

BCEHS PROGRESS REPORT

2024/2025

BCEHS | BC Emergency
Health Services



Land Acknowledgement

We recognize with deep gratitude that BC Emergency Health Services is a provincial service and we live and work on the ancestral and unceded territories of many First Nations who have stewarded these lands for thousands of years.

Coast Salish Knowledge Keeper Siem Te'Ta-in (Shane Pointe) has generously gifted six Coast Salish teachings to our organization. These teachings guide us in building a culturally safe and inclusive workplace that is free of Indigenous-specific racism and all forms of racism. They ground our ongoing commitment to providing culturally safe care for all people in British Columbia.

As uninvited settlers on these lands, we recognize our responsibility for continuous learning, listening, reflection, and action. We are committed to reconciliation and decolonization.



Abbreviations

ACP - Advanced Care Paramedic

APADBC - Ambulance Paramedics and Ambulance Dispatchers of B.C.

APBC (CUPE 873) - Ambulance Paramedics of British Columbia, Canadian Union of Public Employees Local 873

ASTaR - Assess, See, Treat, and Refer

BCEHS - BC Emergency Health Services

BCGEU - BC General Employees' Union

CAR - Connect and Recover

CCP - Critical Care Paramedic

CISM - Critical Incident Stress Management

CPR - Cardiopulmonary Resuscitation

CRM - Clinical Response Model

DEI - Diversity, Equity, Inclusion

DR3 - Disaster, Risk Reduction, and Resilience

ECC - Emergency Coordination Centre

EMR - Emergency Medical Responder

EPOS - Emergency Physician Online Support

FR - First Responder

FRS - First Responder Services

HR - Human Resources

JIBC - Justice Institute of British Columbia

LAPN - Low Acuity Patient Navigator

LARU - Link and Referral Unit

MPDS - Medical Priority Dispatch System

MSI - Musculoskeletal Injury

PCP - Primary Care Paramedic

PPE - Personal Protective Equipment

PPL - Paramedic Practice Leader

PHSA - Provincial Health Services Authority

PTCC - Patient Transport Coordination Centre

PTN - Patient Transfer Network

STC - Secondary Triage

TA - Talent Acquisition

TPP - Travelling Paramedic Program

UPCC - Urgent Primary Care Centre

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Board Chair's Message

I was pleased to look back and take stock of all the changes and improvements that have taken place at BCEHS since [the last progress report](#). The growth of BC Emergency Health Services has not slowed down, and new projects and initiatives to support BCEHS patients and employees are paving the way for future success.

This report covers the period from April 1, 2024, to March 31, 2025. It is a snapshot in time of the good work that teams across BCEHS have done and continue to do, with further positive progress taking place since the end of the fiscal year.

This past year has seen increased demand placed upon BCEHS as the number of 911 calls events continues to rise, as does their severity. BCEHS has had to adapt and rise to meet those challenges, and I am inspired by the way the organization responds while constantly seeking to improve the most important part of our service – the patient experience.

Internally, there is equally important work going on to support frontline employees. Paramedics and dispatch teams care for people living in British Columbia day in and day out, and it is important that they are equally well cared for and supported. This includes programs to strengthen mental and physical wellbeing and initiatives to improve the culture for better employee retention and morale.

I am grateful for the efforts of all BCEHS employees as they deliver and support the provision of exceptional emergency health care across B.C. I would also like to express my sincere appreciation to our many partners in providing care, including the health authorities across B.C., CUPE 873 and the hundreds of first responder agencies we work with to support patient care in all corners of the province.

This past year has seen substantial progress made towards the goals set out in the organization's strategic plan, and I look forward to seeing more progress in the next 12 months.

Sincerely,

Elizabeth Cull

Board Chair

BC Emergency Health Services



Chief Ambulance Officer's Message

The past year has been one of progress and change at BCEHS. We have built on last year's record hiring numbers by recruiting and hiring more employees in 2024/25 to support the increased demand on our system. It has been a challenging time in healthcare but our people continue to work hard to provide excellent service to their communities and patients.

Our ability to care for our patients is made possible by the efforts of our employees. Recognizing that healthy and well employees are best positioned to provide exceptional care experiences to patients and families, I am proud of efforts over the past year to improve the work experiences of our employees and ensure our workplaces are more welcoming, inclusive and safe spaces.

Important work continued this past year to eradicate Indigenous-specific racism at BCEHS and to move us closer toward our vision of creating an equitable, anti-racist and culturally safe health system. This past year we made strong progress on implementing our three-year People Plan and also rolled out significant initiatives as part of our Indigenous Health strategy.

We are also in the middle of a significant initiative to increase the scope of practice for our paramedics. This is a considerable undertaking that we are implementing at all license levels within our organization. This is an exciting effort to add new skills, medications and tools for our employees, and at the same time, create better care outcomes for our patients.

Thank you to all our employees for your continued support as we work to strengthen BCEHS for our teams and for the patients we serve.

Sincerely,

Leanne Heppell

EVP and Chief Ambulance Officer

BC Emergency Health Services

Provincial Health Services Authority

Who We Are

BC Emergency Health Services (BCEHS) is one of the largest emergency health services providers in North America. We deliver emergency call-taking, dispatch, and paramedic care to every community in British Columbia. As part of the Provincial Health Services Authority (PHSA) and mandated under the Emergency Health Services Act, we serve a province of 5.7 million people across nearly one million square kilometres.

Beyond emergency response, BCEHS manages the planning and coordination of interfacility patient transfers requiring paramedic care and provides patient care through the Community Paramedicine program, which supports patients with chronic health needs in rural and remote communities.

In partnership with health authorities, unions, first responders, and public safety agencies, we are committed to delivering high-quality emergency care and community health services anywhere in B.C., in any weather, using leading paramedic practices tailored to the province's vast and diverse geography, from urban centres to isolated coastal and mountain regions.



Our Vision and Purpose

Vision

BCEHS is a place where we care for the people who work here. Employees at BCEHS feel pride in the work they do together and feel supported to provide the highest quality, evidence-informed emergency care, interfacility patient transfers, and community services to all patients.

Purpose

BCEHS brings compassionate, equitable, and professional emergency care, interfacility patient transfers, and community health care services to people in communities across British Columbia.

We believe in...

- Creating the conditions for employees to thrive, to learn, be healthy, and effectively apply their professional expertise to do work they are proud of.
- Providing high quality and timely emergency and community health care to meet the unique needs of patients and their families.
- Collaborating and coordinating with partners across health care systems to provide people with the right care at the right time, the first time.
- Meaningfully consulting and partnering with communities to understand and better meet their needs to ensure equity as well as cultural safety and humility.
- Using evidence-informed decision-making to support a learning organization that drives quality as well as innovative and sustainable systems of care.



Standing Strong Together: How BCEHS Supports BC's Health System and Our People

BC Emergency Health Services is committed to delivering exceptional out-of-hospital care and supporting the health and wellbeing of both the patients we serve and the dedicated employees who make our work possible.

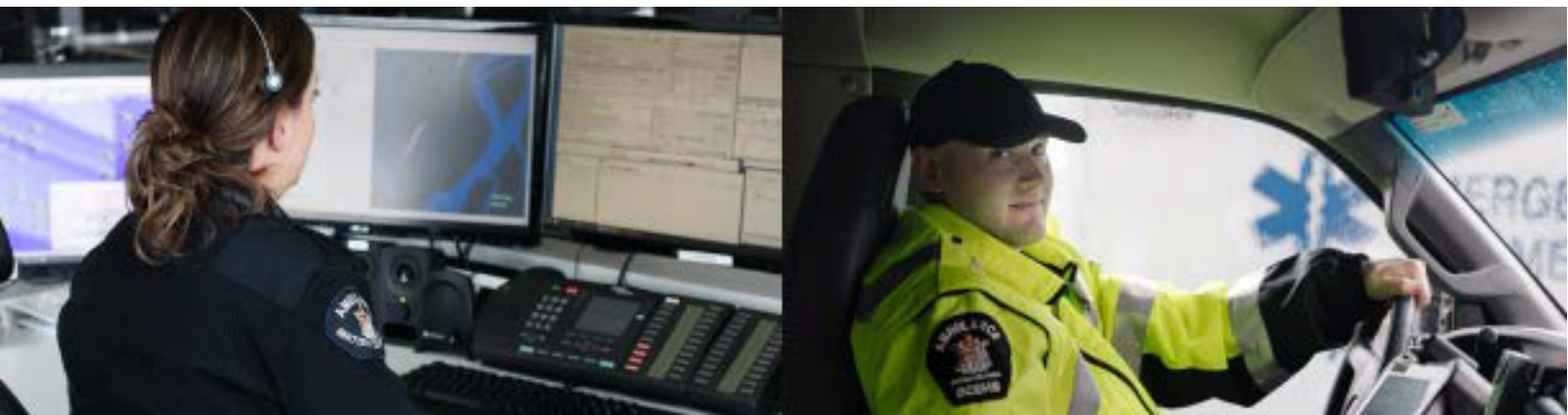
Over the past year, BC's health care system has faced significant pressures including hospital closures, emergency department diversions, staffing shortages and growing demand for services. These challenges have tested the resilience of both the broader health system and our teams.

As a key part of BC's health care network, BCEHS will continue to adapt and provide support as a province-wide resource for the system. Weather events have become more significant in their severity and can impact our ability to respond and deliver care. Our Disaster Risk Reduction and Resilience team ensures business continuity while mitigating impacts to 911 emergency response and the health system at large. We will continue to help bridge gaps where needed and provide timely emergency care and interfacility patient transfers across British Columbia.

Our ability to meet these challenges depends on the people who deliver frontline care every day. That's why we're focused on supporting the wellbeing of our employees by investing in mental health, physical wellness, and fostering a workplace culture built on respect, safety, and inclusion. We've enhanced training and education opportunities, continue to strengthen employee supports, and remain committed to continuous improvement, both for patient care and for those who deliver it.

Guided by our Strategic Plan, Indigenous Health Strategy, and People Plan, we remain focused on four priorities: improving patient care, enhancing employee wellbeing and supports, addressing health care inequities for First Nations and Indigenous Peoples and planning for the future needs of BC's diverse communities.

We are proud of the essential role BCEHS plays in BC's health care system and will continue working alongside our partners to support patients, communities, and each other.



Growing Demand for Our Services

BCEHS continues to experience growing demand for our services. Between April 1, 2024, and March 31, 2025, we responded to more than 608,000 911 events and completed over 75,000 interfacility patient transfers. This represents a two per cent increase in 911 events, with more than 12,000 additional events compared to the previous year and a five per cent increase in interfacility patient transfers, amounting to over 3,800 more transfers than in 2023/24.

**Averaging
more than
1,650 911
events per
day**

**A 911 event is a request for
BCEHS service that
originated through one or
more 911 phone calls.
One event can generate
multiple 911 calls and when
appropriate, can trigger
multiple ambulance
responses.**



In 2024/25, there were an average of 1,998 calls per day to 911. This is 31 per cent higher than the average daily 911 call volume in the three calendar years before the pandemic.

**Averaging
nearly 2,000
911 calls per
day**

**A 911 call is a phone call into
dispatch to request BCEHS
service. As mentioned above,
a 911 event may be
associated with multiple 911
phone calls. For example, a
traffic collision on a busy
street may trigger many calls
to 911 from various sources.**



As part of the response to increasing call volumes, BCEHS increased staffing and in-service hours in the past year. By March 2025, 1,876 in-service hours per day were added across the province, a 28 per cent increase from April 2022.

In-service hours provide an indication of our capacity to provide patient care across the province. It is an indication of system readiness and demonstrates the ability to hire, retain, and schedule employees to meet the needs of the population.

BCEHS prioritizes care for the most critically ill and injured patients by using the internationally recognized Medical Priority Dispatch System (MPDS) alongside our Clinical Response Model (CRM). Through this system, calls involving life-threatening conditions are given the highest priority for ambulance response. Examples of high priority conditions include cardiac arrest, chest pain, difficulty breathing, severe bleeding, or unconsciousness.

The CRM uses a colour-coded system to guide resource allocation, with each colour representing the type of response, urgency, and resources required ranging from purple (immediately life-threatening, highest priority) to blue (non-urgent, lowest priority).

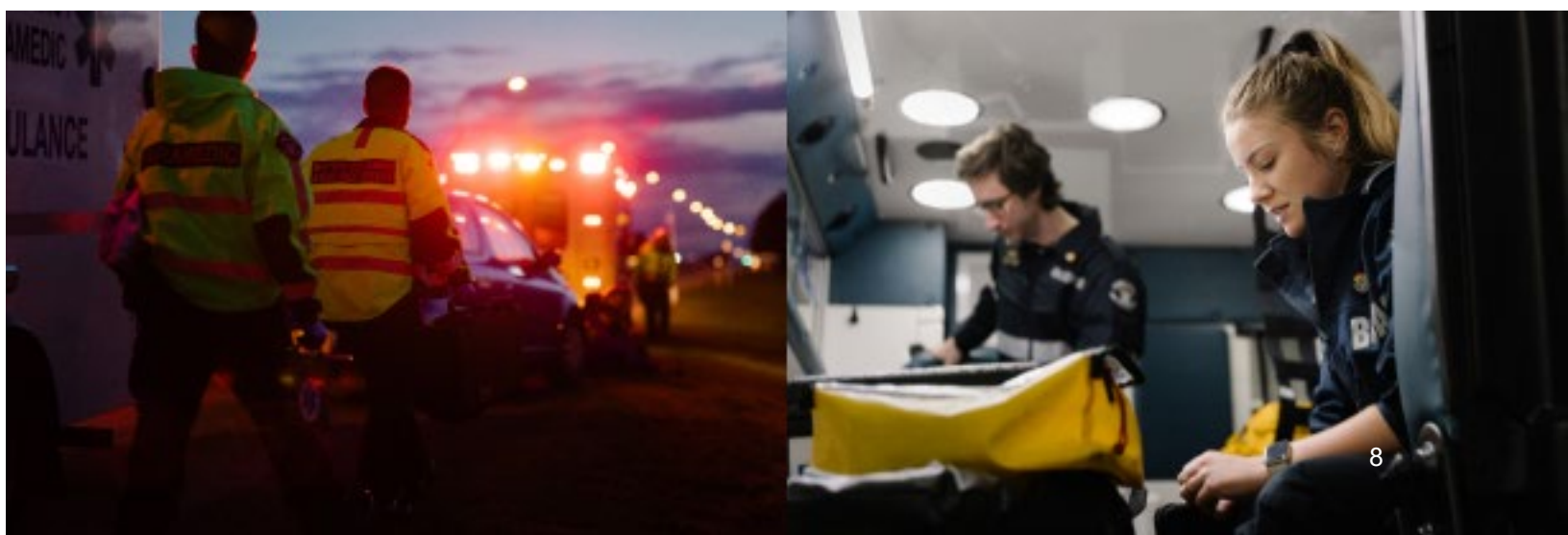
The system is designed to be dynamic, allowing for the priority of a call to be upgraded if a patient's condition worsens before help arrives.

Clinical Response Model Colour Codes

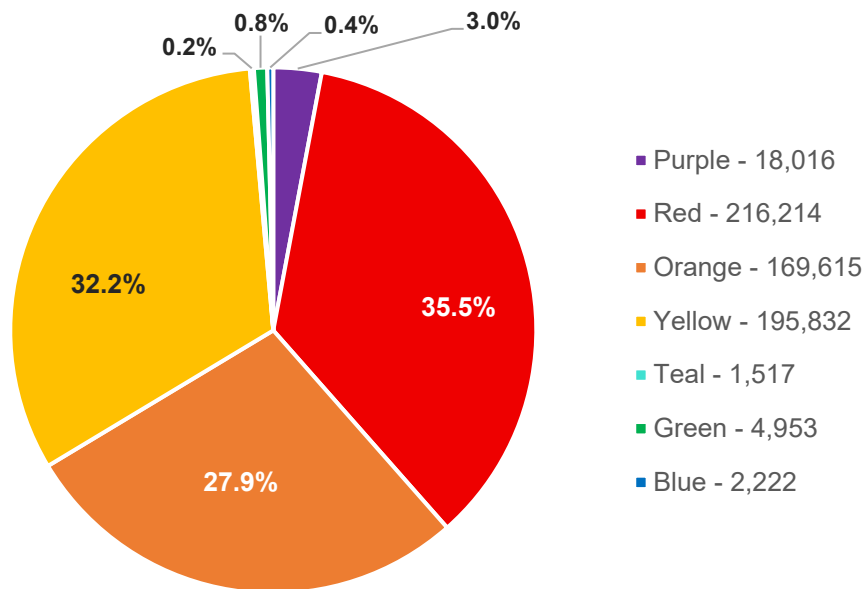
COLOUR	CONCERN	EXAMPLE
Purple	Immediately life-threatening	Cardiac arrest
Red	Immediately life-threatening or time critical	Chest pain
Orange	Urgent, potentially serious, but not immediately life-threatening	Abdominal pain
Yellow	Non-urgent, not serious or life-threatening	Sprained ankle
Green	Non-urgent (not serious or life threatening), possibly suited for treatment at scene	Minor cut
Blue	Non-urgent (not serious or life threatening), further telephone triage and advice, referrals to HealthLink	Skin rash
Teal	Virtual assessments performed by the Clinical Hub. Paramedics and/or Link and Referral Units (LARUs) are not dispatched to these events.	Minor allergy

BCEHS is responding to more urgent, life-threatening 911 events than ever before. Critical, immediately life-threatening events, which are categorized as purple or red in the Medical Priority Dispatch System (MPDS), represented 38.5 per cent of all events between April 1, 2024, and March 31, 2025. In 2023/24, purple and red events represented 35.6 per cent of all patient events.

Approximately one third of 911 events in 2024/25 were considered ‘lower acuity’ or not immediately life-threatening and coded as yellow, green, or blue. While some of these patients may not need to be seen at an emergency department, they require appropriate treatment and connection to care for less urgent concerns, such as sprains, mild illness, minor cuts, or skin conditions.



911 Events by Clinical Response Model Colour 2024/25

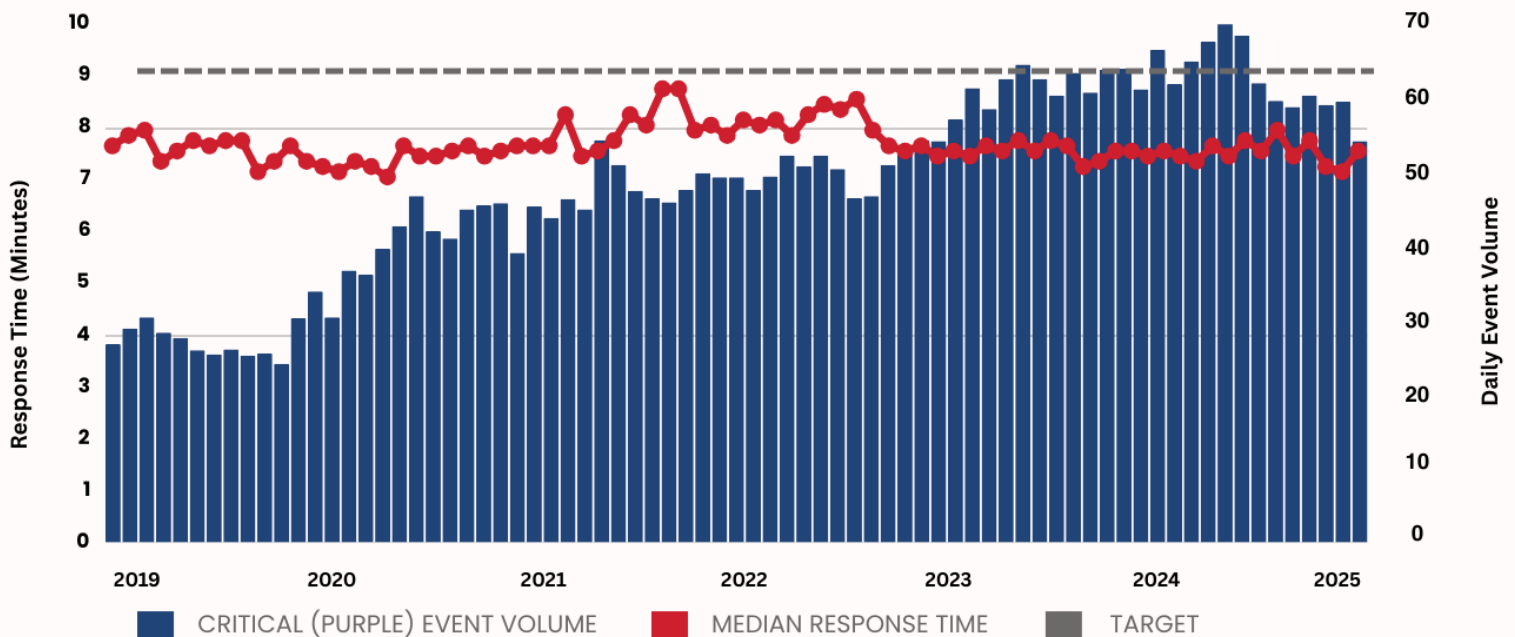


A key performance measure for BCEHS is our response times for 'high acuity' urgent or life-threatening events.

Although 911 call volumes continue to rise, BCEHS response times for the most life-threatening events (CRM Purple) remain below our target thresholds in metro, urban, rural, and remote communities.

We remain focused on improving our response to all 911 calls and ensuring patients across the province receive timely, appropriate care.

Response Times to Critical 911 Events in Metro/Urban B.C. from January 2019 to March 2025



The median represents the middle point of the responses, so half of all BCEHS responses are shorter and half are longer than the median response time.

- BCEHS is effectively prioritizing patients with the most urgent needs, even as event volumes increase.
- More than 80 per cent of people living in British Columbia live in urban areas.
- In 2024/25, more than 90 per cent of critical 911 events (CRM code purple) occurred in metro or urban B.C.

The People Behind the Care



BCEHS has more than 6,400 BCEHS employees supporting patient care, including paramedics, emergency medical call-takers and dispatchers, as well as all the many behind-the-scenes teams that support our frontline employees such as Logistics and Transportation Operations, Business Operations Support, a range of administrators and leaders, Indigenous Health advisors, Communications, on call Emergency Physicians, the First Responder and Allied Partnership Team, and many others. The figures below are a snapshot of BCEHS's frontline staffing complement as of March 31, 2025.

Clinical Operations includes out-of-hospital 911 emergency care delivered by frontline paramedics and community paramedics who can provide scheduled at-home care to patients.

The Clinical Operations Team

3,400+ Primary Care Paramedics

1,200+ Emergency Medical Responders

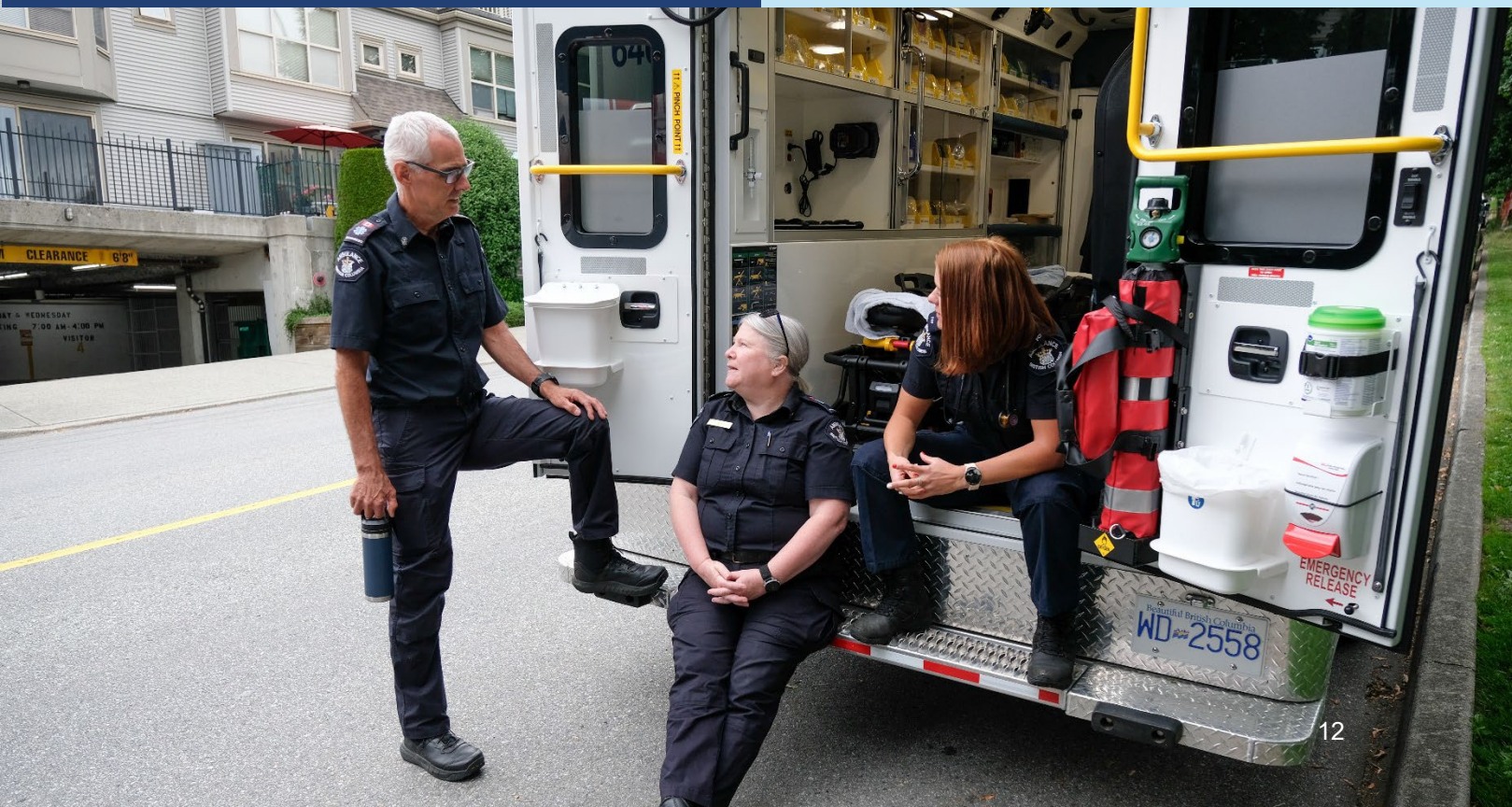
300+ Advanced Care Paramedics

90 Critical Care Paramedics

49 Community Paramedics

8 Link and Referral Units

20 Infant Transport Team Paramedics



Clinical Operations is also responsible for emergency 911 call-taking, dispatching resources, and coordinating interfacility patient transfers in BCEHS's three Dispatch Operations Centres in Kamloops, Victoria, and Vancouver.

The Patient Transfer Network (PTN) centrally coordinates patient referrals and ambulance transportation across the province by connecting sending and receiving physicians, facilities, and ambulance services.

The Patient Transport Coordination Centre (PTCC) manages the logistical aspects of interfacility patient movements, including coordinating the staffing and equipment. PTCC is also responsible for dispatching critical care paramedics by air ambulance to high acuity out-of-hospital events to support the rapid transport of patients to trauma centres.

The Dispatch Operations Team

397 Emergency Medical Dispatchers & Call-Takers

26 Emergency Physician Online Support Physicians

24 Paramedic Specialists

16 Secondary Triage Clinicians

6 Low Acuity Patient Navigators

The PTN Team

57 Interfacility Emergency Medical Call-Takers

6 Charge Interfacility Emergency Medical Call-Takers

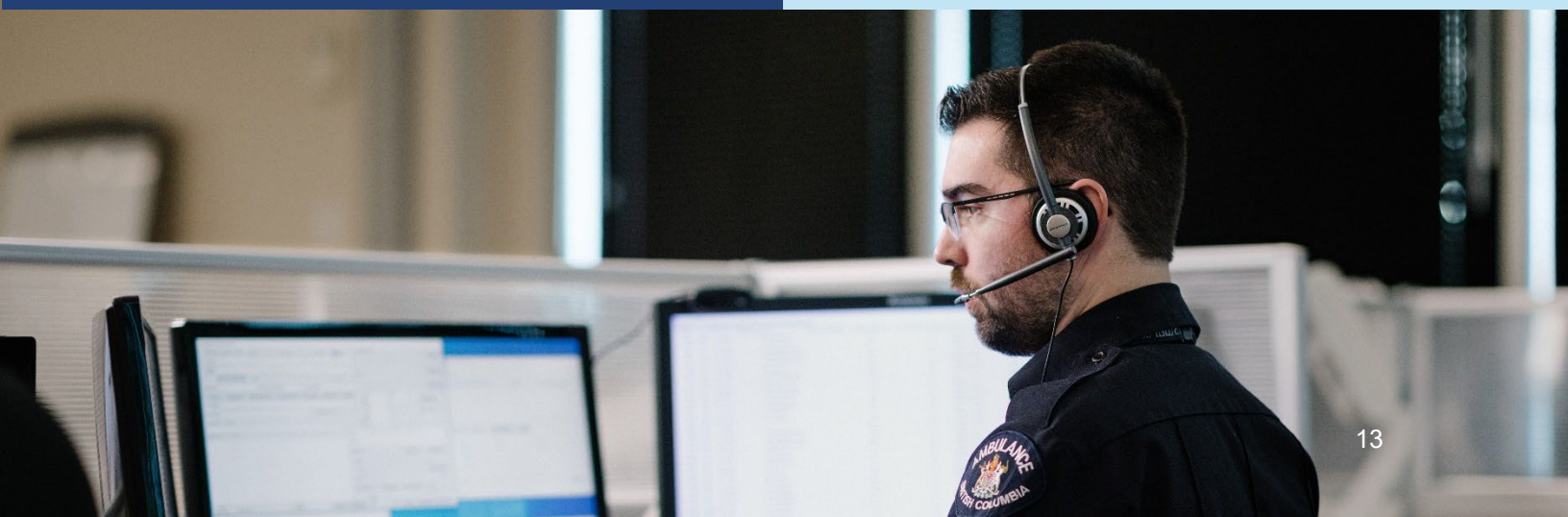
4 Practice Educators

The PTCC Team

41 Interfacility Emergency Medical Dispatchers

5 Charge Interfacility Emergency Medical Dispatchers

3 Practice Educators



Resources

BCEHS paramedics work out of 182 ambulance stations around the province. Of those stations, 64 serve remote areas, 49 serve rural areas, 39 serve urban areas, and 30 serve metro areas.



Remote

Low response volumes and limited number of transfers due to population or geographic location.



Rural

Slightly higher response volumes and limited transfers due to population or geographic location.



Urban

Higher response volumes and transfers with increased population or geographic location.



Metro

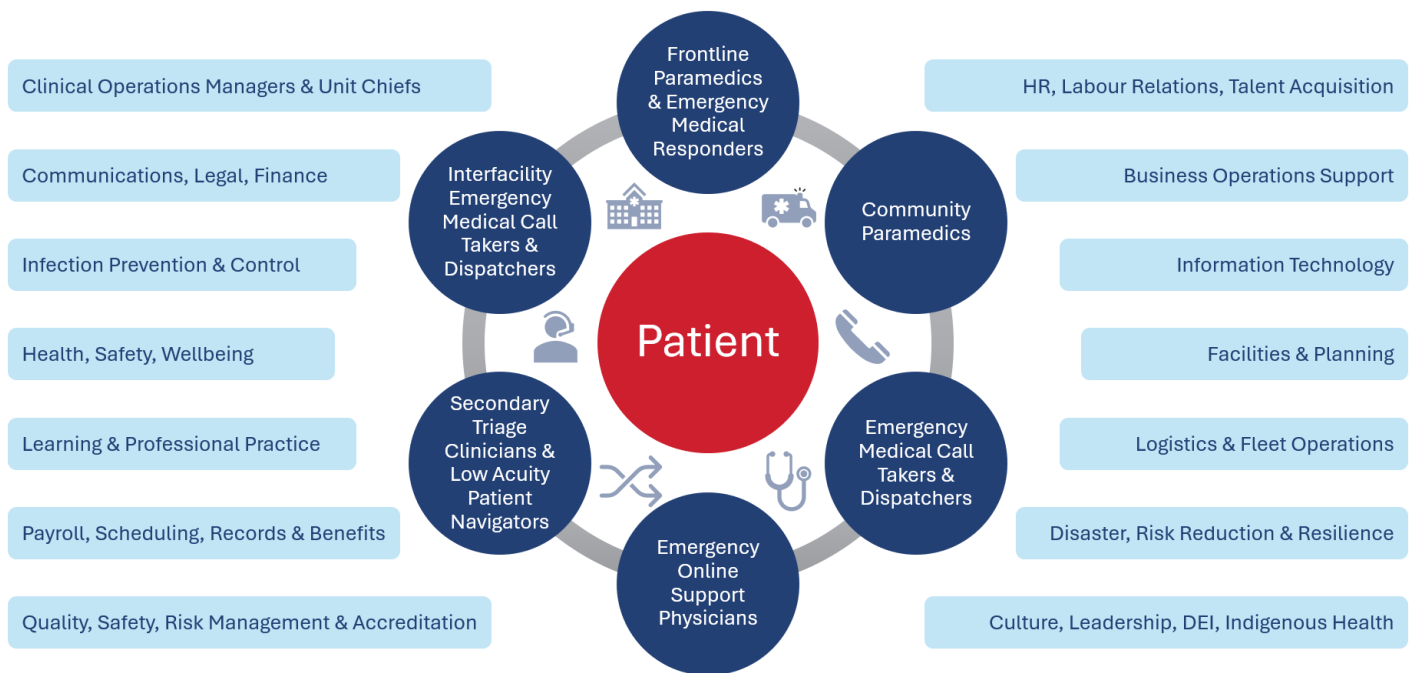
Highest response volumes and number of patient transfers with increased population.



Some of Our Support Teams

BCEHS frontline services would not be possible were it not for the many small but mighty teams working behind the scenes to support frontline care.

We exist to deliver excellent patient care supported by dedicated teams



The BCEHS Logistics and Transport Operations team oversees the following fleet to facilitate the delivery of patient care:

Air Ambulance Fleet [‡]	Ground Ambulance Fleet	Marine Ambulance Fleet
35+ helicopter and airplanes contracted from ad hoc providers	660+ ambulances equipped with power stretchers and power loading systems	12+ ad hoc water taxi providers
9 turboprop planes	29 low acuity transport vehicles	3 dedicated marine ambulance vessels on contract
6 helicopters	300+ non-ambulance response and support vehicles	

[‡]Air Ambulance resources are spread across the province in various locations including Vancouver, Kelowna, Kamloops, Parksville, Prince George, Prince Rupert, and Fort St. John.

Improved Fleet Service Coordination

In late-June 2024, we launched 24/7 support for ambulance maintenance and repairs across all regions managed by our Logistics team. This service supports approximately 65% of ambulances and 40 support vehicles. With 24/7 service, we are reducing vehicle downtime, streamlining maintenance and repairs, enhancing spare vehicle tracking in all regions, and contributing to improved patient care.



Advancing Air Ambulance Care: A New Era for BCEHS Fleet

The BCEHS air ambulance program has historically relied on multiple contracted providers, supplemented by ad-hoc aircraft when needed. While this approach met operational demands, it resulted in inconsistent aircraft environments for patients and paramedics, creating challenges for care delivery.

In 2023, BCEHS took a major step forward by awarding new air ambulance contracts to a single provider for both fixed-wing and rotary-wing aircraft. This transition, which continued through 2024/25, marks a significant upgrade in aircraft technology, design, and standardization. The result: consistent cabin configurations that enhance clinical efficiency for paramedics and improve comfort for patients.

A key advancement is the introduction of mechanized stretcher loading systems, improving safety and easing patient transfers. The new fleet also expands BCEHS's capacity to care for patients with complex needs, including those requiring ECMO (extracorporeal membrane oxygenation, a form of life support for critically ill patients that does the work of their heart and lungs), neonatal incubators, bariatric support, or EpiShuttle isolation for infectious diseases.

The fixed-wing aircraft, designed to land on gravel runways, serves to increase access to rural, remote, and Indigenous communities. Of the 12 new planes, three are stationed in Vancouver, three in Kelowna, two in Prince George, one in Fort St. John, with three dedicated as backups. The rotary-wing fleet includes six dedicated helicopters and one spare. All helicopters are equipped with night vision technology for enhanced operations.

The first fixed-wing aircraft entered service in May 2024, with full deployment planned by the second quarter of 2026. The first helicopter began operations in March 2025 and the entire rotary-wing fleet was operational by the end of summer 2025.

In 2024/25, air ambulances were used in 8,682 patient transports. Of those transports, 6,333 were by fixed-wing aircraft and 2,349 were by helicopter which reflects the ongoing importance of air resources.

Approximately 70% of air transports use fixed-wing aircraft.



Approximately 30% of air transports use helicopters.



Continued Improvements

Supporting Paramedic Education & Upskilling

In 2024/25, BCEHS strengthened its focus on education and upskilling by continuing to fund primary care paramedic (PCP) training for employees who accept full-time or regular part-time PCP positions. This initiative directly supports our goal of increasing staffing in rural and remote communities by helping employees overcome barriers to completing their education.

Eligible employees receive full wage replacement while attending their PCP education, along with paid tuition, textbooks, uniforms, travel and meal allowances, and exam fees. Removing financial obstacles supports employees to advance their careers.

This past year, 105 employees enrolled with BCEHS funding support, and 17 successfully obtained their PCP licenses from the provincial licensing board.

The program continues to support BCEHS staff across B.C., contributing to our commitment to strengthen staffing levels province-wide.



Expanded Clinical Skills and Training

This year, BCEHS placed a strong emphasis on enhancing out-of-hospital patient care by broadening the clinical tools, medications, procedures, and competencies available to paramedics.

Emergency Medical Responder (EMR) and critical care paramedic (CCP) scope of practice education is ongoing. Primary care paramedic (PCP) scope of practice education launched in May 2024. Corresponding advanced care paramedic (ACP) education will launch in May 2025.

As of March 31, 2025, 96 per cent of EMRs, 49 per cent of PCPs and 95 per cent of CCPs had completed scope of practice expansion education.

Growing Our Dispatch Teams to Meet Rising Demand

This year BCEHS achieved a major milestone, fully staffing all three provincial dispatch centres. This is a significant accomplishment, especially as the volume of 911 medical calls continues to rise each year. Focused recruitment efforts are paying off, enabling us to better serve communities across B.C.

In 2024/25, 109 new Emergency Medical Call-Takers (EMCTs) joined BCEHS dispatch centres. These highly trained professionals are the first point of contact for medical emergencies, gathering critical information, assessing situations through specialized systems like MPDS and CAD, and dispatching the appropriate paramedic teams.

Beyond coordinating emergency responses, EMCTs provide vital, often life-saving support over the phone, guiding callers through CPR and offering calm, clear instructions in moments of crisis. Their ability to stay composed, compassionate, and decisive under pressure can make all the difference in an emergency.

Training and Supporting Resilient Dispatch Teams

After completing classroom instruction, new EMCTs transition to live training on the dispatch floor, supported by experienced mentors known as preceptors. There are 155 preceptors across the province, coaching and guiding new recruits as they build the confidence and skills needed to perform in high-pressure situations.

Of the students who completed call-taker training in the period covered by this report, 88 per cent were successfully signed off and working independently.

Patient Transfer Services

The BCEHS Patient Transfer Services team moved into a new space at the start of 2025, enabling the 911 dispatch team to expand. The move significantly improved communication and collaboration between interfacility emergency medical call-takers and interfacility emergency medical dispatchers, enhancing the coordination of patient transfers.

Patient Transfer Services (PTS) which is comprised of the Patient Transfer Network (PTN) and Patient Transport Coordination Centre (PTCC) coordinates and dispatches interfacility patient transfers between hospitals and/or health care facilities. PTN employees work with the sending and receiving facilities to determine patient needs and coordinate the transfer, then pass the confirmed transfer to PTCC, which handles the logistics and dispatching of resources.

Most transfers done by PTS are within B.C., but they may also involve other domestic or international destinations.

PTS continues to collaborate closely with health authorities to refine and improve interfacility patient transfer processes and remains engaged at the ministry level in the development of related provincial policies.

PTCC dispatches the Lower Mainland's patient transfer fleet, which includes more than 30 ambulances, as well as the patient transfer ambulances in the Interior and on Vancouver Island. The addition of patient transfer units outside of the Vancouver area is intended to help regional centres maintain coverage for pre-hospital emergency events. In addition to the ground fleet, PTCC also dispatches all critical care and air-evacuation interfacility patient transfers as well as BCEHS's air ambulance fleet.



Modernizing Response Resources and Care

In 2024, BCEHS responded to a record number of calls with approximately two-thirds classified as high-acuity urgent emergencies and one-third as low-acuity or non-urgent cases.

To ensure ambulances remain available for the most critical patients, the BCEHS Clinical Hub designs, implements, and evaluates innovative roles, systems, and processes that help connect low-acuity patients with the right care options.

The Clinical Hub includes 16 full-time Secondary Triage Clinicians (STCs) and six full-time Low Acuity Patient Navigators (LAPNs), working alongside paramedic specialists at the Vancouver Dispatch Operations Centre. Together, they help manage non-urgent calls and support patients in accessing the most appropriate care, easing demand on emergency ambulance resources.

Secondary Triage

Secondary Triage Clinicians (STCs) are specially trained primary care paramedics who provide in-depth clinical assessments for low-acuity patients by phone or videoconference. Drawing on their advanced clinical judgment and skills, STCs assess patient needs and recommend appropriate care options, often guiding patients toward alternatives that do not require ambulance transport or a visit to the emergency department. STCs play an important role in ensuring emergency resources remain available for the most urgent cases, while still supporting patients with safe, timely care.

Since January 1, 2022, more than 12,000 patients who were assessed by secondary triage did not require an ambulance:

4,135 patients in 2022

3,945 patients in 2023

3,367 patients in 2024

1,129 patients in the first three months of 2025

Easing Pressure on Emergency Ambulances and Emergency Departments

Link and Referral Unit (LARU) paramedics are specialized PCPs who respond to non-urgent patients. They assess patients and can refer them to alternate care or transport them to an urgent care centre or emergency department. LARU paramedics work with LAPNs to identify low acuity patient events that may be suitable for a LARU response.

- 4 new LARU units were deployed in 2024 in Prince George (2), Victoria (1) and Nanaimo (1).
- 18 total LARU units are in operation in urban areas of the province

Since January 1, 2022, there have been more than 7,000 events where a LARU was the primary unit dispatched to a low acuity event and the event was resolved in a manner other than transporting a patient to an emergency department:

- 2,426 events in 2022
- 2,070 events in 2023
- 2,232 events in 2024
- 534 in the first three months of 2025

Clinical Hub Director Ford Smith (third from right) accepts the Canadian College of Health Leaders (CCHL) and Solventum's 2024 Health Care Innovation Team Award in recognition of "pioneering efforts in reshaping out-of-hospital care in British Columbia".



Modernizing our service relies heavily on evolving partnerships in the larger health-care system. 2024 saw continued partner collaboration.

Referrals to Urgent Primary
Care Centres (UPCCs)

Five additional UPCCs began taking BCEHS referrals in 2024 bringing total UPCC partnerships to 29, providing coverage in all regional health authorities.

574 patients were referred to UPCCs by BCEHS crews, including patients who were conveyed to the UPCC by a paramedic crew and those who received a referral following a virtual assessment over the phone or by videoconference.

Work with Mental Health Teams

A new partnership began in 2024 with Fraser Health Mental Health and Substance Use Urgent Care to connect patients with mental health presentations to appropriate care instead of an emergency department.

Conveyance to Treatment
Facilities

2024 saw a new partnership with BC Centre for Excellence in HIV and AIDS to support conveying patients to their Hope to Health primary care clinic in the Downtown Eastside.

Ministry of Health

Ministerial Order signed allowing BCEHS to access the provincial electronic health records (EHR), CareConnect, giving all Clinical Hub employees the ability to bolster clinical decision making, referrals and care plans.

Recruiting for Impact: Supporting Communities, Advancing Equity, and Growing BCEHS

In recent years, BC Emergency Health Services has focused on proactive recruitment, leading to steady gains in hiring and staffing. By the end of the fiscal year, 82 per cent of the 3,247 permanent paramedic and dispatch positions were filled, an increase of eight percentage points over the previous year.

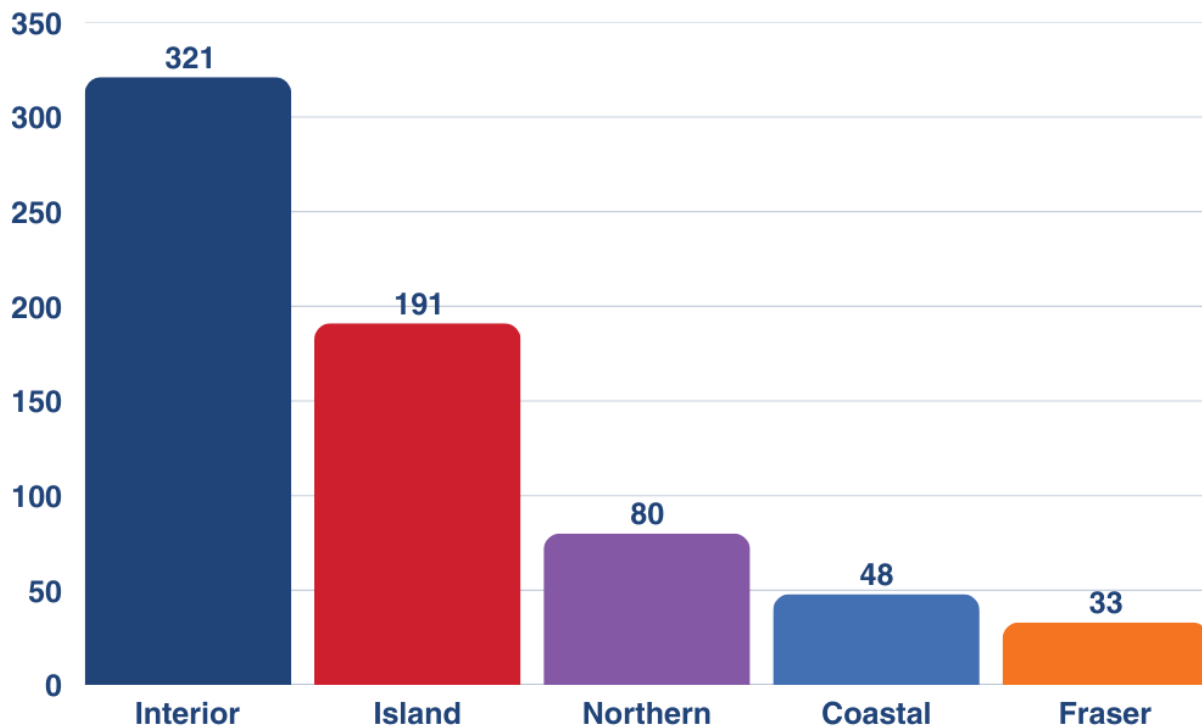
We remain committed to building paramedic capacity to meet service demands in every community across the province. Over the year, more than 250 paramedics were hired into newly converted full-time and regular part-time positions, more than 300 temporary roles were filled, and 398 casual employees transitioned into permanent roles. Of the 1,525 internal job postings, 1,112 were successfully filled. While the expedited hiring process continues to deliver results, recruiting for remote communities remains a significant challenge we are working to address.

The BCEHS Proactive Recruitment team hosted 404 events across British Columbia during this reporting period, including 152 Indigenous-focused sessions with implications for 113 stations. The addition of four Indigenous Talent Acquisition Advisors helped deepen culturally informed hiring practices and strengthen community relationships. The team processed over 670 applications from rural, remote, and out-of-province candidates.

The BCEHS Proactive Recruitment team hosted 404 events across British Columbia during this reporting period, including 152 Indigenous-focused sessions with implications for 113 stations. The addition of four Indigenous Talent Acquisition Advisors helped deepen culturally informed hiring practices and strengthen community relationships.

Outreach to high schools was also expanded through the BCEHS Youth Pathways program, returning to EMR program sites to highlight BCEHS career pathways and keep future talent pipelines strong. The Proactive and Indigenous Talent Acquisition teams took part in major Pride events to support 2SLGBTQIA+ inclusion and continued to build strong partnerships with Indigenous communities, PHSA, and health sector partners to foster culturally respectful recruitment. The team remains committed to diversity, equity, and supporting BCEHS's workforce needs across the province despite ongoing staffing pressures, the recruitment team has remained focused on supporting BCEHS's workforce needs while advancing diversity, equity, and meaningful engagement across the province.

New Paramedic Hires by Area



Building a Culture of Trust, Safety, and Belonging: Progress on the BCEHS People Plan

Throughout this reporting period, BCEHS advanced key priorities of the People Plan, our three-year strategy focused on fostering a culture of trust, safety and belonging to create better experiences for all employees.

The Culture & Leadership team continued monthly culture sessions with non-unionized leaders, providing executive updates on pressing cultural issues, practical tools for leadership, brief learning sessions, and open Q&A forums. To support new employees, a comprehensive onboarding program for non-unionized leaders and staff was launched, structured around the first 30, 60, 90 days, six months, and one year. A buddy program was also introduced, pairing new leaders with experienced mentors to help them navigate their roles at BCEHS.

Coaching services remained a key support, available to all employees, from frontline supervisors to directors. In the past fiscal year, BCEHS coaches supported 105 individuals through over 217 hours of coaching and facilitated 37 team effectiveness and leadership sessions.

The Leadership Development and Organizational Development teams also launched new working groups to design programs directly shaped by employee feedback, including:

- A Mixed Generation Mentorship Program for paramedics and dispatchers
- A Women and Gender Diverse Leadership Program
- A Male Allyship Program

All programs are grounded in best practices for meaningful culture change.

The BCEHS Recognition team strengthened and coordinated several employee recognition events, including:

- **National Public Safety Telecommunicators Week (April 2024)** for dispatch employees and those who work in Patient Transfer Services
- **Paramedic Services Week (May 2024)**

As work continues to implement the long-term Culture Change Strategy, BCEHS remains focused on three priorities: ensuring both physical and psychological safety, equipping leaders to build trust within their teams, and fostering skills for healthy conflict resolution. This year, a leadership course on “Navigating Difficult Conversations” was launched. The course provides practical tools for navigating tough conversations with clarity and confidence.

Advancing Diversity, Equity, and Inclusion

The Diversity, Equity, and Inclusion (DEI) team delivered on 75 per cent of the DEI initiatives outlined in the 2023-2026 People Plan. Highlights include:

- Launching a BCEHS-specific Accessibility Strategy aligned with B.C.’s Accessibility Act
- Promoting and supporting PHSA’s DEI education offerings
- Delivering specialized training for unit chiefs, leaders, and unionized employees
- Supporting and growing employee community groups such as the Women in Paramedicine Special Interest Group (WIPSIG) and the 2SLGBTQIA+ Committee

As the percentage of women at BCEHS, including those in leadership roles, continues to grow, the DEI team also developed a Healthy Parenting and Maternity Leave Toolkit, trained leaders to better support expecting and returning parents, and contributed to uniform policy advancements, including maternity and female uniform options.

BCEHS proudly participated in more than a dozen Pride celebrations across B.C., an effort led jointly by the DEI and Proactive Recruitment teams.

To foster connection and learning on key social topics, the team launched the IDEA360 Series in fall 2024, a monthly event series covering issues such as accessibility, BIPOC (black, Indigenous, and people of colour) perspectives, sustainability, women’s leadership, and 2SLGBTQIA+ community topics.

These collective efforts are laying a strong foundation for continued leadership in diversity, equity, and inclusion at BCEHS.



Advancing Indigenous Health: A Transformative Year

In 2024/25, BCEHS marked a pivotal year for Indigenous Health with the completion and BCEHS board approval of the BCEHS Indigenous Health Strategy. This milestone reflects three years of dedicated work, shaped by deep engagement and grounded in Indigenous teachings. These include the Coast Salish teachings gifted by Musqueam Knowledge Keeper Siem Te'Ta-in and the Nuu-chah-nulth values shared by BCEHS Senior Director Hakuum.

Structured around three interconnected pillars of Community, Employee, and Patient, the Indigenous Health Strategy guides the Indigenous Health Action Plan and informs strategic initiatives across BCEHS. Its approval fulfills a key priority in the BCEHS Strategic Plan.

One of the most significant advancements this year was widespread staff participation in anti-Indigenous racism response education. By March 31, 2025:

- 91% of non-unionized staff and 72% of unionized staff completed a foundational course on anti-Indigenous racism
- 89% of non-unionized staff and 53% of unionized staff completed [San'yas](#)

This uptake signals a meaningful cultural shift within BCEHS, fostering a shared understanding of Indigenous-specific racism and systemic inequities.

At the heart of this work are BCEHS's five Indigenous Cultural Advisors (ICAs) who are trusted knowledge holders and serve as bridges between BCEHS and Indigenous patients and communities. Through community visits, event participation, advocacy, and staff support, ICAs have strengthened relationships and reinforced BCEHS's commitment to relational accountability.

Key achievements of the Indigenous Health team

- Introducing Indigenous cultural safety materials for all new hires and leaders
- Developing Indigenous-specific assessment and response guidelines for emergencies and disasters, ensuring culturally safe planning.
- Collaborating with the Clinical Hub to create care pathways that enable Indigenous patients to remain in community when clinically appropriate.
- Aligning low-acuity services and "familiar faces" care planning with Indigenous community needs, in partnership with health authorities.
- Enhancing educational resources tailored for First Nations communities.

BCEHS also advanced Indigenous patient safety and employee support by:

- Establishing a dedicated manager and patient safety reviewer to review cases involving Indigenous-specific racism or discrimination.
- Continuing work on implementing an Indigenous patient identifier within Siren, BCEHS's electronic patient care record system.
- Expanding Critical Incident Stress Management (CISM) services to include culturally aligned psychological supports for Indigenous employees.
- Updating the Employee and Family Assistance (EFAP) intake protocols to offer Indigenous clients the option of working with Indigenous-identifying counsellors.
- Increasing honoraria for Elders supporting Indigenous clients in mental health services, acknowledging the value of their cultural knowledge and time.

The progress made this year represents more than organizational milestones, it reflects a deeper cultural shift in intent, direction, and accountability. Guided by the Indigenous Health Strategy's North Star vision to eradicate Indigenous-specific racism and embed cultural safety and humility, BCEHS recognizes this as ongoing work that demands leadership, reflection, and commitment.

The Indigenous Health team continues to carry this work forward, grounded in Indigenous ways of knowing, lived experience, and enduring community relationships.



Caring for Our People

Investment in the mental wellbeing of our employees remains a high priority and continues to steadily increase. There is growing demand for employee mental health support across the province. BCEHS is continuing to take proactive measures to foster psychological resilience and ensure employees are well supported when they experience work-related incidents or personal and family matters.

Promoting Psychological Health & Safety

The Psychological Health & Safety team promotes wellbeing through education, training, consultations and other forms of support.

Discussing Psychological Wellbeing Early and Often

In 2024, the team incorporated psychological resilience content into BCEHS orientation programmes to build on these skills early and at key career milestones. The recurrence of this subject has the benefit of normalizing discussion of mental health needs and reducing stigma. Specific skill-building includes:

- Understanding the stress cycle, the effects of accumulated stress, and how to break the cycle
- Skills in self-awareness and personal regulation to foster self-agency and empowerment
- Awareness of resources and pathways to support

Supporting Leaders

After a successful pilot, 2024 saw the launch of an Introduction to Psychological Health & Safety Course for Leaders. The course provides BCEHS leaders with the following knowledge and skills:

- A foundation of understanding trauma-informed practice
- The effects of operational stress and trauma exposure
- Strategies to prioritize self-care
- A framework for communicating and checking in with employees
- Guidance on fostering a psychologically safe, inclusive workplace

Critical Incident Stress Management

The Critical Incident Stress Management (CISM) program is a confidential BCEHS initiative rooted in the gifted Coast Salish teaching of eyhh slaxin, embracing the principle of 'Good medicine.' The program is designed to mitigate the potentially adverse psychological and emotional impacts caused by incidental or cumulative critical incidents. The CISM team offers timely, evidenced-based interventions and coping strategies through peer support, clinical referrals, defusing, and debriefing.

The program also provides access to trained clinicians and psychologists for employees who have experienced a work-related event that has negatively affected their emotional wellness, with a 24/7 phone line that initiates peer check-ins and debriefings and connection to counselling.

Throughout 2024, the CISM program maintained a stable level of service while responding to a rise in the intensity and complexity of employee needs and critical incidents.



Capacity Building

In the period this report covers:

- The clinician network grew by 10.5% and now includes 376 counsellors and psychologists
- The CISM network location coverage increased by 9% and now covers 61 locations
- The number of CIS peers increased by 14% and is now a diverse group of 221 peers
- CISM facilitated 4,958 peer connections demonstrating the strength of peer support, even in a year marked by complex psychological demands and operational pressures
- New on-call peer coordinators were added to enhance regional support, improve response capacity, and ensure reliable coverage across the province

The CISM program supported 1,634 employees with 2,650 counselling referrals, 450 of whom were first-time clients of the CISM program and 1,184 of whom were returning clients who had received a referral in a previous year, marking an 18 per cent increase from 2023/24. In 2024/25, BCEHS invested \$2 million just on clinician hours alone.

Helping Injured Employees Stay Connected and Recover Faster

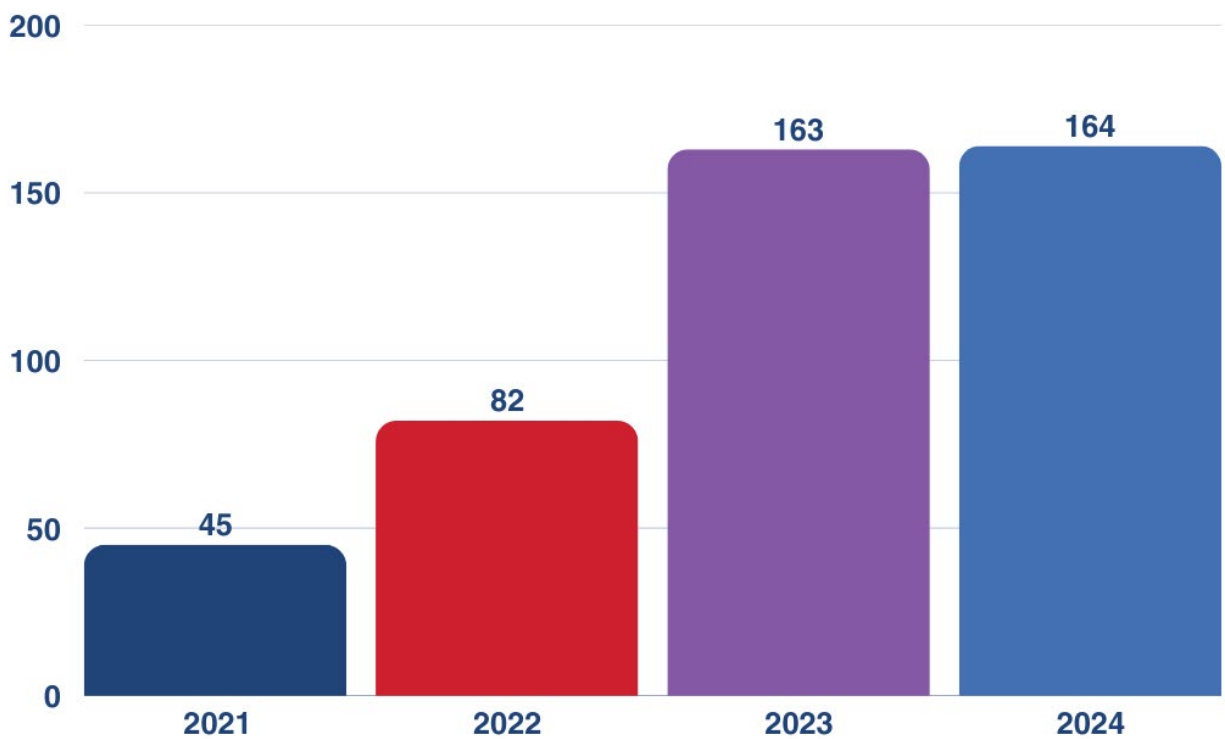
Workplace injuries happen, but recovery shouldn't mean isolation. In the past, injured employees often felt cut off from their peers, a factor that can slow recovery.

Since launching the Connect and Recover (CAR) program, BCEHS has seen clear benefits for employees through early access to physiotherapy, meaningful connection, and purposeful modified duties. What began as a small pilot has grown into a key early intervention program, developed in partnership with CUPE 873 and WorkSafeBC.

CAR offers expedited physiotherapy and helps coordinate modified duties to keep employees engaged throughout recovery. First introduced at stations in Victoria, CAR has since expanded to the Lower Mainland. As of March 31, 2024, CAR operated at four Victoria stations and 38 in the Lower Mainland, reaching more than 2,000 employees in Metro Vancouver.

Since its 2021 launch, participation has more than tripled. In early 2024, enrolment in Victoria jumped 67 per cent over the same period in 2023, with a 40 per cent increase in the Lower Mainland.

Connect and Recover Staff Enrolment



Improving Staff Engagement

In fall 2024, BCEHS launched the BCEHS Portal, a modern, mobile-friendly update to the organization's intranet. The change was met with strong early adoption: within one month, 87 per cent of employees had engaged with the platform.

The project team focused on improving the frontline employee experience and reducing friction in daily tasks to better support patient care. The BCEHS Portal also aimed to strengthen internal visibility across teams and improve collaboration.

BCEHS selected a versatile, scalable platform with strong long-term potential. The phased implementation approach provided a solid foundation for continued, user-centered improvements.

The new BCEHS Portal offers significantly improved access and functionality. By March 2025, 63.4 per cent of active users accessed the BCEHS Portal using the mobile app.

In a March 2025 employee survey, 92 per cent of respondents said the BCEHS Portal includes many or all of the features needed to succeed in their roles.

Proactive Communication and Public Engagement

The BCEHS Communications team plays a vital role in keeping employees and the public informed. The team manages internal communications, social media engagement, some community engagement, and responds to media inquiries.

Social Media Impact

BCEHS's social media presence continues to grow, with 5,198 new followers this year, a 23 per cent increase from 2023/24. Engagement rose by 23 per cent from 2023/24, with over 71,500 interactions across 1,415 posts and a 4.99 per cent engagement rate.

Video content doubled, with 50+ videos shared on topics like heat safety, CPR, AED use, road safety, and major event preparedness. Highlights included air ambulance fleet features, wildfire evacuations, and the Surrey RCMP Mental Health Outreach pilot.

The team also marked the organization's 50th anniversary by publishing [50 feature stories](#) over 12 months, about our employees and history, including popular features on Advanced Care Paramedic Peter Marochi and Infant Transport Paramedic Ray Sims.



Media Relations

Between April 2024 and March 2025, the team handled 1,579 media requests. July alone saw 202 inquiries. Nearly 10 per cent of total requests stemmed from proactive outreach like news releases and advisories.

Celebrating 50 Years of Caring

On July 1, 2024, BCEHS marked its 50th anniversary as B.C.'s provincial ambulance service. Dozens of celebrations were held across the province, many in collaboration with the Ambulance Paramedics of BC union and the BCAS 10-7 Association Society of retired employees.

To commemorate this milestone, BCEHS unveiled two special anniversary logos designed by BCEHS Senior Director Qwayacnit Hakuum (Natalee Dennis) and launched the “BCEHS Celebrates 50 Years of Caring” campaign, sharing 50 stories over 12 months, that highlighted our history, achievements, and the extraordinary people who shaped our service.



Honouring Dedication: Recognizing the Service and Excellence of Our People

Every day, BCEHS employees demonstrate extraordinary commitment. We are proud to recognize their dedication through meaningful programs that celebrate individual achievements, career milestones, and contributions to lifesaving care.

The BCEHS Recognition Team has enhanced its efforts to highlight staff achievements and foster a culture of appreciation. These programs honour employee contributions and strengthen public recognition of our shared role in delivering emergency care.

The Chief Ambulance Officer's Commendation for Excellence in Adversity, a significant honour, was created to recognize employees who perform exceptionally under pressure. Since its launch in 2021, this award has been presented to more than 230 employees who have shown extraordinary service in challenging circumstances.

In September 2024, BCEHS hosted its annual Long Service Awards ceremony, celebrating employees with 25 to 50 years of service. The BCEHS Recognition Team also revamped the Long Service Awards for those with 5 to 25 years of service, issuing monthly awards to employees reaching key anniversaries. In 2024, 782 employees were recognized for their service milestones.

BCEHS also honoured recipients of two special memorial awards:

- The **Tom St. Laurent Leadership Memorial Award**, created with the St. Laurent family, recognizes a leader who exemplifies the compassion, care, and support that defined Tom's legacy.
- The **Tony Sunderland Memorial Plaque of Pride** honours an employee whose unwavering dedication and loyalty to BCEHS reflect a deep commitment to their community.

Our employees' excellence is also recognized nationally through the Emergency Medical Services Exemplary Service Medal, administered by the Governor General's Chancellery of Honours, to honour professionals in pre-hospital care who have demonstrated exemplary service, good conduct, and efficiency for 20 years or more.

Through these recognition efforts, BCEHS celebrates not just years of service, but the professionalism, leadership, and compassion that define our people.



Recognizing Community Heroes

BCEHS doesn't just honour the contributions of its employees, we also celebrate the bravery of bystanders whose quick actions help save lives. In a medical emergency, every second counts.

When a member of the public starts CPR or provides first aid before paramedics arrive, those crucial minutes can mean the difference between life and death.

Through the Vital Link and Good Samaritan awards, BCEHS recognizes bystanders who have performed life-saving CPR or first aid. In 2024/25, we held 65 award ceremonies, honouring 160 community members for their heroic actions.

These events bring together bystanders, paramedics, and often the patients themselves. For paramedics, who rarely learn what happens after handing a patient over at the hospital, these moments offer a rare and meaningful opportunity to reconnect and see the life-saving impact of their work and the public's.

A Vital Link Award ceremony to recognize three people who provided life-saving CPR to their friend. The ceremony took place on November 27, 2024, at BCEHS Station 288 in Surrey.



On March 17, 2025, BCEHS employees gathered at Station 120 in Nanaimo to recognize Camryn McLeod. Camryn was presented with the BCEHS Vital Link Award for her brave actions that helped save her mother, Kim Macaulay.

In the early hours of December 4, 2022, Camryn was awake when she heard a sudden, loud noise. Acting on instinct, she went to investigate and found Kim collapsed and unresponsive on the floor. Camryn quickly called 911 and was guided by a BCEHS EMCT as she began performing CPR.

Despite the shock of the moment, Camryn remained focused and determined, continuing CPR until paramedics arrived.

Not long before the incident, Camryn had completed a level one first aid course, with Kim acting as her scribe. After finishing the course, Kim had joked that she hoped Camryn would never have to use those skills on her.

Thanks to Camryn's courage, quick thinking, and training, Kim survived and is here with us today.



BCEHS Foundation Revitalized

This year also saw the revitalization of the BC Emergency Health Services Foundation with the appointment of new board members.

The foundation supports the vital work of BC Emergency Health Services and the board members are experienced leaders who will help support the services BCEHS provides.

The BCEHS Foundation was created to fund initiatives and resources that directly benefit our staff, patients, and communities. Through charitable contributions, the foundation helps us advance key areas such as innovative patient care research and equipment, staff wellness and recognition initiatives and educational opportunities for our employees. During this time the foundation also launched it's website – www.bcehsf.ca.

The foundation board members are:

- Teri Nicholas (Chair)
- Barb Fitzsimmons
- Lynn Klein
- Dr. Stephen Wheeler
- Dr. Leanne Heppell

BCEHS Foundation Funding Priorities:

- Initiatives that help build the mental health and resiliency of BCEHS employees
- Specialized innovative equipment that advances the care paramedics can provide patients
- Initiatives that acknowledge employees' contributions and improve their morale and work environment
- Education opportunities that help improve the license levels and training of front-line employees
- Initiatives that improve access to emergency care in Indigenous communities
- Innovative research in out of hospital care



BC Emergency Health Services
FOUNDATION

Building Capacity for Care

Improving our capacity to provide care is an important effort that involves working with our partners, the communities we serve, and our employees. This past year, we launched the Travelling Paramedic Program, sending available paramedics to areas that need it most, as well as introducing new paramedic designations to add more flight capacity.

Advancing Care With New Flight Paramedic Roles

In early 2025, BCEHS introduced two new paramedic designations: Primary Care Flight Paramedic (PCFP) and Advanced Care Flight Paramedic (ACFP). The planning and implementation of the training for this were still underway at the time of this report.

These new designations are focused on improving outcomes for maternal, neonatal, and pediatric (MNP) patients, groups that have historically faced challenges accessing timely care, especially in areas outside the Lower Mainland. With substantially expanded scope of practice, PCFPs and ACFPs will be better equipped to manage interfacility transports for these patients.

To ensure these services reach the areas that need them most, these new resources will be in Vancouver, Prince George, Prince Rupert, Fort St. John, and Kelowna. The locations were chosen based on patient transport data, geographic need, and their proximity to underserved populations.

This initiative also introduces a new employment category within BCEHS, designed to meet the unique clinical and operational requirements of air transport for MNP patients. It reflects our commitment to innovation, workforce specialization, and improving health outcomes for vulnerable populations.

Once these new resources come online, they will help preserve current Infant Transport Team and Critical Care Paramedic resources for the most urgent and complex cases.

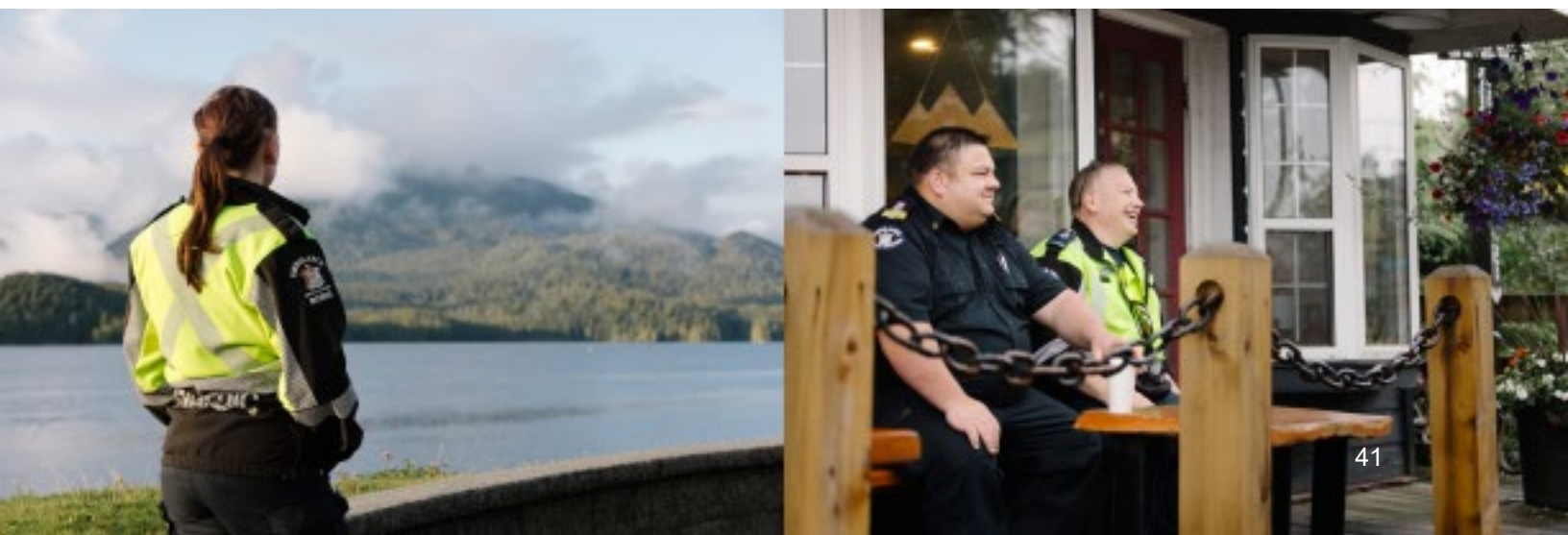
Traveling Paramedic Program: Supporting Patient Care in Rural and Remote Communities

Launched in July 2024, the Travelling Paramedic Program (TPP) was created to address staffing shortages in Northern B.C., parts of the Interior, and some Vancouver Island communities. Since then, it provides staffing support to the communities BCEHS has traditionally had challenges staffing as well as those experiencing ongoing emergency department closures or diversions.

By filling critical coverage gaps, the TPP improves response times, helps ensure consistent community emergency coverage, and supports better outcomes for patients in underserved areas while also contributing to workforce stability.

A dedicated coordination team works with traveling paramedics to arrange travel and accommodations, ensuring smooth deployment.

Since August 2024, the Travelling Paramedic Program has organized 752 paramedic tours, covering 4,013 previously unfilled shifts in high-need communities such as Port Hardy, Williams Lake, Dease Lake, Alexis Creek, and Fort St John.



Strengthening Community Response Through First Responder Services

The BCEHS First Responder Services team works with communities across the province to create agreements and collaborative programs that empower non-BCEHS first responders to deliver basic life-saving care until BCEHS paramedics arrive.

To ensure this work is both equitable and impactful, the team developed decision-making tools that prioritize support for communities with the least access to out-of-hospital care. This includes building community capacity by training residents in critical skills such as cardiopulmonary resuscitation (CPR), automated external defibrillator (AED) use, bleeding control, and naloxone (Narcan) administration, especially in remote areas far from the nearest paramedic resource. These essential skills help lay the foundation for launching new first responder programs or strengthening existing ones.

In October 2024, First Responder Services partnered with the BCEHS Youth Pathways Program and the Fort Nelson Paramedic Unit Chief to deliver community capacity-building in Prophet River First Nation. Four additional communities are set to welcome First Responder Services in Spring 2025.

Partnering with First Nations Communities

As part of BCEHS's response to the Office of the [Auditor General of British Columbia's report on access to care](#), BCEHS's First Responder Services held dedicated First Nations First Responder engagement and consultation sessions. The goal of the sessions was to ensure First Nations voices shaped the development of first responder agreements, providing the same opportunity for involvement as non-Indigenous first responder partners.

The engagement plan, approved in May 2024, was guided by the Ownership, Control, Access, and Possession (OCAP) principles. Between May and June 2024, First Responder Services reached out to 64 First Nations communities already connected with BCEHS. Ultimately, 16 distinct First Nations communities took part, with 26 participants contributing valuable insights. A final report, identifying three key areas for improvement, was submitted to the Ministry of Health in December 2024 and shared with the BCEHS senior leadership team. Work to address these areas remains ongoing.

237: Number of agreements with agencies, districts, and fire departments.

282: Number of communities covered by First Responder program agreements.

Advancing Partnership Agreements

A new First Responder Services Agreement (FRSA) and Operational Response Plan (ORP) were developed and piloted with 20 communities between September 2024 and January 2025 and refined based on direct community feedback. The final FRSA and ORP were endorsed by the Ministry of Health, the Fire Chiefs' Association of British Columbia, and BCEHS in March 2025, a significant milestone in formalizing partnerships with first responder agencies across the province.

Supporting Indigenous Rights and Self-Determination

Through this work, First Responder Services actively supports the implementation of the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) by advancing Indigenous sovereignty and self-determination in health care. These partnerships are helping to reshape emergency response in B.C. and ensuring that all communities, especially First Nations, have a voice in how care is delivered.

Photos: First Responder Services working in the Nisga'a Valley to better support the provision of prehospital care. Top: Smokehouse with oolichan cold smoking. Bottom: (L to R) Dawn Tisdale, BCEHS Indigenous Health, Don Elzinga, BCEHS First Responder Services, Corinne McKay, Nisga'a Valley Health Authority CEO, Lyndsay Kay, BCEHS First Responder Services, Rob Schlamp, BCEHS Clinical Air Operations and Professional Practice.



Evolving Community-Based Care

The BCEHS Community Paramedicine program continues to evolve to better meet the needs of the people and communities it serves. This year marked a milestone with the introduction of full-time, standalone Community Paramedic (CP) positions, a significant step forward in expanding access to proactive, community-based care.

CPs deliver a range of health services in rural areas, remote, and select urban communities, with their work grounded in four core service areas:

- Community outreach
- Health promotion
- Wellness clinics
- Home wellness checks



Community Paramedics play a particularly vital role in underserved areas, where they support aging populations and individuals with chronic or complex health needs. By filling gaps in local health systems, CPs help clients stay well at home and remain connected to care. In addition to in-person services, CPs conduct virtual wellness checks, a practice first introduced during the COVID-19 pandemic to maintain safe and consistent care. Virtual visits have since become a valuable tool to support clients in areas without CP support and help to enhance continuity of care across the province.

