

# 5 Diamond Patient Safety Program Application

The 5 Diamond Patient Safety program consists of 9 modules, of which you may choose a maximum of 5 to complete in order to receive diamond status recognition. For each module completed, each facility will be tiered as a 1-Diamond, 2-Diamond, 3-Diamond, 4-Diamond, or 5-Diamond facility. Participating facilities will receive recognition as follows:

### 1-4 Diamond Facilities ~

Facility accomplishment written in network newsletter  
Facility will be listed on our website

### 5 Diamond Facilities~

Facility accomplishment written in network newsletter  
Facility listed on network website  
Special Recognition at our next Council Meeting  
2 Free Passes to attend the next Council Meeting  
Receive a letter of special recognition from the Board Chair  
Plaque to display in the facility

Please complete the application below and submit it to the Network Office. Upon receipt, we will review your application and planned activities and send you a packet of materials explaining how each activity should be conducted and measured. Participants must complete the Patient Safety Principles module first, however once completed, you may complete other modules in any order. We encourage you to submit your outcomes upon completion of each individual activity. If you have any questions please contact Casey Magee at 601-936-9260.

### Applicant Information

FACILITY: \_\_\_\_\_ PROVIDER #: \_\_\_\_\_ NPI #: \_\_\_\_\_

NAME OF PROJECT CONTACT PERSON AT THE FACILITY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ SIGNATURE OF PROJECT CONTACT : \_\_\_\_\_

*(must be same contact listed above)*

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

# OF FACILITY STAFF INVOLVED IN THIS PROJECT: \_\_\_\_\_

### PLEASE INDICATE WHICH PROGRAM(S) YOUR FACILITY WILL BE STRIVING TO COMPLETE:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Patient Safety Principles *<br><i>(* Mandatory Component)</i> | <input type="checkbox"/> Emergency Preparedness                 |
| <input type="checkbox"/> Hand Hygiene (Infection Control)   | <input type="checkbox"/> Sharps Safety                          |
| <input type="checkbox"/> Flu Vaccination  | <input type="checkbox"/> Decreasing Patient & Provider Conflict |
| <input type="checkbox"/> Slips, Trips, & Falls  | <input type="checkbox"/> Missed Treatments                      |
| <input type="checkbox"/> Medication Reconciliation  | <input type="checkbox"/> Stenosis Monitoring & Surveillance     |
| <input type="checkbox"/> Patient Self-Managed Care  | <input type="checkbox"/> Health Literacy                        |

If you are interested in another clinical patient safety topic not listed above, please identify it on the back of this form, along with a brief description of how you would monitor and evaluate it's effectiveness. We will contact you and let you know if your plan is approved.

**OTHER CLINICAL PATIENT SAFETY TOPIC FOR PROGRAM APPROVAL...Include monitor and evaluation plan:**

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**Fax your application to Casey Magee at Network 8, Inc. at 601-932-4446 or mail to:  
Network 8, Inc, PO Box 321475, Flowood, MS**

*The 5-Diamond Patient Safety Program was collaboratively developed by the Mid-Atlantic Renal Coalition (MARC) and the ESRD Network of New England and is endorsed by the Renal Physicians Association (RPA) and American Nephrology Nurses' Association (ANNA).*