

eWCC User Guide MD Users

Introduction

The electronic Work Capacity Certificate (eWCC) is used by medical practitioners to certify capacity for injured workers in South Australia. It is a prescribed form and legally required.

Medical Practitioners in South Australia who use Medical Director have been able to access the eWCC via an adapter (installed by the practice and accessed via a launch bar on the desktop) or a widget, known as the UHG widget within the Medical Director sidebar.

From June 2021 ReturnToWorkSA have partnered with Telstra Health and HealthLink to create a native integration for Medical Director users, enabling access to the certificate from within the Medical Director solution via the HealthLink Forms Library.

This guide has been created to outline how the form will be accessed and the new features and functionalities available to medical practitioners.

Please Note:

All patient details shown in this document are test patients and do not reflect a real patient in any way.

This User Guide is subject to be updated, please ensure you have the correct version.



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1. Minimum system requirements

Browser	IE 11 update 2929437, Edge, Chrome, Firefox
Medical Director	Version 3.16 and above
HealthLink	HealthLink Client Installation to enable HealthLink Forms Use

2. HealthLink Client and Forms Installation

Some practices may already have access to the HealthLink Forms Library – if so, no further installation or set up is required. You will be notified when the eWCC is available for use.

If practices do not already have access to the HealthLink Forms Library this will require set up. HealthLink will contact practices that have Medical Director version 3.16 and above to install the HealthLink Client and enable the HealthLink Forms library.

Once this set up is complete and the ReturnToWorkSA eWCC is available in the HealthLink Forms Library it is ready to use and send actual certificates to ReturnToWorkSA which are then automatically loaded into their live system.

If the HealthLink forms library is not available in your practice or available for a particular doctor – please contact the support team on the contact details below.

Tech Support:Phone:1800 952 252Email:fastforms@health.telstra.com





3. Access and Launching the eWCC

Step 1:

Open the patient record and select the "HealthLink tab on the far right:

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🄊 File Patient Edit Summaries Tools Clinical Correspond	lence Assessment Resources Sideb	ar MyHealthRecord Window	Help	_ 8 ×
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Mr Jonathan Anderson-Smith (45yrs 5mths 🗸 DOB: 05/05/1975 Gender	: Male Occupation:		0m 43s	FACT
Sirius Building, 23 Furzer Street. Phillip. Act 2606 Ph: 931265	i45 (work) Record No:	ATSI: Aboriginal		No Photo
Allergies & ? Allergies/Adverse Reactions Adverse Reactions:	∧ Pension No: ✓ Smoking Hx: ? Smoker	Ethnicity: Australian Aboriginal		
Namings:	Myt	lealthRecord:	Reca	
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Consultation date: 14/10/2020 💷 🖪 🚺 🖳 😨 😻 🏠	Previous visits: ALL			
Visit type: Visit	Date Recorded by: 14/08/2019 Dr Medical Director 15/08/2019 Dr Medical Director 16/08/2019 Dr Medical Director	Visit type	Reason for contact	Start ^ 15:58:33 14:34:00 15:21:52

Step 2:

From the HealthLink tab on the far right select "New Form" to launch the Forms Menu, this is located on the far left of the screen.

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17 of 17 Records	Delete Clear H	itters Kefresh	error Detail					
Date Created 🔹 👻	Form Status	Message ID	Туре	Subject	Description	Recipient	Sender	Ac
2/06/2020 11:47:27 a.m.	Submitted	EH-3960	Eastern Health Referral	Cardiology - Jenni	Eastern Health Referral Form	easthcda	Dr Medical Director	Wa
2/06/2020 11:45:48 a.m.	Parked	EH-3959	Eastern Health Referral	Dermatology - Jo	Eastern Health Referral Form	easthcda		
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16/08/2019 3:24:31 p.m.	Submitted	MAC-1611	My Aged Care Referral	My Aged Care Re	My Aged Care Referral	agedcfm	Dr Medical Director	Ac
14/00/2010 4-00-47 pm	Submitted	MAC 1559	My Aged Care Referral	My Aged Care Re	My Aged Care Referral	agedofm	Dr Madiaal Director	Ac





Step 3:

From the HealthLink Forms Menu, under General Services, select Return to Work SA to launch the eWCC. (Each user will have a different selection of forms as the Library is tailored for what individuals reuqire)

