NHS England

Creating a highly usable and accessible GP website for patients

Version 1, September 2022

Who is this guide for?

Practice managers, PCNs, ICSs (formerly CCGs), GP federations and anyone who is looking for guidance for improving general practice (GP) websites.

It's been put together by the user experience team in NHS England's Primary Care Group and is based on user testing with 102 patients with moderate to low digital confidence, conducted between October 2021 to April 2022.

There are multiple benefits to creating a highly accessible and usable GP website. It will:

- Improve patient satisfaction and experience of using the GP practice, making it more likely they will return and use digital tools

- Ensure patients are signposted to the correct place for their needs, reducing wasted patient and practice time

- Reduce the risk of adding digital inequalities to existing health inequalities

- Remove access barriers for patients with disabilities, as well as making your website legally compliant

- Create a place where patients can effectively self-serve, thereby:

    o Reducing the burden on receptionists and clinical staff

    o Empowering patients to manage their health and care

[Read our research in full](#).

If you have any questions or would like to send feedback, please get in touch:

Digital First Primary Care team inbox: england.digitalfirstprimarycare@nhs.net

Contents

These are the things you should think about as a team (whoever you are) before you make any decisions. These are the hard questions you need to answer before setting off and will help you stay focused. They will also help you work with your website supplier.

This section will help you write your Invitation to Quote (ITQ) and gives suggestions for asking potential suppliers about their usability and accessibility approach.

Here are all the details of how to make the website usable and accessible, with information for key pages and resources.

A list of the contractually required elements of a GP website at the time of writing (July 2022).

Part 1: Getting ready

Before you can get into the details of designing or redesigning your GP website, there are some important decisions you (as a practice, PCN, ICS or previously CCG or GP federation) need to make first.

1.1 Identify the tasks patients come to the website for, and prioritise improving them

Our research showed that these were the top tasks for patients on a GP website:

1. Make, change or cancel and appointment

2. Get a repeat prescription

3. Get a sick note for work

4. Get test results

5. Register with/join the practice

6. Get the practice phone number

7. Find out the practice opening times

8. Find the practice address

The main users of a GP website are patients. They come to the website to complete tasks. Their top tasks define the website's core purpose. Supporting this purpose and those tasks is the website's main goal.

GP websites no longer exist just to display information, they are becoming places where patients can complete tasks. This shift to being places where you can provide services makes websites a valuable tool for practices and worthy of time and effort to ensure they are optimised.

The website should help the practice to provide care to its patients and should be integral to its approach, not seen as separate.

You can identify the top tasks through patient research, website analytics or you can use the tasks we identified in our research.

1.2 Decide how you will keep website content up to date

Creating accurate, clear and concise content is critical, especially for the 11 million people who have literacy challenges in the UK[1].

Maintaining this content is time consuming and requires ongoing copywriting skills, staff time and resources. Some GP websites contain up to 200 pages of content and that's a lot of content to review and keep updated.

In some areas, PCNs, ICSs or previously CCGs or GP federations have come together to purchase a single web platform to support multiple practices. This enables them to:

- Create individual pages of content that can be created once and used on all practice websites

- Create pages of suggested content that can be shared to all practices for practices to customise as they wish

- Create unique pages for individual practices

- See analytics at practice, PCN or ICS (formerly CCG) or GP federation level showing you how patients use the site and what services or content they use most and what is not used.

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[1] https://literacytrust.org.uk/parents-and-families/adult-literacy/

1.3 Using a template that uses the NHS 'look and feel'
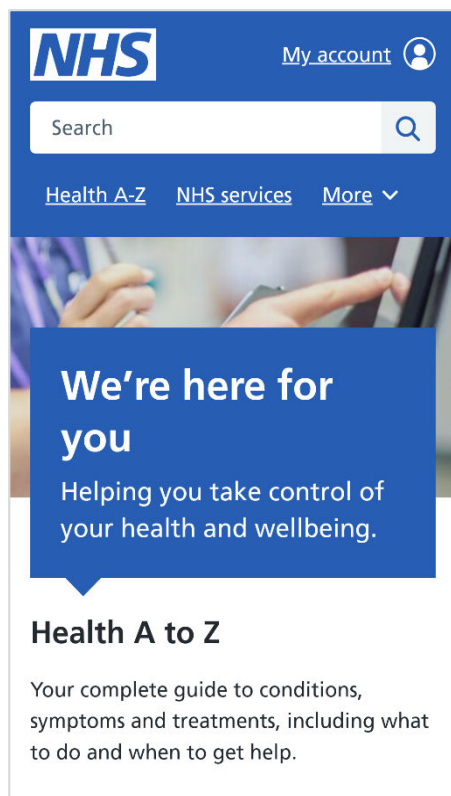
nhs.uk webpage

GP websites should look like NHS websites to give patients confidence and trust that they are in the right place.

Trust is at the heart of healthcare. The NHS logo and its distinctive blue identity are widely recognised by the public. NHS England states: *Patients and the public see the NHS as a single, national, unified service and expect and want the NHS Identity to be applied in a consistent and uniform way – it reassures them that they can rely on the quality of healthcare being provided wherever they access it.*

From research with 1,000 members of the public, 98% knew the NHS brand. The same research found that it is associated with trustworthiness.

[The NHS identity guidelines and links to the research](#)

[Specific guidance for how GPs can use the NHS identity](#)

1.4 Ask your supplier to use NHS design components

The NHS provides many different services to patients throughout their life and many of these will involve patients going online.

Imagine your frustration if your supermarket moved the items you want into different aisles every time you visited. Equally patients shouldn't have to 're-learn' how to use NHS online journeys every time they access a different NHS service.

The NHS has a well-tested set of design components (the bits and pieces that make up web pages) available for web designers and developers to use. They are well tested, free and help us build web journeys that are familiar and easy for patients to navigate.

Ask your current website supplier to use [NHS design components](#) if they don't already.

1.5 Check your supplier (and you) take a 'mobile first' approach

Designing a website using a 'mobile first' approach has been a standard across web design for many years now. The idea is that if you can make a design work for a small screen first, you get the content and the priorities of your website down to its simplest form. This is one of the reasons why keeping it simple, reducing the amount of copy (words) and options is crucial to making a website usable.

Analytics from nhs.uk for the first six months of 2022 show 81% of sessions were via mobile devices, with just 16% from desktop and 3% from tablet. Research from Ofcom[2] shows that people with low digital confidence are more likely to only use a mobile to go online.

A 'mobile first' approach supports two ways that websites are built:

- Responsive web design: The website is built to fit the screens of different devices automatically

- Progressive advancement: The first version of a website is built for relatively simple browsers (like those used on a mobile). This version includes the most basic functions and features. After that, a more advanced version is added for tablets or desktops, which is created by adding images and more complicated effects to the basic version.

A 'mobile first' approach has many advantages, for example:

- It pushes you to make your digital products more readable on smaller screens and therefore easier for most of your users

- It means content first. This means putting your most important tasks or information - the ones your users want most often - first on your page. This

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[2] https://www.ofcom.org.uk/research-and-data/media-literacy-research/adults/adults-media-use-and-attitudes

also makes your content more accessible to anyone with cognitive disabilities.

Recommendations

- Insist suppliers show their mobile designs first and during any discussions, view the site on a mobile width screen.

- When you look at your site, choose to look at it on a mobile.

- When you think about your content, think of it as a long list (how it will be viewed on a mobile screen) rather than a web page on a desktop computer which has bits on the left, middle and right.

