# HealthLink*

## User Guide
17.02.2025 ZM

# HealthLink SmartForms for
# Zedmed

Welcome to HealthLink SmartForms. The smartest way for health professionals to refer their patients to Head to Health

Your practice must be running Zedmed v35 or above to access the HealthLink SmartForms.

**HEAD TO HEALTH**
Intake

**ZEDMED**

# Submitting eReferrals from Zedmed

## Using HealthLink SmartForms

SmartForms enable **Zedmed** users to easily refer and engage with all HealthLink SmartForm service providers including Hospitals, Private Specialist, Transport for NSW and My Aged Care.

SmartForms are designed to speed up the service you can provide for your patients. They give you confidence that your form has been securely delivered to the service provider, and a copy has been saved to your Practice Software. And what's more, they are free for you to use.

**HealthLink Technical Support**

Email: helpdesk@healthlink.net

Phone: 1800 125 036

Step 1:
**Accessing HealthLink SmartForms (eReferrals)**

Step 2:
**Launching a new form**

Step 3:
**Completing the form**

Step 4:
**Previewing, Submitting and Parking**

Step 5:
**Managing SmartForms and eReferrals in Zedmed**

Step 6:
**Accessing submitted forms**

Step 7:
**What happens after a referral has been made?**

**Step 1:**

# Accessing HealthLink SmartForms (eReferrals)

**To access the forms within your Zedmed software…**

**A** First, search for the patient and open their electronic medical record.
(Hotkey: F4)

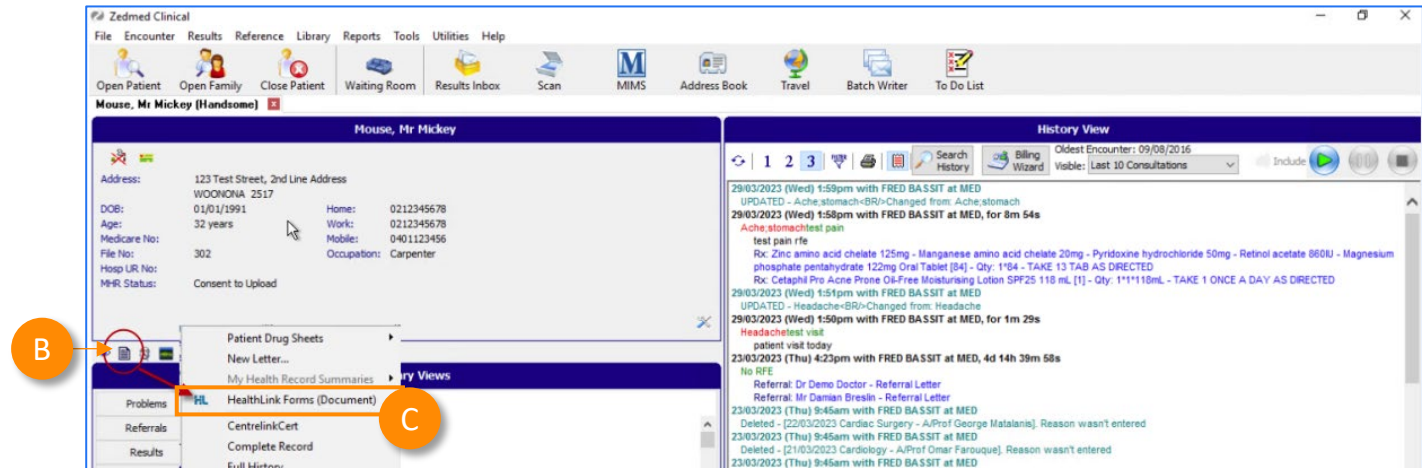**Once the patient's file is open, there are several ways to launch the HealthLink forms page.**

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**B** One way is to click the **Quick Documents icon**

