



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH VA 22042

Canc: Jan 2023
IN REPLY REFER TO
BUMEDNOTE 3440
BUMED-M4
26 Jan 2022

BUMED NOTICE 3440

From: Chief, Bureau of Medicine and Surgery

Subj: WAIVERS AND EXCEPTIONS

Ref: (a) BUMEDINST 3440.10B
(b) BUMEDINST 3440.13

Encl: (1) Sample Waiver Request
(2) Sample Long-Term Exception Request
(3) Sample Permanent Exception Request

1. Purpose. To provide guidance regarding the procedures for requesting waivers and exceptions to policy for the requirements established in references (a) and (b). Enclosure (1) is a sample waiver request. Enclosure (2) is a sample long-term exception request. Enclosure (3) is a sample permanent exception request.

2. Scope and Applicability. This notice applies to all budget submitting office 18 echelon 3 commands, all Navy Medicine Readiness and Training Commands (NAVMEDREADTRN-CMD), Navy Medicine Readiness and Training Units (NAVMEDREADTRNUNIT), and all non-medical commands and units.

3. Background. This notice governs the procedures for requesting and approving waivers or exceptions to policy. It mirrors the procedures contained in reference (a) used to request similar waivers or exceptions for established security requirements on Navy installations. Commanders, commander officers (CO), and officers in charge (OIC) at all levels must weigh the risks involved in complying with the requirements and standards contained in numerous instructions. The inability to meet minimum standards and requirements may result in an increased risk to the commands. Whenever the mandatory requirements of the applicable instruction cannot be met by budget submitting office 18 echelon 3 commands, all NAVMEDREADTRNCMDs, NAVMEDREADTRNUNITs, and all non-medical commands and units must request a waiver or exception per this notice. Waivers and exceptions to policy will be evaluated based on merit only and must include compensatory measures.

a. Waiver. A waiver is considered a temporary relief from policy, normally for a period of 12 months or less, from specific requirements established by this notice. Waivers will be requested when compliance with a prescribed minimum standard is not currently achievable, and the deficiency is not correctable within 90 days, but can be corrected within 12 months. If the deficiency cannot be corrected within a year, another waiver must be submitted. Waivers may be renewed one time. After the renewal time has passed, the waiver changes to an exception and must be submitted as an exception.

b. Exception. An exception is written long-term (for a period greater than 12 months) or permanent relief, from specific requirements established by this notice. An exception will be requested whenever a requirement prescribed in this notice cannot be achieved, or when attainment of the requirement requires more than 12 months. Exceptions must also be submitted when corrective actions would be cost-prohibitive. Exceptions, once formally approved, will be incorporated into emergency management plans.

c. Submitted and approved waiver and exception requests must be retained on file for a period of 5 years. Exceptions will be reviewed annually during a higher headquarter assessment, or self-assessment.

4. Action. All Bureau of Medicine and Surgery (BUMED) echelon 3 commanders, NAVMEDREADTRNCMDs COs, and NAVMEDREADTRNUNITs OICs must:

a. Submit a request for waiver or exception whenever the mandatory program requirements are not achievable by the command. Requests for waivers and exceptions will be submitted in the format outlined in this notice. Blanket waivers and exceptions are not authorized. Waivers and long-term exceptions are self-canceling on the expiration dates stated in the approval letters, unless the original approval authority approves an extension. Cancellations do not require BUMED approval.

b. Requests for waivers or exceptions will be submitted to Chief, BUMED, Deputy Chief, Business Operations (BUMED-M4), via the echelon 3 commander the command reports to. The request for waiver must include a complete description of the problem and the alternative and mitigation procedures, as appropriate. Manning shortfalls would not be justification to ignore the requirement entirely and request it be waived altogether. Waiver approvals will normally be for a period of 12 months; exceptions will normally be for a period of 36 months. Extensions of the waiver or exception (normally for 12 months) must be requested via the chain of command and approved by BUMED-M4. Waiver and exception extension requests will refer to previous correspondence approving initial and previous extensions, as appropriate. Do not consider a request for a waiver or exception an automatic. All waivers and exceptions will be evaluated based on content and mitigation of the requirement.

c. Requests must be in letter format per the SECNAV M-5216.5, Department of the Navy Correspondence Manual. This request will be submitted into the electronic tasker system and routed, via the respective chain of command, through the region to BUMED-M4.

5. Records Management

a. Records created as a result of this notice, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records

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Management Division portal page at <https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx>.

b. For questions concerning the management of records related to this notice or the records disposition schedules, please contact the local records manager or the Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records Management Division program office.


G. D. SHAFFER
Acting

Releasability and distribution:

This notice is cleared for public release and is available electronically only via the Navy Medicine Web site, <https://www.med.navy.mil/Directives>

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SAMPLE WAIVER REQUEST

3440
Ser
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From: Officer in Charge, Naval Branch Health Clinic, Naval Air Station, Jacksonville
To: Chief, Bureau of Medicine and Surgery (BUMED-M4)
Via: (1) Commanding Officer, Naval Hospital Jacksonville
(2) Commander, Naval Medical Forces Atlantic

Subj: REQUEST FOR WAIVER TO NAVY MEDICINE FORCE HEALTH PROTECTION
EMERGENCY MANAGEMENT PROGRAM

Ref: (a) BUMEDINST 3440.10B

Encl: (1) Waiver Request in case of Naval Branch Health Clinic, Naval Air Station,
Jacksonville

1. Per reference (a), enclosure (1) is submitted for consideration.
2. This paragraph is for additional comments, as needed.

F. M. LASTNAME

Enclosure (1)

SAMPLE WAIVER REQUEST IN CASE OF NAVAL BRANCH HEALTH CLINIC,
NAVAL AIR STATION JACKSONVILLE

Element 1. Naval Branch Health Clinic, Naval Air Station Jacksonville, unit identification code (UIC) 34566.

Element 2. Request a waiver for the total size of medical response teams as specified in Standard 3.

Element 3. Naval Branch Health Clinic, Jacksonville Naval Air Station is a Tier 3 medical treatment facility (MTF), per Table 3.1 of section 1 of reference (a) and requires a minimum of 33 personnel to fully staff the six medical response teams required. Due to continuing individual augmentee deployments and an ongoing shortfall in hospital corpsmen manning at the E-5 and E-6 levels, the average daily staffing at the facility for the previous 6 months has been 28 full-time personnel, or just under 80 percent of our full allowance. The ongoing shortfall in staffing precludes fielding a minimum of 33 personnel across the six medical response teams.

Element 4. Due to the temporary reduction in manning at the clinic, medical response team personnel have been shifted to fully staff the decontamination, zone management, detection and patient administration teams, and the transport and triage or treatment teams have been partially staffed.

Element 5. All medical response teams are considered fully mission capable and there is no impact on mission, or any problems that will interfere with safety or operating requirements if the waiver is not approved.

Element 6. Once the clinic is able to return to full staffing, the waiver can be eliminated. There are no additional resources or funding required, beyond the already approved manning levels for the clinic.

Element 7. As an interim measure, the clinic is working to identify personnel from other tenant commands that can be assigned to the medical response teams as a collateral duty. We are working to scrub an initial list of candidates and estimate it will take an additional 30 days to fully vet the list, select, and train candidates. However, this augmentation is still considered an interim solution and a waiver will be required until the clinic's full-time staffing is restored to the 90 percent or greater level.

Element 8. Point of contact: LCDR John Jones, DSN 123-4567, commercial (904) 123-4567.

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SAMPLE LONG-TERM EXCEPTION REQUEST

3440
Ser
DD Mmm YYYY

From: Officer in Charge, Naval Branch Health Clinic, Naval Air Station, Jacksonville
To: Chief, Bureau of Medicine and Surgery (BUMED-M4)
Via: (1) Commanding Officer, Naval Hospital Jacksonville, Florida
(2) Commander, Naval Medical Forces Atlantic

Subj: REQUEST FOR LONG-TERM EXCEPTION TO NAVY MEDICINE FORCE
HEALTH PROTECTION EMERGENCY MANAGEMENT PROGRAM

Ref: (a) BUMEDINST 3440.10B

Encl: (1) Long-Term Exception Request in case of Naval Branch Health Clinic, Naval Air
Station Jacksonville

1. Per reference (a), enclosure (1) is submitted for consideration.
2. This paragraph is for additional comments, as needed.

F. M. LASTNAME

Enclosure (2)

LONG-TERM EXCEPTION REQUEST IN CASE OF
NAVAL BRANCH HEALTH CLINIC,
NAVAL AIR STATION JACKSONVILLE

Element 1. Naval Branch Health Clinic, Naval Air Station Jacksonville, UIC 34566.

Element 2. A long-term exception is required for the total size of the medical response teams as specified in Standard 3.

Element 3. Naval Branch Health Clinic, Naval Air Station Jacksonville is a Tier 3 MTF, per Table 3.1 of section 1 of reference (a) and requires a minimum of 33 personnel to fully staff the six medical response teams. Due to a recent reduction in the clinic's basic allowance for Hospital Corpsman (HM) manning at the E-5 and E-6 levels, the maximum staffing at the facility under the revised allowance will be 22 full-time personnel, or just under 65 percent of our previous allowance. The decrease in staffing precludes fielding a minimum of 33 personnel across the six medical response teams.

Element 4. Due to the long-term reduction in manning at the clinic, medical response team personnel have been shifted to fully staff the decontamination, zone management, detection and patient administration teams, and the transport and triage or treatment teams have been partially staffed.

Element 5. All medical response teams are considered fully mission capable and there is no impact on mission, or any problems that will interfere with safety or operating requirements if the long-term exception is not approved.

Element 6. If the clinic's HM manning is restored to previous allowance levels, the long-term exception can be eliminated. There are no additional resources or funding required, beyond the restoration of the former HM manning levels for the clinic.

Element 7. As a possible solution, the clinic is working to identify personnel from other tenant commands that can be assigned to the medical response teams as a collateral duty. Establishing a memorandum of agreement with tenant commands to provide this contingency augmentation is considered the best long-term solution to mitigate the decrease in HM manning allowances. A long-term exception will be required until the clinic's staffing is restored to the previous level, or memoranda of agreement are in place to provide the additional personnel to fully staff the medical response teams.

Element 8. Point of contact: LCDR John Jones, DSN 123-4567, commercial (904) 123-4567.

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SAMPLE PERMANENT EXCEPTION REQUEST

3440
Ser
DD Mmm YYYY

From: Officer in Charge, Naval Branch Health Clinic, Naval Air Station, Jacksonville
To: Chief, Bureau of Medicine and Surgery (BUMED-M4)
Via: (1) Commanding Officer, Naval Hospital Jacksonville
(2) Commander, Naval Medical Forces Atlantic

Subj: REQUEST FOR PERMANENT EXCEPTION TO NAVY MEDICINE FORCE
HEALTH PROTECTION EMERGENCY MANAGEMENT PROGRAM

Ref: (a) BUMEDINST 3440.10B

Encl: (1) Permanent Exception Request in case of Naval Branch Health Clinic, Naval Air
Station Jacksonville

1. Per reference (a), enclosure (1) is submitted for consideration.
2. This paragraph is for additional comments, as needed.

F. M. LASTNAME

Enclosure (3)

PERMANENT EXCEPTION REQUEST IN CASE OF
NAVAL BRANCH HEALTH CLINIC,
NAVAL STATION MAYPORT

Element 1. Naval Branch Health Clinic, Naval Station Mayport, UIC 34567.

Element 2. A permanent exception is required for the total size of the medical response teams as specified in Standard 3.

Element 3. Naval Branch Health Clinic, Naval Station Mayport is currently a Tier 3 MTF, per Table 3.1 in reference (a) of the subject instruction and requires a minimum of 33 personnel to fully staff the six medical responses. Due to the recent decision to consolidate military staffing for this clinic with the staff at Naval Branch Health Clinic, Naval Air Station Jacksonville, and to transition the Naval Branch Health Clinic, Naval Station Mayport to a TRICARE Outpatient Clinic, there will no longer be any military staff assigned to the facility. The elimination of military personnel will preclude fielding any medical response teams from Naval Station, Mayport.

Element 4. Due to the permanent elimination of military manning at the Naval Station, Mayport clinic, the facility anticipates being changed to a Tier 4 MTF as defined in reference (a) for emergency management response.

Element 5. The change in status from a Naval Branch Health Clinic to a TRICARE Outpatient Clinic will eliminate all organic medical response team capabilities at Naval Station Mayport, and the clinic will be completely unable to meet any medical response team mission or requirement if the permanent exception is not approved.

Element 6. Point of contact: LCDR John Jones, DSN 123-4567, commercial (904) 123-4567.