- Make sure at least half of participants in user testing use a mobile (preferably their own) during the session (see the next section for details of user testing).

1.6 Commit to task-based user testing before going live

The only way of knowing if your site is usable is to test it with real patients.

In order to make the most of this process, the goal should be to root out any remaining issues (not to verify assumptions or tick a box).

The key aspects of a usability test are:

- The test participants – aim to test with the third of the population who are least confident using digital and who have low levels of English comprehension and written English. They should be testing on their own device, with at least half of the participants using their mobile

- The moderator – should be neutral, unbiased and experienced at conducting usability tests

- The test script – should use task-based testing, which aims to recreate as realistic a scenario as possible that feels natural to the participants (for example, asking them to get in touch with the surgery using the example of the last time they had to do this).

Further reading around usability testing from gov.uk:

- [Recruiting users to test with](#)

- [Moderated user testing](#)

1.7 Have an accessibility expert in your team and commit to accessibility testing

Millions of people rely on assistive technology and tools to help them access websites. These tools allow them to access content that can be read aloud, navigated without using a mouse, enlarge text and much more. This helps users with accessibility needs use the NHS easily and fairly.

All GP websites are legally required to be accessible to [WCAG AA standard](#), which requires that websites are compatible with these extra tools (plus other requirements).

Getting expert advice

Some of this can be quite technical, so we would recommend having someone with that expertise available in your team, or an expert agency on hand to help you specify, commission and test highly accessible websites.

If you would like advice or recommendations about finding a supplier to conduct accessibility testing, please email us at: england.digitalfirstprimarycare@nhs.net

There are many resources online which can help, some of which are listed here:

- The [NHS Digital Service Manual](#) has good, general advice about accessibility

- [Some useful tips on getting an accessibility audit](#)

Advice about accessibility testing:

- [Advice from NHS Digital about conducting an accessibility test](#) (If you choose to use an in-house expert)

- [Advice from gov.uk about testing for accessibility](#) (This lists all the recommended assistive technology you should test with)

*   [Advice from gov.uk about user personas](#) (the types of people you should design for and test with)

1.8 Identify your data and analytics needs

Website suppliers are responsible for providing you with analytics and data reports. It's vital that they do this so you can see how your site is performing and where to focus your energy. Suppliers should provide insights along with the data, so all stakeholders know what the data means.

Website analytics rely on websites being built and tagged in a way that gathers useful data. Probing a supplier's expertise should indicate whether they invest in this as a source of information to inform the design of their websites.

Recommendations around what to ask for:

*   Ensure reporting looks at both short periods of time (a week/month) and also longer periods of time (6 months/a year). This will give you perspective and show changes over time

*   Suppliers should provide you with information about who is coming to your website:

    o   Visitor demographics (if available), like age, gender, location

    o   What devices people are using to access your site (split between mobile, tablet and desktop)

*   Reports should also tell you what people are doing on your website:

    o   User journeys through your website (these should reflect your website/patient goals) and any problem areas where users drop out of it before they've completed the task it was designed for

    o   Where people enter your site from (google or another site) and which page they initially land on.

Remember that analytics can only tell you so much and should be used with more qualitative information, for example, from user testing, from what receptionists' report patients call about, patient surveys and so on.

Analytics also provides useful information when it's time to decide about website content, for example, when new items have been added and you want to check they are being used and working as intended.

Part 2: If you're using a tender process

You may decide to run a competitive process and ask a range of website suppliers to bid to provide a single website, or a platform to deliver many websites.

There are many elements to include in a tender document. Below we have suggested specific items to make your website more usable and accessible. These can be added alongside the many other needs - service availability, pricing, delivery timetable etc.

(Skip to Part 3 for specific guidance on website design)

2.1 What your ITQ or tender document should include

- Make your usability ambition clear: Make an explicit commitment to delivering a step change in usability and accessibility of your digital journeys.

- Scoring: Weight usability and accessibility highly in your scoring matrix. Include assessments of supplier competence in both areas as well as the usability and accessibility of the proposed website or platform to host many websites.

- Pre-deployment user testing: Include a requirement for user testing prior to deployment and final payments. This should specify the testing organisation, the user profiles and standardised task-based tests and required acceptance criteria.

- Specific requirements:

  o Require suppliers to use the NHS Identity Guidelines when designing the look and feel

  o Require suppliers to meet NHS Content style guide, specifically, around reading age (and testing it), copy and language

  o Require suppliers to use the NHS Digital Service Manual's design system (covering styles, components and patterns) if available

  o Specify key parts of the user experience, for example:

- Have five to six primary navigation items, including Home, Appointments, Prescriptions, About/Contact us

- Ensure on-site search is optimised so that search results display key tasks and reflect the language used by patients

- Ban suppliers from using overlays (boxes that sit on top of a webpage) for information. Use the [warning callout pattern in the NHS Design system](#) instead

- Ban website suppliers from using accessibility tools that sit on top of your website (widgets/overlays). Sites should be built to be accessible from the bottom up and shouldn't need tools that make the text larger or change the contrast.

Further reading:

- [A useful list of questions to include during the procurement process from Disability:IN](#)

- [A detailed toolkit for procuring accessible technology from Disability:IN](#)

2.2 Screening suppliers for usability and accessibility competence

Proof of usability competence

- Expertise: Ask for proof of supplier's design capability and approach. Who leads on design for the organisation? Ask to meet with them. Probe their understanding of inclusive design, what specific groups of patients and their needs might need careful consideration?

- Experience with using NHS Digital Service Manual: Ask suppliers if they are familiar with this key tool and ask to see projects, they have created using it.

- Supplier product testing: What user testing programme do they have in place (if they are selling a standard template or product)? Who does the testing for them? Which profile of users do they test with? What is their test

methodology, and can you see recent sample results? How often do they conduct usability testing?

- Iterative design: What is their approach to continuous improvement based on user feedback, changing technology and ensuring the site stays relevant to patients.

- Project testing: What specific usability testing are they proposing for your website before it goes live?

- Analytics: What analytics do they routinely collect? How are they displayed and what insights will they provide to help your organisation improve your website and overall service?

We can help with recommended user profiles, by sharing the participant screener (for user testing) and our standard user testing script. Please get in touch at england.digitalfirstprimarycare@nhs.net if you would like these.

Proof of accessibility competence

- Expertise: Ask for proof of accessibility expertise within the organisation. Who leads on accessible design for the organisation? Who is their developer or technical lead responsible for meeting WCAG AA standards? Ask to meet with them.

- Testing: What regular accessibility testing programme do they have in place (if it's an off-the-shelf product)? Who does the testing (is it a recognised reputable external organisation)? Which profiles of users do they test with? What is their test methodology, and can you see recent sample results?

- Project testing: What specific pre-deployment accessibility testing are they proposing for this project?

- Keeping the site and content fully accessible: when new content and images are uploaded how will the accessibility of this content be maintained?

Part 3: Designing a highly usable GP website

This section is to help anyone who is involved in designing your new website or updating an existing website. You can pass this to web designers and developers to review or you can use it as a checklist in your discussion with your supplier.

A couple of points before we start:

- For a website to be truly usable, every element needs to be in place, so try to implement all the following points.

- Websites need constant maintenance – they are never 'finished. Maintaining the content can often change the usability and accessibility of a website over time, so it's important to think about the long-term maintenance when designing a new or improving an existing website. Focusing on only having essential content makes this easier.

