# SESLHD HANDBOOK COVER SHEET



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# SESLHD HANDBOOK COVER SHEET



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# Section 1 – Background

The purpose of this framework is to outline the principles, processes and responsibilities for oversight and management of the South Eastern Sydney Local Health District (SESLHD) intranet.

The SESLHD intranet exists as an important resource for staff to access information and documents to support them to undertake their roles, as well as acts as a platform to connect staff to other systems, applications or websites.

The aim of the framework is to set clear, consistent and appropriate processes to allow for the SESLHD intranet to be governed and managed effectively.

This framework is not intended to be a training guide for use of the SESLHD intranet or SharePoint Online. The <u>SESLHD SharePoint Online Comprehensive User Guide</u> provides an introduction and training information for the use of SharePoint Online.

The framework has been developed with consideration to applicable NSW Health and SESLHD policy documents.

The framework exists alongside the separate framework related to the SESLHD internet, <u>SESLHDHB/024 - Website Content Management System Framework</u>.

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# **Section 2 – Principles**

# 2.1 Principles for the intranet

The purpose of the SESLHD intranet is to make available information and resources to SESLHD staff that are:

- Accurate
- Useful
- Readily accessible.

Intranet pages should reference or direct staff to other relevant intranet pages or websites, rather than duplicating content from another page.

The SESLHD intranet is to be used with regard to NSW Health Policy Directive PD2009 076 - Communications – Use and Management of Misuses of NSW Health Communications Systems.

# 2.2 Principles for the intranet framework

The processes related to the oversight and management of the SESLHD intranet are designed to:

- Apply consistency across the organisation
- Allow decisions to be made by appropriate managers at a suitable level, in line with SESLHDHB/027 - SESLHD Delegations of Authority Manual
- Ensure appropriate governance is maintained.

#### 2.3 Intellectual property

Staff involved in editing or approving content and information on the SESLHD intranet must maintain good practices in consideration of intellectual property through referencing and seeking permission for reproduction of content as required, in line with the *Copyright Act 1968* (Cth).



# Section 3 - Definitions

#### 3.1 Definitions

- Intranet: A local or restricted communications network commonly used by organisations as a platform for making information available to staff.
- Page: An individual intranet page created in SharePoint Online. Permissions and approval chains for a page come from the site or subsite it is part of.
- SharePoint Online: A Microsoft Office internet browser-based product used to create websites. SharePoint Online is the platform used by SESLHD to create its intranet.
- Site: A collection of related pages. Pages under a site will have the site name in their web address.
- Staff: The term 'staff' is used in this document as a collective term to describe employees, volunteers, students, contractors and other persons engaged by SESLHD who have access to the SESLHD intranet via the SESLHD network.
- Subsite: A collection of pages created as part of a site. Subsites will have the site name
  and subsite name in their web address. Subsites can have different permissions and
  approval chains to the site they sit under.



# Section 4 – Responsibilities

# 4.1 SESLHD executives are responsible for:

- Establishing and maintaining structures and allocating responsibilities within their hospital,
   service or directorate for creation and management of intranet pages.
- Ensuring a commitment within their hospital, service or directorate to keeping information on the intranet current, useful and readily accessible.

## 4.2 Digital Health Web Services team are responsible for:

- Maintaining the processes and coordinating approval of forms for access and permissions related to the SESLHD intranet.
- Creating and maintaining elements of the SESLHD intranet such as creation of subsites and managing standard page headers and footers.
- Working with the Media and Communications team to design and update content on the SESLHD intranet home page.
- Managing any technical or maintenance components related to use of SharePoint Online as the platform for the SESLHD intranet.
- Providing training and support to staff on the use of SharePoint Online.

## 4.3 Manager, Media and Communications, SESLHD is responsible for:

- Ensuring the overall design and layout of the SESLHD intranet is in line with the <u>SESLHD</u>
   Branding and Style Guide.
- Determining the layout and content of the SESLHD intranet home page on an ongoing basis and working with the Web Services team to edit the home page, ensuring that the layout and content meet staff needs and support the functionality of the intranet.
- Maintaining processes for requesting items on the SESLHD intranet homepage.

#### 4.4 Approvers are responsible for:

- Reviewing changes made to intranet pages when submitted by editors, and either approving or rejecting the changes in a timely manner, with feedback to the editor as appropriate.
- In reviewing and approving intranet page content, ensuring that information is accurate and appropriate.

