

Meddbase Manager Portal Step-By-Step Guide

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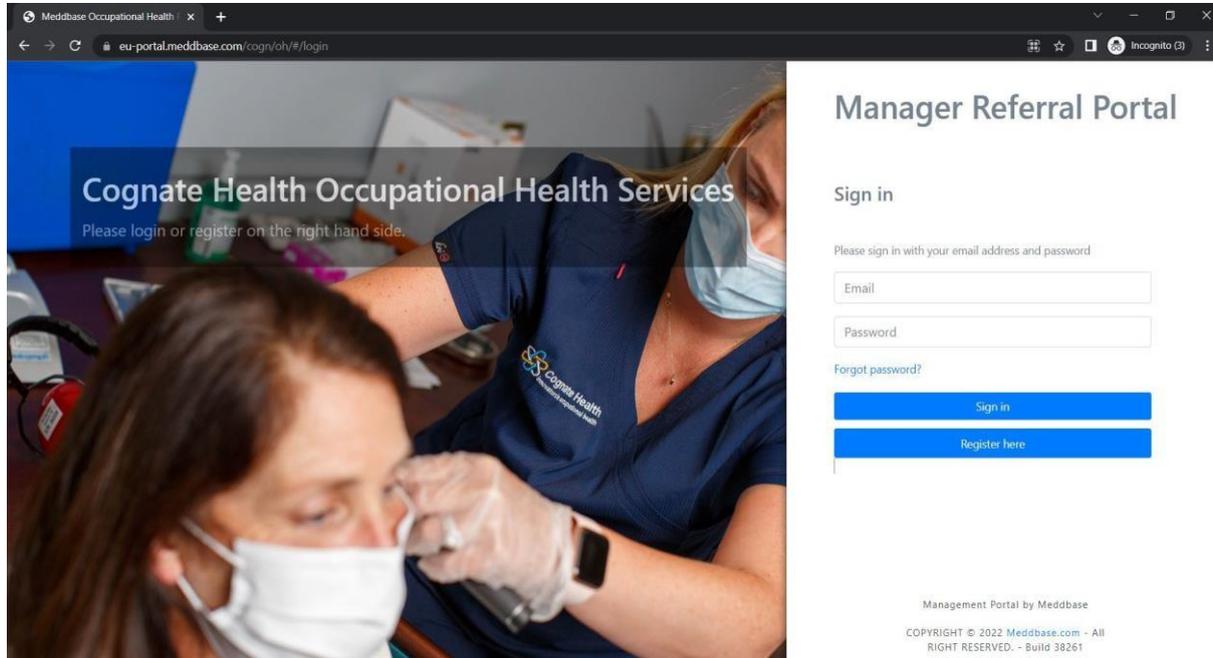
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Please click on the topic you wish to know more about; this will bring you directly to the page.

Meddbase Manager Portal Step-By-Step Guide

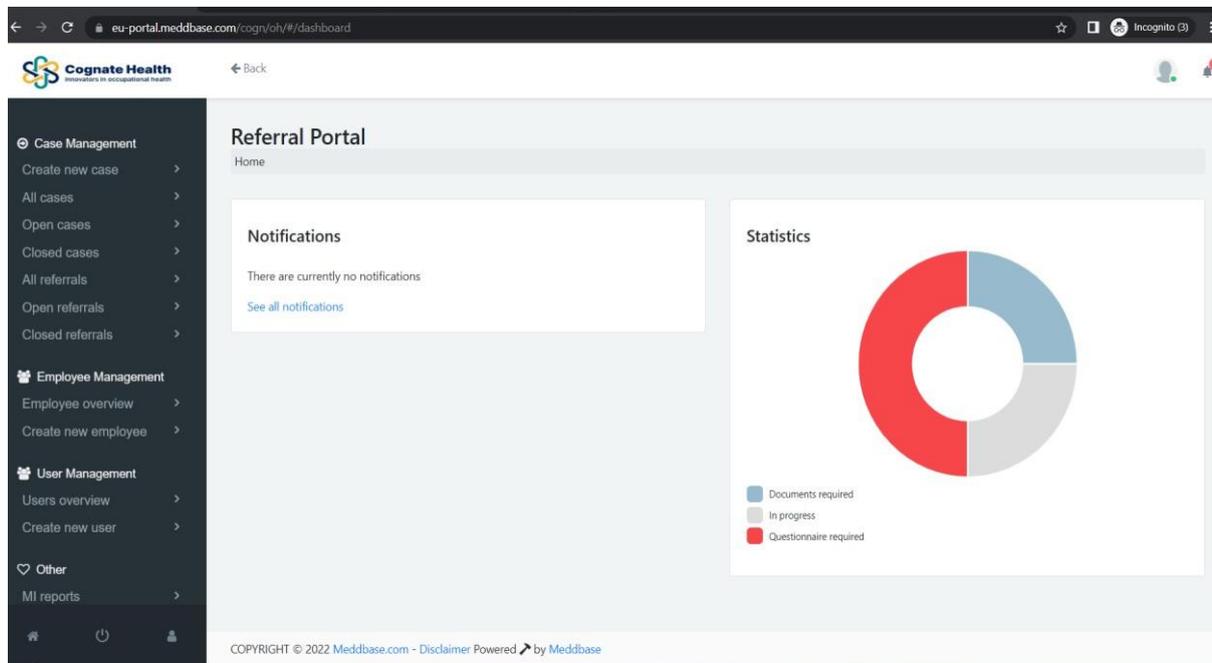
Logging Into the Meddbase Portal

Log in to <https://eu-portal.meddbase.com/cogn/oh/#/login> and save it as a favourite on your preferred internet browser.



You will land on your dashboard.

Use the menu down the left-hand side to navigate through your portal.



