a timely fashion, staff of the Media and Communications Unit are authorised to archive the page without further consultation.

The SESLHD internet aims to provide current, relevant and accurate information about SESLHD facilities and services, in an easily accessible format. The tone, language and organisation of content should always be appropriate for the audience – whether that audience is patients, visitors, carers, the general public, other agencies, staff, or potential staff. .

Website content should be appropriate for dissemination, permissible under copyright laws and should uphold privacy legislation and principles. Content includes both written information, video and images / graphics (e.g. photographs, charts, logos etc).

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## Section 9 – Other Feedback

To provide feedback about **specific sub-site or page content**; including to report incorrect, inaccurate, misleading or outdated information, please contact the relevant Content Author in the first instance. If you do not know who the Content Author is, contact the Web Team.

To provide **general feedback** about the SESLHD internet (e.g. design, usability, language etc) please contact the [Media and Communications Unit](#) in the first instance.

For **technical feedback or queries**, please see Section 7.

## Section 10 – Records Management, Documentation and References, Revision and Approval History

### Records Management

The NSW State Records Act 1998 requires each public office to make and keep full and accurate records of its activities. This refers not only to paper records but all records, including “equipment / technology dependent records”.

Web records can generally be defined as records generated, captured or received using web technologies. They generally fall into three categories:

1. Web content records, including introductory or descriptive information about the organisation, its activities or particular areas it manages, plus publications that it makes available on the internet.
2. Inputs / outputs of transactions performed via the internet, e.g. data submitted via online forms.
3. Website administration records, such as statistics, diagnostics etc, which provide evidence of website operations and management.

Web records are usually created in web authoring software, either on a user's computer or on a webpage (e.g. Wikis and blogs). Like other digital records, if they provide evidence of official business there is a need to keep them as records.

Evidence laws mean that web records may be tendered as evidence in court, subpoenaed or legally required for other reasons. It should also be noted that a record may need to be kept beyond the lifespan of a webpage.

Material that is no longer relevant or has been superseded should be archived. Archived website content must be maintained for the required period, in an appropriate Electronic Document Records Management System (eDRMS) in line with the NSW State Records Act.

It is the responsibility of content creators to ensure that records are maintained appropriately. Capture and retrieval of web records needs to be considered, therefore information that is published on the internet must also be stored in a centralised, official SESLHD eDRMS such as HPE Content Manager. For information contact the [Records Management Team](#)

### References

- [NSW Ministry of Health Guideline - GL2005\\_074 Communication Strategy Guidelines - Department of Health](#)
- [NSW Ministry of Health Policy - PD2015\\_049 NSW Health Code of Conduct](#)
- [NSW Government Brand Guidelines](#)
- [NSW Government Website Content Accessibility Guidelines \(WCAG\)](#)
- [Health Literacy National Statement](#)
- [Web Content Accessibility Guidelines \(WCAG\) 2.0 \(2008\)](#)
- [NSW Government Circular 'Website Management' C2012-08](#)

- [Prince of Wales Hospital Consumer Health Information and Education Resource \(CHIER2\) DPPHE Portal](#)
- [National Safety and Quality Health Service Standards](#)
- [NSW State Records Act 1998](#)
- [NSW Electronic Transactions Act 2000](#)
- [Intellectual Property Australia](#)
- [Commonwealth Copyright Act 1968](#)
- [NSW Government Information \(Public Access\) Act 2009 \(GIPA Act\)](#)
- [NSW Government Information \(Public Access\) Regulation 2009](#)

### Revision and Approval History

Date	Revision no:	Author and approval
July 2016	0v1	Victoria Civils-Wood, MHS Policy and Document Development Officer. First draft of work flow completed with input by members of CMS Work Flow Working Party (Freda Pierce – Manager SESLHD Executive Services; Julieanne Hilbers – Diversity Health Coordinator, POWH and CHS; Anuradha Jayanti – Web Team Leader, SESLHD Health ICT; Rod Isaacs – Programmer, SESLHD Health ICT.
Dec 2016	0v2	Draft prepared by Freda Pierce, SESLHD Manager Executive Services, and Victoria Civils-Wood, SESLHD Mental Health Service Policy and Document Development Officer
April 2017	0v3	Draft updated by Freda Pierce following extensive consultation and feedback from CMS Committee
September 2017	0v4	Draft updated to include Workflow Process provided by Project Manager
December 2017	0v4	Approved by SESLHD District Executive Team (DET) for publishing.
January 2019	0v4	Significant changes following go live of CMS. Updated by Executive Services to reflect current processes.
February 2019	1	Approved by CMS Governance Committee
March 2019	1	Links updated by MES. Published.
April 2022	1	Executive Sponsors updated.