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 Ensuring arrangements are in place to allow for intranet approvals to be delegated or undertaken by another approver during leave or other periods of unavailability, to ensure that changes continue to be made in a timely manner.

# 4.5 Editors are responsible for:

- Creating and updating intranet pages and content for a department, hospital, service or directorate, in line with the principles of this framework and any design standards.
- Collaborating with colleagues and subject matter experts to ensure content is accurate and useful.
- Submitting changes for approval and ensuring approval occurs, or responding to feedback as needed if changes are not approved.
- Seeking appropriate approval before deleting intranet pages.
- Establishing a schedule or routine practices to ensure the intranet pages they are responsible for remain up to date or are removed if no longer required.
- Ensuring arrangements are in place to allow for intranet updates to be undertaken by another editor during leave or other periods of unavailability, to ensure that changes continue to be made in a timely manner.

#### 4.6 All staff are responsible for:

- Using the SESLHD intranet in a safe and appropriate way, with regards to confidentiality and cyber safety.
- Providing input into the content and information available on the intranet pages for their department, hospital, service or directorate as appropriate.
- Providing feedback or raising concerns about content or information on the SESLHD intranet that may be out of date, inaccurate or inappropriate.



# Section 5 - Processes and Workflows

#### 5.1 Access to SharePoint Online

#### **Principles**

- SharePoint is a Microsoft Office product, and all staff have access to the SESLHD intranet after logging into a device or browser using their StaffLink identification number and password. Default staff access is to view pages and does not include permission to edit pages. In SharePoint this type of user is called a 'site visitor'.
- Permission to edit or approve intranet pages is given on an individual basis.
- Requests for editor permissions are approved by an existing approver for the intranet site that access has been requested for, or the site owner.
- Requests for approver permissions are approved by the owner of the intranet site that access has been requested for, or the relevant SESLHD executive.

#### **Process**

To request editor or approval access in SharePoint Online, staff are to seek written approval from an existing site approver, site owner or relevant SESLHD executive, and submit to the Web Services team by logging an 'IT General Request' ticket in <u>SARA</u>, attaching the written approval.

#### 5.2 Creation of new sites, subsites and pages

# **Principles**

- Each hospital, service or directorate, as identified on the <u>SESLHD executive structure</u>, may
  have its own 'site' in SharePoint Online. Sites are created by eHealth and cannot be
  created by SESLHD staff.
- Requests for creation of a new site are approved by the relevant SESLHD executive.
- Sites can contain subsites for the various departments within the hospital, service or directorate. Subsites sit under the parent site and will have the parent site name in the web address. Subsites can be created by the Web Services team.
- In SharePoint Online, each site and subsite can have distinct editors and approvers.
- Subsites can be created for a hospital, service or directorate in circumstances where there
  is a clear need for a different approver workflow process than the parent site. Subsites
  must have a minimum of three pages.

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- Requests for creation of a new subsite are approved by the site owner for the site that the subsite will sit under.
- Once a subsite has been created, new pages within the subsite can be created by editors.

#### **Process**

- Requests for a new site are submitted via the Intranet Site Request Form.
- Requests for a new subsite are submitted to the Web Services team by logging an 'IT General Request' ticket in <u>SARA</u>.
- New pages within an existing site are created and submitted for approval to site approvers
   via the normal process for content editing in SharePoint Online.

#### 5.3 Editing of content

## **Principles**

- Content on intranet pages should be reviewed and updated regularly. Content can be updated at any time when there is a need.
- There is no technical limit on the number of editors for a site or subsite. A minimum of two editors for each site or subsite is recommended, to ensure that processes remain efficient during periods of leave or staffing changes. It is also recommended to limit the number of editors to a reasonable amount for the individual department, to ensure consistency and clear responsibility.
- Editors should seek input from colleagues and subject matter experts as needed when preparing content, to ensure it is accurate and useful.
- If there are other staff members who request to review or approve intranet page content other than the site approver/s, these approvals are to be sought outside of SharePoint Online and prior to the content being submitted within SharePoint Online for approval by the site approver.

#### **Process**

 Creation of pages and editing of content is done within SharePoint Online and is submitted to the site approver for approval via the built-in workflow in SharePoint Online.

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## 5.4 Approval of content

#### **Principles**

• There is no technical limit on the number of approvers for a site or subsite. However, the recommended number of approvers is one main approver and one secondary approver as backup. This ensures consistency and avoids duplication, while also preventing delays during leave or other period of unavailability. Having more than three approvers is not recommended given the duplication and inefficiency likely to be caused.