**C** and select **HealthLink Forms (Document)** from the pop-up menu.

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*Alternatives methods on the following page…*
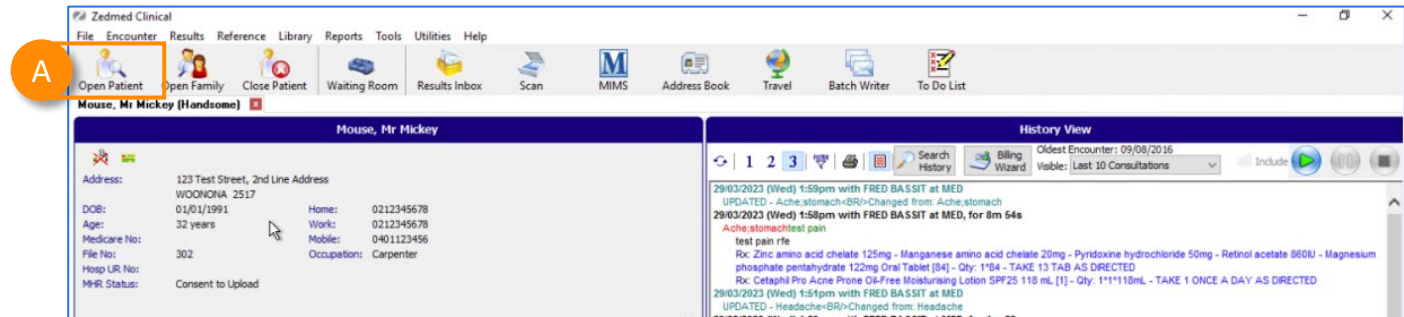
**Method 1:**

**Step 1:**

# Accessing HealthLink SmartForms (eReferrals)

Alternatively, when you've opened the patient's medical record…

**D** Choose **Start Encounter**

**E** Then click the **HealthLink (HL) icon**

**Or** ------------------------------

**F** Choose **Referral Icon** and

**G** Then click on the **Healthlink Forms (Referral)** Referral Module

**Start Encounter**
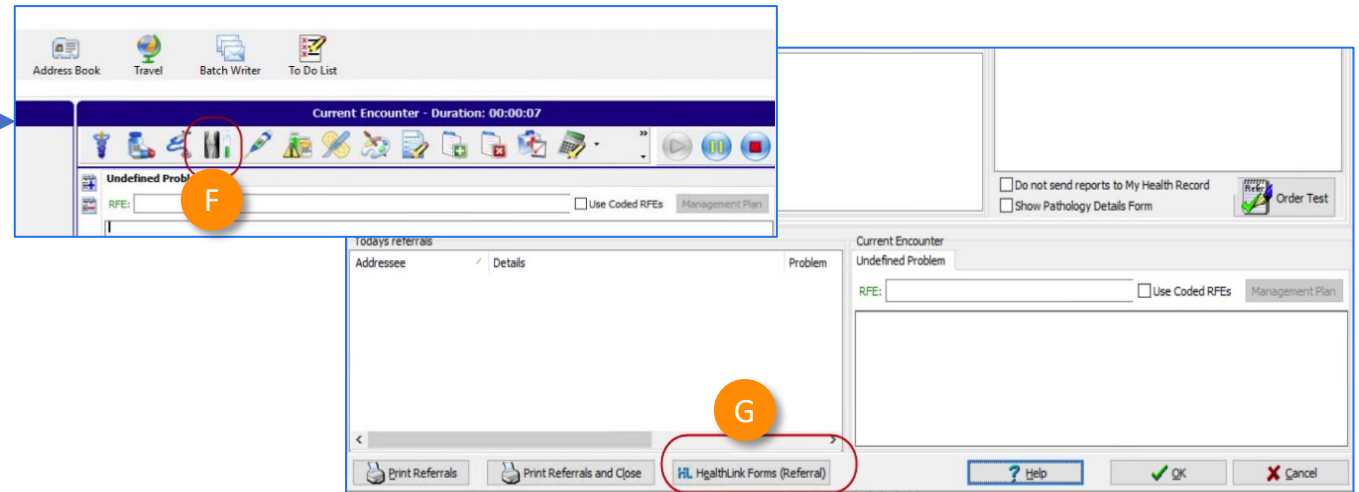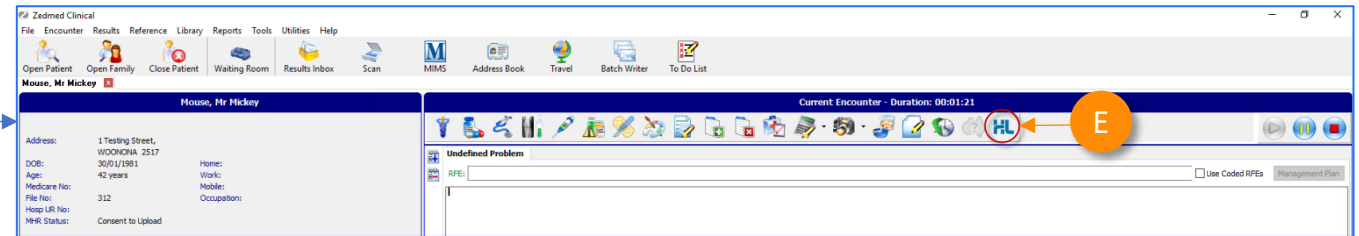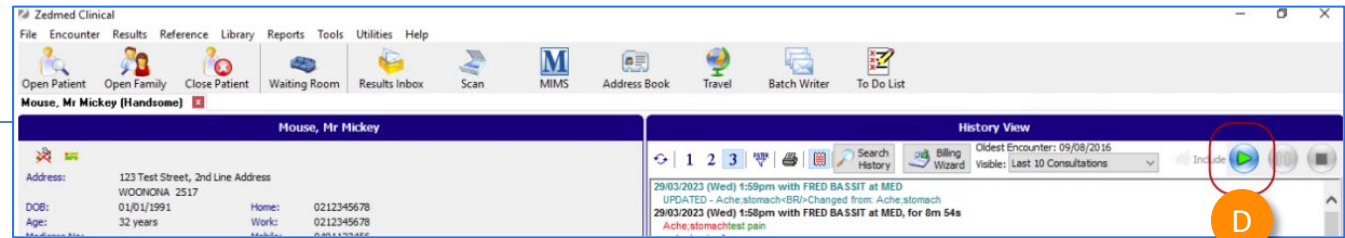
# Step 2:
# Launching a new form