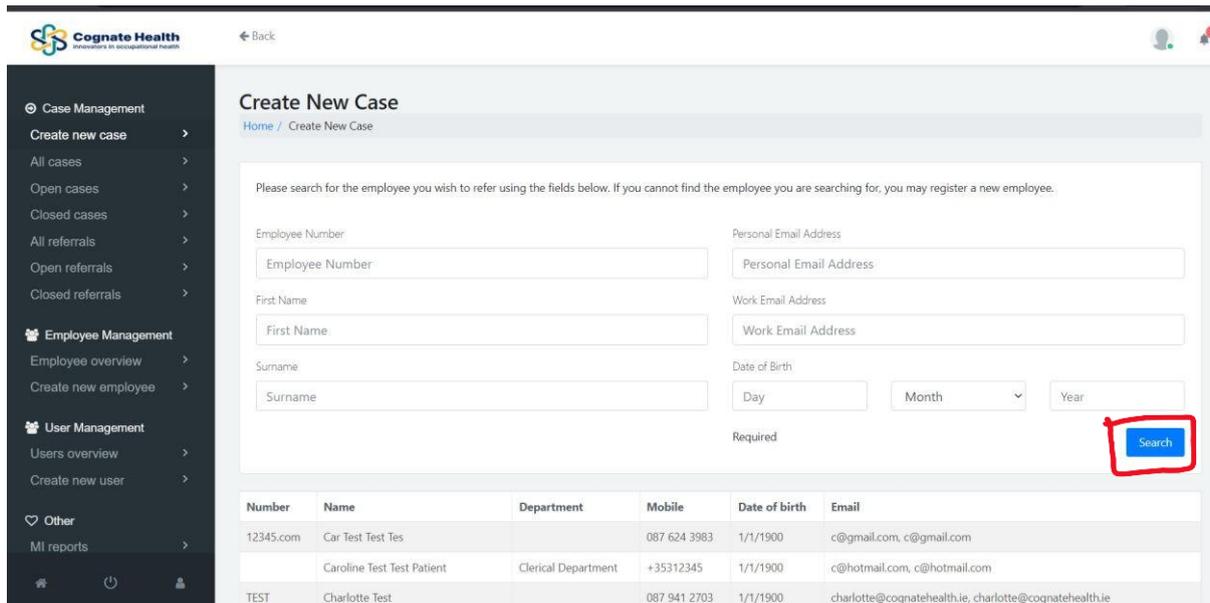
Meddbase Manager Portal Step-By-Step Guide

Creating a Case

“Create a new case” to make a referral (left hand side menu).

Search for an employee by adding some employee details and clicking the Search Button (blue).

If your employee is registered on your system already, select the name and details shown below



Create New Case

Home / Create New Case

Please search for the employee you wish to refer using the fields below. If you cannot find the employee you are searching for, you may register a new employee.

Employee Number:

Personal Email Address:

First Name:

Work Email Address:

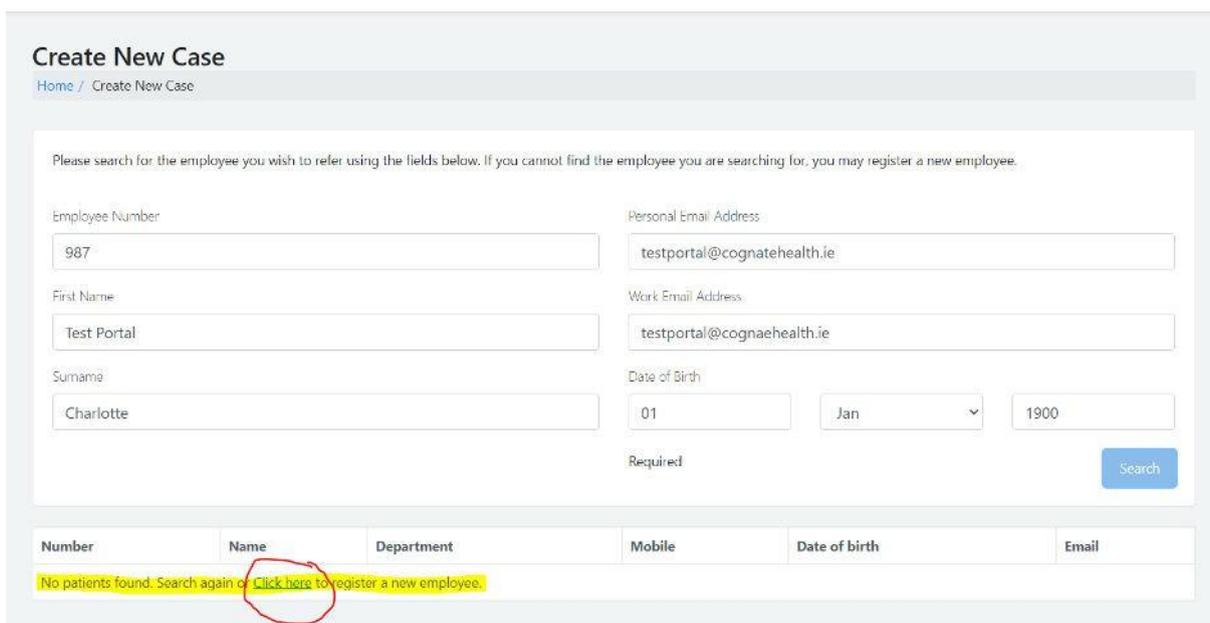
Surname:

Date of Birth: Day Month Year

Required

Number	Name	Department	Mobile	Date of birth	Email
12345.com	Car Test Test Tes		087 624 3983	1/1/1900	c@gmail.com, c@gmail.com
	Caroline Test Test Patient	Clerical Department	+35312345	1/1/1900	c@hotmail.com, c@hotmail.com
TEST	Charlotte Test		087 941 2703	1/1/1900	charlotte@cognatehealth.ie, charlotte@cognatehealth.ie

If your employee is not registered, use the *Click Here* button (highlighted) to register.



Create New Case

Home / Create New Case

Please search for the employee you wish to refer using the fields below. If you cannot find the employee you are searching for, you may register a new employee.

Employee Number:

Personal Email Address:

First Name:

Work Email Address:

Surname:

Date of Birth: Day Month Year

Required

Number	Name	Department	Mobile	Date of birth	Email
No patients found. Search again or Click here to register a new employee.					

Please ensure you complete all relevant fields.

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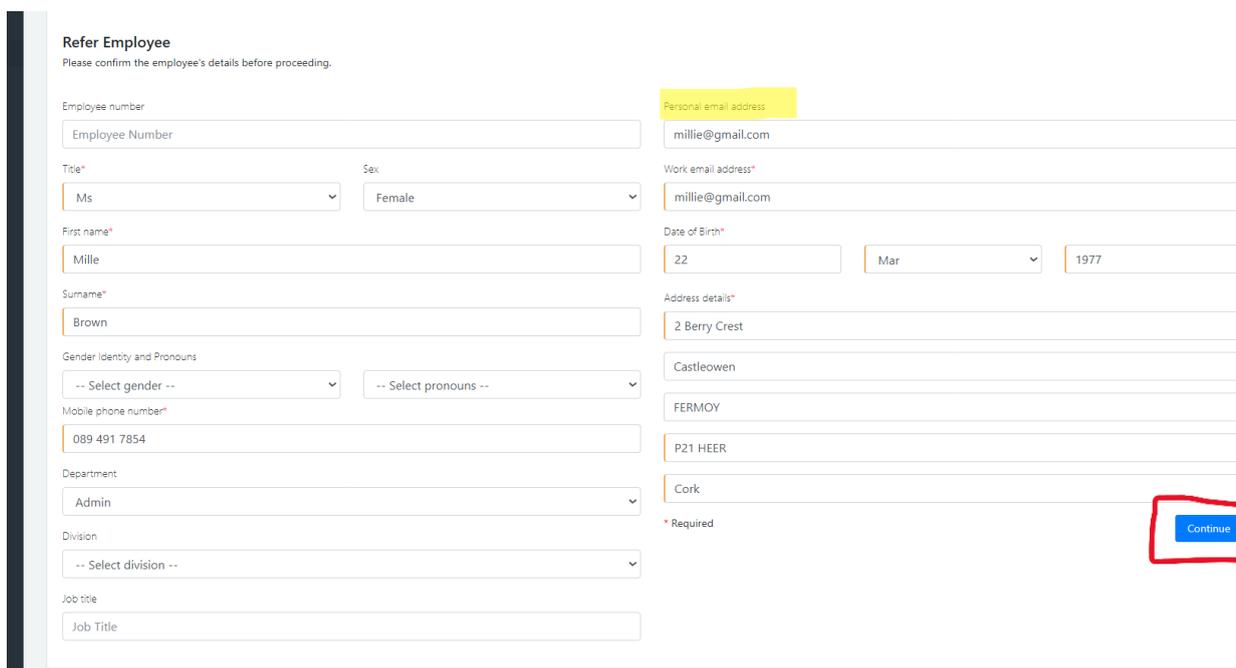
Adding a New Employee to your Dashboard

Please ensure all fields are filled out fully and correctly for the employee you wish to refer.

Please note all correspondence will be **sent to the email address populated in the personal email address field**. – If you do not have a personal email, please input the work email twice, and vice versa if you do not have a work email for the employee.

If you do not have the employee's Eircode, '0000' will suffice.

If you do not have the employee's DOB, 01/01/1900 can be used



Refer Employee
Please confirm the employee's details before proceeding.

Employee number: Employee Number

Title*: Ms | Sex: Female

Personal email address: millie@gmail.com

Work email address*: millie@gmail.com

First name*: Mille | Date of Birth*: 22 Mar 1977

Surname*: Brown

Address details*: 2 Berry Crest, Castleown, FERMOY, P21 HEER, Cork

Gender Identity and Pronouns: -- Select gender -- | -- Select pronouns --

Mobile phone number*: 089 491 7854

Department: Admin

Division: -- Select division --

Job title: Job Title

* Required

Continue

Mandatory Fields:

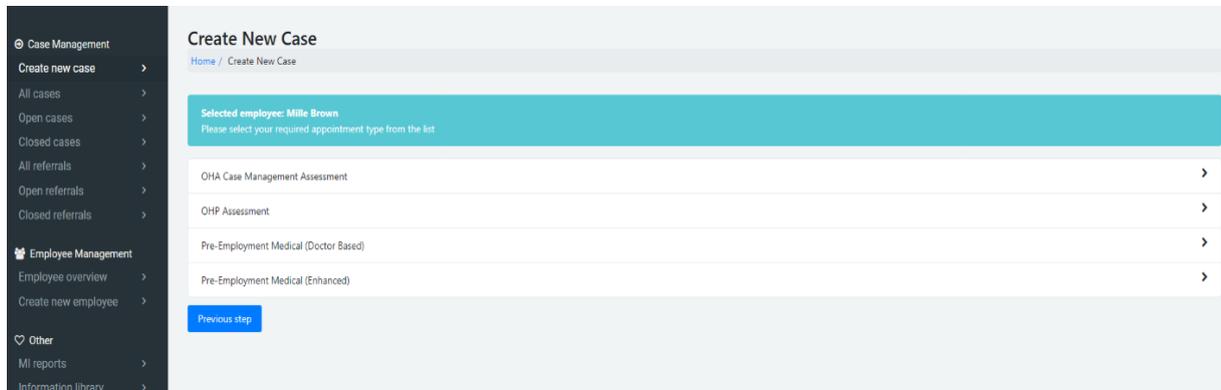
- Title
- First Name
- Surname
- Mobile number - to access questionnaires a code is sent to this number, cannot be landline
- Work Email - please use personal email if no work email
- DOB - use work around mentioned above if no DOB
- First line of address
- Eircode - use workaround mentioned above if you do not have the employee's Eircode
- City
- Personal email address - please input work email here if no personal email
- Department - please select the employee's department if your company has set up depts

Click the blue 'Continue' button, to proceed.

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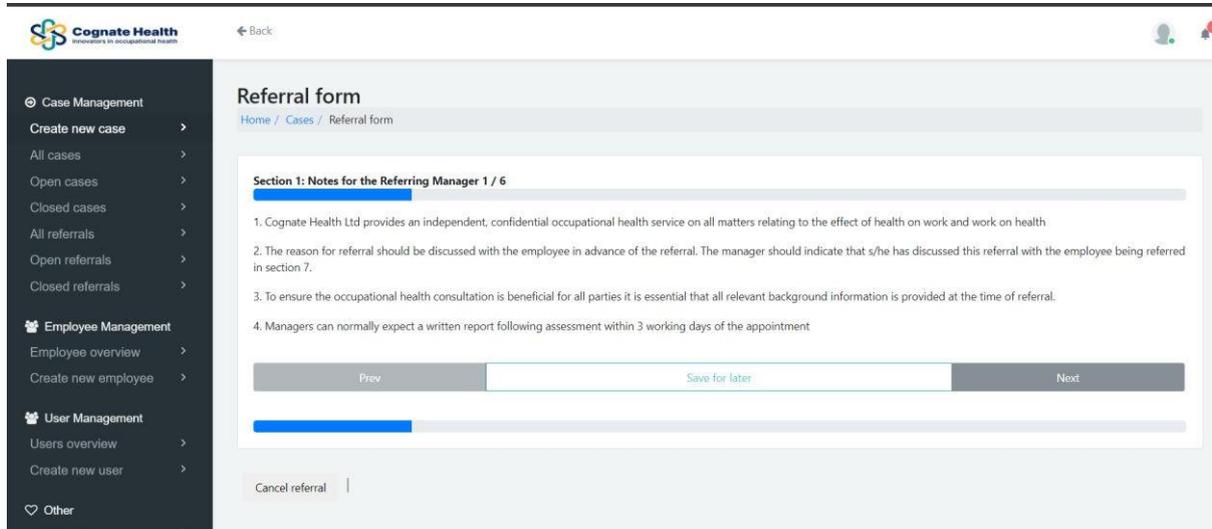
Selecting the Service for your Employee

You can then select the service you wish to book for the employee



- OHA Case Management – Nurse based Assessment.
- OHP Assessment – Dr Based Assessment.
- Pre-Employment/Health Surveillance – Medical Appointments.
- Health Declaration – Pre-Employment Questionnaire, no physical appointment.

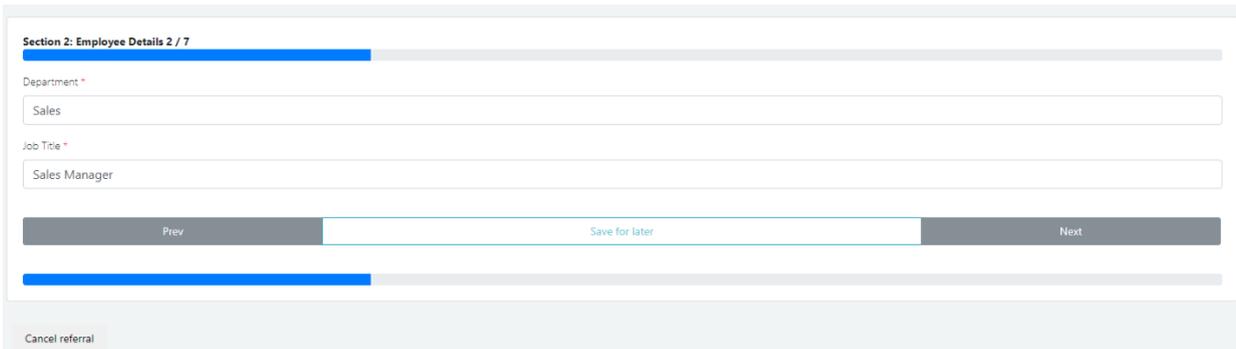
The Referral Form



Once you have selected the service, you are now in the referral form, please read carefully the notes for referring manager and press next.

Please fill out all fields and press next as you move through the form

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Section 2: Employee Details 2 / 7

Department *

Sales

Job Title *

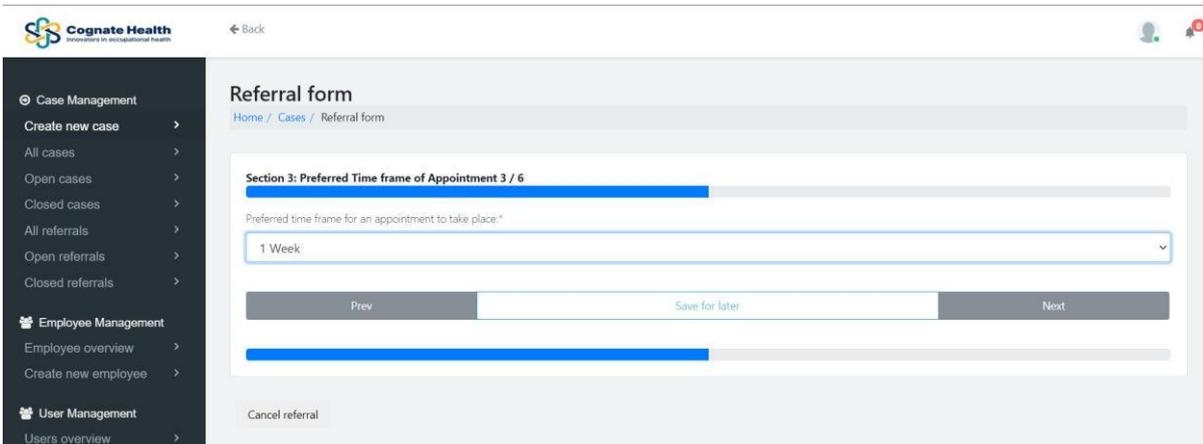
Sales Manager

Prev Save for later Next

Cancel referral

Select the box to see the dropdown menu and select the timeframe you would like your employee seen within. Click on NEXT Button.

- Within 48 hours
- Within 1 week
- Within 2 weeks
- Other* this will give you a free text box to include employee shift patterns and days they can and cannot attend



Referral form

Home / Cases / Referral form

Section 3: Preferred Time frame of Appointment 3 / 6

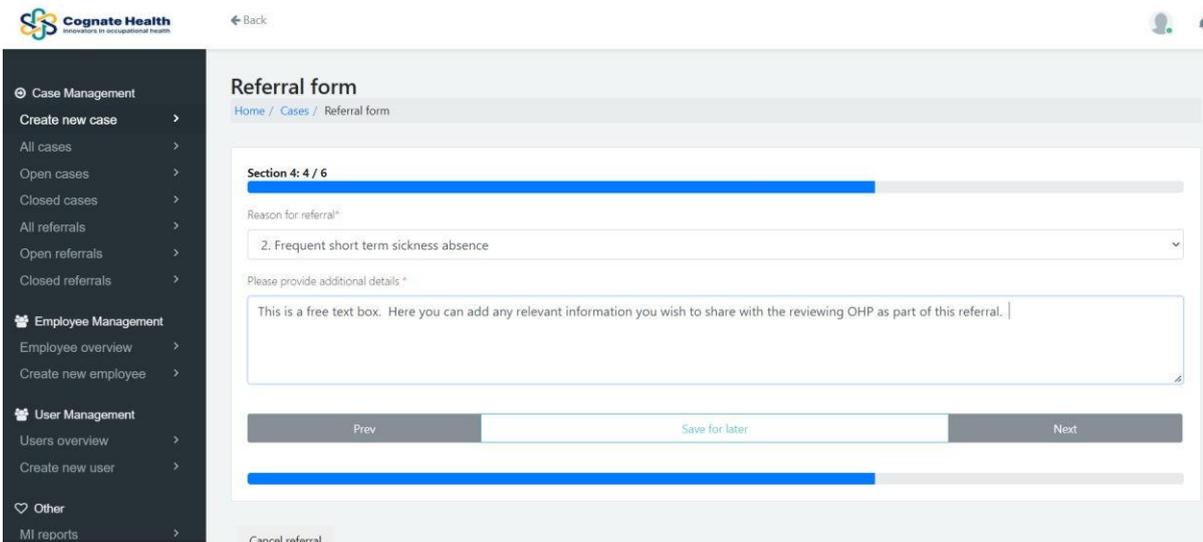
Preferred time frame for an appointment to take place*

1 Week

Prev Save for later Next

Cancel referral

Click in the box to see the dropdown menu and choose the reason for referral. Use the free text box to include any additional information you wish to add to your referral. The more information you can offer, the better.



Referral form

Home / Cases / Referral form

Section 4: 4 / 6

Reason for referral*

2. Frequent short term sickness absence

Please provide additional details*

This is a free text box. Here you can add any relevant information you wish to share with the reviewing OHP as part of this referral. |

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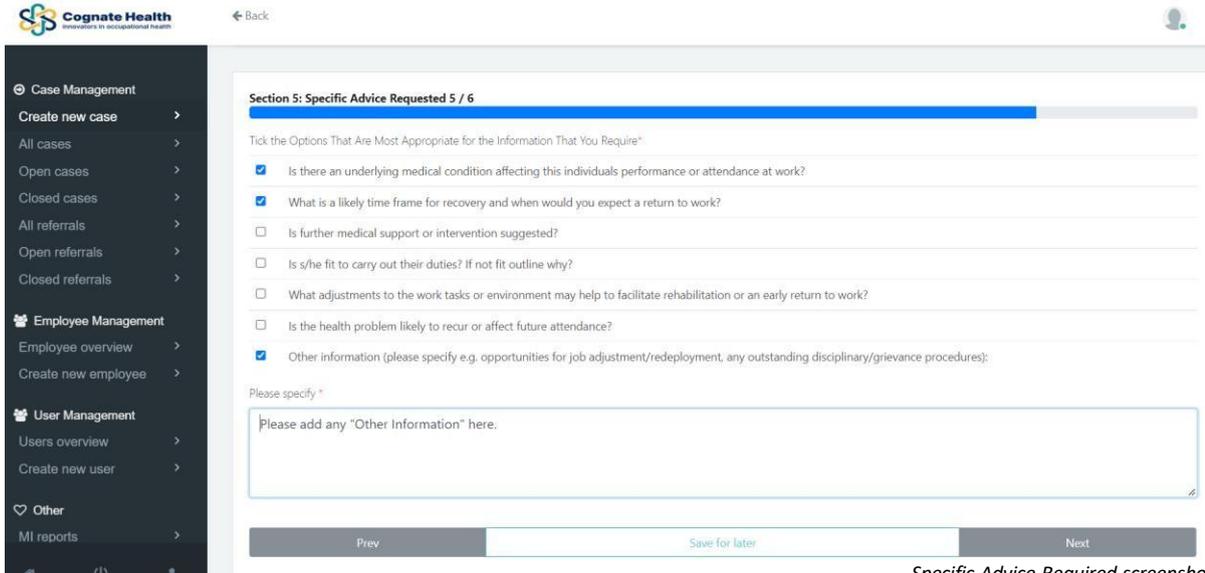
Cancel referral

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Please choose specific questions you would like to address during the consultation.

Use the free text box to add any additional/other information you feel is relevant to the consultation.

Click NEXT.



Section 5: Specific Advice Requested 5 / 6

Tick the Options That Are Most Appropriate for the Information That You Require!

- Is there an underlying medical condition affecting this individuals performance or attendance at work?
- What is a likely time frame for recovery and when would you expect a return to work?
- Is further medical support or intervention suggested?
- Is s/he fit to carry out their duties? If not fit outline why?
- What adjustments to the work tasks or environment may help to facilitate rehabilitation or an early return to work?
- Is the health problem likely to recur or affect future attendance?
- Other information (please specify e.g. opportunities for job adjustment/redeployment, any outstanding disciplinary/grievance procedures):

Please specify *

Please add any "Other Information" here.

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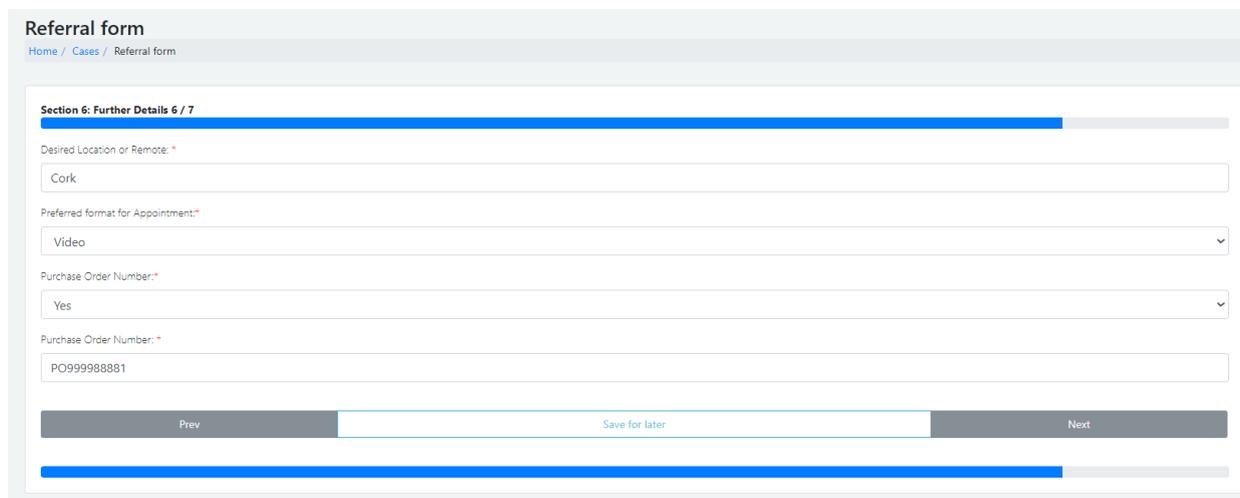
Specific Advice Required screenshot

Please complete all fields.

Please note the desired location is a free text field, you can input a specific clinic, town, or county and the administrative team will do their best to book the best option for the employee.

If your company have a cognate OHA onsite, please type 'Onsite'

If your business does not use PO Numbers, please type select "Not applicable" if you have a PO, select 'Yes' from the drop down and input the PO number in the 'Purchase Order Number' field.



