MedOnline - Website Accessibility Policy
Most Recent Revision: 28 April 2025

I. Policy Statement

It is MedOnline's policy to provide website content that is accessible to people with varying levels and degrees of ability and conforms to W3C Web Accessibility Initiative's Web Content Accessibility Guidelines (WCAG) 2.0, Level AA. These include visual, auditory, physical, speech, cognitive, language, motor, learning and neurological abilities.

II. Purpose of Policy
MedOnline is committed to ensuring that website content can be available to people with disabilities.

III. Applicability (Audience)
This policy applies to all new, updated, and existing web content provided externally on https://medonline.co.nz and covers all public web content produced or updated by MedOnline on its website. In addition, MedOnline will strive to ensure that third-party content providers are aware of our web accessibility policy and will seek to retain providers who are also committed to accessibility conformance.

IV. Definitions
Web Content Accessibility Guidelines ("WCAG"):Describe how to make web content more accessible to people with disabilities.
Varying Levels and Degrees of Abilities: Visual, auditory, physical, speech, cognitive, language, motor, learning, and neurological functions.

V. Procedures and Implementation
Accessibility checks are incorporated into the publishing workflow for all new content. Website content contributors are responsible for preparing the content for publication on our website in accordance with all applicable accessibility guidelines and MedOnline standards, policies, and procedures. MedOnline reserves the right to determine what content will be published to, or removed from, our website in light of the accessibility requirements set forth in this policy. Questions about making documents, media, or other materials accessible can be directed to the Information Systems department.

The following general guidelines apply to content on the MedOnline website:
1. Content must be compatible with a wide variety of assistive technologies, such as screen readers, screen magnification software, text readers, speech input software, alternative input devices, Braille embossers, and refreshable Braille displays.
2. HTML must be validated, and markup must be used in a way that facilitates accessibility, such as by using forms, labels, frame titles, etc. appropriately. A free validation service is available on W3C's website.
3. All images and other non-text content must have text alternatives so that it can be changed into other forms people need, such as large print, braille, speech, symbols, or simpler language. Content that cannot be presented in an equivalent text alternative (e.g., CAPTCHA or non-text content intended to create a specific sensory experience, etc.) should be avoided. When such content is necessary, it must have a text alternative that describes the identity and purpose of the non-text content.
4. Videos must have captions and a text transcript or description. Live and pre-recorded audio must have captions.
5. Use contrasting colors to separate the text and images in the foreground from the background.
6. All page functionality must be available using the keyboard and the keyboard's focus must be visually apparent (e.g. as you tab through a page, you can see where you are).
7. Users must be provided enough time to read and use content.
8. Content must not be designed in a way that is known to cause seizures (e.g. content that flashes more than three times in one second or is below the general flash and red flash thresholds).
9. Links and other navigation instructions must not rely on visual indicators (e.g. "Click here" or "Use the link in the right-hand column"). Links to a file should identify the file type and size (e.g. "Application Form (PDF 130KB)").
10. PDFs must be accessible. This includes, but is not limited to, having searchable text, document structure tags, and appropriate security settings. A scanned image of text is not accessible and will

require manual implementation of accessibility features. Converting a document that is accessible in its native form may require less manual work to make it accessible as a PDF.

The above guidelines are not a complete list of what may be required for making web content accessible, but they will improve the functionality of our website for all users. For more information about the WCAG, a copy of the WCAG 2.0 is available on the W3C's website, along with a reference to WCAG 2.0 requirements and techniques.

VI. Enforcement
Each page of our website includes a link to a form for users to submit feedback about our site. Any submitted feedback will receive a response as promptly as possible. This information will also be compiled and considered during the website accessibility annual review described below.

The MedOnline website is subject to annual reviews using the process described at Website Accessibility Conformance Evaluation Methodology or a substantially similar process. Reviews are the responsibility of the Information Systems department.

VII. Policy Owner, Management and Point of Contact Information
Questions and issues related to website accessibility should be reported to contact@medOnline.co.nz
Although the WCAG covers a wide range of website accessibility issues, they are not able to address the needs of people with all types, degrees, and combinations of disabilities.

VIII. Exclusions
None.

IX. Effective Date
Most Recent Revision Effective Date: 28 April 2025

X. Notification of Policy Changes and Revision History
MedOnline reserves the right to change this policy at any time. This policy is posted on the MedOnline website.

Web Content Accessibility Guidelines (WCAG) at the W3C's website -
WCAG 2.0
http://www.w3.org/TR/WCAG20/

Reference to WCAG 2.0 requirements and techniques:
https://www.w3.org/WAI/WCAG20/quickref/20160105/#navigation-mechanisms-refs