**Now you're on the HealthLink home page…**

**A** Here you'll find a list of available services to refer patients.

**B** Within the **Referred Services** section**,** Click on the link named **Head to Health Phone Service**.

To launch the smart form, Head to Health require you to then:

**C** • **Select a specific state** and **PHN**

**D** • **Facility: Head to Health Intake**

**E** • Then click **Continue** to launch the form.

(**e.g**. *Head to Health Phone Services – VIC – North Western Melbourne PHN)*

**HealthLink**

**D** Make a referral | Update referrals

Specialists, Allied Health Providers and GPs

**A**

Referred Services

Head to Health Phone Service

**B**

**HEAD TO HEALTH**
Intake    1800 595 212

**C** 🔍 Type here to search for a service

Facility*  Head to Health Intake

**E** Continue

⊟ NSW
     Nepean Blue Mountains
⊟ QLD
     Brisbane South PHN
⊟ VIC
     North Western Melbourne PHN

**Step 3:**

# Completing the form

**Now you've loaded the form to complete and submit.**

**(A)** **The SmartForm layout** provides a consistent, easy-to-use tabular structure on the left, with the main action window on the right.

**(B)** **Mandatory Fields** must be completed prior to submitting the SmartForm and are each highlighted with a red asterisk.

You'll notice SmartForms are **responsive**: They will pre-populate all available patient and referrer data and contain logic to request more specific patient information based on your selections.

> **Note:** Once you have ticked on the consent box – the form will open and start pre-populating the patients details

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**Step 3:**

# Completing the form

**C** The additional details can be completed by using the drop-down menu and using the **Yes / No** radio buttons

**D** Assessment section of the form will ask if you would like to use the Initial Assessment and Referral Decision Support Tool (IAR-DST).

**Select** the developmental age group.

**C**

**Additional Patient Details**

The majority of patient demographic information is contained within the "Patient Information" tab, and populated from your medical software. Please review for accuracy prior to submission.

If unsure of an answer to a question below, please leave unanswered.

| | |
|---|---|
| Gender identity | Please select ▼ |
| Patient pronouns | Please select ▼ |
| Patient sexual orientation ℹ | Please select ▼ |
| Patient has Health Care Card | ○ Yes  ○ No |
| Patient has Medicare card | ○ Yes  ○ No |
| Patient has DVA Card | ○ Yes  ○ No |
| Patient has Pensioner Concession Card | ○ Yes  ○ No |
| Homelessness | Not homeless ▼ |
| NDIS participant | ○ Yes  ○ No |
| Proficiency in spoken English | Please select ▼ |
| Main language spoken at home | Please select ▼ |
| Interpreter required?* | ○ Yes  ● No |
| Do you identify as having a multicultural background? | ○ Yes  ○ No |
| Patient's preferred consultation method | Please select ▼ |
| Preferred location for service | |
| Preferred contact method | Please select ▼ |
| Are there any safety concerns with contact methods? ℹ | ○ Yes  ○ No |

