

Financial Statements of

**BRITISH COLUMBIA EMERGENCY
HEALTH SERVICES**

Year ended March 31, 2018



May 28, 2018

Independent Auditor's Report

To the Board of British Columbia Emergency Health Services

We have audited the accompanying financial statements of British Columbia Emergency Health Services, which comprise the statement of financial position as at March 31, 2018 and the statements of operations and accumulated deficit, changes in net debt and cash flows for the year then ended, and the related notes, which comprise a summary of significant accounting policies and other explanatory information.

Management's responsibility for the financial statements

Management is responsible for the preparation of these financial statements in accordance with the accounting requirements of Section 23.1 of the *Budget Transparency and Accountability Act* of the Province of British Columbia, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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Opinion

In our opinion, the financial statements which comprise the statement of financial position as at March 31, 2018 and the statements of operations and accumulated deficit, changes in net debt and cash flows for the year ended, and the related notes, are prepared, in all material respects, in accordance with the accounting requirements of Section 23.1 of the *Budget Transparency and Accountability Act* of the Province of British Columbia.

Emphasis of matter

Without modifying our opinion, we draw attention to note 1 to the financial statements, which describes the basis of accounting and the significant differences between such basis of accounting and Canadian public sector accounting standards. Note 13 to the financial statements discloses the impact of these differences.

PricewaterhouseCoopers LLP

Chartered Professional Accountants

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Statement of Financial Position
(Amounts expressed in thousands of dollars)

As at March 31, 2018

	2018	2017
Financial assets		
Cash and cash equivalents	\$ 7,979	\$ 5,735
Accounts receivable (note 2)	51,818	48,286
	59,797	54,021
Liabilities		
Accounts payable and accrued liabilities (note 3)	59,558	53,718
Retirement allowance (note 4(a))	3,284	3,314
Deferred capital contributions (note 5)	50,868	53,728
	113,710	110,760
Net debt	\$ (53,913)	\$ (56,739)
Non-financial assets		
Tangible capital assets (note 6)	\$ 52,312	\$ 55,245
Prepaid expenses	1,339	1,133
	53,651	56,378
Accumulated deficit	\$ (262)	\$ (361)

Commitments and contingencies (note 7)

See accompanying notes to financial statements.

Approved on behalf of the Board:



Director and Chair of the Board



Director

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Statement of Operations and Accumulated Deficit
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018 Budget (note 1(k))	2018	2017
Revenues:			
Provincial Health Services Authority contributions	\$ 398,871	\$ 439,791	\$ 384,691
Recoveries from other health authorities and BC government reporting entities	-	21,316	23,208
Amortization of deferred capital contributions (note 5)	11,953	11,965	11,740
Other (note 8(a))	26,107	5,494	4,751
Other contributions	-	12	-
Medical Services Plan	-	-	10
	<u>436,931</u>	<u>478,578</u>	<u>424,400</u>
Expenses (note 8(b)):			
Acute	399,751	439,381	391,155
Corporate	16,368	20,520	16,368
Community care	20,812	18,578	16,731
	<u>436,931</u>	<u>478,479</u>	<u>424,254</u>
Annual surplus	\$ -	\$ 99	\$ 146
Accumulated deficit, beginning of year	(361)	(361)	(507)
Accumulated deficit, end of year	\$ (361)	\$ (262)	\$ (361)

See accompanying notes to financial statements.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Statement of Changes in Net Debt
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018 Budget (note 1(k))	2018	2017
Annual surplus	\$ -	\$ 99	\$ 146
Acquisition of tangible capital assets	(9,900)	(9,032)	(11,386)
Amortization of tangible capital assets	11,983	11,944	11,741
Net book value of disposed tangible capital assets	-	21	30
	2,083	3,032	531
Acquisition of prepaid expenses	-	(43,232)	(39,231)
Use of prepaid expenses	-	43,026	39,067
	-	(206)	(164)
Decrease in net debt	2,083	2,826	367
Net debt, beginning of year	(56,739)	(56,739)	(57,106)
Net debt, end of year	\$ (54,656)	\$ (53,913)	\$ (56,739)

