

# Write right

The Health Foundation's house style guide



The  
Health  
Foundation

# Tips for impactful writing

- **Always think about who you are writing for.** Make sure the content and style are appropriate for your audience.
- **Use everyday English.** Try reading what you've written out loud. If you wouldn't say it, don't write it.
- **Be consistent, clear and concise.** If you can cut a word, cut it. Try to use short sentences (up to 20 words) and paragraphs (up to three sentences).
- **Don't use a comma or other punctuation where you could use a full stop.** Break up long sentences and paragraphs.
- **Explain jargon, academic and technical words.**
- **Keep your use of abbreviations and acronyms to a minimum.**
- **Use inclusive language** (see section on [writing about people](#)).
- **Use the active voice where possible.** Say 'we did something' rather than 'something was done'.
- **Speak directly to the reader** using pronouns – eg you, we, us. (There may be exceptions in formal contexts where this is not appropriate.)

- **Use UK rather than US spelling.**
- **Avoid clichés and slang.**
- **Use key points and summary devices effectively.**  
Be selective about the information you present for time-poor audiences. Capture the main topic, argument and findings rather than reinforcing the detail.
- **Write with a clear focus and purpose.** It can help to focus on a key question you want to answer and explain why it matters (the ‘so what?’).

And remember, the style and tone you use should embody and express our tone of voice and values – see section on **our tone of voice**.

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# Our house style

## Why is house style important?

We have developed this house style guide to help make sure that as an organisation we present all our writing in a professional, consistent and accessible way.

Consistency is very important, as it means all our written materials look like they're coming from one cohesive organisation. If readers can see you've taken care with your document, they'll be more likely to trust what you're telling them.

Whatever you're writing, this guide should help you produce clear and easy-to-read documents. But it is not a rule book and you should continue to apply common sense.

Like language, style changes with time, so this is an evolving document. If you have any questions or ideas for improvements, please email [publications@health.org.uk](mailto:publications@health.org.uk).

## Useful tools and other style guides

While this guide covers the key aspects of the Health Foundation's house style, other organisations produce more comprehensive guides. These can be useful references for topics not covered in this guide, although, in the case of any conflict, the Health Foundation's guide takes precedence.

First try the **gov.uk** style guide:

[www.gov.uk/guidance/style-guide](http://www.gov.uk/guidance/style-guide)

If you can't find what you need, try the **Guardian and Observer** style guide:

[www.theguardian.com/guardian-observer-style-guide-a](http://www.theguardian.com/guardian-observer-style-guide-a)

You could also refer to these resources for more detail in certain areas:

- The BBC News style guide:  
[www.bbc.co.uk/newsstyleguide](http://www.bbc.co.uk/newsstyleguide)
- Content Design London's readability guidelines:  
[www.readabilityguidelines.co.uk](http://www.readabilityguidelines.co.uk)
- [UK government guidance](#) on writing about ethnicity
- [UK government guidance](#) on writing about disability
- [National Autistic Society's guidance](#) on writing about autism
- Plain English Campaign guides – a set of free guides to writing in plain English, as well as grammar and other topics: [www.plainenglish.co.uk/free-guides](http://www.plainenglish.co.uk/free-guides)
- The Hemingway Editor – this app identifies complex sentences and common errors in your writing, highlighting where you might want to make changes to improve readability: [www.hemingwayapp.com](http://www.hemingwayapp.com)



Our tone  
of voice

Tone of voice isn't about what you say, it's about how you say it.

The tone of your writing is a vital element in how others perceive you. It matters that the Health Foundation's tone of voice reflects what the organisation stands for – our brand and values. If it didn't, we could send mixed or misleading signals to our audiences, diluting the impact of our work.

## What's the difference between tone of voice and house style?

Our tone of voice guide helps us to produce creative and effective written materials that focus on the needs of our audiences. Having a house style makes sure that we present those materials professionally, consistently and in an accessible way.

## Follow the four principles

Our tone of voice has four principles:

- be clear and precise
- be confident
- be warm and engaging
- show a bit of spark.

These principles are related to our values and they offer a flexible framework you can adapt to different situations and audiences.

The framework shouldn't be a straitjacket – sometimes it will be appropriate to give greater emphasis to one principle than to others. For example, there might be an overriding need to be clear and precise when presenting a piece of research. Focus on that, then assess whether you need to adjust the text if you have gone against the spirit of any of the other principles.

## Our values

Our values guide who we are and what we stand for as an organisation:

- We are independent.
- We collaborate and support to make a greater impact.
- We are informed by evidence and experience.
- We bring a spirit of constructive challenge and an open mind.

# Formatting your document

## Templates

The Health Foundation's communications team designs all of our high-profile publications. For all other projects, we have Word and PowerPoint templates with the Health Foundation's branding.

To access the templates, go to File > New > Shared in Word or PowerPoint. The templates are broadly applicable – eg we have a standard meeting paper template rather than a different template for each category of meeting.

You can find more guidance on using the templates on the hub.

## Spacing

Use a single space after a full stop, not double.

Make sure there is space after each paragraph of text.

These spaces are built into the styles included in the Health Foundation's document templates, so there should be no need to manually add an extra return to insert a line.

## Text alignment

Use non-justified text (left-aligned, ragged line endings) rather than justified text (blocked line endings). It looks more natural and is easier to read. Headings should also be left-aligned, not centred.

These styles are built into the Health Foundation's document templates.

# Bold

Use bold type for:

- headings and subheadings
- emphasis (sparingly).

# Italics

Use italics for:

- full titles of books, reports, white papers, journals, newspapers, magazines, films, TV and radio programmes
- foreign words and phrases including Latin terms (eg *in vitro*). Use English alternatives when possible. If words have become accepted in English (eg cafe, ad hoc, versus), use plain text.