**Next of Kin or Emergency Contact**

| | |
|---|---|
| Relationship to patient | Please select ▼ |
| Is the Next of Kin the preferred contact? | ○ Yes  ○ No |

**Assessment**

**D** →

Do you want to use the Initial Assessment and Referral Decision Support Tool (IAR-DST) for this patient?*   ● Yes   ○ No

Developmental age group*

| Please Select ▲ |
|---|
| |
| **Please Select** |
| Child (5-11) |
| Adolescent (12-17) |
| Adult (18-64) |
| Older Adult (65+) |

**GP Mental Health Treatment Plan**

Has a GP Mental Health Treatment Plan been completed?*

If applicable, please attach the Mental Health Treatment Plan in the

**Step 3:**

# Completing the form

## IAR – DST Calculator

**E** In the form you can use the drop down to select the level.

**TIP:** The domain rating guide under each question will open another window and take you the official IAR-DST website.

**F** Click on Calculate to determine the IAR-DST recommended level of care.

**Note:** For more information on the IAR-DST please click here.

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**Assessment**

**E**

Do you want to use the Initial Assessment and Referral Decision Support Tool (IAR-DST) for this patient?*  ● Yes  ○ No

Developmental age group*  [ Adult (18-64) ▼ ]

▼ Initial Assessment and Referral - Decision Support Tool

Note: Please refer to the IAR-DST rating guidance for selections.

**Primary Domains**

Domain 1 - Symptom Severity and Distress*  [ 1 = Mild or sub diagnostic ▼ ]
Domain rating guide ❓

Domain 2 - Risk of Harm*  [ 1 = Low risk of harm ▼ ]
Domain rating guide ❓

Domain 3 - Functioning*  [ 1 = Mild impact ▼ ]
Domain rating guide ❓

Domain 4 - Impact of Co-Existing Conditions*  [ 3 = Severe impact ▼ ]
Domain rating guide ❓

**Contextual Domains**

Domain 5 - Treatment and Recovery History  [ 1 = Positive ▼ ]
Domain rating guide ❓

Domain 6 - Social and Environmental Stressors*  [ 2 = Moderately stressful environment ▼ ]
Domain rating guide ❓

Domain 7 - Family and Other Supports*  [ 4 = No supports ▼ ]
Domain rating guide ❓

Domain 8 - Engagement and Motivation  [ 2 = Limited ▼ ]
Domain rating guide ❓

[ Calculate ]  ← **F**

IAR-DST recommended level of care*  [ Level 3+ Moderate Intensity Services ]

Additional information supporting IAR-DST selection

[ ]

Do you agree with the IAR-DST recommended level of care?  ● Yes  ○ No

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**Step 3:**

# Completing the form

### IAR-DST

**G** If you disagree with the IAR-DST calculation; use the drop-down menu and text box.

Then **click through the remaining Tabs** on the left to **ensure all the pre-populated patient information has been either selected, or de-selected, as appropriate to submit to the service provider.**

All these features ensure you're providing a quality, and compliant submission every time, on behalf of your patients.

Do you agree with the IAR-DST recommended level of care?  ○ Yes  ● No

**G**

Practitioner assessed level of care*

Please select ▲

Please select

Please include the rationale for any deviation between the DST-der... care.*

| Please select |
| Level 1 - Self Management |
| Level 2 - Low intensity services |
| Level 3 - Moderate intensity services |
| Level 4 - High intensity services |
| Level 5 - Acute and specialist community health services |

**GP Mental Health Treatment Plan**

Has a GP Mental Health Treatment Plan been completed?*  ○ Yes  ● No

If applicable, please attach the Mental Health Treatment Plan in the Attachments/Reports tab of this referral.