Referral form

Home / Cases / Referral form

Section 6: Further Details 6 / 7

Desired Location or Remote: *

Cork

Preferred format for Appointment: *

Video

Purchase Order Number: *

Yes

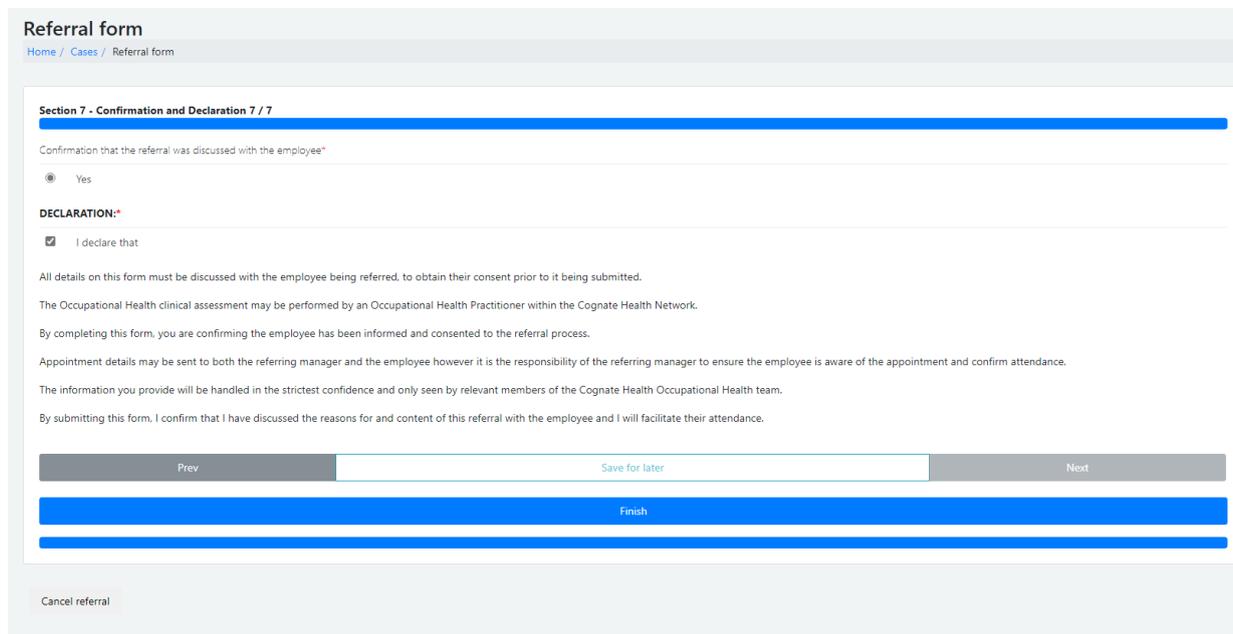
Purchase Order Number: *

PO999988881

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Please ensure you read and comply with the Declaration below. Tick the *"I declare that"* check box to confirm.



Referral form
Home / Cases / Referral form

Section 7 - Confirmation and Declaration 7 / 7

Confirmation that the referral was discussed with the employee*

Yes

DECLARATION:*

I declare that

All details on this form must be shared with the employee being referred, to obtain their consent prior to it being submitted.

The Occupational Health clinical assessment may be performed by an Occupational Health Practitioner within the Cognate Health Network.

By completing this form, you are confirming the employee has been informed and consented to the referral process.

Appointment details may be sent to both the referring manager and the employee however it is the responsibility of the referring manager to ensure the employee is aware of the appointment and confirm attendance.

The information you provide will be handled in the strictest confidence and only seen by relevant members of the Cognate Health Occupational Health team.

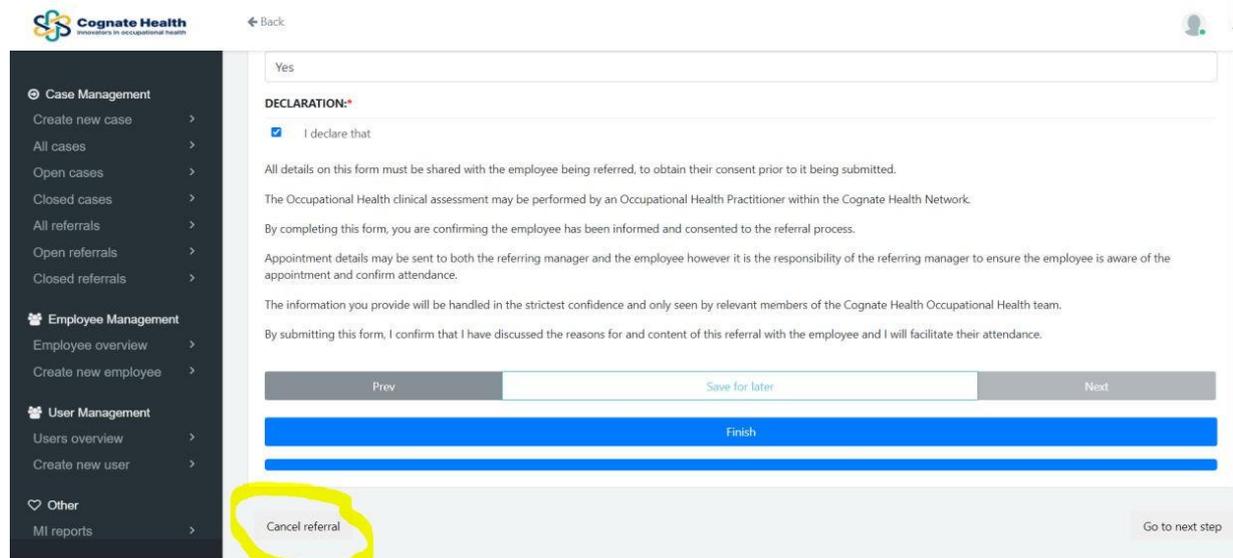
By submitting this form, I confirm that I have discussed the reasons for and content of this referral with the employee and I will facilitate their attendance.

Prev Save for later Next

Finish

Cancel referral

You can cancel your referral at any time should you wish to do so. There is a *"Cancel Referral"* option at the bottom of each page of the referral form.



Cognate Health innovators in occupational health

← Back

Yes

DECLARATION:*

I declare that

All details on this form must be shared with the employee being referred, to obtain their consent prior to it being submitted.

The Occupational Health clinical assessment may be performed by an Occupational Health Practitioner within the Cognate Health Network.

By completing this form, you are confirming the employee has been informed and consented to the referral process.

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The information you provide will be handled in the strictest confidence and only seen by relevant members of the Cognate Health Occupational Health team.

By submitting this form, I confirm that I have discussed the reasons for and content of this referral with the employee and I will facilitate their attendance.

Prev Save for later Next

Finish

Cancel referral

Go to next step

Click the **FINISH** button, if you wish to proceed. This will create the referral. *Please note you have not completed all relevant steps at this point.

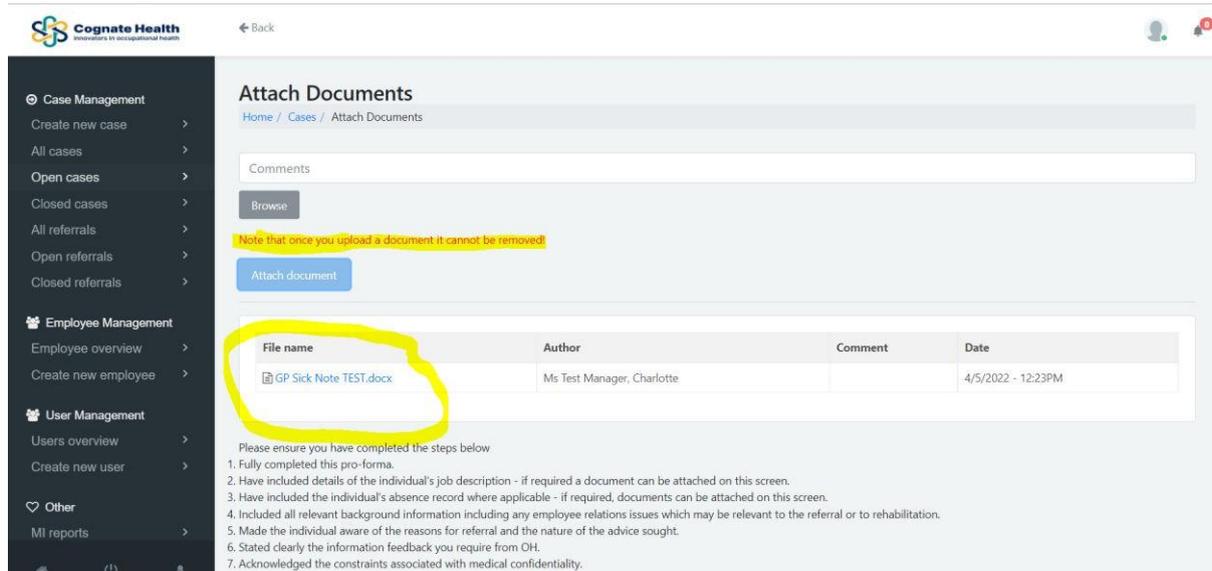
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Sending The Referral Form and Attaching Documents

You can easily attach any documents here by browsing your own documents library. Relevant document types are Job Description, Supplementary Reports, IH Reports etc.

Once uploaded, click on “*Attach Document*” button (blue). Your attachment will now appear in the box below (highlighted).

Please note that once you add a document it cannot be removed. – **Please upload as PDF**



Attach Documents

Home / Cases / Attach Documents

Comments

Browse

Note that once you upload a document it cannot be removed!

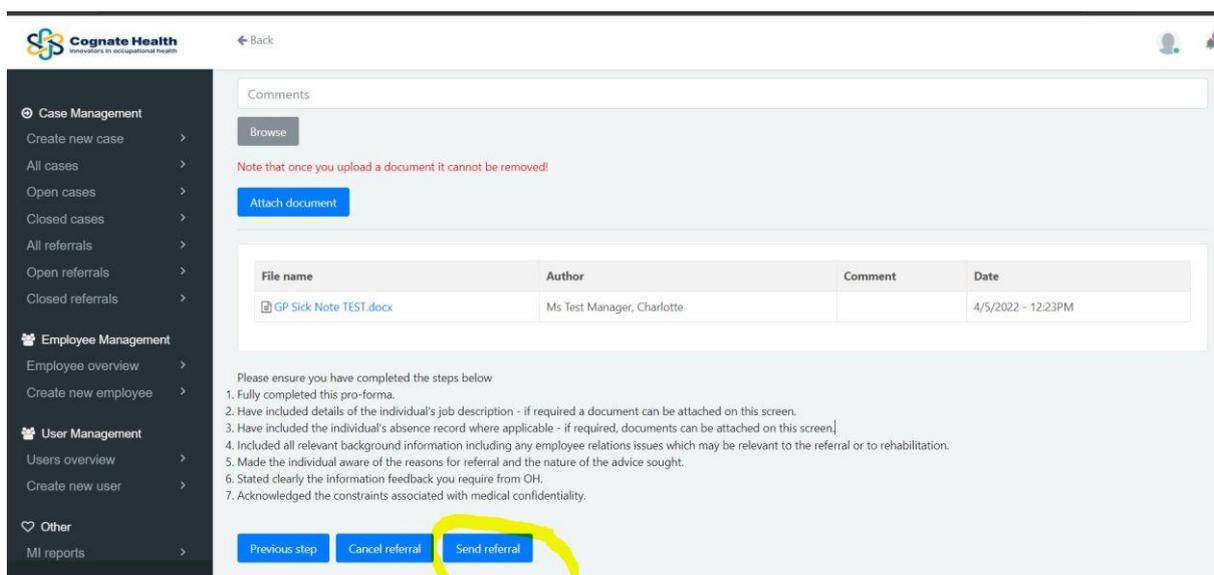
Attach document

File name	Author	Comment	Date
GP Sick Note TEST.docx	Ms Test Manager, Charlotte		4/5/2022 - 12:23PM

Please ensure you have completed the steps below

1. Fully completed this pro-forma.
2. Have included details of the individual's job description - if required a document can be attached on this screen.
3. Have included the individual's absence record where applicable - if required, documents can be attached on this screen.
4. Included all relevant background information including any employee relations issues which may be relevant to the referral or to rehabilitation.
5. Made the individual aware of the reasons for referral and the nature of the advice sought.
6. Stated clearly the information feedback you require from OH.
7. Acknowledged the constraints associated with medical confidentiality.

IMPORTANT Once you have finished completing the referral form click on “Send Referral” button at the bottom of the screen to submit it.



Attach Documents

Home / Cases / Attach Documents

Comments

Browse

Note that once you upload a document it cannot be removed!

Attach document

File name	Author	Comment	Date
GP Sick Note TEST.docx	Ms Test Manager, Charlotte		4/5/2022 - 12:23PM

Please ensure you have completed the steps below

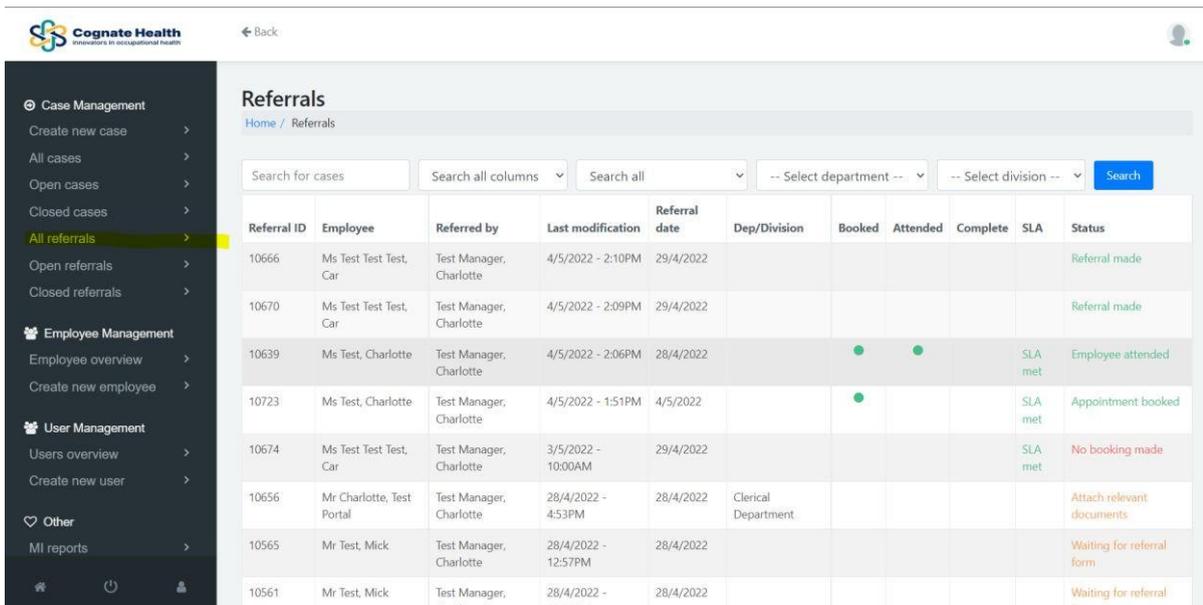
1. Fully completed this pro-forma.
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6. Stated clearly the information feedback you require from OH.
7. Acknowledged the constraints associated with medical confidentiality.