Don't use italics for:

- emphasis – italics are harder to read and should be kept to a minimum
- names of projects and programmes
- information pages on websites
- titles of acts or bills
- quotes, irrespective of whether they are part of a sentence or in a separate paragraph.

## More information on design

You can find information on how our communications materials should look, including how to use our logo, colours, fonts, illustrations and photography, in our branding guidelines on the hub.

Writing  
about  
people



# How we describe **people** has a **powerful effect** on audience perception

When writing about people, and particularly those with protected characteristics, use these guiding principles:

- **Be relevant:** only refer to someone's characteristics or status (eg ethnic origin, disability, socioeconomic circumstances) if warranted by the context.
- **Be specific:** avoid generic terms (eg 'minority ethnic communities') when talking about a specific group. Disaggregate data as much as possible – be clear about who is included and excluded, and explain language choices where these have been constrained by the original data.
- **Be human:**
  - Try not to refer to groups as 'they' or 'them' as this can create a sense of othering. Avoid comparing groups or individuals to an assumed norm – don't refer to people as 'normal' or 'ordinary'. Consider that the people reading your words may be part of a group you're describing.
  - Using the term 'people' to identify a particular group can help to humanise language (eg use 'homeless people' rather than 'the homeless').

- Avoid potentially disempowering language, such as inadvertently victimising people (eg don't say someone 'suffers from' an illness) or assuming vulnerability (eg back up assumptions about social disadvantage or ageing with evidence).
- **Avoid presuming sameness:** within groups of people, individual views and experiences will differ and language choice should reflect this (eg be careful with phrases such as 'the Jewish community', which could imply a unity that may not exist). This includes assumed norms about people's family structure and upbringing (eg assuming people grew up with two parents).

If you are not sure which words to use, ask the person concerned how they would like to be referred to where possible. For material such as case studies, enable people to self-identify according to their preference.

## Age

- Always include a unit, writing it out in full (eg 'years' not 'yrs'), and include a space or a hyphen between the number and the unit (eg aged 18 years, a 10-year-old girl).
- For age ranges, use an en dash to separate the numbers (eg 18–25 years).
- For age groups, use 'older' or 'younger' rather than 'over' or 'under' (eg people younger than 18 years or people aged 65 years and older).

- Use ‘children and young people’ in preference to ‘youth’ (as a noun), ‘youths’ or ‘kids’.
- Use ‘older people’ in preference to ‘elderly’ or ‘the aged’. Only use ‘frail’ and ‘frailty’ where appropriate.

See also the sections on [numbers](#) and [time](#).

## Disability

For disability, the preferred term is ‘disabled people’, which is different to our style for referring to people with a disorder or disease, and follows the social model of disability. This model, developed by disabled people, says that people are disabled by (physical or attitudinal) barriers in society rather than by their impairment or difference.

Other terms to use are:

- ‘mental illness’, people who have ‘mental health problems’ or ‘mental health disorders’ (not ‘mentally ill’ or people with ‘mental health issues’)
- people who are ‘blind’, have ‘sight problems’, are ‘partially sighted’ or ‘visually impaired’ (not ‘the blind’)
- people who are ‘deaf’, people ‘with hearing loss’ or ‘deaf people’ (not ‘the deaf’, ‘hearing impaired’ or ‘partially deaf’). Note that there is a distinction between deaf (medical definition – ie anyone with a severe hearing problem) and Deaf (cultural definition – people who use BSL as their first language and feel part of the Deaf community, with its own culture and shared identity).

Our usual house style is lowercase ‘deaf’, but if the subject or writer of a particular communication prefers to use ‘Deaf’ when referring to a specific group or individual, then we would capitalise it

- ‘non-disabled person’ (not ‘able-bodied’, ‘healthy’ or ‘normal’)
- ‘wheelchair user’ or ‘person who uses a wheelchair’ (not ‘wheelchair bound’ or person ‘confined to a wheelchair’ or ‘in a wheelchair’).

‘Autistic people’ and ‘people with autism’ are both acceptable terms. People with autism have a wide range of different support needs that it may be necessary and appropriate to reflect. Avoid words like ‘severe’ or ‘mild’ when talking about autism.

A ‘learning disability’ is different from a ‘learning difficulty’, as a learning difficulty (such as dyslexia, ADHD or dyspraxia) does not affect general intellect. A learning disability (such as Down’s syndrome) affects the way a person learns new things throughout their life and may mean they need a greater level of support (although everyone’s experience varies).

Don’t use ‘the disabled’, ‘the handicapped’, ‘suffering from’, ‘afflicted by’, ‘invalid’, ‘victim’, ‘sufferer’ or ‘cripple’ when describing disabled people – these terms have very negative connotations.

Beware of ableist language. Avoid, even as metaphors, terms that contribute to stigmas around mental illness or disability (eg turning a blind eye, falling on deaf ears).

## Ethnicity and race

Ethnicity and race have different meanings. Race is a classification mainly based on physical attributes and is a legally protected characteristic in UK law. Ethnicity is broader than race and refers to a common heritage, often including shared culture, language, religion or ancestry. Surveys usually ask people for their ethnicity (not their race), so this is our preferred term.

- Use ‘people from minority ethnic backgrounds/communities/groups’. This phrase includes white minority groups, such as Irish and Cypriot. Use the precise wording of ONS categories for population groups.
- Use lower case for ‘black’ or ‘white’, unless the subject or author of a communication prefers to use ‘Black’ when referring to a specific cultural group, in which case capitalise it.
- Avoid using ‘BME’ and ‘BAME’ (black, Asian and minority ethnic), unless essential for consistency with an external dataset – in which case, use a footnote to explain why the term is being used.
- Avoid terms and phrasing that may imply white British as a norm or default, such as ‘non white’.

