

How to Register

(All users are required to register in order to access module tools & resources. You may register as View Only, providing access to the module tools and resources only, or you may register to Participant for Diamond Status, providing full site access, including to module Reporting Forms.)

On site menu bar, click **Registration**



A registration form will appear

Facility Information

Facility Name:

Facility NPI #:

Network:

Total # of Staff (including MD, SW, & Diet):

Total # of Patients:

Please indicate if you prefer to view module tools & resources or if you plan to participate in the program for Diamond status:

User Information

First Name:

Last Name:

Phone Number:

Select a password

Your email and password will allow you to login and access to module materials. Your password must contain a minimum of 6 characters, upper and lower case, and one of which must be a non-alpha-numeric character (example: Facility!)

Email Address:

Password:

Confirm Password:

By clicking submit, I certify that I am authorized to register my Facility for participation in the 5-Diamond Patient Safety Program. I also grant permission to include my facility in the listing of participants on this web site and in other program communications. I have also reviewed and agree with this web site's [privacy policy](#) and [terms of use](#).

Complete the registration form providing information for your facility. Remember, you are registering the facility as View Only or Participate for Diamond Status, with one User being the contact for that facility.

Facility Name	Facility's full business name (ex. DaVita – ABC, FMC – ABC, DCI – ABC, US Renal Care – ABC, etc.)
Facility NPI #	10-digit National Provider Identification number
Network	Network covering state facility is located in; click here for a listing of Networks by state
Total # of Staff	Includes Medical Director, Nurses, Technicians, Social Workers, Dietitians, Administrators, etc.
Total # of Patients	Total patient population
View/Participate Status	Indicate user's status: <i>View Only</i> – access to module tools & resources only <i>Participate for Diamond Status</i> – full-site access, including to module Reporting Forms

Once you determine View/Participate Status, if you select *View Only*, your screen will remain the same. If you select *Participate for Diamond Status*, your screen will change, adding a Provider # field. This is required for all Participating Facilities.

Facility Information

Facility Name:

Facility NPI #:

Network:

Total # of Staff (including MD, SW, & Diet):

Total # of Patients:

Please indicate if you prefer to view module tools & resources or if you plan to participate in the program for Diamond status:

Provider #:

User Information

First Name:

Last Name:

Phone Number:

Select a password

Your email and password will allow you to login and access to module materials. Your password must contain a minimum of 6 characters, upper and lower case, and one of which must be a non-alpha-numeric character (example: Facility!)

Email Address:

Password:

Confirm Password:

By clicking submit, I certify that I am authorized to register my Facility for participation in the 5-Diamond Patient Safety Program. I also grant permission to include my facility in the listing of participants on this web site and in other program communications. I have also reviewed and agree with this web site's [privacy policy](#) and [terms of use](#).

Provider #	6-digit facility certification number assigned by the Centers for Medicare & Medicaid Services. Required for all CROWNWeb 2728 and 2746 form submissions.
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All users, regardless of View/Participate status, must provide the following identifying information.

First Name, Last Name, & Phone Number	Contact information for the person managing the 5-Diamond program for your facility.
Email Address	Each facility must provide a unique email address; this will become the username associated with site log-in. If one person is managing more than one facility, he/she must have a separate unique email address for each facility.
Password	Must contain: <ul style="list-style-type: none">- a minimum of 6 characters,- an upper and lower case character, <u>and</u>,- at least one non-alpha-numeric character (@!%\$)

Once form is completed, click *Submit* and you'll return to the site Home page, logged in, and ready to go.