Previous step Cancel referral Send referral

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Tracking the Status of Your Referral

You can track the status of your referral by logging back into the portal at any time, selecting 'All referrals' from the control tab.



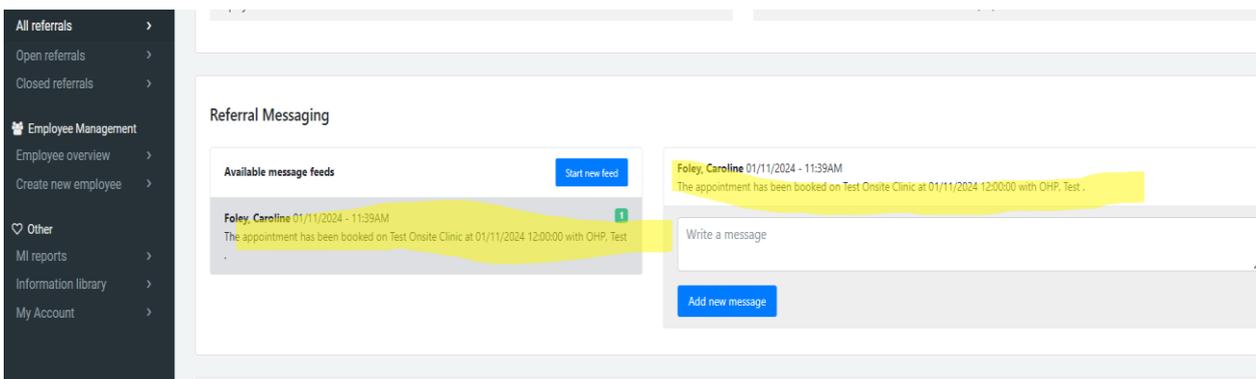
Referral ID	Employee	Referred by	Last modification	Referral date	Dep/Division	Booked	Attended	Complete	SLA	Status
10666	Ms Test Test, Car	Test Manager, Charlotte	4/5/2022 - 2:10PM	29/4/2022						Referral made
10670	Ms Test Test, Car	Test Manager, Charlotte	4/5/2022 - 2:09PM	29/4/2022						Referral made
10639	Ms Test, Charlotte	Test Manager, Charlotte	4/5/2022 - 2:06PM	28/4/2022		●	●		SLA met	Employee attended
10723	Ms Test, Charlotte	Test Manager, Charlotte	4/5/2022 - 1:51PM	4/5/2022		●			SLA met	Appointment booked
10674	Ms Test Test, Car	Test Manager, Charlotte	3/5/2022 - 10:00AM	29/4/2022					SLA met	No booking made
10656	Mr Charlotte, Test Portal	Test Manager, Charlotte	28/4/2022 - 4:53PM	28/4/2022	Clerical Department					Attach relevant documents
10565	Mr Test, Mick	Test Manager, Charlotte	28/4/2022 - 12:57PM	28/4/2022						Waiting for referral form
10561	Mr Test, Mick	Test Manager, Charlotte	28/4/2022 - 12:57PM	28/4/2022						Waiting for referral form

To view appointment details, such as date, time, and location, please select the employee's referral from the rows in the 'All referrals' tab.

You will be able to view the details, as shown below.

IMPORTANT – Please do not use the text messaging feed, our administration team are not notified of any messages that are sent, and queries/requests will be missed.

Please email centraladmin@cognatehealth.ie or if you have an OHA Onsite, please email the OHA (Nurse) directly if you have any queries on the referral or wish to make any changes to the appointment.



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Viewing The Report

To view the employee's report once released, you can select the referral as shown above, and it will bring you to the below page.

Here you can click 'OH Report.pdf' – This will open the report in a new window.

You can download this report if you wish.

Referral Messaging

Available message feeds

[Start new feed](#)

Foley, Caroline 01/11/2024 - 11:39AM

The appointment has been booked on Test Onsite Clinic at 01/11/2024 12:00:00 with OHP, Test .

Write a message

[Add new message](#)

Referral Documents

File name	Author	Comment	Date
OH Report.pdf	Foley, Caroline		1/11/2024 - 11:41AM
Referral letter.pdf	Miss Casey, Test Janice		1/11/2024 - 10:36AM

Related Appointments

Type	Time/Date	Status	Clinician	Site
OHP Assessment (Face to Face)	1/11/2024 - 12:00PM	Attended	Doctor OHP, Test	Test Onsite Clinic

Requesting a Follow-Up

To request a follow-up, select 'Open Cases' on the control panel to the left. Search for the employee and select 'Request Follow-up' at the top of the page, highlighted below.

You can also close the case here if the employee no longer requires OH Services for this health reason.



- Case Management
 - Create new case
 - All cases
 - Open cases
 - Closed cases
 - All referrals
 - Open referrals
 - Closed referrals
- Employee Management
 - Employee overview
 - Create new employee

Cases overview
Request follow-up
Close case

Case Details

Case ID	291597
Status	Open
Reason	OH Case #291597
Case Opened Date	27/11/2024
Case Closed Date	

Employee Details

Employee Name	Mille Brown
Employer Name	Test Portal Janice
Employee ID	
Department	Admin

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Important Notes to Remember

1. If you do not have visibility on an employee, you will have to add the employee to your portal to refer them.
2. If you have tier one access (Access to only your own referrals) Please **do not add employee details and log out**, you will have to re-register the employee. **The employee will only be saved to your portal AFTER you have made the referral.**
3. When referring an employee, please check that all relevant fields are filled in and details are correct. **Please remember to fill in the personal email address field.**
4. If you are unable to proceed with adding an employee, and receive an error message stating the employee exists, please contact central admin, or if you have an onsite OHA, please contact them directly.
5. The employee will receive an email confirmation of their appointment date, time, and location of the assessment. This is an automatic email sent to the email populated in the ***personal email address field***.
6. Any forms required for the consultation (Pre-Employment Questionnaire, Assessment Consent Form) will be sent automatically to your ***employee's Personal email address***.
7. Please log back into the portal to track the status of your referral and appointment details once booked.
8. You will receive an email once the report is completed and released back to the portal. Steps to view the report are highlighted above.
9. Please do not use any messaging/chat fields on the portal. This messaging platform is not monitored. Our central admin team **respond by email only**.
10. If the employee is unable to attend, or must reschedule, please contact central admin, or your onsite OHA, to make the necessary changes to the appointment.