If you are interested in reading more about core principles behind good digital design, the NHS service standard[3] is an excellent resource. It is designed to help teams:

- Meet the GOV.UK service standard

- Address the different needs of health service users

- Navigate the complexities of delivering digital services in health and care

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[3] https://service-manual.nhs.uk/standards-and-technology/service-standard

3.1 Reducing content pages and copy to the minimum

A 1000-word appointment page creates a huge barrier for many users

Decluttering your website can be difficult, especially when there are many stakeholders wanting to put things on the site. It's tempting to think that all the information is important, but in truth, users don't read most of it. This means that the useful information is lost and patients, especially those with literacy challenges, will struggle to find what they are looking for. With website content, "more is less".

There are many benefits to reducing the copy on your website:

• You create a highly usable website that focuses on the tasks patients want to do

• Your content is far more likely to be up to date and relevant

• You reduce the time and cost of writing and maintaining content.

Our research showed:

• We found that if there were paragraphs of copy explaining the appointments system in great detail, users didn't read this and would just hunt for the call to action

• On one GP website, there were many paragraphs of copy and the link to the online consultation form was buried in this copy. This meant that half of the users were unable to find the start of the form.

How to start decluttering your website

Keep the amount of copy patients need to read to an absolute minimum.

This means rewriting the copy, potentially many times, to reduce the length of sentences, number of sentences and number of paragraphs. The NHS Content Style Guide has excellent guidance on how to write clear, accurate and concise copy.

We keep content to the point.

We use short words. For example, we prefer "have" or "get" to "experience" in phrases like "if you experience headaches".

We use short sentences – up to 20 words. We use short paragraphs – up to 3 sentences.

We use subheadings and bulleted lists to help users find what they need.

We use the active voice – "find a pharmacy" rather than "a pharmacy can be found".

Example of how we write from the NHS Content Style Guide

Recommendations

- Start with analytics to look at pages that have had the least traffic and consider removing or cutting down these pages

- Add timestamps (auto removal or schedule to check freshness of content)

- See what content can be written/sourced from a PCN (neighbourhood), Local authority (place) or ICS (system) level

- Is there a link to national content (on nhs.uk) that could be used?

With every section of content, rate what is important to patients, vs what matters to the practice.

3.2 Keeping your content highly usable and up to date

Writing good words

In the UK, 7.1 million adults read at, or below, the level of an average nine-year-old. More than four in 10 adults struggle to understand health content written for the public. And six in 10 adults struggle with health information that includes numbers and statistics.

Where to get content from

The NHS Digital Service Manual has great guidelines and support but it's hard to train every practice team member creating content to be a good copywriter. Ways to ease this are:

NHS Digital Service Manual 'content style guide'

- Using NHS-managed content from nhs.uk for generic health information or medicines (so someone else creates, tests and maintains this content)

- Creating ICS/place or PCN/neighbourhood level, shared content (written once, tested and deployed to many practice sites). An ICS or PCN content management system has been used in some areas to make this easy and quick

- Templated content - standard copy and page structures which practices can amend rather than have to start from scratch.

Keeping content up to date

This is vital. Add a date stamp to each page and set diary reminders to review.

Think about seasonal changes and information that needs to be made more visible for example during 'flu season' or 'hay fever season'.

Require suppliers to put an expiry date on 'news' announcements, for example, practice closure dates, and ask for tools that automatically delete them after a fixed time period (like your out of office email messages).

For emergency and urgent information, the [NHS Digital Service Manual recommends embedding it within the page](#).

3.3 Making calls to action clear

Linking to tasks

Getting a user to the right page is important but enabling them to find what they are looking for when they get there is just as important.

Calls to action are buttons or links that start users on a journey or link them to somewhere else where they can start a task. The words used on these calls to action and the visual design of them are both important.

The NHS Digital Service Manual has guidance on this:

[NHS Design guidance on using buttons](#).

[NHS Design guidance on using calls to action that signpost the start of a digital service (action links)](#)

[NHS Content guidance on writing good links](#)

Example of a clear call to action button

What our research showed

In our research, all the key tasks we asked people to find on GP websites were well understood by users. Many had experienced them before and knew what they were trying to achieve.

Users bring this 'mental model' and associated keywords with them when they approach a website. These keywords are critical. These are the key words patient-users scan the page for, look for in navigation or enter into search boxes.

Recommended calls to action for key tasks

We recommend using the following calls to action for key patient tasks which include the words most people are searching for (the keyword that users associate with the task is in bold):

- Make, change or cancel an **appointment**

- Get a repeat **prescription** online

- Get a **sick note** for work

- Get **test results**

- **Join** the surgery
  (Participants varied between 'register' or 'join' the practice. 'Register' was often confused with other items you can register for, for example, 'Register for Patient Access'.

Avoid adding lots of tasks that patients aren't looking for on the homepage

We found that the more options users had on a page, the more likely they were to be unsure which to choose. This led users to get lost and confused and less likely to find the task easily.

3.4 Creating a highly usable primary navigation (menu) and website structure

Your primary navigation, also known as your menu, is a tool for users to navigate your site and shows the structure of information within it.

Every piece of information, task and link is grouped under these menu items, like the categories of books in a library. Getting this structure to be usable and simple is key to enabling patients to find what they are looking for.

In our research, we found that patients have particular keywords in mind when they come to the website to do something, so they are looking for 'appointment' or 'prescriptions', for example.

Patients then used three different strategies to find the starting point for key tasks:

1. Scanning the homepage calls to action for their keywords.

2. Scanning the primary navigation (menu) for their keywords.

3. Entering keywords into the search box and then scanning the search results for their keywords.

Scanning the homepage for their keywords in homepage calls to action.
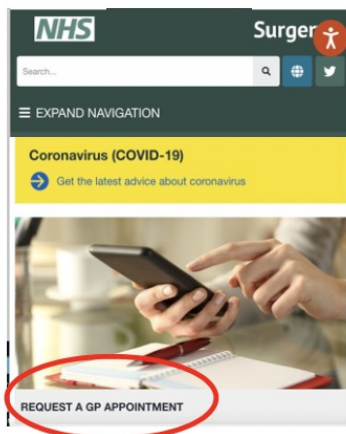
Scanning primary navigation for their keywords in section headings.
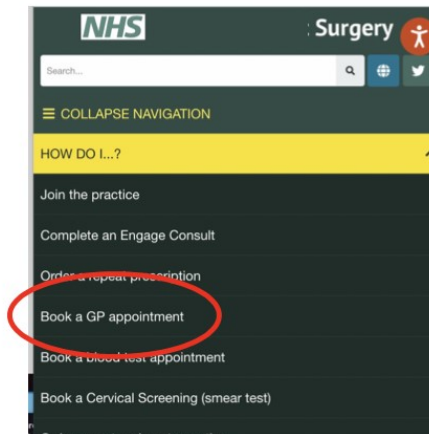
Entering keywords into search for their keywords and then scanning search results returned.
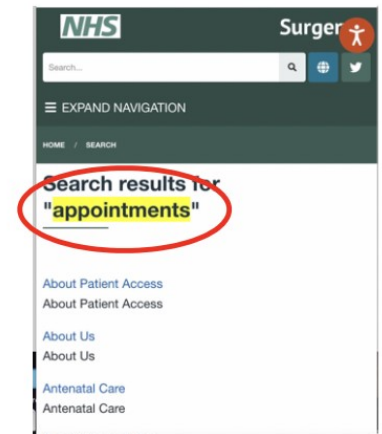
Example of the three different strategies to support users find the starting point of key tasks

When all three strategies were supported, the site was more usable.