a referral Update referral	
earch a Private Specialist or Allied Health P	Provider to Refer Patient
Type individual / practice name, or specialty then enter Sea	arch Help Clear Location 1
SR Specialists & Referrals For Private Specialist Referrals	
eneral Services	
This is the AU UAT Environment	ReturnToWorkSA Work Capacity Certificate
eferred Services	
Application for ACT Approval to Prescribe Controlled	AU Radiology Referrals
Application for ACT Approval to Prescribe Controlled Medicines	AU Radiology Referrals Banyule Community Health
Application for ACT Approval to Prescribe Controlled Medicines Austin Health	AU Radiology Referrals Banyule Community Health Carrington Community Health
Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services
Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form ccCHiP - Cardiometabolic Health in Psychosis	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services Eastern Health
Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form ccCHiP - Cardiometabolic Health in Psychosis DPV Community Health	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services Eastern Health HealthLink Logging Service
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Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form ccCHiP - Cardiometabolic Health in Psychosis DPV Community Health EMR API Test App HealthLink Logging Service	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services Eastern Health HealthLink Logging Service Hearing Australia Medical Certificate Monash Health Specialist Consulting Clinics
Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form ccCHiP - Cardiometabolic Health in Psychosis DPV Community Health EMR API Test App HealthLink Logging Service Mater Health Referrals	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services Eastern Health HealthLink Logging Service Hearing Australia Medical Certificate Monash Health Specialist Consulting Clinics Northern Health
Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form ccCHiP - Cardiometabolic Health in Psychosis DPV Community Health EMR API Test App HealthLink Logging Service Mater Health Referrals My Aged Care Referral	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services Eastern Health HealthLink Logging Service Hearing Australia Medical Certificate Monash Health Specialist Consulting Clinics Northern Health Online Medical Certificate for QLD CTP Claim Sudawy Local Health District Services
Application for ACT Approval to Prescribe Controlled Medicines Austin Health Canberra Health Services - Outpatient and Community Referral Form ccCHiP - Cardiometabolic Health in Psychosis DPV Community Health EMR API Test App HealthLink Logging Service Mater Health Referrals My Aged Care Referral Northern NSW Local Health District services	AU Radiology Referrals Banyule Community Health Carrington Community Health Chris O'Brien Lifehouse Services Eastern Health HealthLink Logging Service Hearing Australia Medical Certificate Monash Health Specialist Consulting Clinics Northern Health Online Medical Certificate for QLD CTP Claim Sydney Local Health District Services Transport for NSW







Create New WCC

Step 4:

Medical Practitioners will now have the option of:

- Create a New WCC
- Create Subsequent WCC
- Finish Draft WCC •

These options are dependent on what has previously been completed for the patient.

(See further details on this functionality in Section 4 New Functionality)



Create New WCC

Create Subsequent WCC

Submission Date	Injury Date	Injury Caused	Clinical Diagnosis	Employer Name	Claim Number	
04/06/2021	04/06/2021	trip over pall	mild concussio	Construct Services	12345678/	Create Subsequent WCC
04/06/2021	04/06/2021	tractor ran ov	fractured foot	Caterpillar of Aust	unknown	Create Subsequent WCC
04/06/2021	20/05/2021	cut finger	laceration	B & A Bricklaying C	12345678/	Create Subsequent WCC
04/06/2021	20/05/2021	cut finger	laceration	B & A Bricklaying C	unknown	Create Subsequent WCC
Showing 1 to 4 of 4	entries				First Previous	1 Next Last

Finish Draft WCC

Last Saved Date	Injury Date	Injury Caused	Clinical Diagnosis	Employer Name	Claim Number			
05/06/2021	unknown	Spanner to the	Sore head	ABC Building Servic	unknown		Ø	×
Showing 1 to 1 of 1	entries				First Previous	1	Next	Last









Step 5:

The form will load and prepopulate the required fields. Highlighted below for sections **A. B. & G**. of the form.

Work Capacity Certific	ate©		
A. Patient and employer detail	ils		
Family Name *	Lane		
Given Names *	Simon		
ReturnToWorkSA Claim#	12345678 (if known)	/ 02	
Other Claim #			
Employer Name *	DD & Parj Pty Ltd		
Date of Birth *	12/12/1987	ii	
B. Injury details and assessm	ent		
I examined you on *	30/08/2016	i	
G. Doctor's details			
Doctor's Name *	Dr Julianne Smith		
Address line1 *	Suites 1 - 4		
Address line2	25 Young St		
Suburb *	Unley		I
State	SA		I
Postcode	5061		I
Phone	0884595487		
Provider Number *	0319352K		
Email Address			I
Fax			I
Completion Date *	30/08/2016		I





Step 6:

Forms can be completed and saved as a draft, saved and printed without sending, or sent and printed. Authorisation from the patient is required prior to sending electronically to ReturnToWorkSA.



Step 7:

When the Print and Save option or Send and Print option is selected a copy of the certificate will open up on the screen.

OFFIC	IAL: Sensitive//Medical in Confidence	
Return to WorkSA	www.rbwsa.com 13 18 55	
Work Capacity Certifica	te	
Version 2 effective 1 July 2017		
A. Patient and employer details	Mandatory	
Family Name: Returntoworksa Claim Number (if known): 48805285/0 Date of Birth: 08/05/1950	Given Names: Test Employer Name: Telstra Business Centre SA North	
B. Injury details and assessment	Mandatory	
l examined you on 27/05/2021 for injury(s)/condition The stated cause was:	on(s) you stated occurred/developed on: 27/05/2021	
The injury(s)/condition(s) you presented with is/are of Is this a new injury/condition? Yes My clinical diagnoss/se based on my examination of	consistent with your stated cause(s): you and other available information is:	
Sore hand unable to type Other comments/clinical findings:		
C. Certification	Mandatory	
have recovered from your injury/condition an are fit to perform suitable duties that accomm are medically unfit to undertake suitable duti Reason:	nd are fit to return to your normal duties: 31/05/2021 modate your functional abilities: les while recovering from your injury for the period:	
Note: Certification based on your functional a	ability, not available duties. Ity to return to work days weeks OR [uncertain at this stage for seturn to rais work]	

To print a copy of the certificate for the patient a "Print" button will be located at the top of the certificate. When selected this will open your print options.