#### **Process**

- Approvers are prompted to review content through notifications received in Microsoft
  Outlook and Microsoft Teams. Approvers have the option to either approve or reject the
  changes made by the editor, through the prompts and buttons in the notification.
- If there are multiple approvers for a site and another approver approves or rejects the request, the notification will be updated to reflect this and no action is required.

## 5.5 Changes to pages owned by others

#### **Principles**

- Editor permissions are given on an individual basis for the relevant department, hospital,
   service or directorate. Editors are not able to directly edit pages outside of their area.
- There are some circumstances where a staff member may wish to add or change content on an intranet page owned by others, such as:
  - On the intranet home page (see <u>Section 5.6</u> below)
  - On common or shared pages, such as organisation-wide forms, policies or news pages
  - When department resources or contact details may be included on other pages.
- It is the responsibility of the staff member to contact the other department, hospital, service or directorate via any established processes as needed, to request changes to an intranet page or provide feedback on an intranet page. These requests do not need to be sent to the Web Services team.



#### **Process**

 Editor permissions are given on an individual basis for the relevant department, hospital, service or directorate. Editors are not able to directly edit pages outside of their area and should contact the relevant department to request any changes.

#### 5.6 Intranet home page

# **Principles**

- The SESLHD intranet home page is managed using different processes to standard pages, due to the importance of this page and given it incorporates content from across the organisation.
- The Manager, Media and Communications, SESLHD has overall responsibility for the design and content of the intranet home page.
- Appendix A provides information on the design and content options available for the intranet home page. Requests for content on the intranet home page are to be approved by the appropriate senior manager before being submitted.
- The Web Services team maintains features such as headers, footers and the main navigation menu on the home page, and approves content for the 'What's Happening in SESLHD?' section.
- In urgent or emergency situations, the following positions can approve changes to the intranet home page:
  - Chief Executive, SESLHD
  - Executive Director, Operations, SESLHD
  - Manager, Media and Communications, SESLHD
  - SESLHD Health Services Functional Area Coordinator (HSFAC)

#### **Process**

- Requests for inclusion of content in the form of tiles, banners, buttons or quick links on the intranet home page are to be submitted to the Media and Communications team via email to <a href="mailto:session-s
- Requests for inclusion of content in the news section titled 'What's Happening in
   SESLHD?' are to be raised with the Web Services team by logging a 'IT General Enquiry'



ticket in <u>SARA</u>. Evidence of approval by the relevant senior manager is to be attached to the ticket.

## 5.7 Deletion of pages

#### **Principles**

- It is important that content on the intranet remains current and useful. As such, every intranet page should be reviewed at minimum once per year. Site owners and editors should actively consider whether an intranet page is still required, and if it is not, then the page should be removed.
- Proposals to delete an intranet page should be discussed with the relevant approver or site owner and can then be actioned directly in SharePoint Online by the editor.
- In addition, the Web Services team may undertake reviews of intranet pages to assess currency. Pages that appear to be out of date may be escalated to the site owner and/or SESLHD executive for action.

#### **Process**

 Editors can delete pages directly in SharePoint Online, following discussion with the relevant approver or site owner.

#### 5.8 Exemptions

#### **Principles**

Exemptions to the processes listed above are limited. Exemptions to standard intranet
processes are assessed on a case-by-case basis and must be supported by the relevant
SESLHD executive and the Web Services team for the technical component.

#### **Process**

 Requests for exemptions to standard intranet process are to be discussed with the relevant SESLHD executive and the Web Services team.



# **Section 6 – Design and Content Standards**

## 6.1 Design standards

# 6.1.1 Design elements

- Intranet pages will be created within the overall design and format that has been developed for SESLHD intranet pages. The <u>SESLHD SharePoint Online Style Guide</u> has been developed to provide guidance to staff on design and layout standards for the SESLHD intranet.
- Within the overall design, there are elements of an intranet page that can used to customise the page to best fit its purpose and audience. This includes elements such as subheadings, images and text layout.
- Intranet pages are to be created with consideration given to access, navigation, visual appeal, engagement and ability to provide feedback. The NSW Government Behavioural Insights Unit has a guide on reducing user difficulties titled 'Reducing sludge in websites' that provides tips on these areas.