HL

**HEAD TO HEALTH**
**Intake    1800 595 212**    North Western Melbourne PHN - Head to Health Intake

Submit  Preview  Park  Help ∨

**Requested Information** ⚠
North Western Melbourne PHN

**Attachments / Reports**
No reports selected
No files attached

**Medications, Allergies, Alerts**
No long term medications specified
No medications specified
No medical warnings specified

**Patient Information** ⚠
John Smith
No patient ID available
13/02/1985

**Referrer Information**
Brett Mitchell
No Different Regular GP

✓ **Form has been auto-saved.**

**Patient Information**
Date of birth*
13/02/1985

Name*

▾ John Smith

First name*        Middle name(s)
John

Last name*         Preferred name
Smith

Gender*                          Patient's Indigenous status*
Male ∨                           Not stated/inadequately described ∨

Gender Identity                  Country of Birth

**Residential Address**
Please add only the following State or Territory codes, ACT, NSW, NT, QLD, SA, TAS, VIC, WA only in the State field

**Step 3:**

# Completing the form

## Attachments

**H** The **Attachments / Reports** tab will give you access to all the supporting documents that you may wish to attach to the form.

**I** You can select any item from the **table** – showing you patient medical records captured from the **last six months**.

Or you can **browse for files**…

**J** • stored in your Practice Management Software by clicking the **Browse for Patient Document** button .

**K** **Note:** Make sure to update the date parameters if you want to see files that are older than 6 months.

**L** • *Or* in your local computer's file system by clicking the **Browse for Local File** button.

**Step 4:**

# Previewing, Submitting and Parking

## Previewing

**A** You can verify that the form has been completed correctly by clicking **Preview** allowing you to review the details before submitting.

**B** Whether you click **Preview** or **Submit**, if a piece of required information is incomplete or incorrect, the form will notify you to complete or correct it.

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**Step 4:**

# Previewing, Submitting and Parking

## Submitting

**C** When you are ready to send your form, click **Submit**.

**D** This will safely and securely send the form electronically via HealthLink, and you will see a copy of the completed form with a **date stamp.**

**A copy of the submitted form is saved directly to the patient file**.

**E** If you'd like to provide the patient with a copy, you can left-click the **Print** button or right-click anywhere on the submitted form and choose Print.

**Form sent on 17/02/2025 09:34 AEDT**

Print

**Sensitive: Personal**

North Western Melbourne PHN - Head to Health Intake

**HEAD TO HEALTH** Intake 1800 595 212

Patient: MICKEY HEATLEY, 83yrs, M, DOB 17/12/1941, PH: 0401 201 2011, Wrk 03 9 23423221, Hme 03 9 53532221
**Residential address:** 95 Pitt Street, Apartment, Sydney, NSW 2000
**Postal address:** 9600 Pitt Street, Apartment, Sydney, NSW 2000
**Referred by:** Sam Entwistle, Millstone Family Practice, PH 03 9 358 0116, FAX 03 9 4433456
**Referral date:** 13/02/2025 12:14 NZDT

**Clinical Referral Information**

**Important Information**
The following information **MUST** be understood by the referring clinician and the patient:

- Head to Health Phone Service provides a free, confidential referral service for anyone seeking mental health support.
- Head to Health is NOT a crisis service. Our operating hours are Monday to Friday 8.30am - 5.00pm (excluding public holidays).
- Please do not use for critical emergencies; instead, follow your existing emergency healthcare pathways or call 000

**Step 4:**

# Previewing, Submitting and Parking

## Parking

**F** And if you need more information to complete the form, you can **Park** the form to save what you've done so far and come back to it later.

**Step 5:**

# Managing SmartForms and eReferrals in Zedmed

**A** Any HealthLink SmartForm referral created for a patient can be viewed and interacted with in Zedmed's **Summary Views** section of the patient's record .