## Appendix A: Workflow Process

### BACKGROUND

The work flow is a description of processes to ensure appropriate approval for creating or updating content to the internet as part of a broader governance framework for the Content Management System (CMS).

It is not a guideline on how to write for an internet audience, nor does it provide advice on suitable content for SESLHD sites and sub-sites.

This workflow is to be followed whenever new or updated content is required within the SESLHD internet site to ensure that appropriate governance processes support the implementation of a self-publishing internet for SESLHD.

Facilities or services may wish to create a process for the approval of content to be sent to the Content Author for adding to the CMS. An example of an internal process for the governance of web content is included in **Appendix F**.

The key roles are Content Author, Content Approver and Special Content Approver. An individual cannot be both an Author and an Approver. Where possible at least two staff from each team that has a website should be registered in the CMS workflow system, for each of these roles, to avoid delays or disruptions when a staff member is on annual leave, sick leave or unexpectedly unavailable.

A two-step workflow is applied for the publishing of regular content. This requires approval by the Content Approver only.

A three step workflow is applied to the publishing of certain types of content which may need to be published urgently or be sensitive in nature and requires senior management approval. This involves approval by the Content Approver and then review and publishing by the Special Content Approver.

### PROCESS

1. Staff who need to be involved in content development and publishing for the SESLHD internet first need to ensure they are registered in the CMS workflow system. This can be facilitated by completing the Internet Content Management System (CMS) Access Form: (<http://sesinet/sites/Forms/Lists/CMS/Newform.aspx>) (**Note this is a link to ICT Sharepoint. Click on CMS form in the left hand navigation**)
2. To add new content or update a page, the **Author** needs to **log** into the CMS. Instructions are outlined in the SESLHD CMS User Manual.
3. **Regular Content** - The Author can save drafts at any time and return to the task later. When the task is complete and the 'Save and Request Review' option is selected, a request to approve **and** publish the content will be automatically emailed to the Approver.

The Approver has **three business days** to **either**:

- **Endorse** the content and publish live to the internet

- Make small changes to the content and publish live to the internet
  - **Return** the content to the Author for further edits and resubmission. The reason for returning the page should be provided to the Author.
4. **Special Content** (urgent or sensitive content) – The Author creates the content. If the Author or Approver consider that the content meets the definition of special content described below, a ‘final Approver’ process must be undertaken. The Author or Approver should select process ‘Save and Request Director Review’. This will request review by the **Special Content Approver**.

**Special Content:**

- Needs to be published urgently
- Is potentially contentious, significant or a matter of public (external) interest i.e. likely to be of concern to the community or a considerable number of staff
- Poses, or may pose a risk (legal, safety and/or reputational)
- Represents a significant change in practice or process
- Involves a major change to the audience, intent or purpose of the content

If the Author or Approver is unsure if the proposed content is ‘special content’ or urgent, they should seek advice from the relevant Tier 2 Director or delegate.

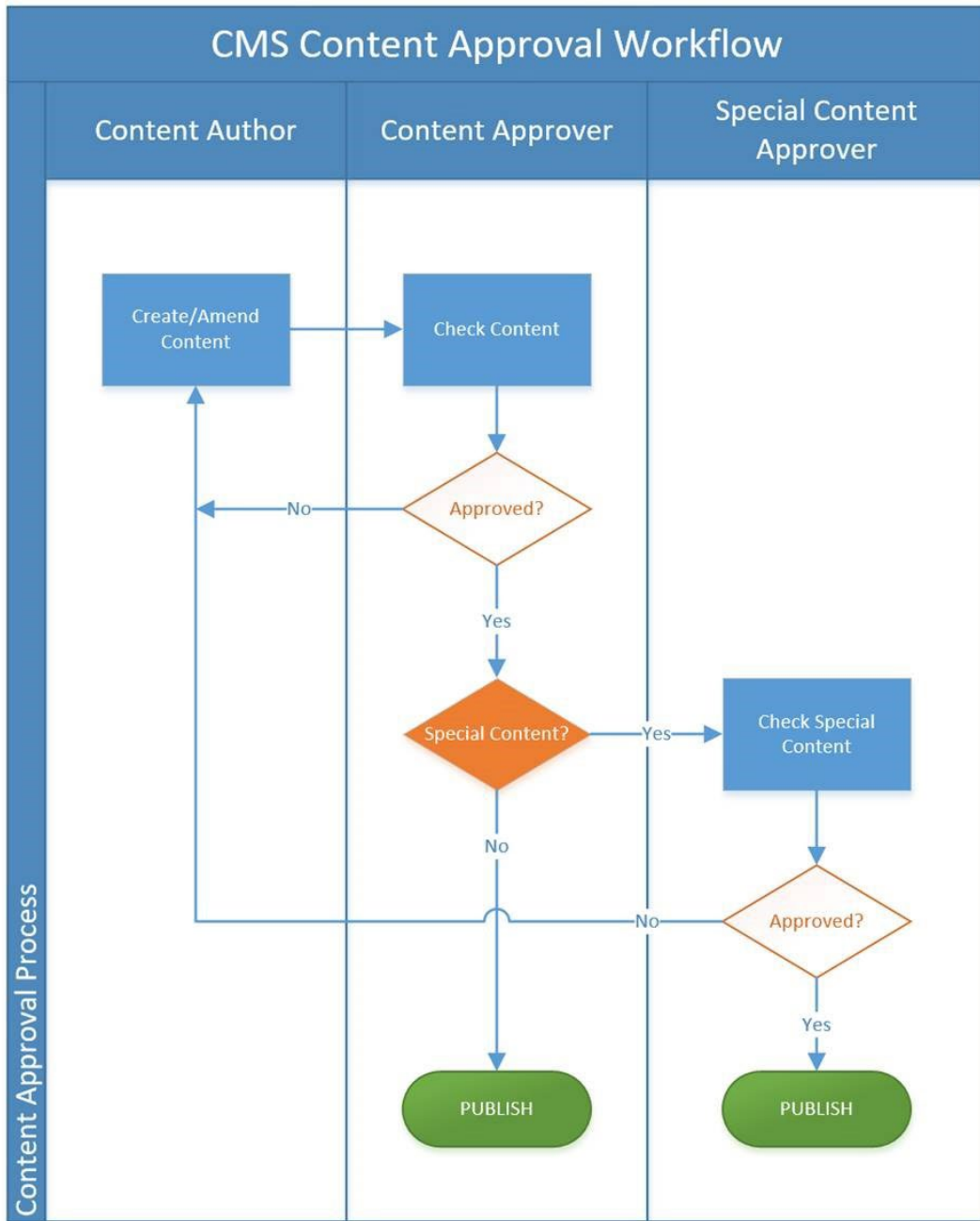
The Special Content Approver will be the relevant Tier 2 Director or the Media and Communications Manager. It is highly recommended that either the Author or the Approver consults with the Tier 2 Director or Media and Communications Manager prior to the start of the workflow process to ensure the prompt approval of the content.

If the special content requires urgent publication, it is recommended that the Author consult with the Approver prior to the start of the workflow process to ensure prompt approval. Urgent publishing is only to be used in the event that any delays in the workflow process pose either a risk to patient health or safety, a reputational risk to the organisation or publishing of the content is a legal requirement.

The Special Content Approver reviews the content. If approved they select the ‘Save and Publish’ button for the content to go live. If rejected they select ‘Save and Request review’ to return the content to the Author. The reason for returning the page should be provided to the Author.

Further details and ‘how to’ guidance is provided in [CMS User Guide](#).

## Appendix B: Workflow Flowchart



## Appendix C: SESLHD Web Writing Style Guide



### SESLHD WEB WRITING STYLE GUIDE

Writing for the web is not the same as writing for print or writing business correspondence. The interactive nature of the web means that pages are often read in a non linear way and readers are just one click away from leaving the page.

Below are suggestions for writing in a style that will keep visitors to the page engaged and encourage them to read more of the content.

#### 1. KEEP YOUR AUDIENCE IN MIND

Consider who will be reading and using your web content. Prospective patients, current patients, staff, doctors, allied health organisations? What are they looking for, and what do they need? Be sure the tone, language and organisation of content is appropriate for your audience.

#### 2. BE CONCISE

Web writing should be clear and direct. Keep sentences short. Remove words or descriptions that don't add value to the content.