If you find that the certificate is printing over multiple pages with blank ones in between ensure that the paper setting in Advanced Options is set to A4 and not Letter.







Alternatively:

Right click anywhere on the screen and select Print from the menu.

www.rtwsa.com 13 18 55	
	<u>B</u> ack
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	Print
	Print preview
	<u>R</u> efresh
	<u>P</u> roperties

4. New Functionality

New functionality has been introduced to assist Medical Practitioners in retrieving certificates that have either been saved as a draft of previously submitted.

When users open up the HealthLink forms library and select ReturnToWorkSA form – they will be presented with a table that lists the forms for that patient that are either in draft or saved and submitted state.

Medical Practitioners will have the option to:

- **Create New WCCC** this will launch a new WCC form with only the required prepopulated fields
- **Create Subsequent WCC** below this heading will be a table that lists all of that patients previous WCC certificates with the following details pre populated in the table:
 - o Submission Date
 - o Injury Date
 - o Injury Caused
 - o Clinical Diagnosis
 - o Employer Name
 - Claim Number

Medical Practitioners will be able to select one of these certificates to clone and resubmit as a new certificate









• **Finish Draft WCC** – this will allow Medical Practitioners to return to a certificate that has not been completed or submitted to complete.

Returnto	SA V	Vork Capac	ity Certificate	9		
Bob Builde	ər					
January 01, ²	1980					
Create New	WCC					Create New WCC
Create Subse	equent WC	c				
Submission Date	Injury Date	Injury Caused	Clinical Diagnosis	Employer Name	Claim Number	
04/06/2021	04/06/2021	trip over pall	mild concussio	Construct Services	12345678/	Create Subsequent WCC
04/06/2021	04/06/2021	tractor ran ov	fractured foot	Caterpillar of Aust	unknown	Create Subsequent WCC
04/06/2021	20/05/2021	cut finger	laceration	B & A Bricklaying C	12345678/	Create Subsequent WCC
04/06/2021	20/05/2021	cut finger	laceration	B & A Bricklaying C	unknown	Create Subsequent WCC
Showing 1 to 4 of 4	entries				First Previous	1 Next Last
Finish Draft V	NCC					
Last Saved Date	Injury Date	Injury Caused	Clinical Diagnosis	Employer Name	Claim Number	
05/06/2021	unknown	Spanner to the	Sore head	ABC Building Servic	unknown	v x
Showing 1 to 1 of 1	entries				First Previous	1 Next Last
			T	HEALTH		

5. How to test without sending a certificate to ReturnToWorkSA

Once access is available to the HealthLink Forms Library, the electronic Work Capacity Certificate (eWCC) is ready to send actual certificates to ReturnToWorkSA and these are automatically loaded into their live system. Consequently, it is important that you **DO NOT SEND** a 'test' certificate if you wish to test.

If you want to test that the eWCC solution is working correctly, select a test patient record in your practice management software and run through the steps above -, completing required fields in the eWCC. At this point you can finalize testing by clicking the **PRINT & SAVE** button.







Return to Drafts	🖨 Print & Save	Save as draft			
I confirm my patient has authorised me to send this WCC electronically to ReturnToWorkSA					
A Send & Print					

This will display a PDF copy of the form and place a copy of the PDF form into the incoming message section of your clinical application to be filed against the patient record. If all completes as expected, then you can be confident that your system is setup correctly when you need to send through the first real patient data.

6. Where to find your copy of the eWCC form in your clinical application.

To view previously submitted forms from within Medical Director, open the patient record, select "Letters", and choose the eWCC.

A preview of the form is shown in the pane to the right hand side.





Click on Open Externally to see the full form.

File Patient	Edit Summaries Tools Clinical Corre	espondence Assessment Resources Sidebar MyHealthRecord Window Help	_ 8 ×
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Johathan Ander	son-Smith (45vrs 5mths V DOB: 05/05/1975	Gender: Male Occupation: 26m 24s	FACT
			SHEETS
s Building, 23 Fu	urzer Street. Phillip. Act. 2606	33126343 (Work) Record No. All Standard Donginal	
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of 13 Records		Select A	
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6/2020	Cardiology - Jennifer Cooke	Eastern Health Referral Form	
10/2019	Geriatric Medicine - Peteris Darzins	Eastern Health Referral Form	REF
08/2019	My Aged Care Referral	My Aged Care Referral	
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Website	Feedback Help	Medical Certificate Letter Template #2 Letter Template #3 Custom #1 Custom #2	
		Dr Medical Director MD Live Data - UAT-MD-SVR\HCNSOL07 Wednerday, 14 October 2020 11	18-37 DM

7. Support

For application support please contact Telstra Health on:

Phone:1800 952 252Email:fastforms@health.telstra.com