## Poverty and disadvantage

Be aware of the differences between the terms inequality, inequity and disparity:

- **Equality** suggests that everyone gets the same resources, support and opportunities.
- **Equity** achieves fairness through treating people differently depending on need. It takes into account structures – organisational or societal – that might put particular people or groups at a disadvantage.
- **Disparity** simply means difference (ie it does not specifically refer to differences that are the result of unfairness or injustice).

For other terms, follow this guidance:

- Use ‘deprived’ as an adjective to describe areas but not people. If necessary, use ‘more/less socioeconomically deprived’ to make the type of deprivation clear. Avoid terms that reinforce a rigid sense of social hierarchy (eg using ‘lower/higher’ to describe socioeconomic groups).
- Use ‘people experiencing/living in poverty/financial insecurity’ or ‘living on a low income’.
- It is particularly important to avoid disempowering language when describing poverty and deprivation. Positive phrases include ‘people who have had restricted earning opportunities’. Avoid terms that ascribe any kind of individual inadequacy or blame.
- ‘Underserved’ is more a suitable term than ‘hard to reach’ when describing groups of patients or particular communities.

- Use ‘people experiencing homelessness’, or ‘homeless people’, but never ‘the homeless’.
- Use ‘welfare system’ rather than ‘benefits system’ – ‘benefit’ can imply advantage or profit. If talking about people, use ‘people receiving benefits’ rather than ‘people on benefits’ or ‘people claiming benefits’.

## Religion or belief

Use the phrase ‘religion or belief’ rather than just ‘religion’ or ‘faith’.

## Sex and gender identity

- We follow the ONS definitions of sex and gender. Sex is biological (male or female) while gender has connotations of upbringing and choice (feminine or masculine). People can choose which gender to be, irrespective of their biological sex.
- When writing about specific people, use the gender (and pronouns) that they identify as – not their sex at birth.
- ‘Transgender’ is an adjective, describing someone whose experienced individual gender does not align with their sex at birth. Write ‘transgender man’ or ‘transgender woman’ or ‘transgender person’ for first use. Thereafter, write ‘trans man’/‘woman’/‘person’. Avoid the terms ‘transgendered’ and ‘transgenderism’.

## Female, male

These are adjectives and should not be used as nouns – eg use ‘the female patients’ or ‘the women’, but not ‘females’.

Don’t use ‘he’ or ‘she’ where ‘he or she’ is meant; reword or use ‘they’ or ‘their’. Use gender neutral descriptors such as chair, headteacher or firefighter.

## Sexual orientation

We use ‘gay’, ‘straight’, ‘lesbian’ and ‘bisexual’. Where appropriate we use ‘LGBTQ+’ (which stands for lesbian, gay, bisexual, transgender, queer and other identities) – but only spell it out where context necessitates doing so. Only say ‘LGBTQ+ people’ if you mean to refer to the wider group (eg don’t use the whole abbreviation to refer to gay people).

## Work

Be aware of the following points when writing about people in terms of their work:

- When writing about carers, be sensitive to context. Do you mean a paid personal assistant, a support worker, or a family member providing unpaid care?
- Avoid the term ‘low-skilled’ work/workers – ‘lower paid’ is more accurate.
- Use the terms ‘international staff’ or ‘migrant staff’, in preference to ‘immigrant staff’ or ‘foreign/foreign-trained staff’.



Choosing  
the right  
words

## Archaic language

Avoid using old-fashioned language – eg use ‘among’ not ‘amongst’, and ‘while’ not ‘whilst’.

A good test is to consider whether you would use the word when speaking. If you wouldn’t, don’t write it.

## Disorder and disease names

Refer to people with a disorder or disease – eg use ‘patients with cancer’ not ‘cancer patients’. While the person has a disorder or disease, this should not be their defining characteristic.

Use ‘type 1’ and ‘type 2’ diabetes (do not use roman numerals, hyphens or capital letters).

Write disease and disorder names in full on first use, then abbreviate subsequently – eg motor neurone disease (MND) and cystic fibrosis (CF). Check capitalisation at [www.nhs.uk/conditions](http://www.nhs.uk/conditions) if unsure (eg Parkinson’s).

Write ‘COVID-19’ (not ‘COVID’, ‘Covid’, ‘Covid-19’ or ‘coronavirus’), but ‘non-COVID’ and ‘long COVID’.

## Drug names

Use the generic name of a drug rather than the brand name if possible. If you feel it is helpful to include the brand name, put it in brackets after the generic name – eg fluoxetine (Prozac).

# Grammar – common misunderstandings

## **Affect and effect**

To ‘affect’ is a verb, whereas the ‘effect’ is a noun – eg the effect of the legislation will affect them a great deal.

## **Compared to or compared with**

Use ‘compared to’ to show similarity – eg The NHS’s workforce concerns can be compared to those of other public sector organisations.

Use ‘compared with’ to emphasise difference – eg Compared with the private sector, the NHS’s concerns are very different.

## **Different from not different to**

Use ‘different from’ – eg The UK case is different from the rest of Europe.

## **Fewer or less**

Use ‘fewer’ when you are referring to something that comes in discrete parts, such as people or objects – eg fewer than seven officers.

Use ‘less’ when you are referring to something on a continuous scale, such as a score, a percentage or proportion, a measurement or currency – eg less than a third of nurses, or less than £200.

## **Include or comprise**

‘Include’ suggests that you have mentioned some but not all. If you’ve mentioned everything, use ‘comprise’ – eg The report includes information on A and B, and it comprises three chapters, C, D and E.

## **Last or past**

Use ‘past’ for the one just gone – eg The number of people visiting A&E departments has increased by 2.4% per year over the past decade.

Use ‘last’ for the last ever one, or the last of a list or range that has been referred to – eg We asked patients about the last time they went to the A&E department.

## **Nouns**

Try to avoid noun clusters (a phrase in which nouns modify other nouns) unless the meaning is clear (eg ‘cancer mortality’).

