

Renewal 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 services until the ambulance service renews its license. When the variance expires, an ambulance service may apply for a new variance under this paragraph.

ALS 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 for 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. How many times since your last approval did your service respond to a 911 or interfacility call with either a Paramedic / EMR or EMT / Driver as the minimum required staff?

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2. Where there any adverse patient outcomes directly related to staffing changes as determined by your medical director's review of Paramedic / EMR runs or EMT / Driver runs? If yes, how many?

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3. Please provide a report on your recruitment efforts.

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