See accompanying notes to financial statements.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Statement of Cash Flows
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018	2017
Cash flows from (used in) operating activities:		
Annual surplus	\$ 99	\$ 146
Items not involving cash:		
Amortization of deferred capital contributions	(11,965)	(11,740)
Amortization of tangible capital assets	11,944	11,741
Net book value of disposed tangible capital assets	21	30
Retirement allowance expense	137	134
	236	311
Net change in non-cash operating items (note 9)	2,102	981
Retirement allowance benefits paid	(167)	(147)
Net change in cash from operating activities	2,171	1,145
Capital activities:		
Acquisition of tangible capital assets	(9,032)	(11,333)
Net change in cash from capital activities	(9,032)	(11,333)
Financing activities:		
Capital contributions	9,105	11,257
Net change in cash from financing activities	9,105	11,257
Increase in cash and cash equivalents	2,244	1,069
Cash and cash equivalents, beginning of year	5,735	4,666
Cash and cash equivalents, end of year	\$ 7,979	\$ 5,735

Supplementary cash flow information (note 9)

See accompanying notes to financial statements.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

The British Columbia Emergency Health Services (the "Corporation"), formerly the Emergency and Health Services Commission ("EHSC"), was established as a corporation on April 1, 2013 by Bill 7 – 2013, *Emergency and Health Services Amendment Act, 2013*.

The Corporation is a member of the Provincial Health Services Authority ("PHSA" or the "Authority"), which was created under the *Society Act of British Columbia* on December 12, 2001 with a Board of Directors appointed by the Ministry of Health (the "Ministry"). PHSA is one of six health authorities in British Columbia ("BC"). Effective April 1, 2011, the financial operations of the EHSC were transferred to the Authority to align BC's pre-hospital services with the health care system.

The Corporation is dependent on the Ministry to provide sufficient funds to continue operations, replace essential equipment and complete its capital projects. The Corporation is a not-for-profit organization under the *Income Tax Act* and, as such, is exempt from income and capital taxes.

The following agencies/programs (collectively referred to as "Agencies") are also included in PHSA's mandate:

- British Columbia Cancer Agency Branch;
- British Columbia Centre for Disease Control and Prevention Society Branch;
- British Columbia Mental Health Society Branch;
- British Columbia Provincial Renal Agency;
- British Columbia Transplant Society Branch;
- Cardiac Services British Columbia;
- Children's & Women's Health Centre of British Columbia Branch;
- Correctional Health Services; and
- Forensic Psychiatric Services Commission.

The Corporation has a mandate of providing provincial ambulance and emergency health services. The Corporation oversees BC Ambulance Service, BC Patient Transfer Network and Community Paramedicine.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies:

(a) Basis of accounting:

The financial statements have been prepared in accordance with Section 23.1 of the *Budget Transparency and Accountability Act* of the Province of BC supplemented by Regulations 257/2010 and 198/2011 issued by the Province of BC Treasury Board, referred to as the financial reporting framework (the “framework”).

The *Budget Transparency and Accountability Act* requires that the financial statements be prepared in accordance with the set of standards and guidelines that comprise generally accepted accounting principles for senior governments in Canada, or if the Treasury Board makes a regulation, the set of standards and guidelines that comprise generally accepted accounting principles for senior governments in Canada as modified by the alternate standard or guideline or part thereof adopted in the regulation.

Regulation 257/2010 requires all tax-payer supported organizations in the Schools, Universities, Colleges and Hospitals sectors to adopt Canadian public sector accounting standards (“PSAS”) issued by the Public Sector Accounting Board (“PSAB”) without any PS 4200 series.

Regulation 198/2011 requires that restricted contributions received or receivable are to be reported as revenue depending on the nature of the restrictions on the use of the funds by the contributors as follows:

- (i) Contributions for the purpose of acquiring or developing a depreciable tangible capital asset or contributions in the form of a depreciable tangible capital asset, in each case for use in providing services, are recorded and referred to as deferred capital contributions, and recognized in revenue at the same rate that amortization of the related tangible capital asset is recorded. The reduction of the deferred capital contributions and the recognition of the revenue are accounted for in the fiscal periods during which the tangible capital asset is used to provide services. If the depreciable tangible capital asset funded by a deferred contribution is written down, a proportionate share of the deferred capital contribution is recognized as revenue during the same period.
- (ii) Contributions externally restricted for specific purposes other than those for the acquisition or development of a depreciable tangible capital asset are recorded as deferred operating contributions or deferred research and designated contributions, and recognized in revenue in the year in which the stipulation or restriction on the contributions has been met by the Corporation.

For BC tax-payer supported organizations, these contributions include government transfers and externally restricted contributions.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(a) Basis of accounting (continued):

The accounting policy requirements under Regulation 198/2011 are significantly different from the requirements of PSAS which require that:

- government transfers, which do not contain a stipulation that creates a liability, be recognized as revenue by the recipient when approved by the transferor and the eligibility criteria have been met in accordance with PS 3410, *Government Transfers*;
- externally restricted contributions be recognized as revenue in the period in which the resources are used for the purpose or purposes specified, in accordance with PS 3100, *Restricted Assets and Revenues*; and
- deferred contributions meet liability criteria in accordance with PS 3200, *Liabilities*.