## **Singular or plural nouns**

Collective nouns are singular – eg the government has, the team is, the public believes, the range of issues includes, the Health Foundation has 214 employees. If the expression sounds awkward, reword it – eg The members of the team are working together.

All organisations are collective nouns – eg The Health Foundation is considering proposals for....

The pronouns ‘anyone’, ‘everyone’, ‘each’, ‘either’, ‘neither’, ‘none’, ‘no one’, and ‘someone’ are all singular – eg None of the patients was eligible for the study.

‘Criteria’, ‘phenomena’, ‘forums’ and ‘data’ are all plural – eg Once patient data are available... The singular forms are ‘criterion’, ‘phenomenon’, ‘forum’ and ‘datum’.

## **Tenses**

The present tense is much easier and more interesting to read, so use it wherever possible, especially for judgements or to summarise findings – eg 52% of social care funding is spent on those aged 65 years and older, and the number of people in this age group is growing rapidly.

You will need to use the past tense to:

- refer to activities that have already happened – eg To help answer this question, we published three briefings on...
- specify findings for a particular year – eg In 2020/21 local authorities in England spent £26bn on social care for adults.

## **That or which**

‘That’ describes, whereas ‘which’ explains and should usually be preceded by a comma.

For example:

- They stopped the first car that was driven by a teenager – ie they targeted that particular car because it was driven by a teenager.

- They stopped the first car, which was driven by a teenager – ie they targeted the first car, which just happened to be driven by a teenager.

## The Health Foundation

Use ‘the Health Foundation’ (with no capital T unless it begins a sentence). For short, use ‘the Foundation’, not ‘THF’.

## Jargon and non-English words

Avoid using jargon if you can find a way around it. Explain any technical or unfamiliar terms you do include. You may find that the explanation does away with the need to use the term in the first place.

Avoid foreign words or phrases for which there are English equivalents – eg use ‘per year’ rather than ‘per annum’. It’s OK to use ‘per capita’ (but know your audience – would ‘per person’ be more appropriate in this context?).

Use italics for foreign words and phrases including Latin terms (eg *in vitro*), unless they have become accepted in English (eg *cafe*, *ad hoc*, *versus*).

# Numbers

## Numerals or words?

Spell out one to nine in words, then use numerals for 10 upwards, for anything that comes in discrete parts, such as people or objects (eg units, hospitals, vaccines).

Use numerals when the number has a unit of measurement or symbol (these numbers are usually on a continuous scale). This includes:

- currency (eg £300)
- dates
- measurements (eg 3km, 865kg)
- rates (eg 1.5 times higher), percentage points and percentages
- ratios (eg 3:1)
- scores
- time (eg 4 hours) and age (eg aged 18 years).

Put the unit or symbol straight after the number (with no space between), except for when writing time.

Round numbers up to whole numbers or to one decimal place (with the exception of pence), and use the same degree of precision for similar quantities (eg 2.7–5.8).

You can start a sentence or a paragraph with a numeral.

Use numerals for all numbers in figures or tables.

See also the sections on [age](#), [dates and date ranges](#), and [time](#).

## Fractions

Fractions can be written in words (eg two-thirds, a tenth) or as decimals (eg 0.5, 0.25). Make sure you use the same style of fraction throughout your document, particularly when you are comparing two or more numbers. Don't use numerals separated by a forward slash (eg 1/3).

## Thousands, millions and billions

- Use a comma in numbers with four or more digits (eg 8,674 or 83,106).
- Spell out 'million' and 'billion' in full, with a space between the number and the word (eg 3 million people). The exception is for currency – use the abbreviations 'm' and 'bn', with no space between (eg £2bn).
- A million should be written as 1 million (not 1,000,000).
- A billion is a thousand million and should be written as 1 billion.
- Always include all relevant zeros – eg don't use 50–100,000 to mean 50,000–100,000.
- In tables and figures, avoid repeating 'million' and 'billion' next to all relevant numbers by including the term alongside the unit in the axis, column or row heading – eg 'Number of vaccines (million)'.

See also the section on [units and symbols](#).



## Referring to the four UK countries

Be clear whether you are referring to England, Great Britain or the UK.

- **UK:** England, Northern Ireland, Scotland and Wales.
- **Great Britain:** England, Scotland and Wales.

If you are referring to several countries in the UK, list them in alphabetical order – eg The trend was the same in England, Northern Ireland and Wales.

Try to avoid the term ‘national’ – it can cause confusion as to whether you are referring to one country in the UK or to the UK overall. Instead, refer to a specific country or countries.

Refer to the NHS in each of the four UK countries as, for example, ‘the NHS in England’ not ‘the English NHS’.

## Short words

Try to use short (Anglo-Saxon) words rather than long (Latin) ones, or the words that you tend to use when you speak.

For example:

- ‘use’ rather than ‘utilise’
- ‘set up’ rather than ‘establish’
- ‘before’ rather than ‘prior to’
- ‘show’ rather than ‘demonstrate’

- ‘make sure’ rather than ‘ensure’
- ‘give’ or ‘send’ rather than ‘provide’.

## Spelling

Our spelling style follows the *Oxford English Dictionary* – see [www.lexico.com](http://www.lexico.com)

Spell check all documents (in UK English), but note that spell checks won’t pick up a correctly spelled word in the wrong place – eg ‘form’ instead of ‘from’.

### Standard UK spellings

Use UK rather than US spellings:

- -ed rather than -t for verbs (eg burned, learned)
- -ise/yse endings rather than -ize/zye (eg realise, organise, analyse).

The exception is proper nouns, such as organisation or company names, for which you need to keep the original spelling – eg World Health Organization.