Users often weren't sure which sections some tasks would be found in, so having fewer places they needed to look in helped them.

How to start

We recommend having six menu sections:

- **Home**

- **Appointments**
  With information and links to make, change or cancel an appointment

- **Prescriptions**
  With information and links to getting a repeat prescription online

- **Services**
  With information and links to getting a sick note for work and getting test results

- **Health information and support**

- **Surgery information/About us**
  With information and links to register with the practice and the practice contact information

Think about the top patient tasks and how they fit into the main sections of your site.

How can you reduce the number of sections in your site? What sections can go or be combined?

What are the main sections now and are they focused around the patient and their understanding and needs? Or are they GP practice focused?

Is it easy for someone who doesn't know the GP practice to guess what is in each section, based on its label?

Primary navigation recommendations based on our research

- Keep the number of items in the main menu to between five and seven. Our research found that people weren't sure where to look for some key tasks, so having fewer places for them to look makes it easier

- Use design components recommended by the NHS Digital Service Manual to help users find their way around:

  Example of a 'breadcrumb' structure and a clear call to action.

  - Use 'breadcrumbs' (a list of links to sections higher up in the structure) to help users understand where they are in the website: Advice in the NHS Design system around breadcrumbs

  - Use calls to action called 'action links' to signpost users to the start of a digital service. Advice in the NHS Design system on action links

- Do have a link to 'Home' in your primary navigation, this is used a lot by users and most users don't know that the logo in the top left takes you to the homepage

- Use the word 'Surgery' not 'Practice' throughout your website. This is more familiar to patients. Use the NHS Digital Service Manual's content style guide on words to use when describing a GP surgery

3.5 Making your primary navigation and search box visible

Primary navigation (menu)

Make sure your menu is visible and open on a wide screen, for example in a browser viewed on a desktop computer. When the site is viewed on a narrow, mobile screen, don't use an icon to represent the menu, for example a hamburger menu icon (an icon with three horizontal, stacked lines). Users often don't understand these icons and ignore them. For a narrow, mobile screen, use the word 'menu' or 'more' instead.

nhs.uk use a 'combo navigation' on a mobile width screen, showing the first two items in the menu and having a 'more' option which expands the rest of the menu.

Search

Always make the search box visible and open, with the word 'search' used somewhere in the component. Seeing how it's done on nhs.uk is a good guide.

Unlabelled menu and search icons are not noticed by users

Example of a 'combo navigation' on a mobile

Our research showed

When the search is only indicated using a magnifying glass icon, participants were less likely to use the search when looking for tasks.

When the search field is visible and especially when the word 'search' is used around that component, this feature is far more likely to be used.
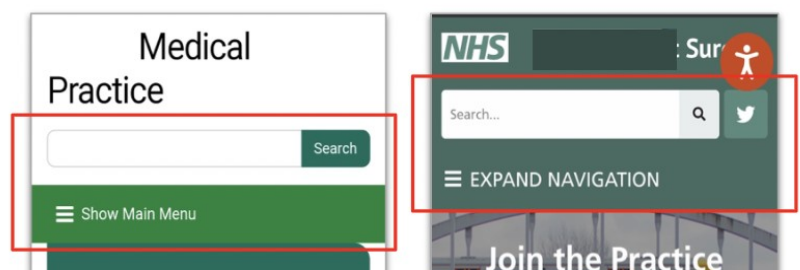
Example of labelled menus and search icons

This is especially important on mobile as people are more likely to use the search function.

3.6 Creating a highly usable homepage

The homepage of a GP website should provide quick links to all of the most commonly used tasks for patients. This will enable patients to quickly complete tasks and creates a positive user experience.

Our research found that the homepage is the first place that 80% of users will look when searching for a task on a GP website. If the task is visible, high up on the homepage, and clearly labelled, it's much more likely to be found quickly and easily.

Recommendations

- Put all key tasks high up on the homepage

- Don't have paragraphs of text on the homepage, just have tasks and calls to action

- Make sure useful information like opening times and the practice phone number are visible on the homepage (these can be in the header and footer).

3.7 Thinking through your patient and carer contact model

There are different ways to contact and see a doctor or other healthcare professional. As well as phoning or visiting the GP surgery, patients can fill out an online consultation form, book an appointment through the NHS App or other patient facing apps.

Patients can then consult with a doctor or nurse in person, by phone, in a video call or via a text or online message.

Patients can also receive care from their own practice team or from staff employed by the PCN ('ARRS roles'), and this can be via in-hours or out-of-hours care including via extended/enhanced access services.

There's a lot to explain to patients so they can choose how to contact the practice.

We need to explain how patients can meet **their** needs. Many sites explain the practice admin process which is sometimes hard for patients to understand how it can meet their needs.

Start by:

- Writing down the different ways a patient can request help from the surgery for a situation they feel requires an **urgent or same day appointment**

- This might include calling, going to the practice in person, filling out an online consultation (OC) form. It might mean contacting the surgery at a specific time or on a specific number

- Writing down the different ways a patient can request help from the surgery for a situation they feel requires a **routine appointment in the next week to 10 days**

- This might include calling, going to the practice in person, filling out an online consultation (OC) form or calling a specific test results line or calling at quieter times

- Writing down the different ways a patient can request help **after the surgery closes** on weekdays or over the weekend

- This might include contacting an extended or enhanced access service, out-of-hours service, palliative care team, calling duty district nurses, contacting local late hour pharmacies, calling 111, or calling 999.

This is the information you will be adding to your appointments page.

3.8 Creating a highly usable appointments page

Our research showed the appointments page is the 'go to' page for patients. Most participants 'want a doctor's appointment' or help from another healthcare professional.

'Appointments' is a keyword that patients hunt for and therefore, they visit the "appointments section" for information for **all** ways to request and secure a consultation.

Helping patients understand what the process is will enable patients to contact their GP practice in a way that is also helpful to the practice.

Suggested copy for an appointment page on a GP website

Below is an example of the copy we tested with users which was widely understood.

To request an urgent appointment for today or tomorrow (Monday to Friday)

- Use an online form[4] *[insert times OC is available, e.g. 24/7]* to request an appointment. We will respond within *[insert OC response time, e.g. 2 hours]* when we are open. We are open Monday to Friday, 8am to 6.30pm

- Phone us Monday to Friday, 8am to 6.30pm

- Visit the surgery and speak with a receptionist. We are open Monday to Friday, 8am to 6.30pm

When you get in touch, we'll ask what you need help with.

We will use the information you give us to choose the most suitable doctor, nurse or health professional to help you.

To request a routine appointment in the next 7 days

- Use an online form *[insert times OC is available, e.g. 24/7]* to request an appointment. We will respond within *[insert OC response time, e.g. 2 hours]* when we are open. We are open Monday to Friday, 8am to 6.30pm

- Phone us Monday to Friday, 8am to 6.30pm

- Visit the surgery and speak with a receptionist. We are open Monday to Friday, 8am to 6.30pm

- Use the NHS App *[add any alternative tools]* to book a screening test or vaccination

When you get in touch, we'll ask what you need help with.

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[4] This should link to your online consultation submission form

We will use the information you give us to choose the most suitable doctor, nurse or health professional to help you.

Your appointment

However you choose to contact us we may offer you a consultation:

- By phone

- Face to face at the surgery

- On a video call

- By text or email

Appointments by phone, video call or by text or email can be more flexible and often means the doctor or nurse can help you sooner.