*Locating a patient's referral/document…*

**B** If a referral is done through an Encounter, then it will go into the **Referrals** tab.

**C** If a referral is done through Quick Documents, it will show in the **Documents** tab.

**Note:** You can locate 'parked' and 'auto-saved' forms here too.

**Note**: Users need to right click on the item they want to edit / update.

**Note:** when returning to a draft form, due to security policy, any previously added attachments will need to be re-added.
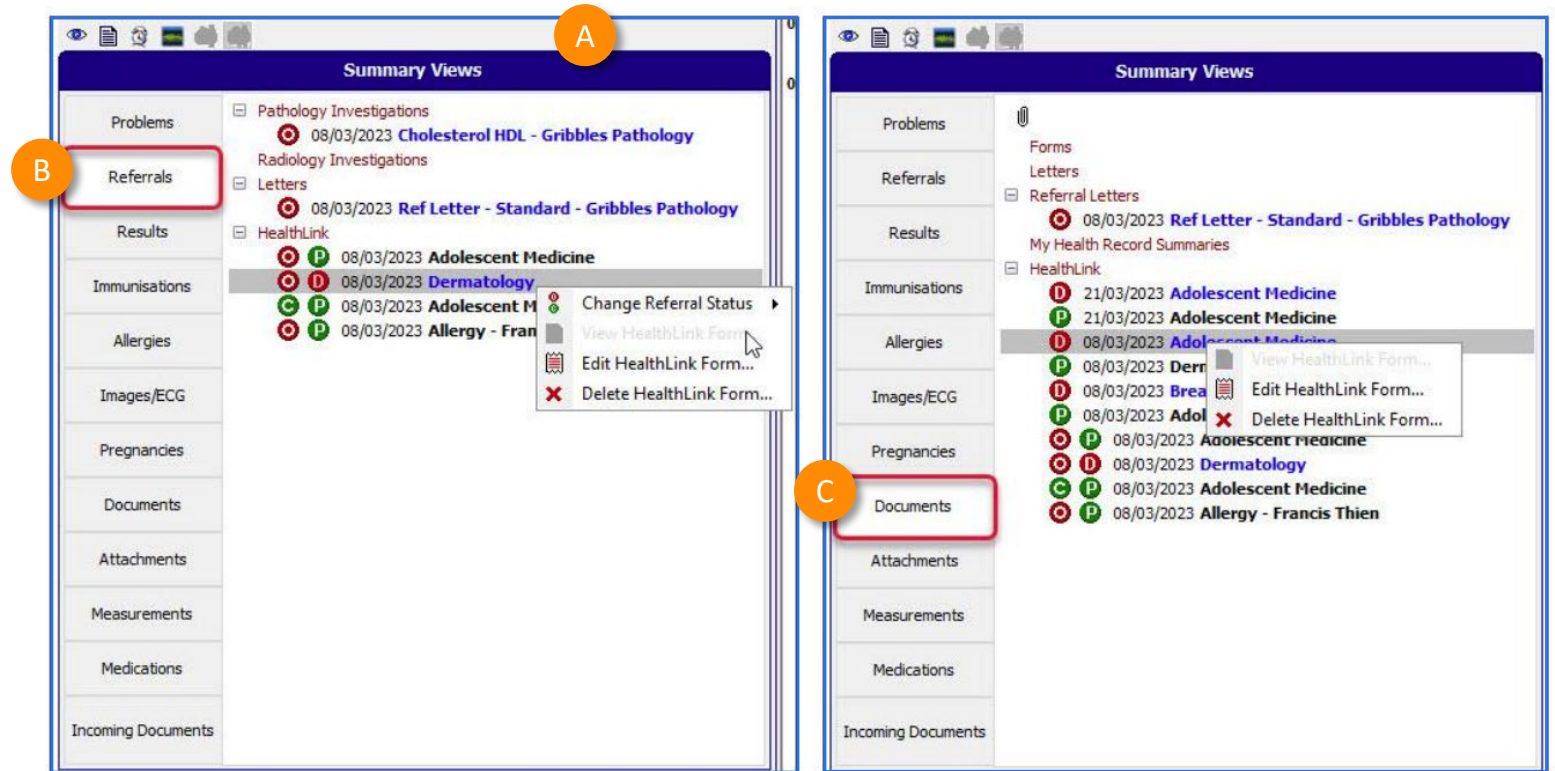
Zedmed status options manually selected by doctor:

⊙ Open - referral not been actioned or discussed with the patient.

🄲 Closed - referral has been discussed with the patient or no action is required.

HealthLink status options:

🄳 Draft - the referral/document has not been submitted.

🄿 Processed - the referral/document has been submitted.

🄰 Awaiting Acknowledgement – the referral has been submitted, waiting for an Acknowledgement from the Referred To service.

# Accessing submitted forms

**A** A copy of the submitted form can be found in the **Summary View > Referrals section**

**B** Or the **Summary View > Documents section**

**Step 7:**

# What happens after a referral has been made?

- Head to Health will respond with a **Status Message** regarding the **Referral Acceptance** or **Referral Rejection** with reasons.

- These Status Messages will be received back into your Practice Software using the same workflows when receiving Incoming Reports and Results, and Other correspondence like Discharge Summaries.