## Commonly confused words and phrases

<b>advise</b> (verb – eg to advise, I can advise you)	<b>advice</b> (noun – eg the advice, I can give you advice)
<b>complement, complementary</b> (enhance or improve)	<b>compliment</b> (congratulate or praise), <b>complimentary</b> (praising or given free of charge)
<b>dependant</b> (noun, someone who depends on you)	<b>dependent</b> (adjective, reliant on someone or something)
<b>enquiry</b> (ask a question)	<b>inquiry</b> (official investigation)
<b>licence</b> * (noun – eg doctors need a licence to practise)	<b>license</b> (verb – eg the GMC licenses doctors), <b>licensed, licensing</b>
<b>practice</b> * (noun – eg a GP practice)	<b>practise</b> (verb – eg a practising nurse)
<b>principle</b> (a firm belief)	<b>principal</b> (head – eg of a college)
<b>specialty</b> (branch of medicine – eg neurology)	<b>speciality</b> (an area of expertise, a dish in a restaurant)
<b>stationary</b> (not moving)	<b>stationery</b> (writing materials)

\* Try replacing the word with advice or advise – one will sound correct and you'll know whether to use the word with a 'c' (noun) or an 's' (verb).

## Preferred spellings

Use	Don't use
acknowledgement	acknowledgment
adviser	advisor
ageing	aging
benefited, benefiting	benefitted, benefitting
centre	center
enrol, enrolled, enrolment	enroll, enroled, enrollment
focused, focusing	focussed, focussing
judgement	judgment
knowledgeable	knowledgable
liaise, liaison	liase, liason
programme	program (unless referring to a computer program)

See also the section on **hyphens** for examples of words spelled as one word, hyphenated or as two words.

## Titles and qualifications

Don't include titles before names (eg Ms, Dr, Prof). An exception is if you are writing a letter or email directly to someone, and you don't know them well enough to use their first name. In that case:

- for customary titles (eg Mr, Mrs, Ms) and professional titles (eg Dr, Prof), the surname follows
- for honorary titles (eg Sir, Lady, Dame), the first name follows
- for a combination of professional and honorary titles, the first name and surname follows (eg Prof Sir Peter Rubin).

Don't include letters after names for qualifications (eg doctorates, postgraduate diplomas) or honours (eg CBE, OBE) unless there is a particular need to do so. If you do need to, present the letters in capitals (or a mix of upper and lower case where this is usual) with no full stop (eg MD, FRCPath).

See also the section on **capital letters** for information on how to present job, political and academic titles.

Information  
outside  
of the  
main text

# Contact details

## Addresses

Use as little punctuation as possible in addresses – no commas at the end of lines or after house numbers.

## Email (not e-mail)

You email people ‘at’ their email address and call people ‘on’ their number – eg Email Jo at jo.bloggs@health.org.uk or telephone her on 020 7257 8765.

## Telephone numbers

- Divide telephone numbers using spaces not hyphens – eg 020 7226 2260.
- Present international numbers as, for example, +44 (0) 20 7226 2260.
- Email/Tel or E/T are acceptable abbreviations. Be consistent.
- When giving an extension, include the full telephone number – eg 01253 692607 ext 1234.

# Figures, tables and boxes

- Number figures, tables and boxes consecutively (ie Figure 1, Figure 2, Table 1, Figure 3, Box 1, etc).

- Place the figure, table or box number, above the piece of content, in bold. Follow this with a colon and a title starting with a capital letter.
- Always include a reference to tables, figures and boxes in the main text.
- Edit text in tables and diagrams consistently, using minimal punctuation and capitalisation.
- Use symbols in tables and figures to make sure the information is as succinct as possible.
- Include all relevant details in titles (eg units, dates, if the data are in real or cash terms).
- Where there are many tables, figures and boxes, you could list them at the end of the main contents list.

## **Figures**

Figures include diagrams, charts, maps and hand-drawn illustrations.

## **Tables**

Tables are straightforward columns of words and numbers.

## **Boxes**

Boxes can be used to pull out or highlight key pieces of information that are related to the main text but don't fit directly into the narrative.



# Referencing

You must always provide a reputable reference for facts, figures and quotes sourced from published work.

## Placing the reference numbers in the main text

- Our style is to use numbered endnotes in the text, with a corresponding list of references at the end of the document.
- Use a separate endnote number for each reference. You can use the same number to refer to the same reference in several places in the text. Endnote numbers (and footnotes) always go after any punctuation.
- If you need to include several references at the same point in the text, separate the numbers with a comma only (no space). Include all the relevant reference numbers (rather than writing them as a number range) so you can link them to the reference list at the end of the document.
- If you have references that are mentioned for the first time in a figure, table or box, number the references from the first time the figure, table or box is mentioned in the main text.
- We don't use endnotes in online outputs. Add references as hyperlinks in digital content (see [hyperlinks](#) section).

## Formatting the reference list

Our style for formatting the list of references is based on the Vancouver referencing system. For all types of references, include:

- author name or names (use the publisher if the document has no author, and if the document has more than five authors, use ‘et al’ after listing the first five authors)
- title
- date of publication, broadcast or recording.

For full details of our style for references, and examples of the most common publications we usually reference in our reports, see the reference guide in the communications section of the hub.

## Website addresses

- Only include http:// or https:// if the website address excludes www.
- Don’t include a forward slash at the end of the website address.
- Avoid using a full stop at the end of a website address, even if it is at the end of a sentence or reference, as readers may think this is part of the address.
- In the online version of a document, make each web address a clickable link.

## Hyperlinks

We don't usually include hyperlinks in the main text of publications as these won't be helpful to readers if they use a printed version, but hyperlinks are important in digital content.

When you choose the text to hyperlink, make sure you describe what the link connects to rather than writing 'click here'.

For example:

- write Read our latest NHS funding report
- not To read our latest report about NHS funding, click here.

As well as being best practice, this also helps people using screen readers.

## Referencing our text or figures in external publications

When publishers and authors ask to reproduce text or figures from our reports in their own publications, we recommend using the following style:

This text is reproduced from page 7 of: Fisher R, Allen L, Malhotra A, Alderwick H. *Tackling the inverse care law: Analysis of policies to improve general practice in deprived areas since 1990*. The Health Foundation; 2022 (<https://doi.org/10.37829/HF-2022-P09>).

# Punctuation

Keep punctuation to a minimum, using enough to make your writing clear and easy to understand. Bear in mind that using too much punctuation can interrupt the flow of the sentence.

## Abbreviations

- Minimise the use of abbreviations, including acronyms and initialisms – they may be familiar internally but not to an external audience. They can also affect readability if overused.
- Acronyms are a type of abbreviation that combine the first letter of each word to form a pronounceable word (eg NASA). Initialisms are similar but require you to pronounce each letter separately (eg NHS, CCG).
- Spell these out the first time they appear, followed by the initials in brackets – eg integrated care systems (ICs); you can use ICs in the text thereafter.
- It may be helpful to repeat the full name of uncommon abbreviations and their initials at certain points in the text – for example, at the start of new chapters.
- If a term occurs only a few times, it's usually best to spell it out.
- There is no need to spell out familiar terms such as A&E, GP, HIV, NHS, UK, US.
- Don't use full stops in initialisms or acronyms (such as BBC, CQC, OHID) or abbreviations (such as eg, am, Mr, Ltd, Dr, mm, pp).

- If you use a lot of abbreviated terms, consider including these in a glossary.

See also the sections on [eg, etc, it](#) and [units and symbols](#).

## Ampersands (&)

Use the word ‘and’ rather than an ampersand. The only exceptions are:

- A&E, as this is widely recognised
- when organisations or company names include one – eg Peyton & Byrne.

## Apostrophes (’)

- Apostrophes can indicate possession – eg the Health Foundation’s position on value for money.
- If the possessor is plural, add the apostrophe after the s – eg the GPs’ opinions. If the plural doesn’t end in s, add ’s – eg the children’s ward, the people’s views.
- Use apostrophes in, for example, a week’s time and 4 months’ leave, where the apostrophe replaces ‘of’. You don’t need an apostrophe in, for example, 5 years ago.
- Don’t use apostrophes for plurals that aren’t possessive (eg 1990s, NGOs).
- Don’t use apostrophes to indicate possession in yours, ours, theirs, hers and its (note that its means ‘belonging to it’, while it’s is a contraction of ‘it is’).

- Don't use an apostrophe and s after personal names ending with s where the end of the person's name is pronounced 'iz' – eg Dr Bridges' surgery is in the morning, whereas Dr Jones's is in the afternoon.

## Brackets

- Use curved brackets (also known as parentheses) in normal text when you need to include extra information that explains your point.
- Use square brackets to add material to direct quotes – eg She [the female patient] was very ill.
- If the bracketed text is contained in a longer sentence, the closing stop is placed outside the bracket (as in this example). (If the bracket encloses a full sentence, the stop is placed inside the bracket – as it is here.)

## Bullet points and lists

Use bullet points for lists of three items or more – this helps to break up and clarify the text.

In lists of short bullet points, the bullets form part of a sentence.

The introductory sentence therefore ends with a colon and the bullets:

- should follow grammatically from the introductory sentence
- should begin in lower case

- can include full stops. But they only end with a full stop if they are the last point in the list.

Don't use a semicolon at the end of each bullet point.

Another option is a list of long bullet points.

- In a list of long bullet points, each point is one or more complete sentence.
- Each bullet point starts with a capital letter and ends with a full stop.

Don't number the bullet points unless you want to indicate a hierarchy or refer to separate processes.

## Capital letters

Our style is to use capital letters sparingly, as they interrupt the flow of text and can make sentences more difficult to read. Try to use capitals for proper nouns, such as names, only. If in doubt, use lower case. The table on the next page summarises common uses of capital letters and when to use lower case instead.



<b>Use capital letters</b>	<b>Use lower case</b>
Specific organisations, departments and judicial bodies – eg Islington Clinical Commissioning Group, the Royal College of Physicians	Organisations in general – eg clinical commissioning groups, the royal colleges  Internal teams – eg digital and editorial team
Job, political and academic titles when specific and attached to a name – eg Chief Executive Jennifer Dixon, Professor Charles Vincent, Harkness Fellow Adam Briggs	Job, political and academic titles in general – eg the chief executives, the professor, the programme fellows
Titles of specific programmes, projects, schemes and campaigns – eg Shaping Places for Healthier Lives, Networked Data Lab, THIS Institute, the REAL Centre (including capitalising Centre when used without REAL)	Programmes, projects, schemes and campaigns in general – eg the programme
Specific pieces of legislation – eg the Health and Social Care Act 2012, the Budget, the Spending Review, the Queen’s Speech, the 2019 General Election	Use lower case for bill and white paper, unless using the full name – eg the Health and Social Care Bill, but the bill  Use lower case for non-specific activities – eg the past five general elections
Recognised political or geographical divisions – eg Central America, the Middle East, sub-Saharan Africa	Points of the compass (east, west, north, south) – eg south-east London, northern Scotland, southern Africa

**Also use lower case for:**

- the board, trustees, governors
- government, parliament (other than the Houses of Parliament)
- social services, probation services (except specific departments)
- names of types of documents (reports, papers)

- liberal, socialist, democrat and so on (unless referring to a specific political party – eg the Liberal Democrats)
- national living wage
- seasons (autumn, winter, etc)
- the hub, internet, the web, website (but use initial capitals for names of specific products, such as Yammer and Salesforce).

For publication titles and headings, use sentence case (ie a capital letter for the first word and lower case for all other words) – eg *Nurses’ pay over the long term: what next?*

Follow the publisher’s convention on capitalisation of flagship government plans – eg *NHS Long Term Plan*.

