

Network 18 Facility Personnel Change Form



ESRD ALLIANCE | NETWORK 18

CCN #:	Facility Name:
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This form must be completed only by the Facility Administrator or Facility Head Nurse

Printed Name of Person Completing this Form:	<input type="checkbox"/> <input type="checkbox"/>	Facility Administrator Facility Head Nurse	Date:
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Instructions: Please complete all **required (*)** fields when key personnel or their contact information has changed. Use blank rows if you want to notify the Network of additional staff (CROWNWeb Data Contact, Social Worker or positions not listed such as Transplant Coordinator, NHSN Contact, Area Manager, or Regional VP). **Leave blank if positions have not changed.**

Job Title *	Name *	Credentials	Phone *	Ext	Email Address *
Medical Director					
Facility Administrator					
Facility Head Nurse					
Social Worker					
CROWNWeb Data Contact					
Home Coordinator <small>(required if unit has home program)</small>					

EMERGENCY CONTACTS (2) REQUIRED

Emergency Contact Name *	Office Phone & Ext *	Cell Phone (required) *	E-mail Address *
1*			
2*			

Key Personnel must be updated in CROWNWeb by the facility (See page 2 for definitions of personnel roles). For any additional facility changes not listed on this form (ownership, licensed stations, new services), please complete the [Network 18 Facility Update Form](#).

Submit Page 1 of this form to the Network by fax or email
 Fax: 888-280-8669 | Email: network18@nw18.esrd.net

HealthInsight ESRD Network 18

700 N Brand Blvd., Suite 405, Glendale, CA 91203

Phone: 888-268-1539 | Fax: 888-280-8669 | www.esrdnetwork18.org

- **Facility Medical Director:** Medical Director for the dialysis unit. Responsible for the delivery of patient care and outcomes in the facility.
- **Facility Administrator:** Appointed individual who exercises responsibility for the management of the facility and its compliance with Network goals and activities as required by the federal Conditions for Coverage (dialysis facilities) and Conditions for Participation (transplant centers) regulations.
 - Subscribes to the **ESRD Network Blog*** (or designates alternate staff);
 - Casts the facility vote for the Network Board of Directors elections;
 - Primary contact for Network Quality Improvement Activities for the facility;
 - Provides education to staff on Network security policy requirements;
 - Default Master Account Holder (MAH)** for dialysisdata.org.
- **Facility Head Nurse:** Registered Nurse who is responsible for the nursing and clinical care provided.
- **Facility CROWNWeb Data Contact(s):** Contact for the Network for completion of and questions regarding CROWNWeb data activities.
 - At minimum, facility must have one (1) CROWNWeb Data Contact with QARM/CROWNWeb **Facility Editor Role**;
 - Receives CROWNWeb clean-up emails from the Network.
- **Facility Social Worker(s):** LCSW/ASW providing social services for the dialysis unit.
- **Facility Emergency Contact and Emergency Contact Back-up:** The contact person(s) for the Network in case of a disaster. Each facility needs one primary and one backup contact on file with the Network.
- **Home Coordinator:** Main contact for the Network regarding Network projects and data for home modalities.

Additional Notes:

- **Sign up for our **ESRD Network blog posts** at <https://nwrnbulletins.wordpress.com> - Click on the "Follow" button in the lower right-hand corner.*
- ***Facility Administrator can designate alternate staff to be the MAH on page one of this form.*
- *This update form is for **Network contact purposes only**. User accounts required by other systems (QIP POC/Viewer, QARM Security Official, and CROWNWeb Editor) need to be created separately, using the methods designated by those systems.*

**Do NOT email PHI/PII (Name, DOB, SSN, Medicare #, etc.) to the Network.
All Security Violations are reported to CMS.**

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