#### 3. MAKE CONTENT SCANNABLE

Readers scan web pages before they read. If they don't recognise useful, relevant content, they often move on. Elements that enhance scanning include headers, links, highlighted text, bulleted lists, graphics, captions and pull-quotes.

#### 4. WRITE MEANINGFUL HEADERS

Readers rely on headers to navigate on-page content. Choose words for headers and sub-headers that clearly describe the content they introduce. Boring, useful words are better than clever, obtuse words.

#### 5. LIMIT PARAGRAPHS TO 70 WORDS

A 70-word limit is practical and effective number in most cases. Of course, less is better.

#### 6. USE BULLETED LISTS WHENEVER POSSIBLE

Bulleted lists are easier to scan and read than full paragraphs. If you are listing three or more items, consider using a bulleted list. For instructions or long lists like this one, consider using numbered lists for easy reference.

#### 7. USE ACTIVE VOICE

Writing in the active voice is more clear, conversational and engaging than the passive voice.

#### 8. USE COMMON LANGUAGE

It's essential for locatability and SEO (search engine optimisation) to use the same words and phrases your readers do. When creating page titles, headers, list items and links, choose keywords carefully. Additionally, be sure to use keywords consistently when creating web content. When used appropriately, this practice reinforces keyword relevancy for search engines, such as Google and your own internal search, thereby improving locatability. Avoid acronyms or health jargon which are foreign to consumers.

## 9. BE PROFESSIONAL AND HUMAN

Use a more conversational tone. Avoid jargon and buzzwords like "cutting-edge" or "leverage." Users are turned off by content that talks at them instead of with them. Consider how you would communicate with someone standing in front of you instead of via a traditional TV or radio advertisement.

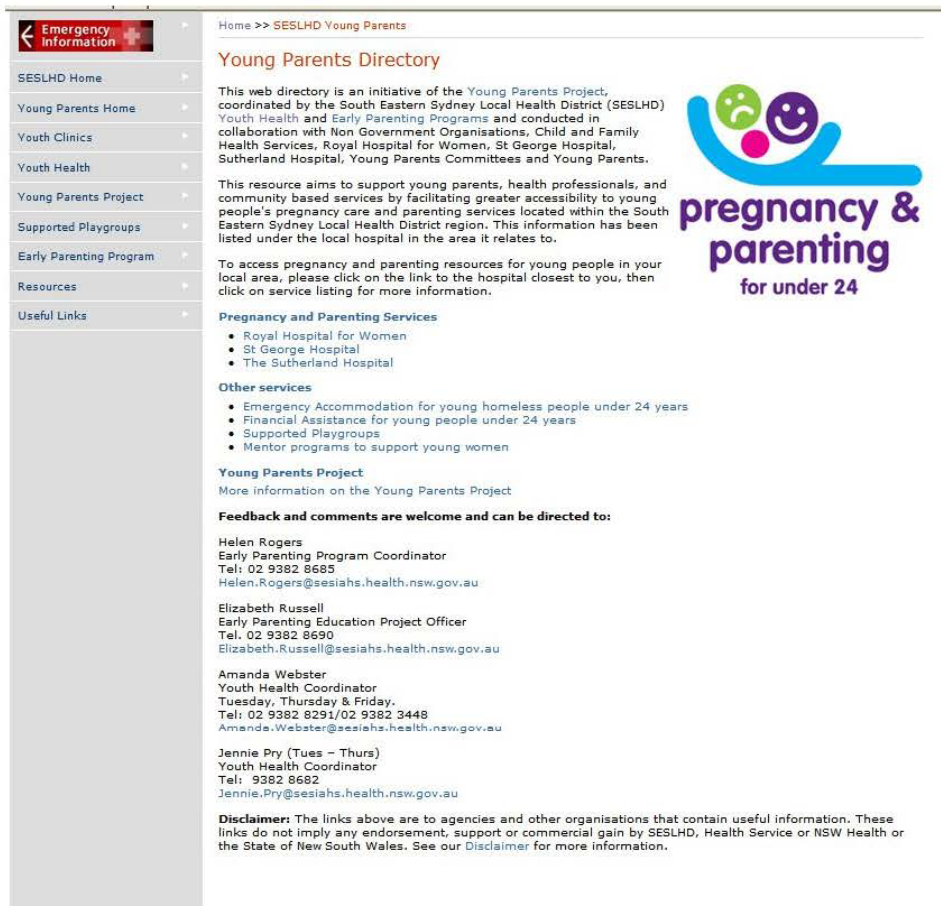
## 10. PURPOSE OF SITE

What is the purpose of the site? Is it to inform? Does it have forms? It is so people can access the service or contacts? Always ensure there is contact information that can be easily found for the consumer.

## 10. INCLUDE VALUABLE LINKS

If additional useful, relevant and appropriate content exists elsewhere—on or off your website—link to it. Instead of repeating information that already exists on your site, link to this content as well. Consider what content elsewhere might add value to yours and improve usability. When possible, include links within your page copy to make them contextually relevant.

## EXAMPLE



Home >> SESLHD Young Parents

### Young Parents Directory

This web directory is an initiative of the Young Parents Project, coordinated by the South Eastern Sydney Local Health District (SESLHD) Youth Health and Early Parenting Programs and conducted in collaboration with Non Government Organisations, Child and Family Health Services, Royal Hospital for Women, St George Hospital, Sutherland Hospital, Young Parents Committees and Young Parents.

This resource aims to support young parents, health professionals, and community based services by facilitating greater accessibility to young people's pregnancy care and parenting services located within the South Eastern Sydney Local Health District region. This information has been listed under the local hospital in the area it relates to.

To access pregnancy and parenting resources for young people in your local area, please click on the link to the hospital closest to you, then click on service listing for more information.

#### Pregnancy and Parenting Services

- Royal Hospital for Women
- St George Hospital
- The Sutherland Hospital

#### Other services

- Emergency Accommodation for young homeless people under 24 years
- Financial Assistance for young people under 24 years
- Supported Playgroups
- Mentor programs to support young women

#### Young Parents Project

More information on the Young Parents Project

**Feedback and comments are welcome and can be directed to:**

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**Disclaimer:** The links above are to agencies and other organisations that contain useful information. These links do not imply any endorsement, support or commercial gain by SESLHD, Health Service or NSW Health or the State of New South Wales. See our [Disclaimer](#) for more information.

## Appendix D: Health Literacy

The incorporation of health literacy, co-production with our consumers and community, and equity are essential components in reaching the vision for the SESLHD websites.

### Co-Production

The principles and actions articulated in the SESLHD Community Partnerships Strategy and SESLHD Equity Strategy assist us in ensuring our SESLHD website vision is achieved. We need to move beyond doing things *for* communities to a model where we genuinely work *with* them<sup>10</sup>. Known as **co-production**, the responsibility for this rests not only with managers, leaders or committees, but across the whole organisation. Co-production is relevant from the very top of governance and planning, through community-based strategies and programs, and across every single individual clinical interaction.

SESLHD websites are integral in achieving the goals set out in the Community Partnership Strategy. In particular:

Goal 1. Increase community participation and engagement

Goal 2. Ensure that community voices are genuinely heard and understood.

### Health Literacy

Health literacy is a significant issue as health information and systems have become increasingly complex and harder to understand. In Australia, sixty percent of the population have low health literacy (ABS, 2009).

Both the health literacy of the individual and the demands or complexity of the healthcare environment will impact upon the way a person accesses, understands, appraises and applies information. The more complex the health care environment the higher an individual patient's health literacy needs to be.

Health literacy is important because it shapes people's health and the safety and quality of healthcare. Low levels of individual health literacy contribute to a higher rate of hospitalisation and use of emergency services. People with low health literacy have poorer health outcomes and are more likely to have chronic conditions, difficulty managing those conditions, and are at increased risk of an adverse event and higher healthcare costs.

The [Health Literacy National Statement](#) is the national approach to addressing health literacy. This statement outlines the need for health services to:

- Embed health literacy into systems
- Ensure effective communication
- Integrate health literacy into education.

Health service organisations should communicate with patients in a way that supports effective partnerships and is responsive to the diversity of consumers. It is essential to work in partnership with consumers to develop the health information resources that they will use in a way that they can understand.