### Viewing incoming reports

**A**   Click on '**Results Inbox**' or go Results > Results Inbox.

**B**   Use the selection tool bar to filter results such as choosing 'Role' and 'User'.

**C**   This will bring up a list of results for the selected filters.
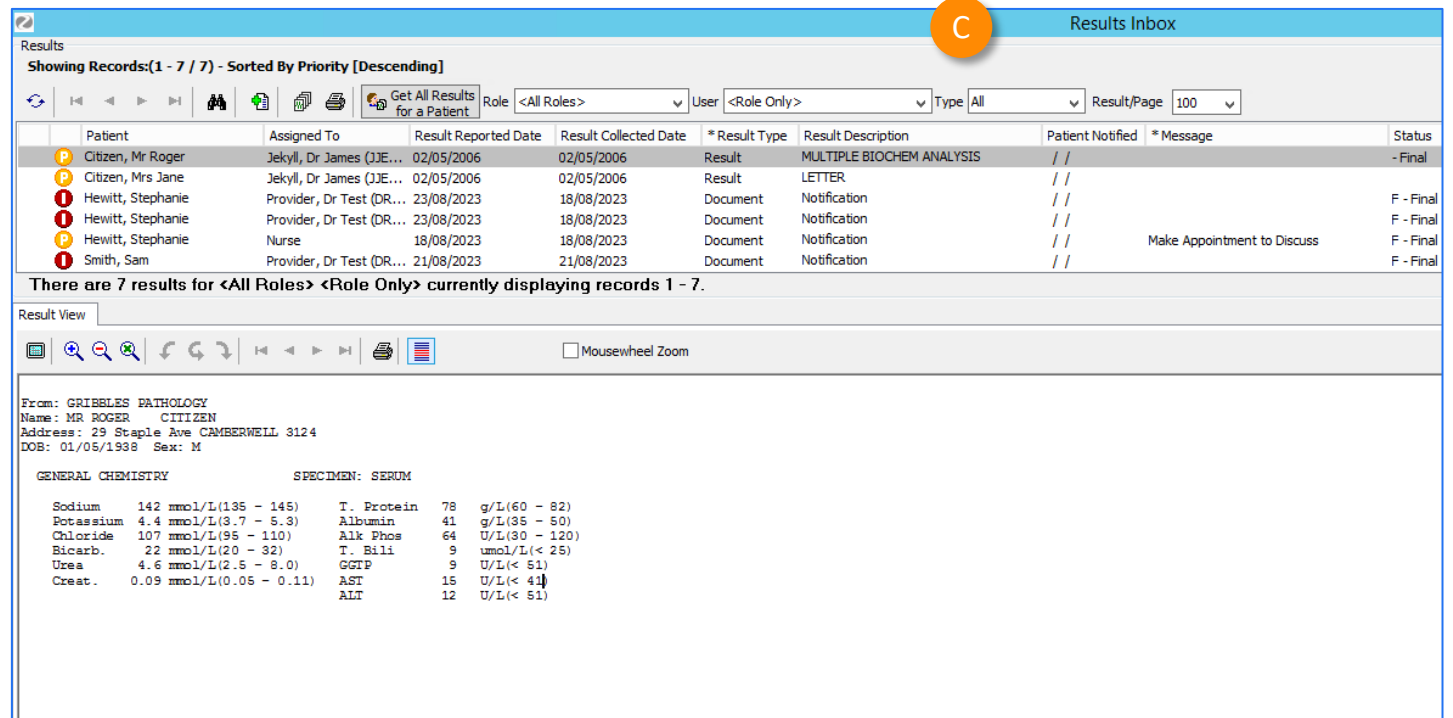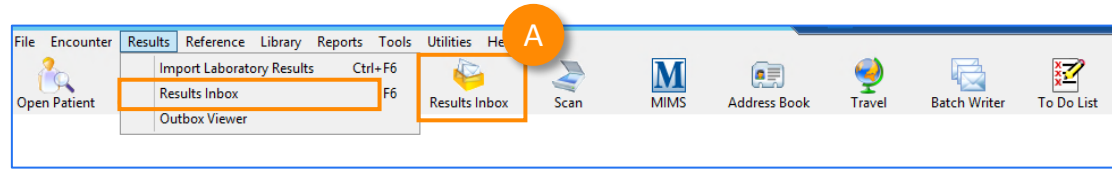
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enterprises spanning across the United Kingdom, Ireland, New
Zealand, Australia, and India. Together, we're working
collectively to create safer, more efficient and better
healthcare for everyone.