Capitalise cross-references as follows: see Chapter 2, Appendix 3, Figure 1, Table 7.

Don’t use capitals for the first letters of words simply because they’re better known by their abbreviation – eg use ‘general practitioner’ not ‘General Practitioner’.

Avoid using all capitals for complete words or sentences. It will come across as shouting at your readers and can also be difficult to read. If you want to add emphasis to a particular passage, use bold text.

## Colons (:)

- Information that follows a colon can explain what came before – eg The nurses were split over the decision: half wanted to go ahead while the others were more reluctant.
- You can use colons to introduce a summary or example – eg There were two priorities: building the knowledge base for quality, and engaging patients for better health outcomes.
- You can use colons to introduce bulleted lists that follow on grammatically from the introduction (see also the section on **bullet points and lists**).
- Don't add a hyphen or en dash directly after a colon (eg ':-').

## Commas

Commas give a brief pause in the flow of the text and guide the reader through the sentence. However, commas can be overused, making reading more difficult than it has to be. Remember the advice: never use a comma when a full stop will do.

Use commas:

- to make complex sentences easier to understand – eg Where the rights of patients are at stake, the charity must speak out in their defence, even if this involves criticising the NHS

- to prevent ambiguity – eg In the valley below, the villages looked very small
- to define a clause – eg The MP’s change of heart, if that is the correct term, came too late
- to separate a subordinate clause (eg beginning with ‘if’, ‘although’, ‘because’) from the main clause of a sentence – eg If the NHS is to achieve this goal, it needs to be more flexible
- to separate successive items in a list – eg green, black and gold. Don’t use a comma between the penultimate item and the word ‘and’ or ‘or’ unless the sentence could be misunderstood without it – eg Research and economics, finance and administration, and human resources
- to separate two or more adjectives before a noun, where they both modify the meaning of the noun in a similar way – eg a difficult, expensive process. If the two adjectives modify the meaning in different ways, don’t use a comma – eg a major British institution
- following ‘however’ when it is used at the beginning of a sentence. A pair of commas surround ‘however’ when it is used within a sentence – eg The details, however, were not disclosed
- in numbers of four or more digits: 1,000, 100,000.

## Contractions

Think about your audience and the impression you want to give before using a contraction, such as don't, couldn't and she's. They can add a familiar tone to case studies, blogs and marketing materials. However, they are unlikely to be appropriate for publications, long-form digital content, formal letters and invitations.

## Dates and date ranges

- Use the style 5 July 2022 (not 5th July 2022 or July 5 2022).
- Shorten date spans to two digits (eg 2020–22), unless they span centuries (eg 1990–2001).
- Use an en dash rather than a hyphen for date ranges (see also the section on **en dashes**). But use 'to' or 'and' if the date range is preceded by 'from' or 'between' – eg use 'from 2020 to 2022' not 'from 2020–22', and use 'between 2010 and 2020' not 'between 2010–20'.
- Write financial years with a forward slash (eg 2022/23) and write out a date range with 'from' and 'to' rather than using an en dash – eg use 'from 2021/22 to 2022/23' not '2021/22–2022/23'.
- Write decades as, for example, the 1990s (not the 1990's, the nineties or the '90s).
- Make centuries lower case (eg 21st century). See also the sections on **time** and **numbers**.

## eg, etc, ie

Use eg, etc and ie depending on the formality of the publication. In reports, you can use them in tables and brackets, but you should generally spell them out in the main text: use ‘for example’ (not ‘eg’), ‘that is’ (not ‘ie’) and ‘and so on’ (not ‘etc’).

Don’t use full stops or commas between or after the letters.

## Ellipses (...)

Use ellipses (three dots) where part of a quotation has been left out. The dots should have no space before but a single space after – eg Brevity is... wit.

## En dashes (–)

En dashes (–) are twice as long as hyphens (-). To insert one, press ‘ctrl’ and ‘-’ together on the number pad. Use them:

- in number and date ranges – eg 79–80, 1975–78
- for a connection or relationship between words – eg a patient–clinician relationship (it means ‘to’ or ‘and’ in this case)
- on their own to mark a break in a sentence – eg before giving an example
- to separate out a phrase within a sentence – to break up the text or add emphasis – instead of brackets or commas. Don’t use more than one pair of en dashes per sentence.

In ranges of numbers less than 0, use ‘to’ instead of a middle endash – eg -5 to -10.

See also the section on [hyphens](#).

## Exclamation marks (!)

Only use exclamation marks in exceptional circumstances – so, hardly ever. Try to express the exclamation through your choice of words rather than relying on punctuation. As F Scott Fitzgerald put it, ‘An exclamation point is like laughing at your own joke.’

## Forward slashes (/)

Try not to use forward slashes in text – they can be ambiguous. If you decide to use one because a phrase recurs many times, leave no gap either side – eg before/after studies.

Use forward slashes for financial years – eg 2022/23.

## Full stops

Use one space only after a full stop.

Don’t use full stops in abbreviations (such as eg, etc, Dr, Mrs) or abbreviations (such as MP, GP, UK).

## Hyphens

Keep use of hyphens to a minimum. If they are being used for style purposes only, not because of a grammatical rule, take them out.

Use hyphens:

- in fractions – eg two-thirds
- in specific ages – eg a 10-year-old girl (but aged 10 years)
- as a minus symbol – eg -£2bn
- in a pair of words used as an adjective – eg long-term condition (but the condition was long term)
- to avoid ambiguity in adjectival phrases – eg ‘the best reported studies’ are the best studies that have been conducted and reported, whereas ‘the best-reported studies’ are those that have been best reported
- to avoid ambiguity within a word, such as between two consecutive vowels (eg pre-eminent; exceptions: cooperation and coordination) or consonants (eg cross-species)
- for words beginning with ‘neo-’ (eg neo-liberalism), ‘anti-’ when used to mean ‘against’ (eg anti-inflammatory) and ‘non-’ to indicate opposites (eg non-event).