Cancelling or changing an appointment

[Provide information about different options for cancelling, including phone numbers and links if necessary]

If you need help when we are closed

[Include information about 111, urgent treatment centres, extended access and late-night pharmacies.]

If you need help with your appointment

Please tell us:

- If there's a specific doctor, nurse or other health professional you would prefer to respond

- If you would prefer to consult with the doctor or nurse by phone, face-to-face, by video call or by text or email

- If you need an interpreter

- If you have any other access or communication needs.

Patients have more ways to contact the GP practice, their requests can be processed differently (for example, triaged), they may be contacted by a doctor and other healthcare professionals and offered consultations in a variety of formats. The

situation is much more complex for patients now, so it's crucial that a lot of work goes into making this page incredibly simple. Ways to do this:

- **Section headings should reflect patients' needs:** Writing this page from the perspective of a patient seeking help, rather than a practice wanting to explain their process will make this information usable.

- **Writing needs to be very clear**: Given these more complex models of access and consultation copy needs to be clear, easy to read and well tested with patients with moderate to low digital confidence.

- **All of the relevant information should be together**: And patients should have all the information they need in one place to be able to make contact (for example the practice phone number and opening hours, the 'start now' button for an OC form and when their request will be processed).

- **Read the [NHS Digital Service Manual's How we write section](#)**: It gives excellent advice on writing clearly and concisely.

Emergency, urgent and routine GP surgery appointments

GP appointments are often labelled as emergency, urgent, routine. Our research found that patients all have different perceptions of what these terms mean.

Using a timeframe, for example: "Urgent appointments for today", to clarify these terms helps patients choose the correct appointment type.

The way patients and GP practices categorise different types of appointments are different. It's important to group appointments in a way that makes sense to patients to make them understandable. Patients view appointments by how soon they feel they need to be seen or the type of appointment they need, for example: I need a flu jab, I need an appointment today, not by the channel they use to get in touch, or the mode of consultation.

Recommendations
- Have clear sections for urgent and routine appointments (which also indicate when they will happen: 'urgent appointments for today').
  - Include links to the online consultation form in the sections where you want people to use this contact method. Put this option alongside other contact options.

- - Include a clear explanation of what happens next and within what time frame.

  - Provide clear expectation setting about the range of consultation formats and who the patient might see.

  - Avoid the term 'emergency appointment' in general practice to avoid confusion with A&E and life-threatening symptoms.

- Use the following terms:

  - Use the word 'consultation' for all contacts with a doctor or other healthcare professional in response to a patient regardless of channel. 'Our doctors may consult with you face-to-face, by phone, by video call or by text or email'.

  - Use 'by text or email' instead of 'secure message'.

  - Use 'doctor, nurse or other healthcare professional' instead of 'clinician' or 'healthcare professionals'.

  - Avoid using the word triage. Use "We will look at the information you give us and decide the most suitable person for you to see and when they are available", not "your request will be triaged"

- If you are directing people to tools like the NHS App or other patient facing tools for direct appointment booking, explain what you can use the tool for: 'You can use the NHS app to book routine appointments, to book child vaccinations'.

Online Consultation forms

Using a form or answering a series of questions around symptoms is often a new concept to patients. Our research showed the term 'online consultation' is unfamiliar to patients and is misleading, implying they are going to have a consultation with a doctor online (rather than complete a form). When we asked 100 users what the term 'Online Consultation' meant, 83% didn't know or were unsure.

Recommendations

- Do not use the term "Online Consultation" anywhere on a GP website.

- Use 'request an appointment online' instead.

- Avoid using supplier banners or brand names (for online consultation or direct booking tools). Users either ignore them, think they are advertising or don't

understand what they are. Moreover, banners often end up being too small to see on a mobile making them inaccessible.

- Try the journeys yourself (on mobile) - are they smooth and clear?

3.9 Creating a highly usable prescriptions page

Getting a repeat prescription is the **second most important task** for patients accessing a GP website. It's a task that is repeated regularly and, of the users we spoke to, is the task that many are most familiar with. The aim of the prescriptions section should be to provide:

- Information on the options available

- Information on how to get a repeat prescription

- A clear link to the tool/s or forms to arrange repeat prescriptions

- Information about medication queries

- Information about local pharmacies (including contact details and opening times).

3.10 Creating a highly usable contact us/about us page

All information relating to accessing the practice, staff, Patient Participation Group (PPG) etc. should be in one place and the key information about contact details and access should be high up. This section should contain:

- Surgery phone number, address, access to the building

- Opening times, extended/enhanced hours access

- Surgery staff, PPG

- Registering with/joining the surgery.

3.11 Remove all pop-up banners/overlays

Our research has indicated that overlays/pop up banners are creating huge issues for patients. However, they have become a common tool used on GP websites and our research has found that they are creating huge issues for users.

We found that 27% of participants who visited a site with an overlay as the first thing they saw struggled to get past the overlay, especially on mobile.

An additional 5% of participants struggled to navigate overlays beyond the homepage.
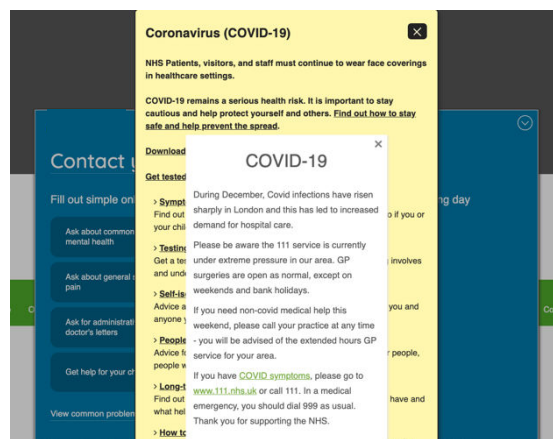
Example where there are three, separate overlays on top of the homepage

The use of overlays:

- It creates a barrier which many users can't get past

- It tries to force users to read information that the practice wants them to read but isn't relevant to many users

- Once the overlay has been closed, the information is lost as it's not stored in the site

- When there is a lot of content, it gets fiddly, especially on mobile. Scrollbars within an overlay creates usability issues

- These issues are often magnified on mobile

- Overlays can create accessibility issues.

What you can do about it

It's important that information on a website lives in the most suitable location. If the information is important, it should be within the site, not on a temporary overlay that, once it's dismissed, is gone.

Information that has a timeframe, for example, practice closure, should be on the pages to which that information relates (the appointments and contact us pages) and should automatically disappear once it's no longer relevant.

GP website suppliers should have strategies for implementing changing NHS directives, for example, COVID-19 broadcasts, in a way that doesn't create barriers for users.
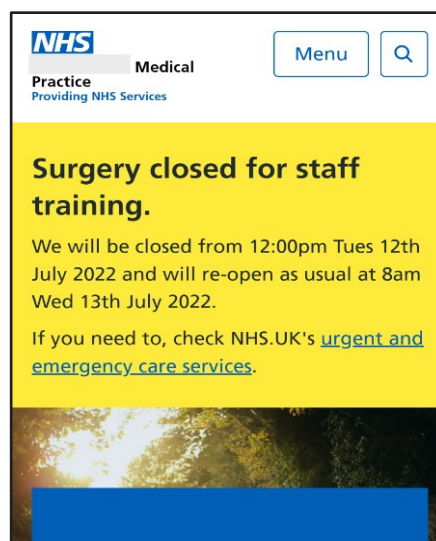
Example of urgent information embedded within the page

[NHS design system recommend embedding emergency or urgent information within the page](#).