## 6.1.2 Minimum page requirements

- Intranet pages will include the following minimum page requirements:
  - Heading
  - Standard navigation menus
  - Standard page footer.
- It is recommended that all pages include a contact email address for question or feedback.

#### 6.1.3 Branding and style guide

Use of fonts, colours and logos on intranet pages are to be in line with the <u>SESLHD</u>
 Branding and Style Guide and the <u>SESLHD SharePoint Online Style Guide.</u>

#### **6.1.4 Images**

Images must only be used on SESLHD intranet pages where SESLHD owns the image, where the image is royalty-free or where copyright permissions have been granted. The Media and Communications team provides guidance on use of images on the Media and Communications intranet page.



 The Media and Communications team maintains a <u>photo library</u> which contains images than can be used on intranet pages. The photo library can be accessed by all staff.

### 6.1.5 Use of Aboriginal artwork

- To use 'Spirits Healing' District Aboriginal artwork on SESLHD intranet pages, staff are to complete the request form, found on the <u>SESLHD Forms page</u>, and submit to the Aboriginal Health Directorate for approval, via email to <u>SESLHD-AHU@health.nsw.gov.au</u>
- For Aboriginal artwork that is branded to identify services, clinics and programs across the organisation, it is recommended as a matter of curtesy that the department contact the artist and inform their intent of use of the artwork, except in cases where an artist's agreement has been undertaken and has all the intended purposes listed.

# 6.1.6 Accessibility

- Design of intranet pages should consider the audience and incorporate features to support accessibility of the information. This includes design considerations like font size, spacing, captions and alternative text for images.
- Guidance from NSW Health is available in <u>NSW Health Policy Directive PD2024\_028</u> <u>NSW Health Accessible Communications</u>.
- External international guidance is available via the <u>Web Content Accessibility Guidelines</u> (<u>WCAG</u>) which provide technical guidance on making web content more accessible to people with disabilities, and the <u>Microsoft Office SharePoint Online support pages on accessibility features</u>.



#### 6.2 Content standards

In line with the principles for the SESLHD intranet outlined in <u>Section 2.1</u>, content on the intranet should be accurate, useful and readily accessible.

Editors and approvers are responsible for ensuring their content meets expected standards and policy requirements.

The following are factors for editors and approvers to consider when developing or updating intranet content.

- Audience: The SESLHD intranet is intended for use by SESLHD staff but is accessible to staff across NSW Health. As such, content on the SESLHD intranet should be written with the expectation that it may be read by a wide audience.
- Currency and duplication: Content on intranet pages should be reviewed at least every year. Only the most recent version of documents should be kept on an intranet page, with previous versions deleted.
  - Intranet pages should not duplicate content from other sources and should instead link to other pages or websites, to avoid duplication and ensure staff are directed to the most up to date information.
- Document collections: Pages that contain collections of information, such as committee
  minutes or reports, should limit their content to three years' worth of information, with older
  documents to be stored in an appropriate archive such as within Content Manager.
- Intellectual property: As per <u>Section 2.3</u>, editors and approvers must maintain good practices in consideration of intellectual property through referencing and seeking permission for reproduction of content as required, in line with the *Copyright Act 1968* (Cth).
- Language and writing style: Use of plain language is recommended. Content should undergo a review of spelling and grammar prior to submission for approval.
  - The <u>Australian Government Style Manual</u> offers guidance on writing and designing content, and use of plain language.
  - NSW Health Guideline GL2019 008 Communicating Positively: A Guide to
     Appropriate Aboriginal Terminology offers guidance on appropriate wording and language usage related to Aboriginal staff and the Aboriginal community.
  - NSW Health Policy Directive PD2024\_028 NSW Health Accessible
     Communications provides guidance on building accessibility and inclusive



practices into communication. Principles of this policy directive can be applied to information being made available to staff such as on the intranet. The Ministry of Health also has a <u>resources page</u> for this policy directive.

- Policy requirements: Content must comply with any relevant policy requirements, such as
  in the <u>Privacy Manual for Health Information</u>. Editors and authors are responsible for
  determining whether any policy requirements apply to their content.
- Professional and ethical communication: Editors and approvers must ensure that
  content is in line with the requirements of the <u>NSW Health Code of Conduct</u>, including that
  content is politically neutral.