As a result, revenue recognized in the statement of operations and certain deferred capital contributions would be recorded differently under PSAS. The impact of accounting for restricted contributions in accordance with Regulation 198/2011 is disclosed in note 13.

(b) Cash and cash equivalents:

Cash and cash equivalents consists of cash on hand.

(c) Accounts receivable:

Accounts receivable are recorded at amortized cost less an amount for valuation allowance. Valuation allowances are made to reflect accounts receivable at the lower of amortized cost and the net recoverable value when risk of loss exists. Changes in valuation allowance are recognized in the statement of operations.

(d) Asset retirement obligations:

The Corporation recognizes an asset retirement obligation in the period in which it incurs a legal or constructive obligation associated with the retirement of a tangible capital asset, including leasehold improvements resulting from the acquisition, construction, development, and/or normal use of the asset.

The obligation is measured at the best estimate of the future cash flows required to settle the liability, discounted at estimated credit-adjusted risk-free discount rates. The estimated amount of the asset retirement cost is capitalized as part of the carrying value of the related tangible capital asset and is amortized over the life of the asset.

The liability is accreted to reflect the passage of time. At each reporting date, the Corporation reviews its asset retirement obligations to reflect current best estimates. Asset retirement obligations are adjusted for changes in factors such as the amount or timing of the expected underlying cash flows, or discount rates, with the offsetting amount recorded to the carrying amount of the related asset.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(e) Employee benefits:

(i) Defined benefit obligations, including multiple employer benefit plans:

Liabilities, net of plan assets, are recorded for employee retirement allowance benefits and multiple employer defined long-term disability and health and welfare benefits plans as employees render services to earn the benefits.

The actuarial determination of the accrued benefit obligations uses the projected benefit method prorated on service which incorporates management's best estimate of future salary levels, other cost escalation, retirement ages of employees and other actuarial factors. Plan assets are measured at fair value.

The cumulative unrecognized actuarial gains and losses on retirement allowance benefits are amortized over the expected average remaining service period of active employees covered under the plan. The expected average remaining service period of the active covered employees entitled to retirement allowance benefits is 11 years (2017 – 11 years). Actuarial gains and losses on event-driven benefits such as long-term disability and health and welfare benefits that do not vest or accumulate are recognized immediately.

The discount rate used to measure the obligations is based on the Province of BC's cost of borrowing, if there are no plan assets. Where there are plan assets, the discount rate is the rate of return on plan assets. The cost of a plan amendment or the crediting of past service is accounted for entirely in the year that the plan change is implemented.

(ii) Defined contribution plans and multi-employer benefit plans:

Defined contribution plan accounting is applied to multi-employer defined benefit plans and, accordingly, contributions are expensed when they become payable.

(iii) Accumulating, non-vesting benefit plans:

Benefits that accrue to employees, which do not vest, such as sick leave banks for certain employee groups, are accrued as the employees render services to earn the benefits, based on estimates of the expected future settlements.

(iv) Non-accumulating, non-vesting benefit plans:

For benefits that do not vest or accumulate, a liability is recognized when an event that obligates the Corporation to pay benefits occurs.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(f) Non-financial assets:

(i) Tangible capital assets:

Tangible capital assets are recorded at cost, which includes amounts that are directly attributable to acquisition, construction, development or betterment of the asset and overhead directly attributable to construction and development. Interest is capitalized over the development period whenever external debt is issued to finance the construction and development of tangible capital assets.

The cost, less residual value, of the tangible capital assets, excluding land, is amortized on a straight-line basis over their estimated useful lives as follows:

Asset	Basis
Buildings	15 – 50 years
Equipment	3 – 20 years
Information systems	3 – 5 years
Leasehold improvements	Lease term to a maximum of 20 years
Vehicles	4 – 7 years

Assets under construction or development are not amortized until the asset is available for productive use.

Tangible capital assets are written down when conditions indicate that they no longer contribute to the Corporation's ability to provide services, or when the value of future economic benefits associated with the tangible capital assets is less than their net book value. The write-downs of tangible capital assets are recorded in the statement of operations. Write-downs are not subsequently reversed.

Contributed tangible capital assets are recorded at their fair value on the date of contribution. Such fair value becomes the cost of the contributed asset. When fair value of a contributed asset cannot be reliably determined, the asset is recorded at nominal value.

(ii) Prepaid expenses:

Prepaid expenses are recorded at cost and amortized over the period during which the service benefits are received.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(g) Revenue recognition:

Under the *Hospital Insurance Act and Regulation* thereto, the Corporation is funded primarily by the Province of BC in accordance with budget management plans and performance agreements established and approved by the Ministry.

Revenues are recognized on an accrual basis in the period in which the transactions or events occurred that gave rise to the revenues, the amounts are considered to be collectible and can be reasonably estimated.

Revenues related to fees or services received in advance of the fees being earned or the services being performed are deferred and recognized when the fees are earned or services are performed.

Unrestricted contributions are recognized as revenue when receivable if the amounts can be estimated and collection is reasonably assured.

Externally restricted contributions are recognized as revenue depending on the nature of the restrictions on the use of the funds by the contributors as described in note 1(a).

Volunteers contribute a significant amount of their time each year to assist the Corporation in carrying out its programs and services. Because of the difficulty of determining their fair value, contributed services are not recognized in these financial statements.

Contributions of assets, supplies and services that would otherwise have been purchased are recorded at fair value at the date of contribution, provided fair value can be reasonably determined.

Contributions for the acquisition of land, or contributions of land, are recorded as revenue in the period of acquisition or transfer of title.

(h) Measurement uncertainty:

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period.

Significant areas requiring the use of estimates include the valuation of accounts receivable, the estimated useful lives of tangible capital assets, amounts to settle asset retirement obligations, contingent liabilities and the future costs to settle employee benefit obligations.

Estimates are based on the best information available at the time of preparation of the financial statements and are reviewed annually to reflect new information as it becomes available. Actual results could differ from the estimates.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(i) Foreign currency translation:

The Corporation's functional currency is the Canadian dollar. The Corporation does not have significant transactions denominated in foreign currencies.

(j) Financial instruments:

Financial instrument classification is determined upon inception and financial instruments are not reclassified into another measurement category for the duration of the period they are held.

Financial assets and financial liabilities, other than derivatives, equity instruments quoted in an active market and financial instruments designated at fair value, are measured at cost or amortized cost upon their inception and subsequent to initial recognition. Cash and cash equivalents are measured at cost. Accounts receivable are recorded at cost less any amount for valuation allowance. All other financial liabilities are recorded using cost or amortized cost.

Interest and dividends attributable to financial instruments are reported in the statement of operations.

All financial assets recorded at amortized cost are tested annually for impairment. When financial assets are impaired, impairment losses are recorded in the statement of operations.

For financial instruments measured using amortized cost, the effective interest rate method is used to determine interest revenue or expense.

Transaction costs for financial instruments measured using cost or amortized cost are added to the carrying value of the financial instrument. Transaction costs for financial instruments measured at fair value are expensed when incurred.

A financial liability or its part is derecognized when it is extinguished.

Management evaluates contractual obligations for the existence of embedded derivatives and elects to either designate the entire contract for fair value measurement or separately measure the value of the derivative component when characteristics of the derivative are not closely related to the economic characteristics and risks of the contract itself. Contracts to buy or sell non-financial items for the Corporation's normal purchase, sale or usage requirements are not recognized as financial assets or financial liabilities.

(k) Budget figures:

Budget figures have been provided for comparative purposes and have been derived from the Corporation's Fiscal 2017/2018 Budget approved by the Board of Directors on October 26, 2017 as part of the Authority's Service Plan. The budget is reflected in the statement of operations and accumulated deficit and the statement of changes in net debt.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(l) Newly adopted accounting standards:

Effective April 1, 2017, the Corporation adopted the following new accounting standards:

- (i) PS 2200, *Related Party Disclosures*. PS 2200 defines a related party and establishes disclosures required for related party transactions. Disclosure of information about related party transactions and the relationship underlying them is required when the transactions have occurred at a value different from that which would have been arrived at if the parties were unrelated, and the transactions have, or could have, a material financial effect on the financial statements.
- (ii) PS 3420, *Inter-entity Transactions*. PS 3420 establishes standards of how to account for and report transactions between public sector entities that comprise a government reporting entity from both a provider and a recipient perspective. Requirements of this standard are considered in conjunction with requirements of PS 2200.
- (iii) PS 3210, *Assets*. PS 3210 provides guidance for applying the definition of assets set out in PS 1000, *Financial Statement Concepts*, and establishes general disclosure standards for assets. Disclosure of information about the major categories of assets that are not recognized is required. When an asset is not recognized because a reasonable estimate of the amount involved cannot be made, a disclosure should be provided.
- (iv) PS 3320, *Contingent Assets*. PS 3320 defines and establishes disclosure standards for contingent assets. Contingent assets are possible assets arising from existing conditions or situations involving uncertainty. Disclosure of information about contingent assets is required when the occurrence of the confirming future event is likely.
- (v) PS 3380, *Contractual Rights*. PS 3380 defines and establishes disclosure standards for contractual rights. Contractual rights are rights to economic resources arising from contracts or agreements that will result in both an asset and revenue in the future. Disclosure of information about contractual rights is required including description of their nature and extent, and the timing.