3.12 Why you should consider not having a news page

News pages can appear to provide an easy answer for practices wanting to update patients. However, most patients are not searching for news and don't bother to go there to find out what's written.

Which means it's really important for all new information on a GP website to be put in the relevant category. This way, it sits in a place that a patient would search for it if they needed it. For example, an update on opening times should be put in the sections that relate to opening times. If there is a new pharmacy UTI service, this information should sit in the 'Services' section. If this information is put among a group of items that are simply 'new', then patients won't see them. If you have doubts, it's worth looking at your site analytics to see the usage of your existing 'News' section. It is usually very low.

The main issues with a news page:

- Important information could be missed by patients

- Makes practices feel they are updating important information, but it's going to a page that users don't see

- Most of the information in the news page is soon out of date, so it needs to be frequently updated and revised, creating extra work.

The solutions for this content:

- Any genuine 'news' should be put on social media (where people who are interested will see it)

- Emergency information should be embedded - and time limited

- Service info should be contextual

- Social info should be in other channels.

Part 4: Contractual requirements of a GP website

We hope the previous sections help you to design a highly usable and accessible website for your patients.

In addition to that goal, GP websites must also meet various contractual requirements and we have included the list below to help you. It's a guide to requirements at the time of writing (July 2022) not a definitive list. You will need to check if requirements have changed.

Please email us at england.digitalfirstprimarycare@nhs.net and let us know about any requirements we might have missed.

The "supporting link" column is hyperlinked to the contract or document that details the requirement or specification.

Category	Requirement	Comments	Support link
Practice information	Practice name	It is essential that the core practice details are kept up to date, this includes but it not limited to: • Practice Name • Practice Phone Number • Practice Address of each site • Practice email address • Or any other way by which a patient may contact the Contractor to book or amend an appointment, or to order repeat prescriptions for drugs, medicines, or appliances.	GMS Regulations, Regulation 73 'Requirement to have and maintain an online presence' confirms that all information contained within the practice leaflet must be available on the practice website: www.legislation.gov.uk/uksi/2015/1862/regulation/73#text%3Donline%20presence GMS Regulations, Schedule 3, Part 6, para 48 'Information to be included in practice leaflets' details the full list of what needs to be included: www.legislation.gov.uk/uksi/2015/1862/schedule/3/paragraph/48/made PMS Regulations, Regulation 66 'Requirement to have and maintain and online presence': www.legislation.gov.uk/uksi/2015/1879/regulation/66 PMS Regulations, Schedule 2, Part 6, paragraph 44 'Information to be included in practice leaflets': www.legislation.gov.uk/uksi/2015/1879/schedule/2/paragraph/44 APMS Directions, Part 4, 14.(1)(gd) 'Requirement to have and maintain and online presence' APMS Directions, Part 4, 14.(3)(a) 'Compilation, review and availability to patients of a practice leaflet The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Practice information	Practice phone number		
Practice information	Practice address		
Practice information	Opening times	Patients want a quick way to know if the practice, and therefore if the phone lines, are open or closed. Inclusion of the opening hours of the practice premises is required.	As above

Practice information	Extended hours access	Please see comments above	As above
Practice information	Named GP	Please see comments above	As above
Practice information	Practice leaflet	Practices" must publish on its practice website or online practice profile (as the case may be) all the information which is required to be included in its practice leaflet. **Practice leaflet must include:** - The name of the Contactor (as listed above) - The address of each of the Contractor's practice premises. - The Contractor's telephone and the address of its website or the address at which its online practice profile is available. - In the case of a Contract with a partnership: - whether or not it is a limited partnership; and the names of all the partners and, in the case of a limited partnership, their status as a general or limited partner. - In the case of a Contract with a company:	As above

		- the names of the directors, the company secretary, and the shareholders of that company; and - the address of the company's registered office. - The full name of each person performing services under the Contract. - The professional qualifications of each health care professional providing services under the Contract. - Whether the Contractor undertakes the teaching or training of health care professionals or persons intending to become health care professionals. - The Contractor's practice area, including the area known as the outer boundary area, within the meaning of GMS Regulations, Regulation 20(3), PMS Regulations, Regulation 13(2)(a), APMS Directions, Part 3, 6(1)(b) by reference to a sketch diagram, plan, or postcode. - The access arrangements which the Contractor's practice premises has for providing services to disabled patients and, if none, the alternative arrangements for providing services to such patients. - How to register as a patient. - Information about the assignment by the contractor to its new and existing patients	

		of an accountable GP in accordance with paragraph 8	
		• Information about the assignment by the contractor to its patients aged 75 and over of an accountable GP in accordance with paragraph 11	
		• The right of patients to express a preference of practitioner and the means of expressing such a preference. in accordance with GMS Regulations, Schedule 3, paragraph 22, PMS Regulations, Schedule 2, Part 2, paragraph 21, APMS Directions, Part 4, 14(1)(p)	
		• The services available under the Contract.	
		• The opening hours of the practice premises and the method of obtaining access to services throughout the core hours.	
		• The criteria for home visits and the method of obtaining such visits.	
		• The consultations available to patients under GMS Regulations, Schedule 3, paragraphs 9 and 10. PMS Regulations instead advise 'the services available under the agreement - PMS Regulations, , Schedule 2, Part 6, paragraph 44(l)	
		• The arrangements for services in the out of hours period and how the patient may contact such services.	

		• If services during the out of hours period are not provided by the Contractor, the fact that the Board is responsible for the commissioning of those services • The method by which patients may obtain repeat prescriptions. • If the Contractor offers repeatable prescribing services, the arrangements for providing such services. • If the Contractor is a dispensing contractor the arrangements for dispensing prescriptions. • How patients may make a complaint or comment on the provision of services. • The rights and responsibilities of the patient, including keeping appointments. • The action that may be taken where a patient is violent or abusive to the Contractor, the Contractor's staff, persons present on the practice premises or in the place where treatment is provided under the Contract. See GMS Regulations, Schedule 3, paragraph 25: PMS Regulations, Schedule 2, Part 2, paragraph 24, APMS Directions, Part 4, 14(1)(p) • Details of who has access to patient information (including information from which the identity of the individual can be ascertained) and the patient's rights in relation to disclosure of such information.	

		• The full name, postal and electronic email address, and telephone number of the Board.	
Practice information	GP Net earnings	Practices are required to publish: The mean net earnings in respect of the previous financial year of— (i) every general medical practitioners who was a party to the contract for a period of at least six months during that financial year, and (ii)every general medical practitioners who was employed or engaged by the contractor to provide services under the contract in the contractor's practice, whether on a full- time or a part-time basis, for a period of at least six months during that financial year; and (b)the— (i)total number of any general medical practitioners to whom the earnings information referred to in sub-paragraph (a) relates, and (ii)(where applicable) the number of those practitioners who were employed or engaged by the contractor to provide services under the contract in the contractor's practice whether on a full-time or a part-time basis, for a period of at least six months during the financial year to which that information relates.	GMS Regulations, Part 5, regulation 27: www.legislation.gov.uk/uksi/2015/1862/regulation/27/made PMS Regulations, Regulation 21 www.legislation.gov.uk/uksi/2015/1879/regulation/21 APMS Directions, Part 4, 14(1)(b) The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Practice information	Overview of the practice and contact information	Practices must review the information available on its practice website or online practice profile at least once in every period of 12 months.	GMS Regulations, Part 10, Regulation 73: www.legislation.gov.uk/uksi/2015/1862/regulation/73#text%3Dpractice%20website PMS Regulations, Regulation 66 'Requirement to have and maintain and online presence': www.legislation.gov.uk/uksi/2015/1879/regulation/66