# Section 7 - Documentation, References and Version History

#### **Documentation**

**Intranet Site Request Form** 

#### References

SESLHD references

SESLHD Branding and Style Guide

SESLHD SharePoint Online Comprehensive User Guide

SESLHD SharePoint Online Style Guide

SESLHDHB/024 - Website Content Management System Framework

SESLHDHB/027 - SESLHD Delegations of Authority Manual

#### **NSW Health references**

NSW Health Guideline GL2019 008 - Communicating Positively: A Guide to Appropriate Aboriginal Terminology

NSW Health Policy Directive PD2009 076 - Communications – Use and Management of Misuses of NSW Health Communications Systems.

NSW Health Policy Directive PD2015 049 - NSW Health Code of Conduct

NSW Health Policy Directive PD2024 028 - NSW Health Accessible Communications

**NSW Health Privacy Manual for Health Information** 

#### External references

Australian Government Style Manual

Copyright Act 1968 (Cth)

Microsoft Office SharePoint Online support pages on accessibility features

NSW Government Behavioural Insights Unit Reducing sludge in websites

Web Content Accessibility Guidelines (WCAG) 2

#### **Version and Approval History**

Date	Version	Version and approval notes
1 October 2025	1.0	Framework developed to outline governance process for the intranet following a change to the intranet platform used in SESLHD. Approved at Executive Meeting and by Chief Executive.



# **Appendix A: Intranet Home Page Content Options**

This information follows on from the principles outlined in <u>Section 5.6 Intranet home page</u>.

#### Content sections open to requests from staff

#### 1. Promotional tiles with graphics – maximum of five

- a. These tiles appear at the top of the intranet home page and are designed to promote major SESLHD-wide priority programs. For example: CORE Awards, People Matter Employee Survey or staff health information.
- b. Awareness days/weeks/months and events are not supported on these tiles.
- c. To request an item on one of these tiles speak, with a <a href="Media and Communications team Communications Partner">Media and Communications team Communications Partner</a> when the communication plan is being developed. The Communications Partner will book the content into the promotional tiles calendar and confirm final approval from the Manager, Media and Communications.
- d. Tiles will be designed by the Media and Communications team. A link is to be provided to an intranet or internet page link relevant to the tile, which staff will be directed to after clicking on the tile.
- e. Tiles will remain on the page for a minimum of three weeks and depending on other requests may be removed after four weeks.

# 2. Right hand navigation buttons – no graphics

- a. These dark blue navigation buttons link to high traffic areas of the intranet that contain specific operational advice. They are listed in alphabetical order with a maximum of 15 buttons allowed.
- b. Requests for items to be added to this area are to be approved by the appropriate senior manager and then submitted via email to <a href="mailto:SESLHD-Communications@health.nsw.gov.au">SESLHD-Communications@health.nsw.gov.au</a> for approval by the Manager, Media and Communications.

## 3. 'What's Happening in SESLHD?' section

- a. This section is used for events and new programs taking place within SESLHD. It is not for promotion of existing intranet or internet pages, or ongoing programs.
- b. A maximum of 10 bullet points will be placed in this section at any one time.
- c. When a new approved request comes through, the bottom bullet point will be removed from the front page (unless there is another bullet point that has an expiry date on it that has passed).
- d. There is no guarantee of how long bullet points will remain in the 'What's happening in SESLHD?' section of the intranet home page.
- e. To request a space, seek approval from the appropriate senior manager, and then log an 'IT General Enquiry' request in <u>SARA</u> to the Web Services team who will seek final approval from the Media and Communications team.
- f. Examples of items that are accepted:
  - i. Event activities taking place across SESLHD

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- ii. Conferences, forums, education and specific training sessions
- iii. Restructure consultation papers
- iv. New action plans or business plans.
- g. Examples of items that are not accepted:
  - i. Links to existing intranet or internet pages
  - ii. Ongoing training programs
  - iii. Ongoing action plans or business plans.

## **Content sections generated by the Media and Communications team**

#### 4. On the Pulse

- a. A maximum of eight recent On the Pulse news stories will be featured under the On the Pulse banner. This will include a corresponding image for each story and a link back to either the website story or the online version of the newsletter.
- b. This section is determined by the Media and Communications team based on content from recent editions of the On the Pusle newsletter.

# 5. Chief Executive (CE) Newsletter

- a. This section includes a static banner image linking to the CE Newsletter landing page which includes a link to the latest edition of the newsletter and details for how to submit content.
- b. This section is determined by the Media and Communications team.

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