

Initial Application – Advanced Life Support and Basic Life Support Ambulance Staffing Variance

Minnesota Statutes 144E.101. Subd. 6a. Ambulance Service Requirements: (*a*) Upon application from an ambulance service that includes evidence demonstrating hardship, the director may grant a variance from the staff requirements in subdivision 6, paragraph (a), and may authorize a basic life-support ambulance to be staffed, for all emergency calls and interfacility transfers, with one individual who meets the qualification requirements in paragraph (b) to drive the ambulance and one individual who meets one of the qualification requirements in subdivision 6, paragraph (a), clause (1), and who must accompany the patient. The variance applies to basic life-support ambulances until the ambulance service renews its license. When the variance expires, the ambulance service may apply for a new variance under this subdivision.

Minnesota Statutes 144E.101. Subd. 7(f). Ambulance Service Requirements. Upon application from an ambulance service that includes evidence demonstrating hardship, the director may grant a variance from the staff requirements in paragraph (a), clause (1), and may authorize an advanced life support ambulance to be staffed by an emergency medical responder driver with a paramedic for all emergency calls and inter-facility transfers. The variance shall apply to advanced life support ambulance service services until the ambulance service renews its license. When the variance expires, an ambulance service may apply for a new variance under this paragraph.

 \Box ALS \Box BLS

Service Information (All Applicants)

Ambulance Service:	OEMS	License #(s):	Exp. Date:	
Address:	City:		Zip:	
Contact Name:				
Contact Information: Phone:		Email:		
Number of Paramedics on service roster:		-		
Number of EMTs on service roster:		-		
Number of EMRs on service roster:		_		
Number of Drivers on service roster:				

The agency has a quality assurance process to ensure patient care is not compromised when using the hardship variance staffing model?

🗆 Yes

🗆 No

Medical Director Endorsement

I, as medical director for the ambulance service named above, approve this application fo	r a staffing hardship variance				
under Minnesota Statute 144E.101 Subd. 6(a) or 7(f), as appropriate. Furthermore, as medical director I have developed					
a quality assurance review process to review calls for service when care was provided by a Paramedic and EMR or EMT					
and Driver, as required under Minnesota Statute 144E.265 Subd. 2(5) and as requested by the Office of Emergency					
Medical Services Director.					
Signature (original):	Date:				
Print Name:					

Evidence of Hardship

1. Explain the current staffing situation and need for hardship variance (please be specific):

2. Explain how you will recruit Emergency Medical Responders or Drivers for the service:

3. Explain how you plan to increase the number of Paramedics / EMTs on the service: