

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT**

Reporting Year: **FISCAL YEAR 2021-2022**

**NOTE:** Number (1) below is to be completed for each county. The balance of Table 2 refers to each agency.

1. Percentage of population served by each level of care by county:  
(Identify for the maximum level of service offered; the total of a, b, and c should equal 100 %.)

County: Los Angeles County

A. Basic Life Support (BLS)	<u>N/A</u> %
B. Limited Advanced Life Support (LALS)	<u>N/A</u> %
C. Advanced Life Support (ALS)	<u>100</u> %

2. Type of agency
- a) Public Health Department
  - b) County Health Services Agency**
  - c) Other (non-health) County Department
  - d) Joint Powers Agency
  - e) Private Non-Profit Entity
  - f) Other: \_\_\_\_\_

3. The person responsible for day-to-day activities of the EMS agency reports to
- a) Public Health Officer
  - b) Health Services Agency Director/Administrator**
  - c) Board of Directors
  - d) Other: \_\_\_\_\_

4. Indicate the non-required functions which are performed by the agency:

Implementation of exclusive operating areas (ambulance franchising)	<u>X</u>
Designation of trauma centers/trauma care system planning	<u>X</u>
Designation/approval of pediatric facilities	<u>X</u>
Designation of other critical care centers	<u>X</u>
Development of transfer agreements	<u>X</u>
Enforcement of local ambulance ordinance	<u>X</u>
Enforcement of ambulance service contracts	<u>X</u>
Operation of ambulance service	<u>X</u>
Continuing education	<u>X</u>
Personnel training	<u>X</u>
Operation of oversight of EMS dispatch center	_____
Non-medical disaster planning	_____
Administration of critical incident stress debriefing team (CISD)	_____



**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

Trauma center application fees	_____
Trauma center designation fees	_____
Pediatric facility approval fees	_____
Pediatric facility designation fees	_____
Other critical care center application fees	<u>111,811</u>
Type: <u>Base Hospital</u>	
Other critical care center designation fees	<u>639,912</u>
Type: <u>Comprehensive Stroke Center</u>	
Ambulance service/Vehicle fees	<u>460,635</u>
Contributions	_____
EMS Fund (SB 12/612 & SB 1773)	<u>6,354,026</u>
Other grants: <u>Homeland Security, HPP, RDMHS</u>	_____
<b>Other fees: <u>Various Other Revenue/Intrafund Transfer</u></b>	<u>6,708,966</u>
Other (specify): <u>    HPP    </u>	<u>8,064,148</u>
<b>TOTAL REVENUE</b>	<b>\$ <u>50,819,938</u></b>

*TOTAL REVENUE SHOULD EQUAL TOTAL EXPENSES.  
IF THEY DON'T, PLEASE EXPLAIN.*

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

**7. Fee structure**

We do not charge any fees

Our fee structure is:

First responder certification	\$ _____
EMS dispatcher certification	_____
EMT certification	<u>190</u>
EMT recertification	<u>190</u>
EMT-defibrillation certification	_____
EMT-defibrillation recertification	_____
AEMT certification	_____
AEMT recertification	_____
EMT-P accreditation	<u>155</u>
EMT-P re-accreditation	<u>155</u>
Mobile Intensive Care Nurse/Authorized Registered Nurse certification	<u>142</u>
MICN/ARN recertification	<u>96</u>
EMT training program approval	_____
AEMT training program approval	_____
EMT-P training program approval	_____
MICN/ARN training program approval	_____
Base hospital application	_____
Base hospital designation	<u>15,973</u>
Trauma center application	_____
Trauma center designation	_____
Pediatric facility approval	_____
Pediatric facility designation	_____
Other critical care center application	
Type: Comprehensive Stroke Center Fee	<u>26,991</u>
Other critical care center designation	
Type: STEMI Receiving Center Fee	<u>31,066</u>
Ambulance service license - New	<u>4,846.17</u>
Ambulance service license - Renewal	<u>2,923.43</u>
Ambulance vehicle permit - New	<u>373.86</u>
Ambulance vehicle permit - Renewal	<u>339.55</u>
Other: Ambulette Operator - New	<u>4,846.17</u>
Other: Ambulette Operator - Renewal	<u>2,923.43</u>
Other: Ambulette Vehicle Permit - New	<u>361.72</u>
Other: Ambulette Vehicle Permit - Renewal	<u>327.41</u>

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

<b>CATEGORY</b>	<b>ACTUAL TITLE</b>	<b>FTE POSITIONS (EMS ONLY)</b>	<b>TOP SALARY BY HOURLY EQUIVALENT</b>	<b>BENEFITS (51.55 %of Salary)</b>	<b>COMMENTS</b>
EMS Admin./Coord./Director	EMERGENCY MEDICAL SERVICES DIRECTOR	1	114.78	78.04	
Asst. Admin./Admin. Asst./Admin. Mgr.	EMERGENCY MEDICAL SERVICES ASSISTANT DIRECTOR	2	93.78	63.76	
ALS Coord./Field Coord./Trng Coordinator	NURSING DIRECTOR, ADMINISTRATION	1	97.46	68.90	
Program Coordinator/Field Liaison (Non-clinical)	ASSISTANT NURSING DIRECTOR, ADMINISTRATION	1	95.39	64.86	
Trauma Coordinator	SENIOR NURSING INSTRUCTOR	1	71.55	48.65	
Medical Director	MEDICAL DIRECTOR II	1	235.50	166.50	
Other MD/Medical Consult/Training Medical Director	CHIEF PHYSICIAN, ASSISTANT MEDICAL DIRECTOR	1	205.64	145.39	
Disaster Medical Planner	SENIOR PHYSICIAN EMERGENCY MEDICINE NURSING DIRECTOR, ADMINISTRATION	2	194.78 97.46	137.71 68.90	Dr. Whitfield Roel Amara

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

Dispatch Supervisor	PATIENT TRANSPORTATION SUPERVISOR	2	39.28	27.77	
Medical Planner (not applicable)					
Data Evaluator/Analyst	NURSE MANAGER		100.09	70.76	
QA/QI Coordinator	SENIOR NURSING INSTRUCTOR	1	77.67	52.81	
Public Info. & Education Coordinator	ASSISTANT NURSING DIRECTOR, ADMINISTRATION	1	83.04	56.46	
Executive Secretary	MANAGEMENT SECRETARY III	1	33.00	22.44	
Other Clerical	SENIOR CLERK; INTERMEDIATE CLERK; INTERMEDIATE TYPIST CLERK	6	25.92	17.62	
Data Entry Clerk	INTERMEDIATE TYPIST-CLERK	2	23.54	16.01	
Other	VARIOUS	180	VARIOUS	VARIOUS	

Include an organizational chart of the local EMS agency and a county organization chart(s) indicating how the LEMSA fits within the county/multi-county structure.