			APMS Directions, Part 4, 14.(1)(gd) 'Requirement to have and maintain and online presence' The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Practice information	Accessibility	Whether the practice premises have suitable access for all disabled patients and, if not, the alternative arrangements for providing services to such patients. This is also listed in the Practice Leaflet requirements.	GMS Regulations, Schedule 3, Part 6, para 48: www.legislation.gov.uk/uksi/2015/1862/schedule/3/paragraph/48/made PMS Regulations, Schedule 2, Part 6, paragraph 44 'Information to be included in practice leaflets': www.legislation.gov.uk/uksi/2015/1879/schedule/2/paragraph/44 APMS Directions, Part 4, 14.(3)(a) 'Compilation, review and availability to patients of a practice leaflet The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Practice information	Practice boundary (interactive map and postcode search)	The practice leaflet is required to include the practice area, including the area known as the outer boundary area, by reference to a sketch diagram, plan, or postcode.	GMS Regulations, Schedule 3, Part 6, para 48: www.legislation.gov.uk/uksi/2015/1862/schedule/3/paragraph/48/made PMS Regulations, Schedule 2, Part 6, paragraph 44 'Information to be included in practice leaflets': www.legislation.gov.uk/uksi/2015/1879/schedule/2/paragraph/44 APMS Directions, Part 4, 14.(3)(a) 'Compilation, review and availability to patients of a practice leaflet The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Practice information	Public transport links and cycle routes	It is good practice to include public transport links and cycle routes to support patients in getting to the practice.	
Practice information	Practice newsletter	It is good practice to include a practice newsletter on the website for a patient to view or download	

Practice information	Other useful contacts	Any links to other GP practices, or staff contact details.	
Practice information	Keeping Patient Participation Groups up to date with progress on agreed actions	It is good practice to include information for Patient Participation Groups up to date and on the website.	GMS Regulations, Part 5, Regulation 26: www.legislation.gov.uk/uksi/2015/1862/regulation/26#text%3Dpatient%20participation%20group PMS Regulations, Regulation 20: www.legislation.gov.uk/uksi/2015/1879/regulation/20 APMS Directions, Part 4, 13(1) The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Practice information	Up-to dated and informative online presence	GP Practices need to have an up-to date and informative online presence,	GMS Regulations, Part 10, Regulation 73 'Requirement to have and maintain an online presence': www.legislation.gov.uk/uksi/2015/1862/regulation/73#text%3Donline%20presence The metadata wording is not included in the regulations. PMS Regulations, Regulation 66 'Requirement to have and maintain and online presence': www.legislation.gov.uk/uksi/2015/1879/regulation/66 APMS Directions, Part 4, 14.(1)(gd) 'Requirement to have and maintain and online presence' The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Saving time, reducing burden items	Patient registration	Patient registration form, to utilise this form it is recommended to collect additional information on which online services that patient would like to use, and if happy to be contacted via SMS.	GMS Regulations, Schedule 3, Part 2, paragraph 18 'Application for inclusion in a list of patients': www.legislation.gov.uk/uksi/2015/1862/schedule/3/paragraph/18#text%3Dpractice%20boundary PMS Regulations, Schedule 2, Part 2, paragraph 17: www.legislation.gov.uk/uksi/2015/1879/schedule/2/paragraph/17 APMS Directions, Part 7, 17(1) The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk) GMS Regulations, Part 10, Regulation 71ZC 'Patient Online Services: providing and updating personal or contact information':

			www.legislation.gov.uk/uksi/2015/1862/regulation/71ZC#text%3Dpatient%20online%20services PMS Regulations, Regulation 64ZC 'Patient Online Services: providing and updating personal or contact information': www.legislation.gov.uk/uksi/2021/995/schedule/2/paragraph/8/made#text%3D64ZC APMS Directions, Part 4, 14(1)(gba): The Alternative Provider Medical Services (Amendment) (no.2) Directions 2021 (publishing.service.gov.uk)
Saving time, reducing burden items	Change/update personal details	This would allow users to update their personal details. Depending on the system in use, this would link to the appropriate page or give instruction on how to do it	GMS Regulations, Part 10, Regulation 71ZC 'Patient Online Services: providing and updating personal or contact information': www.legislation.gov.uk/uksi/2015/1862/regulation/71ZC#text%3Dpatient%20online%20services PMS Regulations, Regulation 64ZC 'Patient Online Services: providing and updating personal or contact information': www.legislation.gov.uk/uksi/2021/995/schedule/2/paragraph/8/made#text%3D64ZC APMS Directions, Part 4, 14(1)(gba): The Alternative Provider Medical Services (Amendment) (no.2) Directions 2021 (publishing.service.gov.uk)
Saving time, reducing burden items	Sign up for online services	Practices are required to promote online services to patients. Providing instructions and where possible allowing patients to request access through your website is an easy way to achieve this	GMS Regulations, Part 10, Regulation 71: www.legislation.gov.uk/uksi/2015/1862/regulation/71#text%3Dpatient%20online%20services PMS Regulations, Regulation 64: www.legislation.gov.uk/uksi/2015/1879/regulation/64 APMS Directions, Part 4, 14(1)(g) The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)

Saving time, reducing burden items	Online consultations	Online and video consultations enable people to contact their GP practice without having to wait on the phone or take time out to come into the practice. Patients can go online to ask questions, report symptoms and upload photos. Practices responding to patients online via messaging systems can save clinical, administrative, and patient time.	GMS Regulations, Part 10, Regulation 71ZD 'Patient Online Services provision of an online consultation tool': www.legislation.gov.uk/uksi/2015/1862/regulation/71ZD#text%3Dpatient%20online%20services PMS Regulations, Regulation 64ZD: www.legislation.gov.uk/uksi/2021/995/schedule/2/paragraph/8/made#text%3D64ZD APMS Directions, Part 4, 14(1)(gbb): The Alternative Provider Medical Services (Amendment) (no.2) Directions 2021 (publishing.service.gov.uk)
Saving time, reducing burden items	Self-referral and online forms	Incorporating self-referral forms and providing access to other online forms can save the practice time and allow patients to manage their own access to the best service for their needs.	GMS Regulations, Part 10, Regulation 73 'Requirement to have and maintain an online presence': www.legislation.gov.uk/uksi/2015/1862/regulation/73#text%3Donline%20presence PMS Regulations, Regulation 66 'Requirement to have and maintain and online presence': www.legislation.gov.uk/uksi/2015/1879/regulation/66 APMS Directions, Part 4, 14.(1)(gd) 'Requirement to have and maintain and online presence' The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Saving time, reducing burden items	Repeat prescriptions	Websites must have the facility for patients to order repeat prescriptions for drugs, medicines, or appliances online; and view and print a list of any drugs, medicines, or appliances in respect of which the patient has a repeat prescription	Websites must have the facility for patients to order repeat prescriptions for drugs, medicines, or appliances online; and view and print a list of any drugs, medicines, or appliances in respect of which the patient has a repeat prescription
Saving time, reducing burden items	Nominating your pharmacy	Patients can also nominate a pharmacy or change their nominated pharmacy through the online services module	