Don’t use hyphens in phrases when the first word is an adverb ending in ‘y’ – eg locally run project.



<b>Use</b>	<b>Don't use</b>
childcare	child-care, child care
co-design	codesign
co-produce	coproduce
comorbidities	co-morbidities
cooperate	co-operate
coordinate	co-ordinate
dataset	data-set, data set
decision making (noun), decision-making (adjective)	decisionmaking
end-of-life care	end of life care
follow up (verb), follow-up (noun and adjective)	followup
front line (noun), front-line (adjective)	frontline
grant making (noun) grant-making (adjective)	grantmaking
groundbreaking	ground-breaking
hard copy	hardcopy
health care, health care professional	healthcare, health-care
ill health	ill-health
inpatient	in-patient
long term (noun), long-term (adjective), longer term (noun and adjective)	longer-term
multidisciplinary	multi-disciplinary
north-east, north-west	northeast, northwest

outpatient	out-patient
policymaker, policymaking	policy maker, policy making, policy-maker, policy-making
real terms (noun) real-terms (adjective)	
rollout (noun) roll out (verb)	roll-out
short term (noun), short-term (adjective), shorter term (noun and adjective)	shorter-term
side effect (noun)	side-effect
socioeconomic	socio-economic
south-east, south-west	southeast, southwest
under-doctored	underdoctored
under-served	underserved
underfunded	under-funded
web page, website	webpage, web site
wellbeing	well-being, well being
worldwide	world-wide

## Question marks

Write direct questions included within a sentence in lower case – eg We asked three questions: who? where? when?.

# Quotes

## Quotation marks

Use single quotation marks (‘...’) for:

- reported speech – eg The organiser said, ‘This has been a really successful event.’
- quoting words or short phrases from another written source – eg Research suggests that doctors are especially prone to the ‘myth of perfection’
- introducing a term the reader is unlikely to have heard before. In this case, use quotation marks the first time the term appears only.

Use double quotation marks (“...”) for:

- quotes within quotes – eg ‘When I say “the conditions were appalling”, that’s what I mean,’ said the nurse.

Use quoted speech sparingly. It is better to paraphrase unless the speaker has said something particularly surprising or interesting.

## Punctuating reported speech

Use a comma to introduce quotes unless they begin mid-sentence – eg She said, ‘Research and development needs to be an integral part of health care.’

Where quotes begin mid-sentence, a comma is not needed and the quote begins with a lower case letter – eg She replied that this was ‘a crucial component of the NHS’.

If the reported speech is:

- a complete sentence, place the closing quotation mark after the punctuation mark – eg He replied, ‘It was fascinating.’
- not a complete sentence, place the closing quotation mark before the punctuation mark – eg He replied that it was ‘fascinating’.
- interrupted by ‘she said’ or a similar expression, place a comma inside the quotation mark before the interruption if the original speech had a pause or break at that point – eg ‘Having failed to obtain permission,’ she explained, ‘we had to turn back.’
- continuous, place the comma outside the quotation mark – eg ‘This year’s campaign’, he concluded, ‘will be even more successful.’

If reported speech spans more than one paragraph, use a quotation mark at the beginning of each new paragraph, but only place a closing mark at the end of the final paragraph.

## Semicolons (;)

Semicolons can join two complete sentences of equal weight within one sentence when they are too closely related to be separated by a full stop and there’s no connecting word like ‘and’ or ‘but’ – eg The report was published today; it was delivered on time.

Use semicolons to divide long entries in lists that already include commas – eg The Foundation supports people involved in: improving the quality of care; the provision, management and administration of health care; and medical research and the application of the results. Include a semicolon between the penultimate item and the word ‘and’ or ‘or’ – this is contrary to our style for commas, but is needed for clarity.

Semicolons can easily be misused. If in doubt, don’t use them.

## Time

Present times using the 24-hour clock, with a full stop not a colon – eg 09.00, 11.30, 18.00.

Where it is necessary to say o’clock (eg in an extract), put a space after the number – eg 6 o’clock.

For length of time:

- always use numerals (except for decades and centuries – eg two decades)
- write the unit of measurement in full (eg years, weeks, days, hours, minutes, seconds), unless brevity is strictly required (eg for a tweet, 5m26s would be ok)
- include a space between the number and the unit (eg 4 hours).

See also the sections on [age](#), [date and date ranges](#) and [numbers](#).

## Units and symbols

- Always use the abbreviated unit of measurement without a full stop (eg mm, l, kg) or with the symbol (eg %, £). There is no need to write out the word in full (eg per cent).
- Don't include a space between the number and the unit or symbol (eg 4kg, 33cm), unless the meaning could be ambiguous (eg 2l could be confused for '21', so use 2 l or 2 litres).
- The plural of a unit of measurement is usually the same as the singular (eg 6mm).
- The exception to the three rules above is when you are referring to a length of time – see the sections on [age](#) and [time](#).
- Use metric measurements where possible (eg mm, cm, m, g, kg). The exception is miles – as miles are the standard measure of distance in the UK, use them instead of kilometres.
- For currency, include the currency name as well as symbol if it could be ambiguous (eg CAD\$4).
- Write out ranges of measurements in full (eg 120–150mm, not 120–50mm).

- Don't use symbols such as  $<$ ,  $>$ ,  $\leq$ ,  $\geq$  and  $=$  as shorthand in text. You can use them in tables. In tables, don't include spaces between the symbol and the number (eg  $p < 0.01$ ,  $n = 5$ ). If you have to include the symbols in text, put them in brackets.
- In equations or ranges of numbers less than 0, use 'to' instead of a middle en dash (eg -5 to -10).

See also the section on [numbers](#).

# My notes





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