Partnering with Indigenous Communities

Many community paramedics are privileged to work in partnership with Indigenous communities across the province. Their practice is grounded in cultural humility and a commitment to reconciliation. CPs strive to build trust-based relationships and provide care that reflects the values, strengths, and health priorities identified by Indigenous Nations. In many areas, CPs work alongside Indigenous health teams, Elders, and community leaders to support holistic wellness. They support individuals, families, and communities, recognizing that well-being is interconnected and rooted in relationships.

With changes to staffing models, CPs are no longer routinely dispatched to 911 calls. However, they may still respond to life-threatening emergencies when they are the nearest available resource, providing critical care until an ambulance arrives.

This approach allows CPs to focus on proactive, community-based care while remaining a vital link in emergency response when needed. CPs completed 10,292 home visits over the last fiscal year, including:

CPs complete 10,292 home visits over the last fiscal year. This includes:

541 initial assessments

9,640 follow-up visits

111 in-home safety checks

1,602 virtual wellness checks, supporting 390 individuals across B.C.

The BCEHS Community Paramedicine program remains committed to strengthening local health care access, supporting Indigenous health and wellness goals, and serving communities across the province, one visit at a time.



Proactive planning

Strengthening Preparedness and Resilience at BCEHS

In late 2024, the BC Emergency Health Services **Disaster Risk Reduction and Resilience** (DR3) team reorganized into two focused portfolios: Operational Readiness and Organizational Resilience, ensuring a more targeted approach to disaster preparedness and system resilience.

Enhancing Readiness

The Operational Readiness team is dedicated to strengthening BCEHS's preparedness, planning, training, and response coordination, including oversight of specialty teams.

Key achievements in 2024 include:

- Launching seasonal readiness sessions open to all employees, featuring internal and external experts on disaster preparedness.
- Enhancing provincial response coordination, establishing clear pathways for coordination centre support and escalation.
- Implementing 24/7 intelligence gathering resources and systems.
- Developing standardized Assessment and Response Guidelines for evaluating hazards and impacts.
- Delivering in-house Incident Command System (ICS) training in partnership with Emergency Management and Climate Readiness, with ICS-100 now available to all BCEHS employees.

Building Organizational Resilience

The Organizational Resilience team focuses on ensuring BCEHS can adapt, recover, and continue providing critical services during disruptions.

In 2024, this team:

- Conducted business impact analyses and multi-day business continuity simulations.
- Developed clear, user-friendly business continuity processes for key departments and projects.
- Established a Business Continuity Steering Committee and Working Group to oversee delivery of continuity services across operations.
- Improved the after-action review process, including debriefs, rightsholder consultations, and one-on-one interviews, resulting in reports on events ranging from wildfires to mass casualty incidents.

As the risk landscape grows increasingly complex, the DR3 team remains focused on strengthening BCEHS's readiness for emerging threats and challenges.

Driving Toward a Lower-Carbon Future

BC Emergency Health Services (BCEHS) is committed to decarbonizing operations and reducing emissions and is making steady progress through focused initiatives.

Since signing the West Coast Fleet Electric Pledge in early 2022, the use of electric vehicles (EVs) in our support fleet has expanded, with future plans for EV deployment in emergency response.

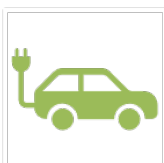
BCEHS was the first ambulance service in North America to deploy a battery electric vehicle (BEV) into code-3 service. The Paramedic Response Unit (PRU) was deployed on its first code-3 call in June 2023. The first Ford Mustang Mach-E received into the BCEHS fleet has served as a technology test subject and proof-of-concept vehicle, notching up several firsts along the way, including being the first EV in the BCEHS fleet and the first code-3 paramedic response EV in North America.

Each support vehicle replaced by an EV contributes
to a lifetime savings of \$162,769 over 10 years
(mostly in fuel costs) and an emissions reduction of
138 tonnes of CO₂e.

Over the past year, fleet decarbonization has been advanced by:

- Appointing a fleet decarbonization manager to lead strategy and implementation.
- Expanding our vehicle telemetry pilot to collect critical data that will guide future decisions.
- Sharing updated ambulance bay guidelines, including EV charging requirements, with health authorities to support infrastructure planning.
- Strengthening partnerships with public agencies, health authorities, and municipalities.
- Deploying three Ford eTransit electric vans for clinical logistics support.
- Commissioning a feasibility study on EV charger and battery storage installations at Delta Hospital and Station 251 in Delta, to prepare for future EV expansion.

The BCEHS low-emission fleet has also grown, adding both electric and hybrid vehicles. To date, we've deployed 18 battery electric vehicles (BEVs), supported by the Provincial Carbon Neutral Capital Program (CNCP), and placed 70 hybrid-electric Ford Interceptors into frontline service, reducing emissions while maintaining readiness. These efforts reflect our commitment to environmental leadership and operational sustainability.



3.2M hybrid & 350k electric
zero-emission
kilometers in-
service by 2024
year-end.



**166k emission-
free kilometers** in
the last half of
2024.



26,065 kWh
delivered from
BCEHS' own Level
II chargers in 2024



**Over 250,000
liters and \$450k**
in **fuel savings** to
date from EV and
HEV operations.



270 tonnes CO2e
saved annually
from the EV and
HEV fleet.

In 2024, our fleet team focused on the Ford Transit ambulance project. The introduction of these vehicles is expected to lower fuel costs and reduce emissions. This new model will feature a more efficient turbocharged engine, better aerodynamics, and improved visibility and comfort for drivers. It also includes lithium-ion auxiliary batteries and an idle-free system to keep the patient area at the right temperature without running the engine. With future potential for hybrid or electric upgrades, the Ford Transit is an encouraging step toward a greener fleet and is expected to cut fuel use and emissions by at least 15 per cent.

Building for the Future of BCEHS

BCEHS has seen a significant increase in the number of established high school Emergency Medical Responder (EMR) programs and continues to expand opportunities for young adults through community-based training camps and riding third (on ambulance observation) experiences.

The Youth Pathways program introduces high school students to the world of emergency health services. For Grades 11 and 12, this includes partnerships with schools, the Justice Institute of British Columbia (JIBC), and the Columbia Medical Program to deliver EMR training, taught by high school faculty. The course covers basic anatomy and physiology, emergency response protocols, and hands-on skills to prepare students for EMR certification which is an entry point into emergency medical services and health care related careers.

The Youth Pathways program experienced remarkable growth in 2024/25 as the program has been successfully implemented in 12 schools. In June 2024, 50 students graduated, and 37 earned their EMR licenses. By June 2025, nearly 200 students are expected to complete the course, with many pursuing their EMR license.

This program not only offers students a unique pathway into health care but also contributes to building emergency response capacity in their communities. Multiple schools have now opted to offer this program in both semesters in the school year.

Youth engagement was also strengthened through training held in Lax Kw'alaams, Prophet River, Ucluelet, and Ahousaht. These sessions focused on essential skills such as CPR/AED, Stop the Bleed, and the use of Narcan in overdoses.

Looking ahead, 16 schools have confirmed participation in the high school Emergency Medical Responder program for 2025/26, with more in development. The Youth Observer Program for 17- and 18-year-olds continues to draw strong interest from young adults eager to gain hands-on experience riding on an ambulance with paramedic crews. This year, 37 successful applicants were selected to participate. Several of these applicants have now turned 19-years-old and have been hired by BCEHS.

The continued success of the BCEHS Youth Pathways program was recognized in March 2024, when program leader Deborah Roberts received a BC Quality Award, nominated by PHSA. This honour reflects the program's growing impact and contribution to the future of emergency health services in B.C.

Looking Ahead: Advancing Care, Culture, and Connection

The year ahead marks a period of significant change for both BCEHS and the broader B.C. health system. We remain focused on operational efficiencies that protect and prioritize frontline services, guided by the priorities in our Indigenous Health Strategy, Strategic Plan, and People Plan.

Supporting our people remains a priority with continued investment in both physical and mental health supports, leadership development, and workplace culture.

We will continue to improve the care we provide to patients and communities and work with our partners to stabilize staffing in rural and remote communities.

Strengthening relationships with Indigenous leaders and communities will continue to be a priority, advancing meaningful partnerships, and making deliberate, large-scale efforts to eliminate Indigenous-specific racism within BCEHS.

We will also continue to advance key system improvements, including decarbonizing our fleet and supporting more paramedics to advance their skills and scope of practice.

The path forward is clear at BCEHS: we will keep building frontline capacity, deepening important community, health authority and partner connections, and fostering a stronger, more resilient BCEHS for our people, patients, and communities.

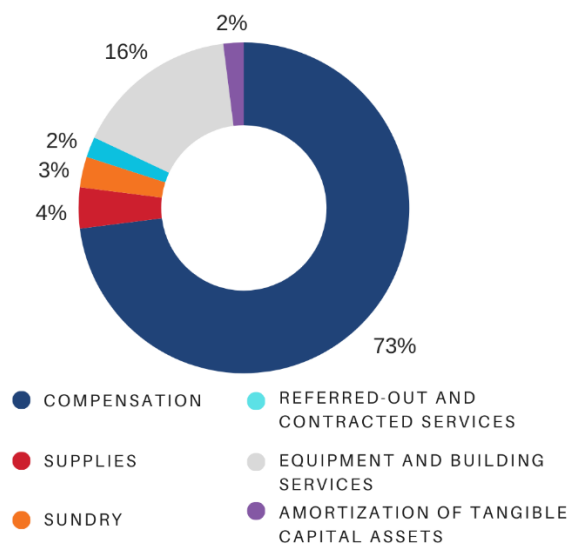


Financials

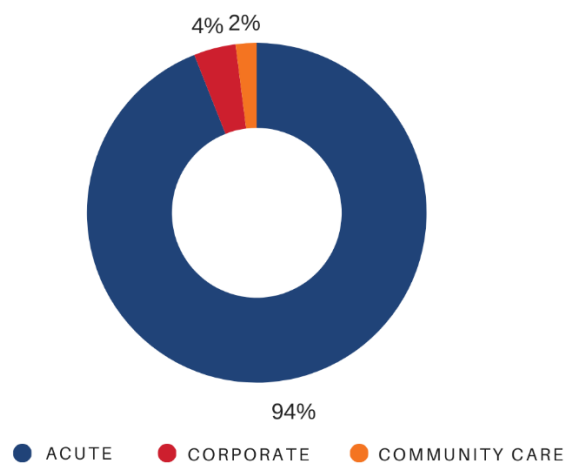
STATEMENT OF OPERATIONS – SUMMARY OF EXPENSES Year ended March 31, 2025

COMPENSATION	\$780,153,000
REFERRED OUT AND CONTRACTED SERVICES	
Health and other support services providers	\$27,282,000
Other health authorities and BC government reporting entities	\$17,087,000
	\$44,369,000
SUPPLIES	
Drugs and medical gases	\$4,636,000
Medical and surgical	\$8,791,000
All other supplies	
	\$39,440,000
EQUIPMENT & BUILDING SERVICES	\$178,179,000
SUNDRY	\$29,283,000
AMORTIZATION OF TANGIBLE CAPITAL ASSETS	\$20,637,000
EXPENSES	\$1,092,360,000

2023/24 EXPENSES



EXPENSES BY OPERATIONAL AREA





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