## Appendix E: CMS Image Specifications

Template	Image Position	Example Images Position	Width	Height	Resolution	Max File Size
Standard Page	Content Highlights Image		640	480		40 MB
Main SESLHD Page	Main Carousel Image	<a href="https://www.dropbox.com/s/yu0hoz4s4rty5c0/Screen%20Shot%202017-08-04%20at%201.22.33%20pm.png?dl=0">https://www.dropbox.com/s/yu0hoz4s4rty5c0/Screen%20Shot%202017-08-04%20at%201.22.33%20pm.png?dl=0</a>	800	470	96	300kb
Main SESLHD Page	Featured 3 Services	<a href="https://www.dropbox.com/s/igngg9d021xmdx6/Screen%20Shot%202017-08-04%20at%201.25.17%20pm.png?dl=0">https://www.dropbox.com/s/igngg9d021xmdx6/Screen%20Shot%202017-08-04%20at%201.25.17%20pm.png?dl=0</a>	702	389	96	200kb
Main SESLHD Page	News Image	<a href="https://www.dropbox.com/s/aloydv0zv8x4lqz/Screen%20Shot%202017-08-04%20at%201.34.53%20pm.png?dl=0">https://www.dropbox.com/s/aloydv0zv8x4lqz/Screen%20Shot%202017-08-04%20at%201.34.53%20pm.png?dl=0</a>	397	264	96	100kb
About Us Page	Main Right Image	<a href="https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0">https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0</a>	641	413	96	200kb
About Us Page	Board Photos	<a href="https://www.dropbox.com/s/pfjt3cqxdn6t74o/Screen%20Shot%202017-08-04%20at%203.03.44%20pm.png?dl=0">https://www.dropbox.com/s/pfjt3cqxdn6t74o/Screen%20Shot%202017-08-04%20at%203.03.44%20pm.png?dl=0</a>	196	274	96	100kb
Careers Page	Main Right Image	<a href="https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0">https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0</a>	641	413	96	200kb
Get Involved	Main Right Image	<a href="https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0">https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0</a>	641	413	96	200kb
Get Involved	Bottom Right Image	<a href="https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0">https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0</a>	641	413	96	200kb
Health Professionals	Main Right Image	<a href="https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0">https://www.dropbox.com/s/1xkxvat52ijlz94/Screen%20Shot%202017-08-04%20at%203.03.37%20pm.png?dl=0</a>	641	413	96	200kb

Template	Image Position	Example Images Position	Width	Height	Resolution	Max File Size
Health Professionals	Right Block Content Image	<a href="https://www.dropbox.com/s/iojupwdr7l8pbhm/Screen%20Shot%202017-08-04%20at%203.11.17%20pm.png?dl=0">https://www.dropbox.com/s/iojupwdr7l8pbhm/Screen%20Shot%202017-08-04%20at%203.11.17%20pm.png?dl=0</a>	805	310	96	200kb
Services Landing	Services Images	<a href="https://www.dropbox.com/s/w504ltw90ofjtgz/Screen%20Shot%202017-08-04%20at%203.14.32%20pm.png?dl=0">https://www.dropbox.com/s/w504ltw90ofjtgz/Screen%20Shot%202017-08-04%20at%203.14.32%20pm.png?dl=0</a>	520	245	96	100kb



## Appendix F: Example of an Internal Process for the Governance of Web Content

The Content Management System (CMS) has an inbuilt approval audit system for the roles of Web Author, Web Approver and Sensitive Content Approver. The Web Author will create or modify a page. The Web Approver reviews, rejects or approves the content and publishes it to the internet. The Tier 2 Director approves sensitive content.

Larger services or facilities may need to have a process in place for the approval of the content, outside of the CMS. For example:

- The General Manager may want the Director of Nursing to approve nursing related information
- The Director of Planning, Population Health and Equity may want to approve all web content from services within the Directorate, such as the HIV Outreach Team or Health Promotion Service.

Where necessary services or facilities may develop a local business rule. For example:

1. **Content generated:** An individual, known as the content owner, identifies information to be published on their website. They email the text and images to be used, in a Word document, to their line manager. Consent to use the photo (if any) should be included.
2. **Line management approval:** The manager reviews, consults and approves the content.
3. **Senior management approval:** If necessary, the line manager emails the content to the senior manager, or their delegate, for approval. The senior manager returns the email to the line manager with the final text and their approval.
4. **Send content to Web Author:** The content owner or line manager forwards the approval email to the web author, along with instructions for where it should be published within the website. The CMS process commences.
5. **Feedback:** The web author or web approver notifies the content owner that the information has been published to the internet.
6. **Consumer consultation:** In most instances the development of content for the internet should follow existing consumer consultation procedures.