2. Accounts receivable:

	2018	2017
Provincial Health Services Authority	\$ 47,283	\$ 44,210
Other health authorities and BC government reporting entities	14,129	12,141
Federal government	814	548
Ministry of Health	41	24
Other	1,242	961
	63,509	57,884
Allowance for doubtful accounts	(11,691)	(9,598)
	\$ 51,818	\$ 48,286

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

3. Accounts payable and accrued liabilities:

	2018	2017
Trade accounts payable and accrued liabilities	\$ 32,315	\$ 31,095
Salaries and benefits payable	20,350	16,422
Accrued vacation pay	6,893	6,201
	\$ 59,558	\$ 53,718

4. Employee benefits:

(a) Retirement allowance:

Certain employees with ten or more years of service and having reached a certain age are entitled to receive special payments upon retirement or as specified by collective or employee agreements. These payments are based upon accumulated sick leave credits and entitlements for each year of service.

The Corporation's liabilities are based on an actuarial valuation as at the early measurement date of December 31, 2015 and extrapolated to March 31, 2018 from which the service cost and interest cost components of expense for the fiscal year ended March 31, 2018 are derived. The next expected valuation will be as of December 31, 2018.

Information about retirement allowance benefits is as follows:

	2018	2017
Accrued benefit obligation:		
Severance benefits	\$ 1,997	\$ 2,017
Sick leave benefits	339	343
	2,336	2,360
Unamortized actuarial gain	948	954
Accrued benefit liability	\$ 3,284	\$ 3,314

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

4. Employee benefits (continued):

(a) Retirement allowance (continued):

The accrued benefit liability for retirement allowance reported on the statement of financial position is as follows:

	2018	2017
Accrued benefit liability, beginning of year	\$ 3,314	\$ 3,327
Net benefit expense:		
Current service cost	158	157
Interest expense	93	91
Amortization of actuarial gain	(114)	(114)
Net benefit expense	137	134
Benefits paid	(167)	(147)
Accrued benefit liability, end of year	\$ 3,284	\$ 3,314

The significant actuarial assumptions adopted in measuring the Corporation's accrued retirement benefit obligation are as follows:

	2018	2017
Accrued benefit obligation as at March 31:		
Discount rate	4.01%	3.86%
Rate of compensation increase	2.50%	2.50%
Benefit costs for years ended March 31:		
Discount rate	3.86%	3.93%
Rate of compensation increase	2.50%	2.50%
Expected future inflationary increases	2.00%	2.00%

(b) Healthcare Benefit Trust benefits:

The Healthcare Benefit Trust (the "Trust") administers long-term disability benefits and group life insurance, accidental death and dismemberment, extended health and dental claims ("health and welfare benefits") for certain employee groups of the Corporation and other provincially funded organizations.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

4. Employee benefits (continued):

(b) Healthcare Benefit Trust benefits (continued):

(i) Long-term disability and health and welfare benefits:

The Trust is a multiple employer plan with respect to long-term disability benefits initiated after September 30, 1997 and health and welfare benefits after December 31, 2014. The assets and liabilities for these long-term disability and health and welfare benefits have been segregated for PHSA, but not for individual branches of PHSA. Accordingly, the Corporation participates in a multi-employer defined benefit plan for long-term disability and health and welfare benefits that is now restricted to members of PHSA.

The most recent actuarial valuation for the PHSA plan at December 31, 2017 extrapolated to March 31, 2018 indicated a deficit of \$2,347 (2017 – deficit of \$5,803). Contributions of \$9,209 (2017 – \$7,442) were expensed during the year. The PHSA plan covers approximately 6,300 active employees, of which approximately 1,900 are employees of the Corporation (2017 – 1,800). The next expected valuation will be as of December 31, 2018.

(ii) Joint benefit trusts:

The 2014-2019 Health Science Professionals Bargaining Association, Community Bargaining Association and Facilities Bargaining Association collective agreements include provisions to establish joint benefit trusts (“JBTs”) to provide long-term disability and health and welfare benefits to the employees covered by these agreements. Effective April 1, 2017, management of the long-term disability and health and welfare benefits being provided to these employee groups through Healthcare Benefit Trust transitioned to the JBTs.

During the year ended March 31, 2018, the Branch contributed \$247 to the Joint Facilities Benefits Trust.

(c) Employee pension benefits:

The Corporation and its employees contribute to the Municipal Pension Plan and the Public Service Pension Plan, multi-employer defined benefit pension plans governed by the *BC Public Sector Pension Plans Act*, and to the Ambulance Paramedics of British Columbia – C.U.P.E. Local 873 Supplemental Pension Plan.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

4. Employee benefits (continued):

(c) Employee pension benefits (continued):

Employer contributions to the Municipal Pension Plan of \$1,932 (2017 – \$1,935) were expensed during the year. Every three years, an actuarial valuation is performed to assess the financial position of the plan and the adequacy of plan funding. The most recent actuarial valuation for the plan at December 31, 2015 indicated a funding surplus of approximately \$2,224,000. The actuary does not attribute portions of the surplus to individual employers. The plan covers approximately 193,000 active members, of which approximately 300 are employees of the Corporation (2017 – 290). The next expected valuation will be as of December 31, 2018, with results available in 2019.

Employer contributions to the Public Service Pension Plan of \$18,042 (2017 – \$16,227) were expensed during the year. Every three years, an actuarial valuation is performed to assess the financial position of the plan and the adequacy of plan funding. The most recent actuarial valuation for the plan at March 31, 2017 indicated a funding surplus of approximately \$1,896,000. The actuary does not attribute portions of the surplus to individual employers. The plan covers approximately 59,000 active members, of which approximately 3,600 are employees of the Corporation (2017 – 3,600). The next actuarial valuation will be as of March 31, 2020, with results available in 2021.

The Ambulance Paramedics of British Columbia – C.U.P.E. Local 873 Supplemental Pension Plan is a single employer defined contribution plan. Employer contributions to the Ambulance Paramedics of British Columbia – C.U.P.E. Local 873 Supplemental Pension Plan of \$3,268 were expensed during the year (2017 – \$2,807). As at March 31, 2018, the plan covered approximately 1,700 (2017 – 1,400) active members, all of which are employees of the Corporation.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

5. Deferred capital contributions:

Deferred capital contributions represent externally restricted contributions and other funding received for the purchase of tangible capital assets.

	2018	2017
Deferred capital contributions, beginning of year	\$ 53,728	\$ 54,211
Capital contributions received:		
Provincial Health Services Authority	8,978	11,189
Other	127	238
	9,105	11,427
Amortization for the year	(11,965)	(11,740)
Transfers to other Agencies	-	(170)
Deferred capital contributions, end of year	\$ 50,868	\$ 53,728

Deferred capital contributions comprise the following:

	2018	2017
Contributions used to purchase tangible capital assets	\$ 50,294	\$ 53,228
Unspent contributions	574	500
	\$ 50,868	\$ 53,728

6. Tangible capital assets:

Cost	2017	Additions	Disposals	Transfers	2018
Land	\$ 1,837	\$ -	\$ -	\$ -	\$ 1,837
Buildings	8,911	-	-	-	8,911
Equipment	15,432	174	-	-	15,606
Information systems	14,635	37	-	-	14,672
Leasehold improvements	17,094	-	-	-	17,094
Vehicles	81,239	7,888	(6,398)	-	82,729
Construction in progress	-	79	-	-	79
Equipment and information systems in progress	1,520	854	-	-	2,374
Total	\$ 140,668	\$ 9,032	\$ (6,398)	\$ -	\$ 143,302

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

6. Tangible capital assets (continued):

Accumulated amortization	2017	Amortization	Disposals	Transfers	2018
Buildings	\$ 1,595	\$ 421	\$ -	\$ -	\$ 2,016
Equipment	13,071	738	-	-	13,809
Information systems	11,684	1,421	-	-	13,105
Leasehold improvements	9,468	1,790	-	-	11,258
Vehicles	49,605	7,574	(6,377)	-	50,802
Total	\$ 85,423	\$ 11,944	\$ (6,377)	\$ -	\$ 90,990

Cost	2016	Additions	Disposals	Transfers	2017
Land	\$ 1,837	\$ -	\$ -	\$ -	\$ 1,837
Buildings	7,099	-	-	1,812	8,911
Equipment	14,993	65	-	374	15,432
Information systems	11,492	10	-	3,133	14,635
Leasehold improvements	16,501	53	-	540	17,094
Vehicles	75,303	10,187	(4,251)	-	81,239
Construction in progress	2,170	94	-	(2,264)	-
Equipment and information systems in progress	4,138	977	-	(3,595)	1,520
Total	\$ 133,533	\$ 11,386	\$ (4,251)	\$ -	\$ 140,668

Accumulated amortization	2016	Amortization	Disposals	Transfers	2017
Buildings	\$ 1,173	\$ 422	\$ -	\$ -	\$ 1,595
Equipment	12,222	849	-	-	13,071
Information systems	10,701	983	-	-	11,684
Leasehold improvements	7,663	1,805	-	-	9,468
Vehicles	46,144	7,682	(4,221)	-	49,605
Total	\$ 77,903	\$ 11,741	\$ (4,221)	\$ -	\$ 85,423

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
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Year ended March 31, 2018

6. Tangible capital assets (continued):

Net book value	2018	2017
Land	\$ 1,837	\$ 1,837
Buildings	6,895	7,316
Equipment	1,797	2,361
Information systems	1,567	2,951
Leasehold improvements	5,836	7,626
Vehicles	31,927	31,634
Construction in progress	79	-
Equipment and information systems in progress	2,374	1,520
Total	\$ 52,312	\$ 55,245

Tangible capital assets are funded as follows:

	2018	2017
Deferred capital contributions	\$ 50,294	\$ 53,228
Internally funded	2,018	2,017
Tangible capital assets	\$ 52,312	\$ 55,245

7. Commitments and contingencies:

(a) Construction in progress:

As at March 31, 2018, the Corporation had outstanding commitments for construction in progress of \$1,515 (2017 – \$2,485).

(b) Contractual obligations:

The Corporation has entered into various contracts for services within the normal course of operations. The estimated contractual obligations under these contracts are as follows:

2019	\$ 18,768
2020	4,066
2021	3,519
2022	3,519
2023	3,519
Thereafter	207,481
	\$ 240,872

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
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Year ended March 31, 2018

7. Commitments and contingencies (continued):

(c) Operating leases:

The aggregate minimum future annual rentals under operating leases are as follows:

2019	\$	7,756
2020		6,998
2021		5,130
2022		2,441
2023		1,615
Thereafter		9,815
	\$	33,755

(d) Litigation and claims:

Risk management and insurance services for all health authorities in BC are provided by the Risk Management and Government Security Branch of the Ministry of Finance.

The nature of the Corporation's activities is such that there is litigation pending or in progress at any time. With respect to unsettled claims at March 31, 2018, management is of the opinion that the Corporation has valid defenses and appropriate insurance coverage in place, or if there is unfunded risk, such claims are not expected to have a material effect on the Corporation's financial position. Outstanding contingencies are reviewed on an ongoing basis and are provided for based on management's best estimate of the ultimate settlement.

8. Statement of operations:

(a) Other revenues:

	2018		2017	
Recoveries from sales of goods and services	\$	4,104	\$	3,360
Other		1,390		1,391
	\$	5,494	\$	4,751

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

8. Statement of operations (continued):

(b) The following is a summary of expenses by object:

	2018	2017
Compensation:		
Compensation	\$ 252,812	\$ 218,806
Employee benefits	73,045	58,296
	325,857	277,102
Equipment and building services:		
Equipment	69,306	66,238
Rent	16,312	16,108
Building and grounds service contracts	2,716	2,714
Plant operations (utilities)	1,339	143
	89,673	85,203
Supplies:		
Medical and surgical	7,773	7,535
Laundry and linen	2,627	1,634
Drugs and medical gases	1,629	1,608
Printing, stationery and office	475	493
Housekeeping	432	483
Other	8,156	7,215
	21,092	18,968
Sundry:		
Travel	3,714	3,340
Professional fees	2,994	1,638
Communication and data processing	2,454	2,364
Other	5,856	10,093
	15,018	17,435
Referred-out and contracted services:		
Other health authorities and BC government reporting entities	9,563	9,762
Health and support services providers	5,311	4,013
	14,874	13,775
Amortization of tangible capital assets	11,944	11,741
Net book value of disposed tangible capital assets	21	30
	\$ 478,479	\$ 424,254

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Notes to Financial Statements
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Year ended March 31, 2018

9. Supplementary cash flow information:

Net change in non-cash operating items:

	2018	2017
Accounts receivable	\$ (3,532)	\$ (2,425)
Accounts payable and accrued liabilities	5,840	3,570
Prepaid expenses	(206)	(164)
	\$ 2,102	\$ 981

10. Related parties:

(a) BC government reporting entities:

The Corporation is related through common control to all Province of BC ministries, agencies, Crown corporations, school districts, health authorities, hospital societies, universities and colleges that are included in the provincial government reporting entity. Transactions with these entities, unless disclosed otherwise, are considered to be in the normal course of operations and are recorded at the exchange amount, which is the amount of consideration established and agreed to by the related parties.

Referred out and contracted services expenses, as outlined in note 8(a) are measured at the exchange amount, which is the amount established and agreed to by the related parties, and differs from fair market value.

The health authorities, hospital societies and BC Clinical Support Services Society provide various services to each other relating to the provision of healthcare and other support services. The related revenues and expenses are reflected in the statement of operations and are recorded on a cost recovery basis, as the entities would have otherwise delivered the services themselves. As a result, the values recorded in the financial statements approximate fair value.

(b) Related party transactions with PHSA and members:

Certain administrative, finance and accounting, and human resource services are provided to the Corporation by PHSA without charge. The costs of these services have not been recorded in the financial statements of the Corporation.

During the year, the Corporation was involved in the following related party transactions with other PHSA members:

For the year ended March 31, 2018, expenses include \$2,642 (2017 – \$2,210) resulting from transactions with other PHSA members.

The above amounts exclude transactions with PHSA which are disclosed elsewhere in these financial statements.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
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11. Risk management:

The Corporation is exposed to credit risk and liquidity risk from its financial instruments. Qualitative and quantitative analysis of the significant risks from the Corporation's financial instruments is provided below by type of risk.

(a) Credit risk:

Credit risk primarily arises from the Corporation's cash and cash equivalents and accounts receivable. The risk exposure is limited to their carrying amounts at the date of the statement of financial position.

The Corporation manages credit risk by holding balances of cash and cash equivalents with a reputable top rated financial institution. The Corporation periodically reviews its investments and is satisfied with the credit rating of the financial institution.

Accounts receivable primarily consist of amounts receivable from the Ministry, PHSA, other health authorities and BC government reporting entities, patients, clients and agencies, hospital foundations and auxiliaries, grantors, etc. To reduce the risk, the Corporation periodically reviews the collectibility of its accounts receivable and establishes an allowance based on its best estimate of potentially uncollectible amounts. As at March 31, 2018, the amount of allowance for doubtful accounts was \$11,691 (2017 – \$9,598).

The Corporation is not exposed to significant credit risk with respect to the amounts receivable from the Ministry, PHSA, other health authorities and BC government reporting entities. At March 31, the following accounts receivable were past due but not impaired:

	2018	2017
30 days	\$ 22	\$ -
60 days	5	-
90 days	-	-
Over 120 days	15	4

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

Notes to Financial Statements
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11. Risk management (continued):

(b) Liquidity risk:

Liquidity risk is the risk that the Corporation will not be able to meet its financial obligations as they become due. It is the Corporation's intention to meet its financial obligations through the collection of current accounts receivable, cash on hand and future funding from the Ministry.

The Corporation's principal source of funding is from the Ministry. The Corporation is not subject to debt covenants or any other capital requirements with respect to operating funding. Funding received for designated purposes must be used for the purpose outlined in the funding letter or grant documentation. The Corporation has complied with the external restrictions on the funding provided.

All financial assets and liabilities of the Corporation have maturities within one year.

12. Comparative figures:

Certain comparative figures have been reclassified to conform to the current year's financial statement presentation.

13. Impact of accounting for restricted contributions in accordance with Restricted Contributions Regulation 198/2011:

As disclosed in the significant accounting policies note 1(a), Regulation 198/2011 requires the Corporation to recognize revenue from restricted contributions for the purpose of acquiring or developing a depreciable tangible capital asset on the same basis as the related amortization expense of the tangible capital asset. As these transfers do not contain stipulations or restrictions creating a liability over the term of the expected useful life of a related tangible capital asset, PSAS would require these contributions to be recognized in revenue as a tangible capital asset is acquired or development and construction of a tangible capital asset is complete.

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

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13. Impact of accounting for restricted contributions in accordance with Restricted Contributions Regulation 198/2011 (continued):

The impact of the departure from PSAS on the financial statements of the Corporation is as follows:

As at March 31, 2016		
Increase in accumulated surplus	\$	53,634
Decrease in deferred capital contributions		(53,634)
For the year ended March 31, 2017		
Decrease in annual surplus		(406)
As at March 31, 2017		
Increase in accumulated surplus		53,228
Decrease in deferred capital contributions		(53,228)
For the year ended March 31, 2018		
Decrease in annual surplus		(2,934)
As at March 31, 2018		
Increase in accumulated surplus		50,294
Decrease in deferred capital contributions		(50,294)