Saving time, reducing burden items	Fit note	Providing a link to the national guidance and to the fit note site, enable patients to self- certify when that is applicable. For patients who need them, provide a link/email so they can request a statement of fitness for work.	**Please see section 4.6.7 in the hyperlinked document** When do I need a fit note? - NHS (www.nhs.uk)
Helping patients to help themselves	Links to existing national validated resources	The NHS provides high quality, trusted, accessible health information. Practices should consider linking to this material in relevant sections of their website. • The health A-Z and the Medicines A-Z • Signs and symptoms – NHS.UK • NHS 111 • Pharmacy finder • Travel health • Travel advice • Vaccination and immunisation • Public health screening advice and guidance Local information from Practice, PCN or ICS. National Campaigns NHS England Modules - Configured by NHS England promoting national campaigns etc Flu, Covid, winter, cervical screening.	Signposting to a validated symptom checker and self-care health information (for example nhs.uk) via the practice's online presence and other communications – Taken from the GP IT Operating Model.
Helping patients to	ICS and PCN Information	Many areas of the country are considering implementing a single website solution for their practices. This has some benefits with regards to	

help themselves		consistency of information, content management and access to services. It also enables the ICS/PCN to generate some of the website content, which can be used within the practice's website. This could cover • what the ICS/ PCN does • how to contact them • the services offered, both clinical and patient support	
Legal Requirements	Access to service information	All practices are required to have an up-to- date and informative online presence, with key information being available as standardised metadata for other platforms to use (for example the Access to Service Information (A2SI) Directory of Services Standard).	GMS Regulations, Part 10, Regulation 73 'Requirement to have and maintain an online presence': www.legislation.gov.uk/uksi/2015/1862/regulation/73#text%3Donline%20presence The metadata wording is not included in the regulations. PMS Regulations, Regulation 66 'Requirement to have and maintain and online presence': www.legislation.gov.uk/uksi/2015/1879/regulation/66 APMS Directions, Part 4, 14.(1)(gd) 'Requirement to have and maintain and online presence' The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)
Legal Requirements	W3C	The accessibility regulations aim to help make sure online public services are accessible to all users, including those with disabilities. All existing websites must **be fully compliant** to the standard **WCAG 2.1 AA** no later than the **23 September 2020**	W3 Webpage GP IT operating Framework
Legal Requirements	Comply with the Equality and	The Equality Act 2010 represents the culmination of years of debate about how to improve British equality law. It offers individuals stronger	Equality and Human Rights Commission: Statutory Code of Practice for "Services, public functions and associations" under the EQA (the Code).

	Human Rights Commission	protection against discrimination. It gives employers and businesses greater clarity about their responsibilities. It sets a new expectation that public services must treat everyone with dignity and respect.	
Legal Requirements	Comply with the Privacy and Electronic Communications Regulations (PECR)	The Privacy and Electronic Communications Regulations (PECR) sit alongside the Data Protection Act and the UK GDPR. They give people specific privacy rights in relation to electronic communications	PECR website
Legal Requirements	Comply with the General Data Protection Regulation (GDPR)	It is for DPOs and others who have day-to-day responsibility for data protection. As the curator of patient records GP practices are called data controllers, this means that practices have responsibility for ensuring that patient information is used appropriately. Informing patients of how their information will be used and their rights is essential, include sections covering: • Your medical records • Privacy notices • SMS texts and emails • GDPR • Your data – your rights • Access to your medical record	GDPR Website NHSD GDPR GMS Regulations, Part 10, Regulation 71ZB 'Patient Online Services: provision of online access to full digital medical record': www.legislation.gov.uk/uksi/2015/1862/regulation/71ZB#text%3Dpatient%20online%20services PMS Regulations, Regulation 64ZB: www.legislation.gov.uk/uksi/2015/1879/regulation/64ZB APMS Directions, Part 4, 14(1)(gb) The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk) Opt out How patient data is used and patient rights

		• The national data opt-out	
Legal Requirements	Data Protection Act 2018	The Data Protection Act updates our data protection laws for the digital age.	DPA Website
Essential extras	Accessibility	The Government Digital Service (GDS) has developed a website design manual, for best practice when developing public facing websites. The GDS provides information on how to test whether your website is accessible or not.	Accessibility Audit website
Essential extras	Performance and patient feedback	**Performance** GP Survey – link this survey results CQC report – link this to CQC report Quality and outcomes framework Public Health England – GP practice profiles **Patient feedback:** NHS.uk ratings and review Friends and Family Test **Links to Social media accounts:** Facebook Twitter	QoF website Public Health England Practice finder NHS.uk ratings Friends and family test GMS Regulations, Part 14, Regulation 88 'Friends and Family Test': https://www.legislation.gov.uk/uksi/2015/1862/regulation/88 PMS Regulations, Part 14, Regulation 80: www.legislation.gov.uk/uksi/2015/1879/regulation/80 APMS Directions, Part 4, 14(1)(i) The Alternative Provider Medical Services Directions 2020 (publishing.service.gov.uk)

		3rd party solutions which are optional: [I want great care](#) [Care Opinion](#)	
Essential extras	NCSC vulnerability	The ICS ask for permission from the practice to run the practice website through the National Cyber Security Centre, this will highlight any cyber issues or vulnerabilities with the practice website.	[National Cyber Security Centre website](#)

Appendix 1:

A list of tasks and information on a GP website (that we have found) - and where they might fit in a website structure

These are the tasks that we have found across GP websites (there may well be more). They fit within the categories we've suggested, but if you have some you're unsure about, please email us at england.digitalfirstprimarycare@nhs.net

Appointments

Make, change or cancel an appointment (including links to online consultation forms)

Vaccinations and health screenings

Links to nhs.uk Vaccinations advice

Links to nhs.uk Screening advice

Link to sign up for text appointment reminders (to encourage patients to come to/cancel appointments)

Find out what to do when the practice is closed

Home visits

Dental advice

Travel advice and vaccines

Link to nhs.uk Travel Vaccination advice

Link to the NHS App and when to use it to book appointments

Prescriptions

Prescriptions - register for, order online, nominated pharmacy, local pharmacy

Pill check

Local pharmacies

Link to nhs.uk Find a Pharmacy

Link to nhs.uk Medicines A-Z

Services

Get a sick/fit note for work

Link to [nhs.uk fit note information](#)

Get test results

Find out about clinics - baby, maternity, vaccinations, diabetes

Programmes like stop smoking, lose weight, family planning

Managing conditions - pain, veteran support, wound care, asthma,

Self-refer to maternity, mental health, physio

Request a medical report

Submit a reading - blood pressure, diabetes, etc.

Local support, social prescribing - bereavement, carers, palliative care

Advanced care planning

Get a document signed by your GP

Register for online services

Access your patient record

Local community transport details

Link to [nhs.uk Services](#)

Health information & support

Look up health information, covid info

Link to [nhs.uk Health A-Z](#)

Link to [111 online](#)

Self-help for minor illnesses

Health promotion campaigns

Coronavirus (COVID-19) advice

Link to [using NHS services during coronavirus](#)

Surgery Information

Complete a form to join the surgery

Practice boundary

Temporary registration

Change your personal details

Choose your patient data is used (Type 1 opt out)

Get the practice phone number, email or address

Find out about access to the practice building

Local transport to the surgery

Get practice opening times

Patient participation group

Complaints process

The practice team

Job vacancies

Events

Practice news

Social media links

Policies and procedures

Friends and family test

Surveys

CQC rating

GP earnings

Practice newsletter

Footer

Links to information and advice on translation and accessibility statement [*see the Accessibility Statement page on nhs.uk for guidance*]