



Developing resources for neonatal families

hints and tips

Introduction

This guide has been created to provide support for staff when creating family resources such as posters, leaflets, cot cards etc, to ensure they are accessible and appropriate for neonatal families. It includes advice from the [UK Association for Accessible Formats \(UKAAF\)](#), [Plain English Campaign](#), and neonatal parents (including the WMPN Parent Advisory Group).

We would like to acknowledge, with thanks, the '*Guide to developing family resources for the neonatal unit*' created by the South West Neonatal Network, which has formed a basis for this document.



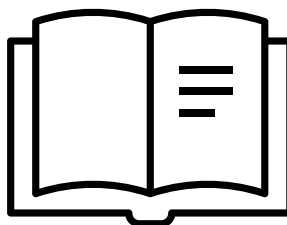
Before you start – things to think about

- What is the objective for this resource? What issue will this aim to solve? How has this been identified?
- What sort of resource will this be? i.e. leaflet, poster, website content.
- How and when will this resource be used? How will the intended audience be directed to it and when?
- Resources should be used to reinforce what has been verbally communicated by healthcare providers, how will staff be supported to have conversations with families alongside this resource.
- Does anything similar exist already, either locally, regionally or nationally? Are there any examples that could be reproduced (with permission and acknowledgment) or adjusted to suit local needs?
- How will families, staff and other stakeholders be involved in the creation of this resource?



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Written materials (hard copies and digital)



Text and Content

Accessibility Guidelines

It is important to make any family information as easy to read as possible. Remember, the neonatal unit is an unfamiliar environment for most families, they will not be used to terminology and jargon.

The average UK reading age is between 9 and 11 years old, there are several tools available to check how readable your document is:

[NHS Document Readability Tool](#)

[Grammarly: Free AI Writing Assistance](#)

Consider how your document will be made available for people for whom English is not their first language. The plainer the English, the easier and more accurate translations can be.

If there are links to versions of the information in different languages, identify for the reader how they will know this is available, if they don't read English. This could be shown with language icons or the title translated into the language and inserted.

Consider how this resource will be accessible to people with additional needs

Be consistent in your use of pronouns and language throughout the document. Avoid using gendered language when it's not necessary. Offer inclusive options on forms, such as allowing patients to identify as non-binary or other. Your local, trust communications team will be able to help with this.

More information about creating inclusive information can be found [here](#).

Considerations when writing information and resources for families:

- Write in short sentences.
- Avoid jargon and complicated words.
- Explain hard words or jargon clearly.



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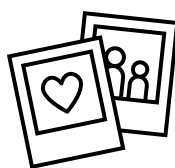
hints and tips

- Be consistent with terminology.
- Use bullet points and sub-headings.
- Avoid contractions.
- Audio recordings and videos can help to reach more people, consider using these where possible, alongside any other features to make the resource as interactive as possible. Adding QR codes to link to recordings, links etc.
- If using QR codes, to avoid reader overwhelm, use only 1 per page/resource.

Suggestions by Neonatal Parents

- Assume the reader knows nothing about the subject.
- Avoid writing as if spoken by the baby.
- Link to more information and specify contact points.

Use of images, pictures, and photos



Accessibility Guidelines

- Place pictures close to relevant text.
- Ensure pictures reflect the text.
- Use line drawings with thick, dark strokes.
- Include Alt text for digital resources.

Suggestions by Neonatal Parents

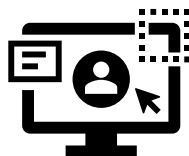
- Avoid images of happy, healthy babies.
- Use pictures of neonatal babies.
- Use graphics or illustrations for upsetting clinical procedures.
- Include diverse images, such as dads and different ethnicities.
- Consider cultural interpretations of imagery.
- Using infographics or icons is helpful for making resources engaging and accessible.



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Formatting, Design, and Layout



Follow your local trust guidelines and governance when producing family resources. Use any applicable branding guidance and templates. Use NHS branding and colours in line with your trust guidance - [NHS Identity Guidelines](#)

The communications and patient experience teams within your workplace will be able to support you with this.

Accessibility Guidelines

- Avoid overcrowding pages.
- Use at least size 14pt font.
- Avoid cursive and serif fonts.
- Use fonts like Arial, Tahoma, Verdana, etc.
- Avoid all caps, italics, and underlining.
- Use bold for emphasis.
- Add extra space between lines.
- Left justify text blocks.
- Avoid angled, curved, or vertical text.
- Use toned backgrounds to reduce glare.
- Ensure high contrast between text and background.
- Avoid patterns or gradients behind text.
- Use non-reflective paper.

Suggestions by Neonatal Parents

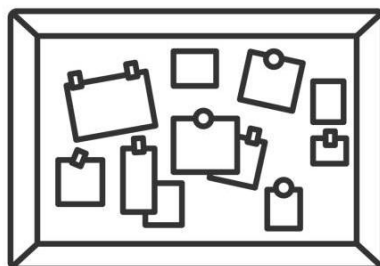
- Use gender-neutral colours.
- Primary colours can be jarring, consider pastel tones (within your branding pallet).
- Keep pages uncluttered.



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Noticeboards



Who? When? Where?

- Before beginning, consider the same points as for producing written materials (see the first section of this document).
- Placement of wall mounted information and noticeboards is important – who do you want to see this information, when (at what stage of their neonatal journey) and where are those people most likely to see it?
- If there is a lot of information to convey – could this be collated in a different way? This could be in a folder, digital displays etc.
- Consider how information flows around the unit – where helps families to see the information that's right for them, at the right time.
- Collation of information on noticeboards by theme is helpful to reach the right people at the right time. Themes could include Family Integrated Care, feedback, feeding, skin to skin, signposting to community services, safeguarding etc.
- The principles described for producing written materials also apply to wall spaces – making things as clear and easy to absorb as possible.
- Too many posters and information on noticeboards is overwhelming.
- Covered noticeboards and laminated pages can help to preserve information and can be wipe-clean, your trust infection protection control team will be able to help with this.
- Have a schedule and named person who is responsible to review:
 - what is included on noticeboards and wall spaces.
 - remove anything that is out of date.
 - remove anything that is damaged.